If time proves that there is some causal relationship, no matter how remote, the doctors must be informed, because it is his obligation to inform the patient of this remote possibility, so that the doctor and the patient between themselves can decide what is the best course of actions of actions.

can decide what is the best course of action.

If time proves that Enovid may be unsafe, you can be sure that your Company would be the first to recognize it and the first to warn against its use. There is nothing new about this statement. We have withdrawn drugs of our manufacture from the market before and I am sure, if it is warranted, we will do it again.

I am firmly convinced that when we are able to view today's events with the calm reason that retrospect offers, we will realize that Enovid must be held blameless. In the meantime, it is important that all of us govern our actions by logic rather than emotion.

Sincerely,

WM. L. SEARLE, Vice President, Marketing.

Dr. Williams. Now, the detail man is the foot soldier of the "ethical" drug industry. It is his job to get the doctors' confidence, and to extoll the virtues, and counteract the shortcomings, of his company's products. Although he has done his job well with the pill, overcoming real adversities from time to time, such as in August 1962, he has had a lot of help from the press and other interested parties. Many obstetriciangynecologists have given him assistance, in part, I think, because they have really enjoyed their exalted position. I am not slamming OBGYN men. I have a lot of friends in that profession. But this has been a rather peculiar play on their ego, and they have enjoyed their exalted position, created in no small measure by the tenor of promotional efforts, as the ultimate experts about any and everything related to the pill.

I think it is very interesting to point out that this advisory committee formed in 1965 to appraise the dangers of the pill in relation to thromboembolism principally, has been composed of specialists in obstetrics and gynecology and epidemiology, but for some strange reason they had no experts in vascular disease or heart disease or stroke

or metabolic disease.

The obstetrician-gynecologist professors have been experts in all of these. I am not deprecating the work of the recent task forces. They have done a very fine job. But it has been a peculiar emphasis. That

is all I want to point out here.

Much of the press, as pointed out by Morton Mintz in a fine presentation of the history of reporting of the pill's problems in the Columbia Journalism Review last spring, has refrained from reporting adverse stories while enthusiastically publishing innumerable accounts of its marvels and reaffirmations of its alleged safety. Many newspaper columns and magazine articles have seemed to be little different from paid advertising. These things have been planted over the years too many times to count.

Senator Dole. Have you discussed this with Mr. Agnew?

Dr. Williams. It is hard to think of Mr. Agnew and the pill in the same column.

Senator Dole. He has a reverse complaint. He is not complaining about only the good being reported.

Dr. Williams. I shall get around to him, if you will be patient with me.