

Interview with Thomas Saenz

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Date of Interview: March 16, 1986

Location: Mr. Saenz's home, 280 Hwy. 81 E (PO Box 874), New Braunfels, TX

Begin Tape 1, Side 1

Priscilla Hanz: This is an interview by Priscilla Hanz of Thomas Saenz on March 16, 1986 at his home.

All right, Tommy, let's start at the beginning, and I'd like to ask you where you were born and in what year.

Thomas Saenz: I was born in Mexico, a town called Pesquería Chica, the State of Nueva Leon, September 22, 1911.

Hanz: How long did you live in Mexico, Tommy?

Saenz: Up to the age of four years. Then my parents migrated to Texas. My mother had some sisters living here, and the revolution was at its height in Mexico, so they wrote to my mother and my father and encouraged them to move to Texas because the conditions in Mexico were very critical at the time. So we came to Texas in the year 1914.

Hanz: Have you lived here ever since?

Saenz: I have lived here ever since. And I was raised here in this county of Comal. And I went to school here. First, I went to the Catholic Church, St. Peter and St. Paul, and at the time they only taught up to the fifth grade in English and up to the third grade in Spanish. So that's where I got my start in school.

Hanz: I know that you are a pharmacist; how did you become interested in becoming a pharmacist?

Saenz: Well, first I started to work as a—in the pharmacy.

Hanz: How old were you?

Saenz: I was twelve years old. And my job was to wash bottles and make deliveries on the bicycle.

Hanz: On the bicycle.

Saenz: And that's the way I got started.

Hanz: So you liked the looks of that industry then at that time?

Saenz: Well, I became interested in pharmacy in the—like I said, my job was to clean the store, and at the time we had the prescription medications that were kept—to fill prescriptions—in jars, and the doctors used to write prescriptions for compounding.

Hanz: So everything wasn't already mixed up ahead of time like now. I guess that would be more interesting.

Saenz: Everything had to be compounded. And, of course, we used powders, elixirs, syrups, and fluid extracts and chemical salts. And that's the way the prescriptions were made.

Hanz: How did you get your training to be a pharmacist?

Saenz: Well, my apprenticeship started under the supervision and direction of a senior pharmacist, the one I worked for at the store. He recognized my interest that I had taken in learning, and so he encouraged me to apply myself. Later on, I—he also encouraged me to get a high school course, which I did, [I] and ordered some books from American School that qualified for high school training, and I—

Hanz: First you had to get that behind you?

Saenz: Yes. And later on, he encouraged me to get a course in pharmacy. At the time up until the year 1935, it was not required to go to college or get a five-year degree in pharmacy—so a three-year correspondence course. And I applied for this and got it from this professor of pharmacy at the Baylor University in Waco. And I took that course for three years. He graded my papers, and eventually I took the State Board of Pharmacy, and I—

Hanz: How did you do on that? Was it like a test?

Saenz: Well, it was a—yes, it was an examination, the State Board of Pharmacy examinations, and eventually I qualified to practice pharmacy, getting my pharmacist certificate from the State Board of Pharmacy [on] May 14, 1934.

Hanz: Then did you keep on working for that same pharmacist that you had trained with?

Saenz: I kept working for the same pharmacy because it was required to get more experience under the supervision of a pharmacist. Eventually, the senior pharmacist passed away, and his wife took over the operation of the pharmacy.

Hanz: So you worked as a pharmacist then for that drugstore?

Saenz: Yes. Later on, she decided, she was up in years herself, and she decided to dispose of the pharmacy, and since I was a registered pharmacist then, she just passed it on to me, sold the store to me.

Hanz: When was that?

Saenz: It was in 1940.

Hanz: So then you had your own business starting in 1940?

Saenz: Yes, I started with a run-down store and very low inventory, and I had to—the lady wrote a note for the amount of \$2,100 for the inventory, and I had to rent the place, rent the fixtures, and pay on the note.

Hanz: And that was not exactly a very profitable time, I imagine, for a while.

Saenz: Well, fortunately, it was a very slow beginning, but I managed to be quite conservative and I watched my buying, and the people that had known me before, the creditors of the original pharmacy, extended credit to me. But I watched my buying, and I built it up gradually.

Hanz: That's real interesting. Now, let's talk some more about the compounding of medicines. I think nowadays; you buy everything almost done, don't you? Back then you had to know a lot more to prepare medicines than now, didn't you?

