

they need to protect the public from false or misleading prescription drug ads.

The agreement that was accepted today is a fair compromise that addresses the concerns of all of the Members involved.

Again, I thank the chairman and Ranking Member ENZI for their efforts to work on this important issue, and I thank all of my colleagues for accepting my amendment.

I ask unanimous consent to add Senator WEBB as a cosponsor of the Drug Safety Act.

The PRESIDING OFFICER. Without objection, it is so ordered.

DRUG IMPORTATION

Mr. DORGAN. Mr. President, if and when we pass the underlying bill, we will have advanced this country's interests, I believe. But if we pass this bill by adding the Cochran amendment, which effectively kills the underlying amendment on which we have now voted cloture last Thursday, dealing with the safe importation of FDA-approved drugs at a much lower price—if we kill that by agreeing to the Cochran amendment, we will have substantially diminished the opportunity to provide for drug safety. That is a fact.

The underlying bill doesn't have in it what we have in the Dorgan-Snowe amendment, for which we have 33 cosponsors. We have pedigree requirements. We have serial requirements to be written on the pill bottles. We have anticounterfeiting measures. We have addressed all of those issues in the amendment. None of those requirements exist today, and none of those will exist with the domestic drug supply or with imported drugs when this legislation passes.

The only way those provisions will exist is if we defeat the Cochran amendment and then pass the amendment that we have offered, allowing for the safe reimportation of prescription drugs, because we put the safety provisions in our amendment.

Mr. President, let me ask unanimous consent to show once again two bottles of Lipitor.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. DORGAN. This is a prescription drug made in Ireland. It is made in Ireland. It is called Lipitor. It is for the reduction of cholesterol. It lowers your cholesterol—the same pill, put in the same bottle, made by the same company, made in the same FDA-approved plant. It has only one difference—only one. That is, this one costs twice as much. Why? Because this one was sent to Canada and this was sent to the United States. The U.S. consumer is told: Congratulations, you get to pay twice as much for the prescription drug.

But that is not unusual. It is happening all the time.

Let's talk about counterfeiting. This is a \$20 bill. This is a new \$20 bill, you

know, the ones we brag about, the ones the mint has press conferences about. We have all kinds of technology in this \$20 bill to prevent and prohibit counterfeiters from reproducing this \$20 bill.

We can build a technology in a \$20 bill to prevent counterfeiting, but we can't do it for medicine? Are you kidding me? What we have provided in this amendment is a series of steps: complete pedigree, serial numbers, RFID technology and anticounterfeiting measures. We can do it for a \$20 bill but not for a bottle of medicine? Don't believe it.

We are going to vote at 4 o'clock. The question is going to be: Will the pharmaceutical industry have their way once again, as they have so often?

Let me make a point that is important. The Cochran amendment is already law. It was passed in 2003—in 2003. It already exists in law. The result is the Secretary of Health and Human Services says it can't be implemented because I can't certify there is no risk. The fact is the Secretary can't certify there is no risk with any new drug. He couldn't certify there is no risk with spinach coming from Mexico or strawberries coming from any other country. He couldn't certify there is no risk with any food product being imported. They can't certify there is no risk with the domestic drug supply. In fact, the domestic drug supply, without our amendment, will be dramatically less safe because you will not have the protections we put in this amendment.

The pharmaceutical industry has never wanted them, and the underlying bill doesn't include them. It doesn't include the anticounterfeiting provisions. It doesn't include the pedigree, the serial requirement on the individual bottles to track back. It does not include that. That is a fact.

So don't vote for the Cochran amendment and then tell people you want to allow Americans to import FDA-approved, lower priced drugs. The question is this: Should the American people be paying the highest prices in the world for prescription drugs? The answer is, no; it is not fair.

Why should that be the case, that we should pay the highest prices in the world? So we have put together a piece of legislation—bipartisan, people on both sides of the aisle, 33 cosponsors. Then we are told, well, it is unsafe to do this. It is unsafe.

