phragms have previously been made per month, 118 patients asked to discontinue the pills and be fitted with diaphragms.

Senator NELSON. May I interrupt there?

Dr. CONNELL. Surely.

Senator NELSON. The best statistics that we have had presented here are that the diaphragm, properly used, is about as good as the pill, is it not?

Dr. CONNELL. I think you will find, Senator Nelson, if you look at comparative data on use-effectiveness that we must talk about two different things here. I do not believe that you would find the use-effectiveness of the diaphragm in large studies to be as good as the pill. When you say "properly used" you are talking of total effectiveness for individual well-motivated intelligent women who use a diaphragm every time: this is one thing. But one must look at use-effectiveness, must look at the prevention of pregnancy for large groups of women over prolonged periods of time. When one does this one does not find the same order of efficiency and effectiveness.

Senator NELSON. Do you not have to, if you are going to start using these figures, include in your statistics the fact, and the testimony varies a little bit—that 40 to 50 percent of the women quit using the pill after a number of months or in other testimony that over half quit after two or three years? That is a much more important statistic than the 6 percent of the—that is, the one-third of the 18 percent in the survey made by Newsweek, who say they were going to quit because they have been concerned about the testimony.

In other words, Newsweek did a survey in which 18 percent of the women are now quitting the pill, 6 percent on account of what they have read in the papers about it. That is the smallest factor involved in that 18 percent. The 50 to 60 percent that quit after a year or two or three, according to one study, and the 30 to 40 percent that quit after a few months according to another study, are much more dramatic statistics than the 6 percent, are they not?

Dr. CONNELL. Here you are talking of use-effectiveness and you are also talking about the use of a method which are two different things. A patient who stops using a particular method cannot be used in the statistics for that method.

Senator NELSON. But the percentage of women who have quit using the pill for one reason or another has been dramatically higher by six or eight or 10 times than those who have quit because of reading something in the paper.

Dr. CONNELL. I think most of this data remains to be collected. We have some concept of the number who are switching, the number who have gone off pills. But we have no idea, there has not yet been time to measure the actual importance of these figures. Therefore, I think it would be dangerous to generalize today as to what the ultimate result of all this is going to be. I think it is a little premature.

Senator NELSON. All I am pointing out is—and I don't have it before me—that one study indicates that 50 to 60 percent of women, after a period of time, quit on their own.

Dr. CONNELL. I am familiar with this.

Senator NELSON. Another 30 to 40 percent quit, in another study, after 6, 7, or 8 months. So you have large numbers quitting, and all