Saenz: Well, we had, the equipment that we used mostly was the regular prescription scale for weighing out your ingredients, you know. A doctor wrote out a prescription for, say twelve capsules or twelve powders, and he wrote a prescription, say for three grains or five grains in each to make twelve capsules or twelve tablets or powders, and the same thing with the compounding of liquids. For instance, in certain prescriptions like cough syrups, well, if they needed to add something like codeine or some form of narcotic to control cough or pain that had to be written on the prescription. And, of course, the vehicles that we used were either elixirs or syrups at the time.

Hanz: What are elixirs or syrups? Can you tell me little more about that?

Saenz: Elixir and syrups are vehicles.

Hanz: What you mix it into?

Saenz: Yes, to dissolve your—or to modify the dosage of your medication.

Hanz: So you had to weigh all the ingredients and put them together and make your own capsules?

Saenz: Right, uh-huh, and, like I said, the elixirs and syrups—more palatable.

Hanz: And it was, also, pretty time-consuming, wasn't it, to do these things?

Saenz: Oh, yes, you couldn't do that in a hurry because you had to be sure that your ingredients were weighed accurately.

Hanz: I imagine.

Saenz: Also, the making of ointments, well, we used the prescription scale again to weigh out the ingredients like menthol or whatever drug it called for, camphor and so on, you know, for certain ointments. They had to be weighed out. And these were either—some had to be under heat, put under heat, the ingredients had to be melted out after they were weighed out. And then others could be incorporated just by mixing the ingredients and then incorporating them because the dosage or the application was already in the mixture itself.

Hanz: Were there things like Noxzema at all that you had to mix up back then? Can you think of anything like that?

Saenz: Well, basically we did because we could make cold creams, face powders, hand lotions and rubs like Mentholatum or Vicks, we used to make those.

Hanz: You even mixed up Vicks; you couldn't just buy it already made?

Saenz: No, we had to make it according to direction. And also liniments, you know, for instance, for arthritis or pain.

Hanz: Did people use more liniments then than now?

Saenz: Almost every prescription that required something for pain, we had to mix a liniment.

Hanz: Goodness, I wouldn't have guessed that. So then, actually, the kind of medicine people take has changed a lot through the years?

Saenz: It has really changed, because right after, well from the forties on up, the manufacturers began to detail more medications. We used to call them ready-made nostrums because they just detailed the doctors and then they passed on the information—then the detail man called on the pharmacy and says, "Well, we have contacted doctors, and they are going to write prescriptions for this particular medication." And at the beginning, of course, it wasn't as complex as it is now. And then there were different manufacturers like, some of the main ones were Eli Lilly and Upjohn and Merck, Sharp, and Dohme, and Mallinckrodt. And then, later on, it began to; others began to come into the field, like the Wyeth Company. Of course, they were also previous to that, Wyeth and Robins and—well, there were quite a few other pharmaceutical firms.

Hanz: But there really were none at first?

Saenz: At the beginning, there was none at all. None at all.

Hanz: And then, all of a sudden, in the forties, they started to mushroom, is that what you are saying?

Saenz: Yes. Of course, today we have bigger firms like Pfizer and Zurl[?] and Lederle and all those giants, they are giants in the industry. And they are the ones that really control.

Hanz: Can you think of any that started at the beginning and are still in business, one of these big companies?

Saenz: Eli Lilly is one of them, and so is Wyeth.

Hanz: But I imagine there's been plenty of them too, though, that have disappeared.

Saenz: Yes, there has been quite a few that has disappeared or have merged with other companies. And now it's very competitive because, you see, the United States laws, they issue a license to a pharmaceutical firm for a certain ingredient, but if that expires, or for some reason or another they don't conform with the standard, they can be taken off the market. Also, at the expiration date, the others might be able to manufacture the same drug, which today is very much in vogue, generics. And generics mean really the original chemical formulation for the particular medication. You see, the standard is the one that has the trade name, and the generic is what has the original medical or pharmaceutical name. For instance, let's say just for an example, today, diazepam, there are hundreds and hundreds of different forms that it's made. However, the ones that have controlled the industry [produced] under the trade name Valium.

