

all of the people participating in their collective observations that this would be a very small portion of all of the childbearing women in the United States.

Now, more specifically in reference to those women who are taking the oral contraceptive, the proportion may be somewhat greater, I think depending on the socio-economic distribution of the particular group of women you are studying. In the case of middle class women under a gynecologist's care, a very high proportion, would have the periodic Papanicolaou smear. Women attending many of the public clinics would, not by virtue of the deficiencies of the procedures in those clinics but by virtue of the lack of followup of those patients, represent a very small proportion of the total number of women for whom the pill is initially prescribed, who would also have smears done regularly.

Senator NELSON. Are you saying that of those who attend birth control clinics, in your judgment, only a small percentage receive the periodic—

Dr. HERTZ. Largely because of the irregularity of their attendance, not because of the inherent deficiencies in the practices of these clinics, which vary tremendously in different localities. So it is very hard to make a generalization. In the larger urban centers it would be a relatively high proportion of those women who actually come into the clinic.

Senator NELSON. Relatively high percentage what?

Dr. HERTZ. That would get the smear. But in less developed facilities elsewhere, I would estimate it would be a relatively small proportion.

Senator NELSON. Since every authority I have read, whether they are critical of the use of the pill or favorable to the use of the pill, strongly emphasizes the necessity for a periodic exam, including the Pap smear, doesn't that indicate that we have been very derelict in not doing a careful broad sample to find out, what in fact is occurring, and if it is true that substantial percentages are not getting periodic examinations including the Pap smear, it raises a very serious question about the protection of the health of the women involved.

Dr. HERTZ. I must say that there is a substantial difference of opinion as to the—

Senator NELSON. Pardon, I didn't hear.

Dr. HERTZ. There is a substantial difference of opinion as to how essential such followup is and particularly how frequent the interval has to be. It would therefore not be correct to conclude that this is a source of active neglect, but more that it is a feature of the impracticability of the universal application of a medication of this potency to large proportions of our population, particularly where a large segment of the population is in the lower socioeconomic group, and that this would be not so much a matter of established neglect as a matter of lack of specific information at this time.

Senator NELSON. The relative result is the same though.

Dr. HERTZ. Essentially, yes, sir.

Senator NELSON. Quite obviously from your testimony, if I interpret it correctly, in underdeveloped countries, as I recall, there probably are rare facilities for that kind of exam.

Dr. HERTZ. There is no question about that and in part of our own country also.