

I have had to ask myself this question, and I have no doubt that you have also seriously asked yourself this question, and I have no doubt about the answer, and the answer is this. We must discuss it. We must discuss it as rational, intelligent beings, as unemotionally as we can, and we must examine the evidence.

If the evidence is there, let us examine the evidence. If the evidence is not there, let us do everything we can to obtain the evidence. But on no account can we put this subject completely behind not an Iron Curtain but something which is substantially much worse.

Now there are other implications in our data. There is a suggestion, and any reasonable physician would accept this, that the changes we have seen, and we have described, could in the end of long-term usage of oral contraceptive medication increase somewhat, by an uncertain amount, the incidence of actual diabetes mellitus, the clinical condition we call diabetes.

Now, I have given in my account as fair a statement on the position as I think I can go. I do not think this risk is very great, but I think the risk is there.

Finally, I would like to conclude with two statements, because this metabolic problem is vaster, far vaster than that which I have outlined to you. It covers every disadvantage ever stated about the oral contraceptive, all the disadvantages of this medication stem from the metabolic changes, whether they be changes in personality, whether they be changes in putting on weight, whether they be changes in skin pigmentation or what have you, high blood pressure.

These are all metabolic changes, and vast numbers of these changes have been identified. And so I could go on at great length, but I do not intend to bore you with this, but I do want to make, if I may, two points.

Dr. Pincus in 1962, and this statement appears on page 28, considered the problem of the justification of the use of contraceptive medication, oral contraceptive medication purely with steroids, purely for the purposes of contraceptives, and he said that if this medication was to be justified, it must meet three criteria, and the criteria quote word for word from his book, or rather from his article:

"The first criterion is the avoidance of any pathological side effect. This must be assured."

We have described pathological side effects, and we have heard others describe such effects.

Second was that "The continuation of normal physiological function must be assured."

There are more than 50 ways in which the metabolic functions of the body are modified, and to say therefore that normal physiological function has been demonstrated in the years of oral contraception is to overlook a very large amount of information.

Finally, "There should be no impairment of subsequent fertility by the medication."

I am in no position to judge this, but I know that this is already a matter for some concern.