fact they are not grossly, overtly misleading. Morton Mintz has pointed out in his book—not pointed out, he has given specific examples of where companies were actually caught misleading the physicians to whom advertising had gone. It is very interesting how these companies—Ortho, Syntex, Mead-Johnson—were forced to send out remedial letters: February 1, 1967; January 22, 1968—confessing, under pressure, of course, to the doctors that some of their advertising claims have been misleading.

But there are other examples. In Enovid Bulletin No. 20, published in 1964, under a section headlined "The responsibility of leadership" is this statement:

* * * few drugs in any category have ever been subjected to clinical tests as exhaustive as those already undergone by Enovid.

The reader was expected, no doubt, to understand that statement as applying to safety as well as to efficacy. I think much of the testimony that has been heard before this committee in the last 2 weeks underscores the fact that research as to safety has been a long time in coming and that it had not been exhaustive by 1964 and certainly has not been exhaustive even today.

In that same bulletin, we find:

In the mass of data now on hand, there is *no* evidence—the italic is mine—that long-term inhibitation of ovulation with Enovid impairs post-treatment fertility, * * *

Again, a statement implying that exhaustive work relevant to the subject had been done when it had not.

Ambiguous language has been employed many times to take away the sting from information which should have had a warning impact on the physician. For example, in Physicians' Product Brochure No. 62, printed March 16, 1964:

There is no direct evidence that Enovid alters the diabetic state. However, in a few instances some degree of difficulty in the management of diabetic patients has been reported in connection with Enovid therapy * * * They may be expected to return to their pretreatment manageability on discontinuance of the drug.

It does not alter the diabetic state but they return to their pretreatment manageability on continuance of the drug.

Senator McIntyre (presiding). Excuse me for interrupting, but on page 3 you have already mentioned Enovid Bulletin No. 20 and the other, Physicians' Product Brochure No. 62. Would it be possible for you to submit these to the committee? You can make them available to the transcriber.

Dr. Williams. Certainly, Senator. I have them right here.

(The documents referred to follow:)