The emotional or psychiatric problems are the complications which seem to me to have the most serious potential danger. Three patients have stated that they were desperately afraid that they were going to kill themselves. Two of them had been on the pills 14 days or less. The third patient lived out of town and later told of her depression and fear of suicide beginning 4 months after she started taking the pills. These three patients are the only ones in the author's experience who have ever told so dramatically of their fear of suicide. After the pills were omitted, the depression and suicidal fears of the three patients disappeared, as did the depression of the other patients in table 1.

Now, rather than go through the points of the report that I gave, which do not deal specifically with the emotional or psychiatric problems, skipping over, then, to the discussion on page 8 of the report which I submitted formally:

A study of the complications of the report indicates that it might be possible to make suggestions regarding the use of contraceptive pills in selected types of patients as well as some general suggestions.

Suggestions for specific patients: The possibility of depression or of other emotional disturbances suggests that caution would be advisable if contraceptive pills are to be prescribed for individuals who already have these conditions. Such patients should be kept under close observation for a possible aggravation of their disturbance if they are to be given the pills. All physicians prescribing the pills should be aware that emotional disorders can occur and persist until the pills are discontinued. Similar precautions should be observed in prescribing the pills for patients with conditions such as migraine headaches, or with symptoms such as vertigo. Just for example, one patient that is not included in this study called me at 12:30 a.m. Sunday. She had had previous psychiatric therapy, had been placed on a contraceptive pill for gynecological reasons, had had them omitted during the preceding week because of an aggravation of the psychiatric disturbance, had called seeking some emergency sedation for an acute emotional reaction. So I have not included all of the complications which I have seen in the last 2 years.

Skipping on then to page 11 with regard to general suggestions:

The emotional or psychiatric changes seen in some of the patients of this report suggest that additional study should be given to such complications. If the patients reported here were willing to discuss their problems without any invitation to do so, one is concerned regarding other patients who may not have discussed similar problems. It is disturbing to consider the patients on the pills whose depression may have ended in suicide and/or homicide with no recognition of any association with the contraceptive pills. Investigations would seem advisable to determine the possibility of such a correlation. Personality changes could be a factor in other conditions such as automobile accidents and divorces. It is my opinion that the changes that one encounters on an emotional basis correspond rather closely to those that are associated and described as premenstrual tension. The correlation is probably not absolute, but I think