Hanz: I've heard of that one. You mentioned something that reminds me of something I should ask about. When did the government start setting these standards? (Unintelligible)

Saenz: Well, this developed gradually, as the industry began to grow more competitive and this, through the years of the sixties, it really got into more controls all around.

Hanz: But there weren't too many controls at first.

Saenz: At the beginning, no there weren't.

Hanz: Do you think anybody ever abused that, not having rules, and made strange medicines and gave them great build-ups that weren't true, and things like that?

Saenz: Well, it was unheard of because we were taught in taking pharmacy that really any large amount of opiate, it was considered a dangerous thing for your health instead of helping you. And, actually, it was a poison instead of a, you know, because it was a no drug unless you really had to have it for pain.

Hanz: So there was a different attitude even then toward taking medicine?

Saenz: Yes, uh-huh, yes.

Hanz: They weren't so apt to take things?

Saenz: Right, and people used more self-medication, like cough syrups and rubs and things of that nature.

Hanz: Not big things.

Saenz: Yes.

Hanz: Let's talk a little bit about some of these things you made and what was the cost, for example, if you were compounding a liniment. What did it cost you, and what did you charge for it?

Saenz: Well, for instance, a four ounce bottle of liniment on prescription that called for a few ingredients like we use today, you know, like menthol, camphor, or even turpentine and q's, soap liniment or chloroform liniment, it would run on a prescription, \$1.25. And today, it would run you, that amount, well the manufactured product, either in the form of a liniment or a rub or a cream, up to, depending, up to \$19.95, say for a half an ounce or one ounce.

Hanz: Quite a difference. When you were making it, were your costs pretty high? Out of \$1.25, how much of it was your cost?

Saenz: It was very minimum because probably we used one gram of this and one gram of that, only cost probably about fifteen or twenty cents for the whole thing.

Hanz: Do you think the profit is higher nowadays for those companies? Is it still low-cost in manufacturing?

Saenz: Manufacturing cost for standard products is very high, due to the technology and due to the labeling and to the promotions, journals, and drug journals, and hustle and advertising.

Hanz: The cost has been a lot too.

Saenz: Right.

Hanz: Can you think of any interesting incidents that happened to you when you had your business just started, any unusual customers, or doctors?

Saenz: Well, one quite interesting thing that I can recall is that the type of doctors at the time, they didn't believe very much in surgery. And the drugstore that I worked for, the old gentleman, right across the street there was two doctors that were in business, and I heard one of the real old doctors ask the senior pharmacist, ask him—this was Dr. Garwood, and he asked the pharmacist, Mr. Schumann, and he looked across the street and looked at that beautiful brick building, and he asked, and he says, "Henry, did Dr. Hayman make all that money practicing medicine?" and the

pharmacist answered, he says, “Yes, Dr. Garwood, but he made five while you made one.” And he asked, “How was that?” and he said, “Well, he operates on everybody now.”

Hanz: It wasn't really in vogue, was it?

Saenz: Yeah, you didn't hear much about operations.

Hanz: The whole outlook, I guess, on medicine has changed, hasn't it?

Saenz: Oh, my, very much so, because now even in order to obtain a license for certain discoveries that are made, probably in another country, like, I would say France or Germany or Great Britain, they have to have a special permit or permit in the United States in order to allow the manufacture of that product.

Hanz: When you think of all the changes through the years, what did you have to do to keep up with it?

Saenz: Well, I just followed the trend, you know, the changes. Of course, being young and inexperienced in the beginning, there was a period of time; well, it was quite difficult because gradually the cost and the buying of merchandise just increased and, fortunately, of course, I have, like I said [been] quite conservative, but there were difficult times in buying because on account of every company tried to sell big amounts and it all depended on the volume that you did. You see, today the chains have the money, the money power to buy merchandise so they are quite competitive with independents. Independents have to really try to control their operation in order to be competitive with the big chains.

Hanz: You know, I was thinking about when I was young, it seems to me like people used to ask the pharmacist for medical advice. Did you have to give out kind of medical advice when you were first in the business?

Saenz: We were free to do so because they really relied on the pharmacist for information and help. Like I said, we used to have the agencies, like the Rexall Agency we had. And people came in, we had these sales, and they needed tonics or milk of magnesia or things of that nature, well, they bought it in quantities in order to save money, and they did that. And we had very good promotions at the beginning.

