

The "comparable" data on thromboembolism in the United States, discussed above, is but one example. Blow for blow rebuttal articles have sprung up at critical times, such as the one described earlier by Dr. Kassouf, that was authored by Drill and Calhoun of the Searle Company and published in the J.A.M.A.

Promotion has been heightened by another assumption implicit in much of the thinking of some segments of our society. That is that The Pill is the *only* method of contraception worth considering. This has caused many young women to remain ignorant of the alternatives until their "side effects" turned into "complications."

Continued sale and use of The Pill has been aided by the convenient lack of data on numerous fronts. Sellers and promoters of The Pill cannot (or will not) tell us very much about why millions of women no longer take it, yet they strenuously objected when a women's magazine attempted to do so. They have not undertaken any laboratory or clinical research (or at least, have not reported any) aimed at yielding comprehensive proof or disproof of a causal relationship between the Pill and thromboembolism. In the absence of published data on experimental and clinical studies, the statistical correlation is all we have to go on, officially. Language such as "statistically significant association" is much easier to swallow, and much better for the pro-Pill cause, than firm statements such as "The Pill causes thromboembolism." Mental depression has been known to be a "side effect" since the earliest days of The Pill, yet it is only very recently that independent researchers began tying down the breadth and depth of that problem. Its risk and ultimate potential danger are still to be articulated.

Other areas of absent, tardy, or incomplete research have been described by other witnesses. It is sufficient here to say that most, if not all, of the areas of major concern today about safety of The Pill were subjects of concern to the manufacturers, and others in the promoters box—ten years and more ago. One indication of this concern appeared in a June 1961 bulletin to Searle salesmen:

The Physician wants to be convinced that Enovid is:

1. Safe for long term use.

Let us weed out unnecessary discussion on:

2. Cancer (why discuss it?)

Tests of bleeding times and clotting times were done on a few women in the Puerto Rico field trials in 1956 and 1957, but the results and the fact that they were done at all, were not included in the published reports. The implication is clear that somebody intimately connected with those trials was concerned, either about the likelihood there would be clotting problems or that some problems already had arisen at that time. And post-Pill infertility was a worry for the manufacturers, otherwise they would not have alleged its non-occurrence in the early days.

Some of the most potent help for the promoters of The Pill came from one of the largest state medical societies, the California Medical Association. In July 1969 it distributed to its members a Special Report about The Pill, including a reprint of a leaflet designed for patients. The leaflet, "What You Should Know About 'The Pill'" contains numerous errors of fact and many words intended to promote The Pill. Doctors were given the opportunity to order the leaflets in quantity so that they could give them to their patients.

SECOND REPORT ON THE ORAL CONTRACEPTIVES, BY THE ADVISORY COMMITTEE ON OBSTETRICS AND GYNECOLOGY, FOOD AND DRUG ADMINISTRATION, AUGUST 1, 1969

Although much of the content of this report is encouraging evidence that we are, at last, facing up to The Pill's problems, certain aspects of it are cause for concern. The exposition of certain hiatuses in knowledge about worrisome questions of long range dangers has been done with care. Indeed, the report appears to place those problems in sharp focus, chiefly in respect of the uncertainties. The disturbing aspects of the report are the tardiness of its accomplishment, the inconsistencies between Task Force reports and the Chairman's Summary, and details of the Summary.

The epidemiologic study of thromboembolism has been a long time coming. The urgency of such a study was stated by various groups of experts, beginning in 1962 and repeated frequently until 1966, when the Advisory Committee rendered its first report. "The present study was begun in November 1965, in