expert interrogation for all possible side effects, and complete physical examination, with very careful examination of the breasts and pelvic organs, and Pap smear at least every 6 months. This would be an extremely expensive package of medical care if done for all women on the pill. Also then, inasmuch as in my experience, many of these women are going to be ailing after the pill is started with any one of a variety of symptoms—they are going to be utilizing a lot of doctors' time for the care of their side effect problems. I find that many of the women on birth control pills have had prescribed to them multiple medications needed to counteract the adverse effects of the birth control pills. These women may have additional prescriptions given by other physicians for appetite depressants, or diuretic fluid eliminators, or hypertension medication, of antidepressant medication, or tranquilizers, or drugs to soothe gastrointestinal side effects or antimigraine medications, or ordinary headache pills, vaginal suppositories and creams to stop itching, et cetera, et cetera. All of these medications are costly, of course, in terms of dollars and many of them have their own side effects that must in turn be looked for. I have found it easier to suggest to women that they stop birth control pills and let their side effects disappear spontaneously.

The birth control pill has been held almost sacred, or at least until the past year or so, it has been held sacred. Why is this? There are many reasons. The medical profession hates as a group to admit that it has been wrong. But we have been wrong. We were wrong in the 1950's in widely using cortisone for very simple cases of rheumatoid arthritis. We eventually stopped this. Now we use it only in exceptional cases. We have been wrong, I think, in widespread use of appetite depressants, and their use is not so popular now. And I think we have been wrong about birth control pills.

Further, because it is so simple for a doctor to prescribe it, the pill has been popular. But if a doctor carefully instructs his patients in the side effects and dangers and makes the checking exams that are necessary, the birth control pill is not so simple. Another sacred thing about the pill has been its presumed 100-percent effectiveness if used properly and continued. But it is really not accurate to say it is 100 percent effective in mass use, because many women do not continue with these pills over long periods of time for various reasons. Hence, if only 60 percent are taking the pill at the end of 2 years, the pill is really only 60 percent effective. Furthermore, a woman that becomes ill because of the pill is 100 percent ill. The pill also has been held sacred because it has been the fad or "in" thing to do—that is, for both patient and doctor, I believe. The sacred birth control pill has also had the halo of being the drug that would control the massive social problems of a burgeoning population. It could be used on the poor, ignorant, illiterate woman who scarcely knew what birth control was all about. Doctors' reluctance to leave the birth control pill also comes because, having once prescribed the holy vision of 100 percent effectiveness, what doctor likes to turn around and offer his patient only a 90 percent to 95 percent technique?

I believe that we physicians are so used to administering very potent medications to very serious disease problems, we have not really yet learned it is a totally different circumstance to administer