I was graduated from Cornell University Medical School in 1948. After serving my internship and residency at the Presbyterian Hospital, I have remained there on the teaching and research staff of the department of medicine ever since.

I am actively engaged in the clinical practice of medicine, and I am

a physician with board certification in internal medicine.

Senator Nelson. You are actively practicing medicine with patients?

Dr. Laragh. Yes, I am. I am a physician in practice practicing in-

ternal medicine.

Senator Nelson. And this is a teaching hospital?

Dr. Laragh. At a teaching hospital. I am the director of the Hypertension and Nephritis Clinic of the Presbyterian Hospital, and for 8 or 10 years have been a consultant to the U.S. Public Health Service for cardiovascular disease.

I am also chairman of the Council for High Blood Pressure Research of the American Heart Association. I consider myself a physician who not only practices medicine but who is a medical researcher and educator.

Senator Nelson. Thank you.

Dr. Laragh. In my comment to you this morning, Senator, I would like to tell you about some studies that we have made which have established clearly a relationship between the use of oral contraceptive drugs and the development of high blood pressure. This relationship came to us by chance in the course of making clinical observations on our patients sometime in 1966, when we observed a woman who we knew had normal blood pressure develop rather severe and impressive hypertension several months after starting an oral contraceptive medication.

Armed with this observation, which we recognized at first could be purely coincidence, and I would emphasize that possibility, because so many million people are taking the pill and so many million women have high blood pressure that the two phenomena could certainly be coincidental. But we were able to collect some eight patients with a similar relationship—that is, the story of no known hypertension prior to the pill, development of hypertension on the pill, and in six of these—

Senator Nelson. They had a physical examination report that

showed there was no hypertension before they took the pill?

Dr. Laragh. Yes. Well, as with all clinical studies, all of them had not been examined by us personally before that, but their histories and their backgrounds indicated that most of them had not had high blood pressure before the pill—six of them, I think, six out of nine. And the histories were fairly reliable in most cases.

Even this observation is, of course, subject to chance occurrence with the two situations being so common. However, we withdrew the medication from nine patients, and six of them had a dramatic improvement in blood pressure. In brief, the blood pressure came back

to normal.

Senator Nelson. Now, six of them had no prior history; three of them did?

Dr. Laragh. The way it breaks down, these numbers—let's get it straight for the record. I have them here.