adjustment to be improving. Eighty percent of this total related to an increasing security regarding pregnancy rather than an increased sexual desire. Actually 10 times as many women reported decreased sexual desire. In this study, as in our own, 9 percent reported only beneficial effects and fewer symptoms of emotional disorder. In 1968, Nilsson and his colleagues reported a prospective psychiatric and psychological investigation of 169 women during pregnancy and the postpregnancy period, comparing 54 women who were prescribed oral contraceptives during the postpregnancy period with 104 women who used other contraceptive methods. There were no differences between the two groups with respect to psychiatric symptoms and psychological or social factors before medication.

Senator NELSON. May I ask, during the Nilsson studies, were they using a sequential or not?

Dr. KANE. No, as I commented earlier, almost exclusively what I am reporting are the use of combination agents. Senator Javits raised the question as to whether sequential agents do not make a difference. I think there is no information. There simply is no research in this area and there are no answers.

Senator NELSON. So these were all fixed combination?

Dr. KANE. Right. Almost everything I say has to do only with combination agents. There is simply no information on sequentials.

Senator NELSON. Did you recite, did you identify in your bibliography the Nilsson study? What was the date of that?

Dr. KANE. 1967 or 1968. You have the bibliography. I do not have mine here.

Senator NELSON. Did they identify the brand of drug they were using?

Dr. KANE. I think they did.

Senator NELSON. So then if they identify the brand, anybody can find out how many micrograms of estrogen are in the drug?

Dr. KANE. Right; that is correct.

Senator NELSON. Then, of course, that identifies the synthetic agents and how many micrograms——

Dr. KANE. Correct. That is all contained in the body of these references.

Senator NELSON. The studies would reflect the effect of that drug, whether it be 100, 75, or 50 micrograms, and everybody would know that it was that level of estrogen content that was involved in the study and not another level?

Dr. KANE. Yes; correct.

In this study during the postpregnancy period, a significantly higher frequency of psychiatric symptoms was found in the oral contraceptive group as regards both the total number of psychiatric symptoms and individual symptoms of a neuresthenic and depressive nature. They felt these to be related to the medication.

In June of 1969 another study was reported by Lewis and Hoghughi in the British Journal of Psychiatry. This was a study of 50 pill-takers in a working class general practice in England. Of the 62 women who were known to be taking oral contraceptives, 50 were agreeable to answering questions. A clinical assessment to their mood/state was made by a psychiatrist, and objective rating scales of