That is nonsense. It is not unsafe. Europe has done it for 20 years. Europe can do it, but we can't do it? It gives consumers the opportunity to take advantage of the global marketplace.

We are talking about FDA-approved drugs, made in FDA-approved plants, sold all over the world with one difference—price. The American consumers are told they have to pay the highest price. Dr. David Kessler is the expert on this, in my judgment. He was FDA Commissioner for 8 years, the head of the Food and Drug Administration. The Dorgan-Snowe bill "provides

a sound framework for assuring that imported drugs are safe and effective."

Safe and effective. End of story, in my judgment. I understand the pharmaceutical industry does not want this. I understand that. They want to control prices. Yes, we have price controls in America, not Government price controls but price controls by the pharmaceutical industry.

It is the only industrialized country in the world that I am aware of that says to the drug industry: Price it as you wish. It doesn't matter. You just price it as you wish.

Well, what they have done—I had a hearing. Here is what they told me. They price at the level they price prescription drugs in this country because they can. Because they can. That might sound OK for the bottom line, but what does it mean for the person walking into the grocery store tonight in a small town in the Midwest who does not have much money and has to decide—the pharmacy is at the back of the store—I better go buy the prescription drugs the doctor says I need first to find out how much money I have left for groceries?

It goes on all the time. Many of us believe, Republicans and Democrats, we ought to at least open the global marketplace for consumers to be able to pursue those FDA-approved drugs, made in FDA-approved plants, at lower prices, the prices at which they are sold in virtually every other country in the world. This is unfair to the American consumer. That is the point.

Interestingly, there was a long description of counterfeit drugs in the New York Times this weekend. None of that would be available to report, in my judgment, because it would not have happened if we had had the provisions, the safety provisions we have in the Dorgan-Snowe amendment.

The fact is, you would not have danger in the drug supply because you would have much more money going to the FDA for the purpose of making certain the drug supply is safe. I am not just talking about the imported drugs, I am talking about a drug supply sold in this country, produced here and sold here. The lack of serial numbers, the lack of a pedigree, the lack of effective anticounterfeiting technology, the lack of resources to go after RFID technology, all of that is lacking in the underlying bill.

It is not in the bill. The only way it is going to get there is if we are willing to defeat the Cochran amendment and to pass the amendment I have offered along with many of my colleagues. This is not a new issue. We have come to this issue on many occasions in the past. Each and every time the pharmaceutical industry has been able to trump us with votes on the floor of the Senate or the House. I hope—first I wish, second I hope, and finally I expect, that one of these days we will be able to prevail. One of these days we may be able to win this debate. Maybe it is today at 4 o'clock. I hope so.

Some say, well, there will be no savings with your amendment. Well, the Congressional Budget Office says it is \$50 billion in 10 years—\$50 billion. Is that a savings? It seems to me it is. Some say, well, this would be unsafe. You cannot prevent counterfeits from coming in.

Once again, we have all of this technology to prevent somebody from counterfeiting a twenty-dollar bill, but we cannot with respect to medicine? Of course we can.

Europe has done it for 20 years in a manner that is safe, but we cannot because we are not as smart as they are. Nonsense. Finally, at last, at long last, I hope this Senate will stand up to the pharmaceutical industry and say this: You are a good industry. We appreciate what you do. We like lifesavings drugs. But lifesavings drugs save no lives if you cannot afford to take them. We do not support your pricing policy. We believe a pricing policy that says to the American consumer: You pay the highest prices in the world, we believe that pricing policy is wrong and you have to change it. That is what I hope the message will be in this Chamber this afternoon.

It is past the time, long past the time, in my judgment, for this Congress to stand up on these issues.

In this case, let's stand up on the side of the American people who have been denied their right to participate in the global economy, to access a safe supply of drugs, FDA-approved, when it is sold in every other country for lower prices.

