done a lot of concentrating on our youth and the drug problem in our colleges, in our schools. I think that is because we do think it is serious. Maybe we don't have the knowledge that a law enforcement officer dealing with this every day has. But I know in my six years on Judiciary Committee I have certainly become very familiar with the problem, as well as being associated with individuals who, daily, are concerned with this problem. Now if you have a problem with having distributors and sellers the same as manufacturers, I'm seriously intending to put an amendment on Select File that pulls out manufacturers then if we want to deal with them more harshly. But I don't know why we shouldn't deal just as harshly with a student or at least a misdemeanor for a student who is pushing this on their peers in school. But I think we've overlooked another part of the look-alikes, and that was called to your attention in the Nebraska Pharmacists Association letter where they are concerned about the nonprescription drugs and calls them clearly a menace to the public health. I would like to read to you about when a drug doesn't work. On Christmas Eve, 1980, the FDA's New York district office received a teletype message about a plain white tablet unmarked and half an inch in diameter. The message from FDA headquarters warned that the tablet, a time-release version of quinidine gluconate, was dangerously understrength and could be fatal in situations in which a full dose is needed to prevent dangerous cardiac arrhythmias, irregularities in the rhythm of the heart. While the tablet had the same active ingredients, and even looked like an FDA approved version of the drug, it had not been approved and in fact should never had been made. In announcing that the manufacturer of the drug was cooperating in the recall, the FDA reported that the plain white tablet was advertised as the approved brand. But the FDA warned that absorption of the "me too" version proved to be only about 35 to 45 percent of an approved version. What that meant to patients was that not enough of the helpful substance was active in the body. Almost three of these look-alike pills would have been necessary to do the job of one tablet that was approved by the FDA. In a similar case, about two years ago, another plain white tablet was found to be ineffective. The FDA warned the three manufacturers of the illegally marketed tablets that may be ineffective and therefore harmful to patients who need the drug. The FDA acted after receiving reports that five patients had become worse after taking tablets manufactured by a small New Jersey company. The federal