

if they are caused by the pill, they disappear when the pill is discontinued. However, in most cases, the discomforts last only for a few months and the woman prefers to "wait it out" and if her doctor concurs, she continues to take the pill. Sometimes a change of dosage, under medical supervision, relieves the symptoms.

One side effect of the pill does call for treatment. Yeast vaginitis occurs in about 30 percent of the users, which is approximately the same incidence as in pregnant women. This inflammation is not a serious health problem, and it responds well to treatment. Sometimes the treatment can be administered without even discontinuing the use of the pill.

IS "THE PILL" DANGEROUS?

What about rumors of more serious complications resulting from the use of the pill?

The relationship between the pill and cancer has been the subject of many studies. To the best of current knowledge, the pill does not cause cancer of the breast, the cervix, or the body of the uterus. Cervical "*Pap*" smears done on patients who are taking the pill have shown that sometimes there are tissue changes, but there has not been evidence of the development of cancer. Every woman on the pill should have the *Pap* test done regularly; if her doctor finds any hint of abnormality, he will advise her whether or not to discontinue the pill.

Does the pill cause sterility? About 80% of women who are on the pill get pregnant within three months of discontinuing its use when they are ready to have a child. Those who have a difficult time getting pregnant are probably those who were relatively infertile before they started to take the pill.

Does the pill cause malformed babies? The only instances of this have occurred when a woman continued taking the pill *after* she was pregnant. Doctors agree that the pill should not be taken by women during pregnancy.

Finally, what about blood clotting? Here medical opinion seems somewhat divided. Extensive studies have been conducted in both this country and England, and British physicians in recent years have questioned the complete safety of the pill in this respect. This situation is being carefully watched, but medical spokesmen point out that a certain number of all women develop a blood-clotting disease, whether they use the pill or not and that this disease tends to be a complication of pregnancy. In other words, the same women who might develop blood clots while taking the pill might also have developed them during pregnancy. A review of many studies of cause-and-effect relationship between the pill and blood clotting, published in the Journal of the American Medical Association of Feb. 10, 1969 revealed only one case of this disease in 27,000 women-years of pill-use (in other words, one case in 2,700 women using it for a period of 10 years). To sum up our knowledge to date, a risk does exist but it is small, unpredictable, and much less than that involved in a pregnancy.

"THE PILL" AND YOU

The pill, like every other powerful drug, has different effects on different users. Some women may be particularly sensitive to it, just as some people are sensitive even to aspirin. An individual sensitivity does not always mean that the drug is dangerous. It does mean that the individual patient should discontinue its use.

What should you do about the pill? You should discuss family planning fully with your doctor, including the various methods available. If he prescribes the pill, you should follow carefully his instructions concerning its use. Tell him promptly about any changes in yourself which you may notice after you start taking the pill. Go back to him for checkups as often as he advises.

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HOW DOES YOUR DOCTOR KNOW WHEN A NEW DRUG IS SAFE?

In recent years, medical science has made impressive headway in developing new drugs that either prevent or treat diseases which were once life-threatening. Among these achievements have been vaccines, antibiotics, and the cortisone drugs—to cite those which are most widely known. But each step along the way toward controlling disease has been taken slowly and carefully; the process is a painstaking one. Only after a new medication has proved itself through clinical trials will it be licensed for widespread use.