

another pregnancy will just add to an already burdensome and frustrating existence. Consequently, the frequency of sexual activity and her ability to respond sexually are considerably diminished by her fear of further pregnancy and eventually leads to her psychosomatic complaints as well. The pill has provided her with a form of security she has never had before.

The diaphragm has never been a technique which a large number of women have enjoyed using. Many find it distasteful to insert, although it is highly effective when used properly. This dislike for the method leads to the temptation not to use it during certain days of the month. An additional problem is to have to interrupt love play to insert the diaphragm. The intra-uterine contraceptive device has far too many local side effects to be widely accepted. The use of condom is aesthetically unsatisfactory and finally intravaginal foam suffers from a high failure rate. In short, if the pill is safe, it bypasses all of the previous mentioned deficiencies of other methods, namely a remarkable degree of effectiveness with minimal side effects, some beneficial effects such as reduced menstrual flow and the elimination of premenstrual tension and painful menstruation. Finally, it allows spontaneous, uninhibited and interrupted love making.

The question must be asked then, "Why has the pill been a subject of such hot debate?" There are at least two major health hazards which are indisputable which have generated much less discussion and virtually no action. I am speaking of the automobile which abruptly kills young and old each year in terrifying numbers. For those spared abrupt death by the automobile, there are the hazards of air pollution. Secondly, cigarettes clearly cause chronic lung disease and have a striking association with the development of lung cancer.

Is the furor over the pill genuinely related to a fear of its unknown effects, such as an ability to produce cancer? Biology does not enjoy the precision of physics or mathematics. One cannot write down a precise formula and predict what its effects will be. These effects are determined by experimentation, namely giving the drug under controlled conditions and observing and recording its effects (4). The pills have probably been the most carefully scrutinized medication in medical history, and we have been hard pressed to find any significant permanent or harmful effect from using these agents. At this point, the margin of safety of these tablets certainly exceeds those of penicillin and aspirin.

It is argued also that 10 or 20 years may be needed to know if these agents will produce breast or uterine cancer. The breast cancers produced in rats, rabbits, or dogs do not take 10 or 20 years to develop but develop within months. This type of argument accrues from such indirect evidence that people begin smoking in their teens and 20's but don't develop their cancers until they reach 40 or 50. Or excessive x-radiation such as that experienced by the surviving Japanese at Hiroshima or Nagasaki has led to increased risk of developing leukemia following a period of 6 years. The time period clearly varies a great deal, and this kind of yardstick cannot be applied irresponsibly for if it were, penicillin would only have been released for usage during the past 2 or 3 years, and thereby have deprived millions of its benefits.

Why the furor then? It is my belief that one of the underlying currents that has not been faced in this meeting as well as in medical and lay circles is that what we are really talking about is sex. The pill is being taken *for sex*. Our society has not handled sex well, and in general has imposed a terrible burden on women. For example, she has been forbidden until she is married to participate in sexual activity, and after this type of sanctification she may release or attempt to release 20 to 25 years of imposed inhibitions. Some religions may forbid her to use birth control or not allow her to have relations until she has stopped menstruating for one week, so she is being reminded that she may be dirty or kept in her place. If she should become pregnant by accident or out of wedlock, by rape or by indiscretion she is forced to bear the products of this moment or go to London, Japan or Puerto Rico to obtain help, or go to back alleys, or be preyed upon financially by amoral physicians. The pills have been primarily responsible for the blossoming of family planning in our society and up to now represent the choice of approximately 70% of our patients. They are a positive source of mental and social health. The average municipal hospital now sees more women for family planning visits than they do prenatal visits. A common sight in municipal hospitals a few years ago were women