to the comparison drug and better than placebo. However, in certain individual trials aspirin was found better than Ponstel and the latter could not be distinguished from placebo; in some trials pain relief with placebo was obtained in as high as 40% of the patients. In other trials the results with Ponstel were better than those with aspirin or placebo.

The Food and Drug Administration considers that the introductory campaign failed to give adequate prominence to the fact that Ponstel is indicated for short-term administration not exceeding one week of therapy. Also, in a promotional brochure, results were reported from a double-blind effectiveness comparison with codeine and placebo, which represented that Ponstel was equal in effectiveness to 25 mg. of codeine. However, the dosage of Ponstel employed in this study was at a level which is still in the investigational phase.

We are discontinuing the advertising campaign in question.

Sincerely,

J. E. GAJEWSKI, M.D.

SYNTEX,
January 22, 1968.

DEAR DOCTOR: The Food and Drug Administration has asked us to call your attention to the fact that certain statements in recent advertising for our oral contraceptives, Norquen® and Norinyl®-1, may be misleading.

In the Norquen advertisement, the paragraph headed "Low incidence of side effects" emphasizes the low incidence of certain less serious side effects such as spotting, break-through bleeding, nausea, vomiting and other gastrointestinal disturbances, but fails to give adequate emphasis to the more serious known side effects such as cholestatic jaundice, rise in blood pressure in susceptible individuals, and mental depression which also occur in low incidence. Further, although a cause and effect relationship has neither been established nor disproved, the advertisement does not give adequate emphasis to the possible occurrence of thrombophlebitis, pulmonary embolism, and neuro-ocular lesions which have been observed in users of oral contraceptives.

The advertisements for both Norquen and Norinyl-1 state that "careful observation and caution are required for patients with symptoms or history of . . . cerebrovascular accident, psychic depression. . . ." The ads should have been more specific in stating:

> "Oral contraceptives should be used with caution in patients with a history of cerebrovascular accident and should be discontinued if there is a sudden partial or complete loss of vision, or if there is a sudden onset of proptosis, diplopia, or migraine, or if examination reveals papilledema or retinal vascular lesions, since these may be symptoms of cerebrovascular accident."

The advertisements disclose that careful observation and caution are required for patients with symptoms or history of psychic depression but do not specifically state that oral contraceptives should be discontinued if psychic depression recurs to a serious degree. Also, the ads fail to disclose that a decrease in glucose tolerance has been observed in a small percentage of patients on oral contraceptives.

We are modifying all future advertising to reflect these changes.

Sincerely,

BEN Z. TABER, M.D.,
Medical Director.

G. D. SEARLE & Co.,
Chicago, Ill., January 26, 1968.

DEAR DOCTOR: In June 1967, the Food and Drug Administration and all manufacturers of oral contraceptives agreed on certain changes in the uniform portions of the labeling for all oral contraceptive products. These changes were to be included in all advertisements after October 1, 1967.

The FDA has asked us to call your attention to recent journal advertisements for Ovulen®-21, which departed from the new uniform labeling in several respects.

The original uniform labeling stated,

> "The following occurrences have been observed in users of oral contraceptives. A cause and effect relationship has not been established:
>
> "Thrombophletbitis
> Pulmonary embolism
> Neuro-ocular lesions."