deaths were summed over the ages 20 to 44 and compared with the observed deaths. In each case there was an excess in the observed number of deaths, the excess increasing with each year. By 1966 from a third to a half of all deaths were in excess of what one would expect. The means of these estimates of excess deaths is also provided. They increase to a level of 268 deaths in 1966.

I should like to make reference to the fact that Vessey and Weatherall [6] have analyzed mortality trends in Great Britain in an article which appeared in *The Lancet* in July, 1968, and conclude "that there has been an increase in the mortality from venous thromboembolism in young women in recent years of a magnitude compatible with the existence of a casual relation between the use of oral contraceptives and death from venous thromboembolism."

SUMMARY

In summary the mortality data from

women in the United States in recent years are compatible with the finding of the British case-control studies in that area where they are themselves most striking, venous thromboembolism and pulmonary embolism.

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