Department of Health, Education, and Welfare, estimated that if current national trends continue, during 1970 approximately 70,000 girls under 18 years of age will have a child out-of-wedlock (17). If the pill scare continues unabated, I fear that figure will become a gross underestimate.

Nor are the harmful consequences of alarm over the pill likely to be confined to unmarried women.

I feel that insufficient recognition is being given to the pill's singular contribution to the happiness of married couples and the stability of their marriages. Rather than theorize and quote statistics, I should like to read excerpts from a letter received February 3 from a woman living in Alma, Michigan:

"Being a voluntary user of the pill for six and one half years, I feel that I should say something in defense of the birth control pill, because I feel it is possible that only those persons who are speaking out against the pill will be listened to. . . .

"The men I know of whose wives take birth control pills, my husband included, enjoy their wives more because they don't have to worry about getting their wives pregnant each time they make love, or worry about supporting a large family, or worry about not being able to give each child enough individual love and some of the material joys of life. There is the joy of being able to make love more often, if the couple so desires.

"But I feel that just because these pills are harmful to some, they shouldn't be banned from all women. The women I know who have had troubles are few, whereas the women who take them without any difficulty are many. I have discussed the possibilities of dangers with women after the frightening articles in a national magazine, and we all agreed that the best advice anyone could be given is to find a doctor you trust, follow his directions for taking the pill, and have frequent check-ups.

"The thought of banning oral contraceptives just because some people cannot take them would be as frightening as banning the use of penicillin or other drugs, just because they are harmful to some.

"I truly hope the few people who are fighting the birth control pill will lose their battle, so that the many of us who want to take it and have an easier and safer way of controlling the size of our families, may do so."

The third matter I should like to discuss is use of the contraceptive pill abroad, especially in the developing nations. I can speak to this issue from extensive personal experience. As Chairman for four years of the Medical Committee of the International Planned Parenthood Federation, and now as a member of that Committee, I travel three months of every year observing birth control clinics all over the world.

Both the IUD and the pill are used abroad. In Singapore, where a significant reduction in birth rate has been achieved through birth control programs sponsored by the Ministry of Health, the oral contraceptive is used exclusively. In Hong Kong and Egypt the pill and IUD are both employed. In Taiwan and South Korea the oral contraceptive is used as a back-up mechanism in patients who cannot tolerate the IUD. In the birth control clinics of Latin America the pill is used more widely than the IUD.

It concerns me that the alarming reports emanating from these hearings have burst the confines of American news media and have gained prominence all over the world. Distinguished physicians from Uruguay and Panama, in behalf of colleagues working in the family planning movement in Latin America, have been in consultation with me seeking advice.

Should we caution our colleagues to cease prescribing the pill? I answer with a strong, No! We support the use of the pill abroad for the same reasons we support its use here: It is an important preventive health tool.

Maternal mortality is hideously high in many of the developing countries—estimated at several hundred maternal deaths per 100,000 birth in Africa and much of Asia and Latin America, for example (18). Infant mortality, too, reaches almost unbelievable figures—in some countries as many as one-quarter of all babies die in the first year of life (19).

It is against these risks that the proven annual mortality of 3 deaths per 100,000 pill users must be weighed.

Sound programs of maternal and child health are a necessary essential component of population control programs.

Surely, with world population soaring and bringing in its wake malnutrition and starvation, overcrowding and increasing illiteracy, joblessness and hope-