

things to watch for—these would include swelling of the legs, tenderness of veins, headache—these are symptoms.

Senator NELSON. These are the things you are referring to when you say certain untoward side effects—certain untoward symptoms, is that right?

Dr. CONNELL. That is right.

Senator NELSON. What is the whole list—in other words, is there a uniform thing that everybody who advises the patient advises them exactly the same in your clinic?

Dr. CONNELL. I would rather doubt it. I do not think one can advise all patients in precisely the same way. I think one can give them all certain concrete information like that on thromboembolism, for instance.

Senator NELSON. Would you not give them all the same information if—

Dr. CONNELL. I would give them the same information. I might couch it in a little different language for different types of patients, but I would certainly give them all the same information.

Senator NELSON. On what basis would you distinguish one patient should be told if she has a swelling of the leg and others might not be told—

Dr. CONNELL. I am saying that they are all told.

Senator NELSON. What patients do you tell as on page 10, and are all patients told the same?

Dr. CONNELL. Yes, precisely.

Senator NELSON. I thought you said no.

Dr. CONNELL. I thought we were talking about the form in which the information was transmitted.

Senator NELSON. No. You are saying that you uniformly, in the clinic, tell each patient that if certain untoward symptoms occur, they are to call the doctor?

Dr. CONNELL. That is right, or come to the clinic.

Senator NELSON. Are these symptoms—how many of these symptoms are there that they are told about in the clinic?

Dr. CONNELL. Maybe half a dozen or so that I think are important.

I think the problem here is that if you look at the most recent letter to physicians which was discussed earlier this morning, there are a huge number of adverse reactions listed. My statement here is simply that the average individual could not be handed this list, realistically. I think they would neither understand it, nor do I think that we are justified in telling them to patients as proven, since these are admittedly still in the area of unproven scientific information. If they are scientifically proven, as in the case of thromboembolism, I think we can, we should, and we do transmit this information to patients.

Senator NELSON. When you tell a patient about these half dozen untoward symptoms which should cause them to call the clinic, to call a doctor, are these untoward symptoms listed for them in writing?

Dr. CONNELL. In many instances. Each variety clinic has its own technique of patient instruction.