Mr. DADDARIO. What do you see that we need to do in order to be able to come to such a clear understanding about this or to a much clearer one than presently exists. Can we eliminate this confusion and have a level of confidence about the criteria established by which people can then move ahead and get support and be willing to act under emergencies as they arise?

Dr. BLOMQUIST. I am compelled to say that the first thing I think is better facts. I think every effort toward research to get the facts should be the primary objective.

Mr. DADDARIO. As you develop your criteria, you say you have certain flaws in it. What does it lead you to conclude as to how much more information you ought to have and as a medical man how you ought to go about getting it?

Dr. BLOMQUIST. I think that one of the major advantages of going through what we are doing in reviewing the literature and evaluating it, is that we are better able to point out what questions should be given priority and further research. I think this will be one of the major benefits of our criteria documents.

I think what we will have to do is to be willing to say that we will do the best we can with the facts we have. That does not mean we do not do anything. I do not think that we can delay and delay because we do not have the conclusive facts.

Mr. DADDARIO. In which direction should we go? Should we approach this medical question from the least common denominator point of view? As an example, I understood Dr. Bennett yesterday to say air pollution does not cause disease but it aggravated health conditions of persons already diseased or weakened. Do you agree or disagree with that? How do we establish whether your position prevails or whether that of the Office of the Science Adviser to the President prevails?

Dr. BLOMQUIST. I think we want action.

I would think action is necessary whether it aggravates a disease or causes it, I am thinking——

Mr. DADDARIO. Wouldn't it have a great deal of effect on what we are willing to pay if we could know that it does have an ill effect at a quicker level than we expect, or if we can understand that it does not? If it does in fact aggravate those who have already some kind of an illness, we would then approach it in a different way altogether?

Dr. MIDDLETON. Are we speaking of the point of mixture and the fact we have direct and indirect and additive effects? I think that is the point Dr. Blomquist is trying to bring out.

Mr. DADDARIO. Of course, we are. That is the reason why it is so important at this stage of the game we know as much as possible about what we are doing, because it has, as Dr. Middleton suggests, so many complications. My fear is that we could easily come to the conclusion that it just aggravates rather than causes, and therefore establish a criteria which is not as good as it ought to be.

Dr. BLOMQUIST. It worries me.

Mr. DADDARIO. It worries you, too?

Dr. BLOMQUIST. Yes.*

Mr. DADDARIO. Dr. Blomquist, this is a matter about which this committee has been greatly concerned.

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*See page 115 for an additional statement by Dr. Blomquist.