proving nothing. As a matter of fact, Senator, I might point out that as the paper finally did appear, they were very careful to say that

the paper proved nothing.

Senator McIntyre. I am informed by the committee staff here that accounts appeared in both the general and trade press with reference to this study. It was rejected by the Journal of the American Medical Association, not out of hand, but only after many months during which the authors and the editors were unable to agree on the revisions.

Dr. Goldzieher. Which would suggest that it was initially unac-

ceptable to the AMA, would it not?

Senator McIntyre. You say that this study finally managed to get itself published in an English journal noted for its lack of editorial discrimination. Was it not published, Doctor, in the British Medical Journal, which is the official organ of the British Medical Society and the counterpart of our own Journal of the American Medical Association?

Dr. Goldzieher. It is the official journal of the British Medical Society. That does not necessarily give it a superlative scientific caliber.

Senator McIntyre. Does this statement, the statement that this journal—I am now referring to the British Medical Journal—this journal is noted for its lack of editorial discrimination, represent simply your

own opinion, or is it based on some evidence?

Dr. Goldzieher. No, sir. It is my opinion exclusively, and it is based on the fact that this particular journal publishes large numbers of letters of an anecdotal nature, which are perhaps amusing, but are of dubious scientific merit, but which are then used for purposes which are not admissible. Having crept into the scientific literature as information—any statistician would call it anecdotal information—it then gets quoted and requoted. This is of questionable value to the medical community.

Senator McIntyre. Doctor, is it not true that letters to medical journals might very well be a manner and a way of detecting problems

that may be occurring?

Dr. Goldzieher. I think there are better ways, Senator. There are all kinds of systems set up for adverse-reaction reporting, where the information is not made public, but privately and scientifically pooled in the hands of a body that knows what to do with such data. To take such raw data is like opening the FBI files, which have probably everything on everybody anywhere that he ever said, some of which may be true, some of which may be false. This raw information should not, in my opinion, appear in a journal of this type. It should go to a body like the FDA; it should go to a body like the Tissue Reaction Committee of the Armed Forces Institute of Pathology. It should go to some body which knows what to do with this information. Printing it in the British Medical Journal is no way to handle this kind of information.

Senator McIntyre. Dr. Goldzieher, on page 8 of your statement you say there has been a rapid increase in deaths from thrombosis of unknown cause since 1958 in both men and women, and you cite a British study of fatal pulmonary embolism in support of your statement, and point out that the increase began before use of the pill was widespread, and that none of the victims were on the pill.