Hanz: What kind of problems did people come to the pharmacist with? What were the things they would ask you about?

Saenz: Well, it hasn't changed very much. It's still the same thing, like the cold remedies.

Hanz: They haven't got rid of the cold yet, have they?

Saenz: Rheumatism and toothaches and ulcerated stomachs, we used to mix magmas for that at the time. And foot problems and eye problems and nose problems.

Hanz: You speak more than English, don't you? You also speak what other languages?

Saenz: Well, being raised in a German community, at the age when I started, there was 90% German spoken, so I couldn't help it but to pick up some German. And, of course, in school, we had, like I said, up to the third grade in Spanish and fifth grade in English.

Hanz: So you have all three languages. And did you use those languages in your business?

Saenz: At the time, every day. And also Latin because we had to learn Latin.

Hanz: Oh, Latin, let's talk about both of those things, but first: how many of your customers were German at that time?

Saenz: I would say about 75%.

Hanz: Seventy-five percent, that's a pretty big number, and then you also had some Spanish-speaking customers?

Saenz: Yes, we had some Spanish-speaking customers. The Spanish community wasn't very large at the time.

Hanz: It's grown since though, hasn't it?

Saenz: It has really grown.

Hanz: And less Germans?

Saenz: Yes.

Hanz: Let's talk about the Latin. Latin was a required language for pharmacy then is what you're saying. You had to know Latin.

Saenz: At the beginning, Latin was required due to the fact that in order to—see the formularies were recognized in other countries. For instance, I do have one that had mainly Latin but also they have a translation of English, German, French, Italian, and Spanish. Due to the fact that if a prescription was written in Latin, you know, they could also fill it in other countries.

Hanz: People took their prescriptions with them?

Saenz: Yeah, suppose someone sailed abroad, like you went to Australia.

Hanz: So they would bring their prescription in Latin and anyone could fill it?

Saenz: Yes. Fill it.

Hanz: Were they were written by the doctors in Latin?

Saenz: Yes.

Hanz: So the doctors also had to know Latin?

Saenz: Right.

Hanz: Did the doctors work with the pharmacists back then?

Saenz: Yes, well, it worked this way, because each drugstore really—or one—either one, the doctor catered to certain—in fact, we had some like Dr. Garwood and Dr. Nosva that had their offices in the back of the drugstore.

Hanz: Oh, really?

Saenz: Yes.

Hanz: So then they were kind of tied in with that particular drugstore.

Saenz: Yes, uh-huh.

Hanz: You'd go to the doctor and then just walk out and get your prescription.

Saenz: Walk for your prescription, yes.

Hanz: Not like today with the chains where everybody would go find the cheapest price? Okay, well, that's interesting. This Latin was one of the things you learned in that correspondence course that you took?

Saenz: Yes.

Hanz: That's a hard way to learn Latin, isn't it?

Saenz: Very much so.

Hanz: I would think so. Can you think of any other major changes in the industry or medicine that we haven't talked about?

Saenz: Well, there has been a lot of research done, and pharmacy has really expanded. It's not anymore, not confined to just the ordinary practice of pharmacy, but there is governmental pharmacy, there's clinical pharmacy, there is detailing pharmacy, manufacturing pharmacy, and hospital pharmacy. So it has branched.

Hanz: One person couldn't know it all anymore, could they?

Saenz: Not anymore because there's a lot of specialization in it. You know, specializing in certain branches of pharmacy.

Hanz: Do you recall the flu epidemic after the war? World War I. The big flu epidemic?

Saenz: I recall, but I had, I wasn't in pharmacy then, but we knew that we had quite a bit of it.

Hanz: Can you think of any other big outbreaks of disease that put a strain on the pharmacists' business when you were working? Any unusual—I know there have been many other outbreaks of the flu since—like the Asian flu.

Saenz: Yes, that was the Asian flu and other flu epidemics that we had constantly almost every year or every other year.

Hanz: And it's still going on?

Saenz: And it's still going on. Also, at the time they came out with, in the course of time, a lot of injectables, which they didn't use before.

Hanz: They didn't use injectables until when; do you know when that started?

Saenz: Well, it started around '45 is when they started using a lot of injectables and then all the wonder drugs that came in, like sulfa diazole, and the modern ones that we have today, ampicillin and amoxicillin.

Hanz: Those were wonder drugs.

