ures through military hospital pharmacies, which had not been possible prior to that time.

We were not allowed to dispense any form of contraceptive measures through the pharmacies to any dependents, even though they were authorized that type of care.

Senator DOLE. Thank you.

Dr. PETERSON. Currently an estimated 258,000 Air Force dependents take the pill—by and large most of whom are using it for contraceptive measures. Each patient is given an appropriate supply of medication after undergoing a breast and pelvic examination, including a Pap smear.

I might add for the record, in response to Dr. Ratner's commentary about 6 months' supplies, the Armed Services only gives out 3 months' supply of oral contraceptives at a time. Further supplies are dispensed at appropriate intervals, again only after an examination, as determined by the patient's age and her clinical course. I might also inject further for the record that if the patient is under 30, she is examined yearly; if she is 30 to 35, she is examined every 9 months; and if she is 35 and over, she is examined every 6 months.

In spite of this intensive program—341,644 such visits were reported by the Air Force in 1969—a recent study at the Malcolm Grow USAF Medical Center showed that over 50 percent of the babies delivered over the study period were unplanned. These findings are similar to those reported by Ryder and Westoff—Fertility Planning Status: United States 1965 Demography 6:#4, Nov 1969—on a sample of 4,810 married women who were respondents in the 1965 national Fertility Study.

These are dismal statistics if we are truly concerned about the population explosion and its effect on the welfare of future generations. Yet in spite of this most serious situation the American woman, faced with the responsibility of proper family planning, has been consistently exposed to articles in magazines and the national press describing myriads of so-called dangers inherent in the use of the pill—the most effective contraceptive currently available on a national level.

They have been led to believe that they will either die of blood clots or if they live will develop diabetes, liver damage, cancer or migraine headaches, and if they survive these perils, may give birth to defective babies—or if avoiding this are placed in an excellent position to become promiscuous or have other psychological problems.

The doctors faced with the tasks of supporting these patients find an increasing amount of their energies occupied by repititious reassurances, thus losing precious time needed for proper followup care or the management of other problems.

The recent hearings conducted by this committee, rather than bringing forth a more enlightened atmosphere, have precipitated a state of confusion and chaos among a large segment of our population. Women have been scared so successfully that an estimated 20-odd percent have summarily stopped the pill—many without consulting their physician for his opinion—or even advice regarding other means of contraception.