Now, I think that we have some reports. Dr. Hertz covered with you the study, from the Sloan-Kettering Institute, on the cervical changes due to oral contraceptives. He probably covered with you the difficul-

ties of that study and the criticisms leveled at it.

I think the Committee, in analyzing the situation, came to this conclusion, and I will read here, because I do want to be accurate about this point—"lacking conclusive information about the applicability of animal data to women and valid direct observations on human beings, the potential carcinogenicity of the oral contraceptives can neither be affirmed nor excluded at this time. Suspicion, however, continues and has been enhanced by recent cytologic studies of the cervix. It is therefore necessary that a major effort be expended to solve this problem. In the meantime, clinical surveillance of all women taking oral contraceptives must be vigorously continued."

That latter appears in the labeling and in the letters that have gone

out, and in most of the medical literature.

Senator Nelson. Do you have any guess, statistics, or figures of your own that will indicate what percentage of the women who are using

the pill have a regular physical examination?

Dr. Hellman. No; I do not have very good data for you. I can tell you this—I have some data. I can tell you this, that in the contraceptive clinics of New York City, my own in particular, which I said deals with economically deprived individuals, the periodic examination is meticulously carried out. Now, we do move some patients. They move, they do not come in, but we try to get them by telephone calls and so forth.

In Maryland, Dr. Davens, who is acting commissioner of health, assures me that the—and I choose Maryland because it is one of the best organized States for treatment of clinic patients with family plan-

ning—assures me that the follow-up is good.

Now, I knew you were going to ask this question, so I initiated a small research effort of my own. I am sure you will realize that it is not very meaningful, but I have a farm up in Maryland, in rural country, and the local pharmacist is a friend of mine. I asked him about 3 or 4 weeks ago whether he would ask the patients who came in with prescriptions for oral contraceptives whether they had been warned of the dangers and whether they had periodic examinations. These are

all general practitioners. There are no specialists in this area.

This is a difficult question for a pharmacist to ask, because if the doctor finds out he is asking the question, he will call him up and say, "What business is it of yours?" He felt he could not ask them about the periodic examination, because the patient would have said immediately, "Should my doctor be doing that?" But he did ask them about warning. We got 10 patients and all but two of them had had a thorough discussion with the doctor about the potential hazards.

Now, this is a small sample in a tiny town in Maryland. I do not know whether it means anything or not, but investigation of this kind

can be done, I think, and ought to be done.

Senator Nelson. I have been told by two pharmacists that they did not have any statistics on the frequency, but that frequently or regularly they will see a prescription—they did not give me any percentage—which simply is to be filled upon request.