

the subject of the pill's safety, I was amazed at how much information there was, already in the medical literature, about the dangers and the proof of those dangers being due to oral contraceptives.

By May 1969 the assembled facts and documents, including material not theretofore disclosed to either the medical profession or the public, impelled me to write a book. I hoped it might help alert physicians and the public to the pill's dangers, and it might help avert similar disasters in the future.

One thing I am convinced of as a result of contact with the public this past year—and by the public I mean young people, men and women. I think we should bear in mind that it is not just the women. It is the men who are interested in the welfare of women—they do not want a pill at any price. As much as society wants the pill, they simply are not willing to pay any price. They want to know what the price is.

This, I think, brings the benefit-risk ratio talk into focus. Whenever we think of benefits and risks, we also, I think, have to talk about damage. It is one thing to face a risk; it is another to experience the harm that that risk, or the risk of whatever might happen, in fact has happened. And this damage is in terms of health, life, and enormous amounts of money.

So, looking at benefits and risks only, I think it is being shortsighted and I urge you to consider the cost and these other factors.

I think it is important also that we ponder what the cost is going to be as long as these deliberations and indecisions and indefinite answers persist. If we allow another 10 years to go on, what is the additional cost going to be? That, gentlemen, I think, is the most crucial question to be grappled with here.

As I point out some of the things that have happened in the advertising and promotion of the pill, please bear in mind that the average practicing physician relies upon the drug companies for much, if not all, of his information about drugs. He may read some of the articles in medical journals which report adverse reactions to certain drugs, but by and large he does not have time, nor is he motivated, to read all journals, to sift the poor articles from the good, and to correlate all the information.

Obviously, he cannot repeat the research that has been done on drugs in his own practice. Usually he looks to the most convenient central source of information, the Physicians Desk Reference, a compendium of drug company advertising. Most of us here in this room, I think, understand that the PDR is no more than a compendium of drug company advertising. The doctor assumes that the drug companies are honest and that the FDA has been a vigilant watchdog to protect him and his patients. This is true sometimes; sometimes it is not.

For the purpose of convenience in this discussion, I will use the word advertising in reference to graphic presentations to physicians which are readily identifiable as commercially sponsored sales messages.

By promotion I mean all other communications aimed at promoting the sales, use, and acceptance of the pill by the medical profession and the public. Advertising of the pill to the medical profession has been characterized by many statements that tend to be misleading. If in