Let me conclude by pointing out, as I did last week, an old man sitting on a straw bale on a North Dakota farm told me one day, he said: I am in my eighties. My wife has fought breast cancer for 3 years. For 3 years we have driven to Canada to buy her Tamoxifen. Three years we have driven to Canada to buy the Tamoxifen.

You can bring a small supply across the border if you do it personally. Why? Because it costs three-fourths less than it costs in the United States. He said: I save 80 percent by buying it in Canada. Yet for 3 years my wife has had to fight breast cancer and fight the high prices here, and we have had to drive into Canada.

Well, the fact is, most Americans cannot drive to Canada. This bill is for most of the Americans who are paying prices that are too high. They want a safe drug supply, but they, for sure, finally, at long last, want a fair price, one they have not been getting, one they ought to get starting at 4 o'clock today.

Mr. President, I yield the floor and reserve the remainder of my time.

The PRESIDING OFFICER. The Senator from Vermont is recognized.

Mr. SANDERS. Mr. President, let me congratulate the Senator for his outstanding leadership on this issue. Let me just pick up right from where he left off. He and I and Senator SNOWE and a number of us have been dealing with this issue for many years. My in-

volvement came in 1999, when I took a busload of Vermonters, including many women who were struggling for their lives with breast cancer.

Many of those women did not have a lot of money, and they also went across the Canadian border. They also purchased Tamoxifen. In those days, the price they paid was one-tenth the price, one-tenth the price compared to what they were paying in the United States. Here you have women struggling for their lives, who do not have a lot of money, and were paying one-tenth the price.

This amendment is a big deal. This amendment will mean that Americans from one end of our country to the other, people with chronic illnesses, senior citizens who run into the doughnut hole, so-called doughnut hole on Medicare Part D, that finally these Americans, our Americans, our people, will no longer continue to be ripped off by the pharmaceutical industry and be forced to pay by far the highest prices in the industrialized world for the same exact medicine which people in Canada, people in Germany, people all over Europe receive at far lower prices—the same medicines, same companies, same factory, except we pay far higher prices.

There is very strong support for this legislation. Millions of Americans are already supporting this legislation by getting into their cars and going over the Canadian border. The AARP and other senior organizations support this amendment. My understanding is that the AARP intends to note on their scorecard that a vote for the Cochran amendment—which is clearly a poison pill—is a vote against reimportation.

I would urge my colleagues, if you disagree with reimportation, vote no. But a vote for the Cochran amendment is, in fact, a vote no.

You have heard from Senator SNOWE. You have heard from Senator DORGAN. The arguments over safety are just not accurate. This bill details in great length an entire regimen as to how we can make sure all of the prescription drugs reimported into the United States are safe and FDA approved.

I always find it remarkable that every day, huge amounts of imported food are coming into this country. I do not hear a hue and cry about whether that food is inspected.

Let me quote from the May 1st New York Times:

More than 135 countries ship food items to the United States. Canada, Mexico and China have led the way with China shipping nearly five times as much in food items to the United States as it did in 1996.

China is importing more and more food into the United States. Where are the FDA inspectors? Are they all over the farms in China making sure these products are safe? I have not heard one word about that issue. This legislation has built in the strongest prescription drug safety regimen we have ever seen.

Let me tell you what this debate is really about. It is not about prescrip-

tion drug safety. It is about the power of the pharmaceutical industry, which in a city that has enormously powerful special interests, we have the pharmaceutical industry standing uniquely alone as the most important, if you will, and, in my view, greedy lobby in the entire United States of America. Here it is. Do you want to know what the issue is? Here it is: pharmaceutical industry lobbying.

From 1998 to 2006 they spent \$1.1 billion for lobbying; 1998 to 2006, \$1.1 billion in lobbying.

The pharmaceutical industry has over 1,000 well-paid lobbyists right here on Capitol Hill: former heads of the Republican Party, former leaders in the Democratic Party. Whenever anybody stands up for justice, whenever anybody stands up to try to lower the cost of prescription drugs in this country so that the American people can afford these lifesaving medicines, these lobbyists descend like locusts on all of our offices in the Senate, in the House. That is what they do.

