Last year K. J. Dennis and J. d'A. Jeffrey (15) commented that "At present it is probably true to say that depression and reduced libido associated with the administration of oestrogen-progestogen mixtures cause more women to discontinue oral contraception than any other single cause," and other workers agree that depression is the most distressing, though not the commonest, side-effect (8). R. H. Moos (16) believes that up to 25% of the women who start on the pill soon abandon it, and H. Ratner states that there is gross under-reporting of side-effects (17). If the pill is to remain man's best hope of control-ling the population explains its side effects that it is a side effects of the side effects. ling the population explosion its side-effects should be eliminated wherever possible, and the value of pyridoxine in treating depression should be studied further. Meanwhile doctors should be careful about prescribing oral contraceptives for anyone with a clear-cut history of depression.

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[From OB-GYN News, November 15, 1969, pp. 2, 46] OCS CAN DEEPLY ALTER GLUCOSE METABOLISM

Niagara Falls, Ont.—Some oral contraceptives alter glucose metabolism so extensively that, after long-term use, 80% of the women demonstrate abnormalities in glucose tolerance, Dr. William N. Spellacy told a district meeting of the American College of Obstetricians and Gynecologists here.

Dr. Spellacy, associate professor of obstetrics and gynecology at the University of Miami, predicted that contraception in the 1970's may no longer involve the types of pills and steroids now on the market.

He foresees new, highly potent progrestogens administered parenterally by injection or through small semipermeable implanted plastic capsules. These agents would not alter the woman's metabolism nor inhibit ovulation. Conception would possibly be prevented by blocking the capacitation of sperm.

Dr. Spellacy has collected data on 32 women from across the country who have used sequential or combination type oral contraceptives for longer than 10 years.

Unfortunately, there are no data on the metabolism of these women prior to the use of the pills. However, Dr. Spellacy believes it is highly unlikely that many had abnormal glucose tolerance prior to pill use.

Glucose tolerance abnormalities are present in 80% of the women using combination agents for longer than 10 years and 25% of those using sequential agents for longer than 10 years. Twelve of the total group of 32 women exhibit significant abnormalities.

The high incidence of abnormal glucose metabolism in these long-term users of combination agents may represent an exhaustion phenomenon, Dr. Spellacy said.