

user of an oral contraceptive. I do not know whether you are saying this is a routine examination of a patient of yours who is not under oral contraceptive or one who was. All of the testimony, save two witnesses, has said every 6 months. One of them said 6 to 7 or 8 months. One doctor, a specialist in the vascular area, said once every 3 months. Doctor Kistner said once every 12 months.

Dr. CUTLER. What is your question, sir?

Senator NELSON. My question is, how often would you recommend a physical for somebody on oral contraceptives, you replied, for most people once a year. I was wondering whether you had understood my question. Were you simply referring to how often somebody ought to have a breast examination whether or not they are on oral contraceptives?

Dr. CUTLER. Yes. The frequency with which a patient should be examined, the opinions of the profession on that question vary widely as you have already indicated, whether they take the pill or not. It is a matter of philosophy as to how often a patient should go to their doctor with respect to cancer. Again, in the early part of the century, the American society for the control of cancer, which is now called the American Cancer Society, took the leadership in urging people to have periodic cancer examinations. The British have never agreed to that even to this day.

I think that insofar as patients who are taking the oral contraceptives, and insofar as the breast is concerned, I think that examination of the breast, at least twice a year, would be a logical procedure.

I think that also depends a little bit on the patient's age. You see, cancer of the breast is almost unknown under the age of 25. They are rare between 25 and 30. So I think the frequency with which such examinations are done, including X-rays, would depend a little bit upon the age of the patient. Certainly, a patient with a positive family history of breast cancer should be examined every 3 months.

Senator NELSON. Thank you very much, Doctor. We appreciate your taking your time to come this morning.

Dr. Anna Southam, of the Department of Obstetrics and Gynecology, College of Physicians and Surgeons, Columbia University, called to say she was unable to appear this morning. She requested permission to file along with her statement a supplementary statement. That will be printed in full in the record.

(The information follows:)

STATEMENT BY ANNA L. SOUTHAM, M.D., LECTURER IN OBSTETRICS AND GYNECOLOGY, COLLEGE OF PHYSICIANS & SURGEONS, COLUMBIA UNIVERSITY, NEW YORK, N.Y.

I am Anna L. Southam and I testify before this Subcommittee on the written invitation of Senator Gaylord Nelson. The views I express are my own and not those of the institutions with which I am affiliated.

As a member of the faculty of the Department of Obstetrics and Gynecology of Columbia University's College of Physicians & Surgeons, I have been involved in the clinical evaluation of the synthetic steroids used in birth control pills since 1955. I have carefully followed the literature relating to the metabolic and pathologic effects of oral contraception which was reviewed before this Subcommittee during January.

Although birth control pills have been used in clinical trials beginning in 1956 and were approved for marketing in the United States in 1960, it is