Saenz: And the sulfa drugs.

Hanz: What did diabetics use before the injectables?

Saenz: We didn't have hardly any diabetics. It was really something unheard of, you know. Until—also hypertensives, there weren't any until recently.

Hanz: Really, high blood pressure was not a problem back then?

Saenz: No, no problem, just the ordinary—

Hanz: That's so common today, you would think that it would have been around for ages, but it wasn't?

Saenz: It wasn't then. But it's really a—and, of course, now we have cancer and heart, that's another thing that we had never heard of, any people with heart trouble, hardly any in cancer.

Hanz: I guess the diseases have changed as well as the medicine, then.

Saenz: I believe it's attributed to the way of living, the way people live today and what they eat. And that causes most of these problems. They say some of these are hereditary, but—

Hanz: You think it's more to do with how people are living today?

Saenz: I believe it does. The way they live, what they eat.

Hanz: You've seen some changes in that, too, through the years.

Saenz: Uh-huh.

Hanz: You mentioned that you used the scale to weigh the ingredients—

Saenz: The ingredients.

Hanz: And I've seen that scale. It's very delicate. What were some of the other pieces of equipment that you used?

Saenz: Well, we used the, a slab to make pills. You see, the slab has a scale, and you weigh out your ingredients on your prescription scale and then, after you weigh out your ingredients, you mix them and then whatever other ingredients go into it, like a mass, because [it takes] a mass to make a pill or tablet. And you mix this and then you strip it out on your scale. And see how many, you see the weight is for so many pills, and the scale gives you the dimension for each pill individually. And you just cut them and then divide them and roll them up and coat them, you see.

Hanz: Oh, you had to actually, after you mixed them, you had to cut it to the right size?

Saenz: Right and the scale—

Hanz: And you rolled it into something, what, to keep it dry or what?

Saenz: Yeah, to coat it.

Hanz: To coat it. Then did you wrap them up or put them in the bottle just like that?

Saenz: Yeah, we had the special coating.

Hanz: And the coating did the job?

Saenz: The coating did the job.

Hanz: That must have been interesting. Did you use anything else?

Saenz: Well, suppositories. We had to use the suppositories, the ingredients and then the whatever ingredient went into it, like the waxes or the cerates and then, of course, we didn't have no refrigeration, so we had a mold, and you melt this and put it in the mold, and then you put it in the refrigeration and let it freeze, and after it froze—not the refrigerator, but the ice box.

Hanz: The ice box, a real ice box.

Saenz: Yeah, a real ice box.

Hanz: Not plugged into the wall, but with a piece of ice in it.

Saenz: Right, then you had these little molds, and then you just put them up.

Hanz: So you molded things, and you had to cut pills, and you weighed, and what did you mix in, what kind of equipment? You didn't have a nice little mixer of some kind.

Saenz: No, we had mortars and pestles. Those were to stir up ingredients and to mix up your powders and pulverize something.

Hanz: Can you think of any other equipment or was that it?

Saenz: Well, your graduates. You had to have graduates.

Hanz: Like measurers?

Saenz: Yes, we had graduates from half an ounce up to quarts. And to measure your, like one gram or two grams, you know.

Hanz: And when was about the last time you mixed up something like that?

Saenz: Well, it's, they are still compounding in some places. It depends on the practitioner; it depends on the doctor. But it has gotten to the point now that you don't need any more prescription scale because everything comes already weighed.

Hanz: So, occasionally, you still have to compound something?

Saenz: Yes.

Hanz: But that's not too frequent?

Saenz: No, not frequent.

Hanz: But at the beginning, it was everything?

Saenz: Everything. Everything had to be made.

Hanz: Did you have the gelatin capsules, like we have today?

Saenz: They came in, they came later on, they came in—around the—yes, they were available when I started. They were coming in then.

Hanz: Just coming in then?

Saenz: Uh-huh.

Hanz: About in the forties, the early forties.

Saenz: Yes. They come in different sizes, like three grains, four grains, five grains.

Hanz: You mix up and put into those?

Saenz: Yes.

Hanz: Do you think that would be easier than rolling pills?

Saenz: Oh my, yes. That was really a timesaver.

Hanz: A timesaver. To fill those little things?

Saenz: Yes.

Hanz: That couldn't have been too easy, either.

Saenz: No.

