statement may be true, is it not irrelevant in view of the fact that there are other methods of contraception available, some of which may be

almost as effective as the pill and all which are perhaps safer?

Dr. KISTNER. I don't agree with that statement completely because I don't think that there is any other method which is as efficient as the pill, and I think that if one becomes pregnant as a result of having used another method that one is then in the risk group of pregnancy. I don't think that there is any doubt that the most efficient method of conception control is the use of the pill. So, therefore, I would disagree with that.

Furthermore, I think the risk—obviously there is no risk to the use of a diaphragm or a jelly although I can't say that either because I have seen some serious allergic reactions or vaginitis, from the use of spermacidal jellies—so even those have a certain risk. I haven't seen anybody die of these other methods. Therefore, I would have to say that "another" method carries with it a mortality rate of pregnancy

if the "other" method is a failure.

Senator McIntyre. I think the testimony yesterday indicated there was a very close percentile difference based on the efficacy of the pill

as opposed to the diaphragm and IUD devices.

Dr. Kistner. I don't know if anybody has a copy of my book up there or not but I listed the various percentages. I don't remember them but there is a fairly definite—I think the pill is 0.01 per hundred women years, a hundred women using a pill for a year with the sequentials that got up a little bit higher, and then with the progestin alone pill, it runs about 3 per hundred, with the IUD I think it ran about 3 or 4 per hundred women years, with the diaphragm it got up to 6 to 8, et cetera, et cetera.

Senator McIntyre. Can you tell the committee where you obtained

those statistics that you cite?

Dr. Kistner. Yes; they are from Christopher Tietze's report who

is a biostatistican for the Population Council.
Senator McIntyre. Did these statistics allow for women who have actually dropped out from use of the pill?

Dr. KISTNER. Efficiency?

Senator McIntyre. Do these statistics you are citing, do they allow for the dropout, the woman who ceases using the pill.

Dr. KISTNER. It is only effective as long as she is taking it.

Senator McIntyre. Well, the question is do the statistics allow for those women who have ceased using the pill?

Dr. Kistner. I would suppose they would; yes, of course.

Senator McIntyre. The statistics do allow for it?

Dr. Kistner. I don't know. I don't understand the question. The efficiency of the pill is only that as long as the woman is taking the pill. After she drops out using it, it wouldn't pertain to efficiency.

Senator Nelson. I think what he is referring to is Dr. Davis yesterday used some statistics in Maryland in which a very high percentage of the users of the pill stopped using it within a 2, 3, and 4 month period.

Dr. KISTNER. Yes.

Senator Nelson. I think in one of their clinics 40——

Dr. Kistner. Stopped using the pill.