It is not just the amount of money they spend on lobbying. They spend a substantial amount of money on campaign contributions: From 1990 to 2006, \$139 million in campaign contributions; 2006 alone, \$19 million. That is power. What this debate is about is not just the need to lower the cost of prescription drugs in America, as important as that is. What this debate is more significantly about is whether the Congress of the United States has the courage to stand up to the greediest, most powerful special interests in this country.

In November the American people went to the polls. They said they want a change in the direction in which this country is moving. Clearly, that election had a lot to do with Iraq. It certainly did. It had a lot to do with global warming, I believe. But it also, in any view, had a lot to do with the understanding that year after year wealthy and powerful special interests have dictated the terms of the debate, have paid for the legislation which has come through the Senate and through the House.

The drug companies have managed to do something rather amazing. Virtually all of the Members of the Senate and the House look at economic issues through two lenses. No. 1, in order to protect consumers, we say: Let there be free market competition. That is the way to lower the costs of the product. And there is truth to that.

The other way that we can protect consumers is through Government regulation. There is certainly truth to that. What the pharmaceutical industry has managed to do is tell us we cannot regulate the pharmaceutical companies. We cannot have Medicare negotiating lower prices with the drug companies. We cannot do that. They have given us all kinds of reasons we cannot do that.

Then they have told us, well, we also cannot do free market competition: No,

you cannot have the local druggist going out and purchasing the product at the best price that he can get, maybe in Canada, maybe Europe. You can't do that. You cannot have regulation. You cannot have free market competition.

Then, on top of all of that, what the drug companies have managed to do is get many billions of dollars in corporate welfare, so the taxpayers of this country subsidize the research and development of many of the most important drugs, while the consumers, the American consumers, get no reasonable pricing despite the many billions of dollars that go into research and development that were paid for by them.

The drug companies get it all. That is what they get. At the end of the day, year after year after year, they are one of the most profitable industries in this country. They are very profitable, and elderly people and working people all over this country find it harder and harder to pay for the prescription drugs they desperately need.

Let us stand with the people. Let's defeat the Cochran amendment and pass the Dorgan amendment.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

PRESCRIPTION DRUG USER FEE AMENDMENTS OF 2007

The PRESIDING OFFICER (Ms. KLOBUCHAR). Under the previous order, the Senate will resume consideration of S. 1082, which the clerk will report.

The legislative clerk read as follows:

A bill (S. 1082) to amend the Federal Food, Drug, and Cosmetic Act to reauthorize and amend the prescription drug user fee provisions, and for other purposes.

Pending:

Landrieu amendment No. 1004, to require the Food and Drug Administration to permit the sale of baby turtles as pets so long as the seller uses proven methods to effectively treat salmonella.

Dorgan amendment No. 990, to provide for the importation of prescription drugs.

Cochran amendment No. 1010 (to amendment No. 990), to protect the health and safety of the public.

Stabenow amendment No. 1011, to insert provisions related to citizens petitions.

Brown (for Brownback/Brown) amendment No. 985, to establish a priority drug review process to encourage treatments of tropical diseases.

Vitter amendment No. 983, to require counterfeit-resistant technologies for prescription drugs.

Inhofe amendment No. 988, to protect children and their parents from being coerced into administering a controlled substance in order to attend school.

Gregg/Coleman amendment No. 993, to provide for the regulation of Internet pharmacies.

Mr. GRASSLEY. Madam President, we have three critical votes ahead of us this afternoon. These votes mean that today is the day we show the American

people whether we can really pass drug importation or whether we are just giving it lip service and nothing else. The Dorgan amendment is the moment American consumers have been waiting for and today is the day.

As I said last week, the Dorgan amendment is the result of a collaborative effort by myself with Senator DORGAN and with Senator SNOWE and Senator KENNEDY to finally make drug importation legal in this country.

