

which urbanites are exposed daily or of the antibiotics in meat, just to mention two of the most obvious examples?

Proponents of the pill—of whom there are many—tend to minimize the short- and long-run dangers described by its opponents. Those who favor the pill point to its high efficiency as a contraceptive, and argue that the potential gains outweigh the potential perils from the pill. It is useful, however, that questions about the pill are being ventilated in public, and that responsible Government officials and the medical profession are being forced to face them.

In the present era of widespread concern over the population problem, the utility of the pill is indubitable. But more answers are needed than are yet available about the societal and individual costs that may yet have to be paid for the convenience and near certainty of contraception the pill provides.

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COMMONSENSE ADVICE ON CONTRACEPTIVES

Dr. Louis M. Hellman, one of the nation's leading experts on birth control, answers questions by senior staff writer Judith Ramsey. Dr. Hellman, who heads the Food and Drug Administration's blue-ribbon advisory committee on oral contraceptives, is also chairman and professor of the department of obstetrics and gynecology at Downstate Medical Center, Brooklyn, N.Y.

*Judith: It's generally agreed that there's no one contraceptive method suitable for everybody. How can a woman decide which is best for her?*

Dr. Hellman: Her personal physician can help her make that decision. First, she must identify her own special needs. Does she want a temporary method until she and her husband are ready to have children? Is she undecided about whether she wants more children? Is her family completed? Then she must weigh the benefits and risks of each method. How safe is it? How convenient? Are there any specific risks for her? A contraceptive method is only effective and safe when properly used by a woman who can tolerate it.

*Judith: Let's talk about some individual but typical cases. For example, what contraceptive method would you recommend for a woman in her mid-twenties who has had two children? She has years of fertility ahead of her, but she and her husband don't know whether they'll want another child. They definitely feel they can't afford one for at least two years.*

Dr. Hellman: This woman is an ideal candidate for the Pill, provided that she doesn't have adverse reactions to it. Some women react with irregular vaginal bleeding, weight gain, headaches, or dramatic mood changes.

*Judith: Could she safely take the Pill for an indefinite period of time?*

Dr. Hellman. Chiefly, the problem with oral contraceptives is an increased, though still small, risk of thrombophlebitis, or clots in the vein. A survey of records from more than forty American hospitals shows that the risk of blood clotting is almost four and a half times greater among pill users than among other women of childbearing age who don't use the Pill. Unfortunately, at present there is no test to determine which women on the Pill will have clotting problems. Of course there are some clear early warning signs: headaches, visual symptoms, excessive weight gain. If these occur, a woman should stop taking the Pill immediately.

Weighted against the small risk of the oral contraceptives are their large benefits. They are nearly a hundred percent effective when taken as prescribed; they are very easy to use; and they don't intrude on the relationship between husband and wife. These are the reasons why about eight and a half million American women are now on the Pill.

As for the length of time a woman should stay on the Pill, there is no evidence that she can't continue as long as she wants. However, she should have a periodic checkup, including a Pap smear and breast examination every six months to a year.

*Judith: What about a wife who wants to take the Pill but wonders whether it is worthwhile? Her husband is a salesman and is away for many months of the year. They have infrequent sexual relations. Should she take the Pill, and if so, all the time or just before her husband comes home?*