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ADVICE, NOT ADVOCACY

Give us "advice, not advocacy." That's what Paul O'Neill, Director of the Human Resources Division of the Office of Management and Budget (OMB), told a meeting of the Advisory Council to the National Institutes of Health this past summer. In essence, he was a spokesman for the Federal government, and his message was directed at those in the scientific community who seek to have input into the process of government and of government decision making. His audience included scientists who were irritated because they felt their viewpoints were often ignored, and they wondered why this was so.

At least to a degree, this same distinction between advice and advocacy seems to have been involved over the past few years in the stresses and strains of the relationship between the American Pharmaceutical Association and its Academy of Pharmaceutical Sciences. In essence, the Academy has complained that the Association wasn't listening, and the Association has complained that the Academy was speaking the wrong language and shouting besides.

As generally follows in such situations, misunderstandings and illfeelings grew on both sides.

However, it is not our purpose here to review this past history, but rather to take note of a very recent development that appears to signal that the communications gap has now been bridged.

On rather short notice, the need arose for APhA to develop a list of drugs, based upon certain criteria, in order to be able to make recommendations to the Department of Health, Education, and Welfare in connection with the drug reimbursement proposal as first announced by HEW Secretary Weinberger last December.

One criterion which APhA wished to embody in developing its list was "the least potential or history of bioavailability differences or other significant quality related problems." Pure and simple, this is a technical question for which it appeared that a direct, sciencebased response could be given.

Recognizing this, APhA requested the Academy to undertake an assessment of those drugs fulfilling the various other criteria, and from among them, to identify the drugs meeting this specific criterion pertaining to drug quality.

The Academy responded to this challenge in a most gratifying manner. APS President Busse convened a special committee, and a well-organized, yet concise report was promptly submitted to the Association. Within hours after its receipt, the report was being used in discussions with HEW officials. The net result was that APS had effective input into an APhA activity in a constructive, mutually beneficial manner for the public interest.

We feel that, were he to be asked, OMB's Mr. O'Neill would attribute this successful experience to the fact that the APS report avoided advocacy in favor of sound, factual advice. In the final analysis, this is chiefly what science is all about.

Edward S. Feldman