This is the golden opportunity this year to get it done.

Now we have heard here on the floor the concerns that some have with drug importation and drug safety. Let me tell you that this is something I take seriously. Everyone who knows me knows that I care deeply about the safety of drugs, and I would not be standing here today urging support for the Dorgan amendment if I didn't think it had the right stuff on drug safety. And it does.

The fact is that the unsafe situation is what we have today.

Today, consumers are ordering drugs over the Internet from who knows where, and the FDA does not have the resources to do much of anything about it.

The fact is that legislation to legalize importation would not only help to lower the cost of prescription drugs for all Americans but also should shut down rogue Internet pharmacies selling unsafe drugs.

The Dorgan amendment would improve drug safety, not threaten it. And it would open up trade to lower cost drugs.

We see news accounts on a regular basis describing Americans who log on to the Internet to purchase drugs from Canada and elsewhere.

In 2004, my staff were briefed about an investigation by the Permanent Subcommittee on Investigations for the Senate Government Affairs Committee.

The Permanent Subcommittee on Investigations conducted an investigation into current drug importation. They found that about 40,000 parcels containing prescription drugs come through the JFK mail facility every single day of the year—40,000 packages each day.

Now, the JFK airport houses the largest International Mail Branch in the United States, but even then it is the tip of the iceberg.

Each day of the year 30,000 packages of drugs enter the United States through Miami, and 20,000 enter through Chicago. That's 50,000 more packages each day.

What is worse, about 28 percent of the drugs coming in are controlled substances.

These are addictive drugs that require close physician supervision.

While most people are ordering their prescriptions from Canada, they are also ordering prescriptions from Brazil, India, Pakistan, the Netherlands, Spain, Portugal, Mexico and Romania.

Although the Federal Food, Drug, and Cosmetic Act prohibits the importation of unapproved, misbranded, or adulterated drugs into the United States, the fact is that thousands of counterfeit and unregulated drugs are seeping through our borders. This is what is happening today.

John Taylor, Associate Commissioner of Regulatory Affairs for the Food and Drug Administration, FDA, in his testimony before the House Committee on Energy and Commerce in June 2003 stated that, "the growing volume of unapproved imported drugs, which often are generated from sales via the Internet, presents a formidable enforcement challenge."

Despite the hard work of both the FDA and BCBP to control our borders, the importation of illegal drugs has become an unenforceable problem. That is because today, the FDA does not have the authority or the resources to do much about it. The Dorgan amendment would change that.

The basic approach to assuring the drugs are safe in the Dorgan amendment which I coauthored with him—is to give FDA the ability to verify the drug pedigree back to the manufacturer, require FDA to inspect frequently, and require fees to give FDA the resources to do this.

For imports by individuals from Canada, the bill requires the exporters in Canada to register with FDA and to post a bond that they will lose if they send unsafe drugs. Frequent inspections by FDA ensure compliance.

For commercial imports, American wholesalers and pharmacists must register with FDA and are subject to criminal penalties if they import unsafe drugs. Again, frequent inspections by FDA ensure compliance.

The bill requires manufacturers to inform FDA whether foreign drugs meet FDA standards, and if they don't, the manufacturers have to give FDA the information necessary to evaluate the safety of the drug. If a foreign drug is manufactured in a plant the FDA has not inspected, FDA can inspect it.

The bottom line is the legislation gives the FDA the authority and resources it needs to implement safely the drug importation program set up under this bill.

The fact is that the unsafe situation is what we have today: 40,000 drug packages coming in every day in New York, 30,000 drug packages coming in every day in Miami, and 20,000 drug packages coming in every day in Chicago. That is 90,000 packages with drugs coming in from other countries every single day.

We are already saying yes to drug importation every day that we allow this unregulated and unsafe situation to exist. We say yes to it 90,000 times a day.

What we need to do and what the Dorgan amendment would accomplish is giving the FDA the resources to clean up this mess.

The Dorgan amendment gives the FDA the resources and authority to