Hanz: Well, let's see here. Packaging, how has packaging changed? Everything used to be in glass, I'm sure, or paper.

Saenz: Well, at the time, they used a lot of paper boxes. They come in different sizes, like number one, number two and number three and number four, you know, for so many capsules and so many powders. And they were square little boxes. That was the main thing instead of vials like we use today. And the bottles, well, we didn't have no plastic caps like we have today. We had to use cork on the prescription bottles, and the bottles had to be rewashed.

Hanz: So you reused the bottles.

Saenz: Yes.

Hanz: I was just wondering, these formulas that you had to mix up, did the doctor give you the formula or did he say mix up some of this and you had to know the formula?

Saenz: No, he wrote it down.

Hanz: He wrote it down.

Saenz: Uh-huh.

Hanz: There wasn't like a cookbook that had them all.

Saenz: No, his way of practice was already, in his schooling, how to write the prescription.

Hanz: That was part of his training, then?

Saenz: Yes.

Hanz: What went in and then you had to what to do with it.

Saenz: What to do with it.

Hanz: Very interesting. Well, I think we have covered all the main points, unless you can think of something we need to add. Can you think of anything?

Saenz: Well, I can say that soda fountains were very popular at the time.

Hanz: A soda fountain, hey, there's a thought. I hadn't thought about that angle. Did you have a soda fountain?

Saenz: I did have a soda fountain. And it was quite interesting because we used to make our own syrups with flavorings, you know, orange and lime and vanilla and our own root beer.

Hanz: So you didn't buy that already made, like today, either?

Saenz: No, it came in concentrates, and we took it from there. In fact, I even made, I had the ingredients to make my own root beer extract, you see, like glycyrrhiza and oil of anise and—oil of anise and glycyrrhiza—anyway, we had the oils to make all these.

Hanz: All these different things, and you'd mix them up, and you'd end up with root beer?

Saenz: Yeah

Hanz: Sounds like fun.

Saenz: Yeah, I still have the formula for it.

Hanz: Was that a popular meeting place, the soda fountain?

Saenz: Oh my, yes. Everybody loved that soda fountain.

Hanz: Now, which was more profitable, the soda fountain or the pharmacy part?

Saenz: Oh, the pharmacy.

Hanz: Yes, the pharmacy. The other was just an addition.

Saenz: Yeah, yeah, just to draw in people for a drink.

Hanz: Kind of like a meeting place. Was it mostly young people or all ages?

Saenz: Well, all ages, but mostly, you know, the young part, more or less.

Hanz: I remember when I was young, our drugstore would make the best things, like the cherry cokes and all that. You know, where they put in the syrup and then spray in the sparkling water.

Saenz: Yes, there were a lot of changes made because the cosmetic industry also developed into a big thing. Which is today, is more or less, you might say, a specialization.

Hanz: Did you used to make cosmetics too?

Saenz: Yes, we used to make our own cold creams and hand lotions and hair tonics and corn remedies and corn salves and eye drops and eye water.

Hanz: And all those things now are made by specialist?

Saenz: They're already manufactured.

Hanz: I hadn't thought about the cosmetics, but I bet that has grown. People didn't use as many back in the forties, did they?

Saenz: No. Well, now skin specialists, dermatologists, they use certain things for, certain lines of skin preparations like Allercream for allergic people, who are allergic to certain things. And there are others, but they are recommended by a dermatologist.

Hanz: So they are still doing this. But they are all now manufactured, too?

Saenz: Yes, and medicine today is more of a specialization. Specialize for certain—eye specialist, ear, nose and throat.

Hanz: Back when you started, it was all very general.

Saenz: All general.

Hanz: Everybody worked with everything, and now everybody specializes. Now though, you have to, as a pharmacist, to fill the needs of all these areas with prescription.

Saenz: Right, right.

Hanz: Is your inventory considerably larger today than when you started?

Saenz: Well, it depends on the volume that you have, and it depends on what your particular area of doctor's use. It differs a lot, certain doctors in certain areas use certain things and others use other things.

Hanz: I imagine you have a hard time keeping up with the changes too. Well, this certainly has been interesting. I see we are about at the end of the tape, and I think this about covers the subject. And I sure appreciate your help with this. I enjoyed the interview.

Saenz: Well, I hope I have given you enough information.

End of interview