

near the number of pharmacologists and internists that our society needs.

Is that a valid appreciation of our present aid to medical schools program, and if it is, don't we need to alter the program and help medical schools on the tried and true conventional pharmacology, internal medicine elements, and not concentrate as much as we are apparently doing on the more exotic?

Mr. COHEN. I think there is a great deal of truth in what you say, Congressman Reuss. I think what has happened in the past has been caused by two factors.

First, through the National Institutes of Health, money is given on a project basis for research and training, and this tends to focus on special areas of great interest with which a particular scientist or a particular institution is concerned. I think this has resulted in some problems because it has motivated individual scientists, individual departments to work in a particular area. As a result, that particular facet of the institution expands so markedly that other supporting elements in the institution, which are necessary, relatively fall behind.

Then the second factor is the medical school program. The medical school program involved many years of debate, as you well know, about whether the Federal Government should get into this area. The final result was that the law put restrictions on the Federal Government and Federal moneys can be used only where additional students and expansion will result—again, a desirable objective.

But I think the time is ripe for a complete reexamination of whether there shouldn't be what I would call institutional support for medical schools, rather than this special type, so that the medical schools can be well rounded, that they have the supporting services that are necessary, and that they can expand in quite a number of areas that are essential to broad public interest.

Let me put it this way. I sense that the medical schools themselves are examining this matter right now, because they are taking a look at all these bits and pieces. When you realize that the Federal Government today, through all of these different programs, is paying for a very major part of both research and training, and to some extent construction of medical schools, it might be proper to completely reexamine the whole area and the Federal Government's role in financing medical education.

Representative REUSS. My hunch is apparently right then, that our so-called Federal aid to medical education program hits around the fringes in the new and exotic, all of which is fine. I have nothing against it. But it does not provide help to the medical schools, and training more students in internal medicine, pharmacology, pathology, and the more conventional elements of medical education.

Mr. COHEN. Well, let me put it this way. Through the National Institutes of Health, particularly through the fellowships, doctoral and postdoctoral fellowships, training of people in the medical and allied science fields and expansion of medical schools to take this on are encouraged. But the extent of the financial support at what you might call the regular student level—the person who is just going through 4 years of medical school and using costly services, facilities, and teaching resources—from the Federal Government is relatively little and goes through different types of programs.