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United States Senate

COMMITTEE ON
INTERIOR AND INSULAR AFFAIRS

October 19, 1967

Dr. Joshua Lederberg
Stanford School of Medicine
300 Pasteur Drive
Palo Alto, California

Dear Joshua:

I hope you have been able to follow the progress of the drug hearings since last May. I remember that you were somewhat apprehensive that a "flavor of muckraking" seemed to be invading the atmosphere of the investigation.

Perhaps a small amount of that kind of quality is inherent to the nature of the animal -- whether it is intended or not. Many individuals, consumers, physicians, pharmacologists, public officials -- all have agreed that some fat does exist in the drug pricing structure. However, unfortunately, the newspaper reporters prefer to write about mark-up rather than the more esoteric approaches to the entire problem of drugs, their manufacturing processes, distribution and selling practices and essential research.

Only last week the Squibb Drug Company demonstrated that even a larger company cannot guarantee efficacious and unadulterated drug products. I hope their case was an isolated one, but others persist, as evidenced by the recalls from the shelves of the major manufacturers.

My primary reason for writing to you is to ask for your viewpoint concerning the value of a drug compendium. One that would provide unbiased information to the doctor, where all drugs -- indexed and cross annotated -- would appear, be described showing side effects and contraindications.

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I think prices should be indicated and kept as current as quarterly supplements would allow. The Physicians Desk Reference is a poor substitute for the project I have in mind. The pharmaceutical manufacturers now pay for inserts which could be discontinued with the advent of a true compendium.

Dr. James Goddard testified that the cost of a compendium could be paid for with the money saved on the inserts. Several drug companies have also endorsed the idea, but I fear that the Pharmaceutical Manufacturers Association opposes it.

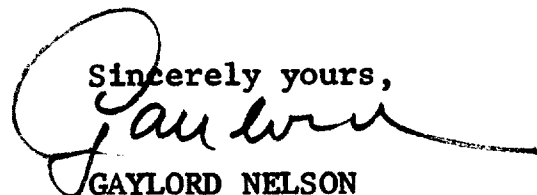
Incidentally, Dr. Goddard gave testimony to another Congressional committee last week and he stated that a large percentage of drug company research is worthless, as evidenced by the poor quality of new drug applications filed with the FDA.

Many distinguished witnesses have agreed that continuing education of the doctor in therapy, prescription writing, and therapeutics is of the utmost importance. Too many of the practicing physicians have received no formal education and very little informed advice in those fields upon leaving their second year of medical school. Advice received from the drug detail man certainly cannot be classified as unbiased or completely educational. I think a way should be sought to finance programs where the doctor can enroll in seminars to relearn and to keep current with the latest drug developments.

A Milwaukee doctor wrote me that a new drug comes on the market every day of every year. Who could possibly keep abreast of this deluge of drugs -- good ones and bad ones.

I try to follow your articles, but the demands on my time preclude a careful following of everything you say. I would be happy to have any further appraisals of the hearings and the brief comments in this letter.

Sincerely yours,



GAYLORD NELSON
U. S. Senator

GN:bcj