introduced, I have been concerned by some adverse side effects. These will continue to bear close observation until definitive answers to critical questions are found. My obligations to society and the medical profession supersede the objectives of the Planned Parenthood Federation.

Weighing all factors, however, I would not advise a woman to discontinue the pills unless her personal physician prescribes another method—and no reason is now known why he should, in the absence of certain specific symptoms. Despite the anxiety aroused by reports that some women taking the pills have experienced strokes, blood clots or impaired vision, present evidence has not established a clear connection between such reactions and oral contraceptives.

Although hundreds of serious complications have been noted by reliable authorities throughout the world since the Food and Drug Administration approved the sale of the pills on doctors' prescriptions six years ago, statisticians say this is a negligible incidence of trouble with a new drug that is used 20 times a month by five million American women and two million more women in England, Canada, South Africa, Australia and South America. They further point out that the disorders reported have also been found in women who are not on the pills.

All this is true, yet as long as there is a shadow of doubt regarding the relationship between the pills and some disturbing symptoms, we are watching patients very closely in Planned Parenthood's 276 centers in 128 cities in this country. Birth control pills are not innocuous preparations like aspirin. They are extremely powerful drugs, and it is essential to maintain a critical scientific attitude toward them until we are absolutely sure they are safe for the overwhelming majority of women.

Proponents of birth control have criticized me for refusing to give an all-out endorsement of the pills in view of the notable success Planned Parenthood has had with them. Approximately 150,000 of the 300,000 women asking our centers for advice have chosen the pills in preference to other methods—the largest single group anywhere in the world—with remarkably few serious complications.

Yet I cannot overlook the fatalities reported, including the one in the experience of Planned Parenthood. The case was that of a healthy young woman with six children who died of pulmonary thrombosis a few years ago. She had been taking the pills in our Wilmington, Del., center. Of course, when I think things through, I realize that she might have died of the same cause had she not been taking the pills. At about the same time she died, a distinguished committee, headed by Dr. Irving S. Wright, that had been appointed by the FDA to investigate just such cases reported that there was no causal connection between the fatalities and the pills.

Although it would be inexcusable ethically to give the public unwarranted confidence in the pills while some important questions remain unanswered, it is equally wrong to disregard the pills' positive advantages. First of all, they are foolproof. A special committee of the American Medical Association recently concluded a year-long study of all contraceptive techniques and found that the pills are virtually 100 percent effective.

Whenever a powerful drug is administered, there is valid concern that it may have undesirable after-effects. It can be stated flatly that the pills do not interfere with a woman's ability to bear children when she stops taking them. In fact, her fertility may be increased. Fear of unwanted pregnancy often sets up a psychological block against conception. Conversely, a woman is much more relaxed when she does decide to have children.

Every prospective mother is plagued by fear that any drug taken for an appreciable period will cause her baby to be abnormal. There are no statistics to indicate that the pills have any residual effects on an embryo.

There was a good deal of apprehension when the pills were put on the market that they would promote cancer. Although it is too early to draw definite conclusions, there is some evidence to suggest that the combination of progestins and estrogens in the pills may even reduce the incidence of some tumors and retard the growth of others.

One facet with far-reaching social implications is the ready acceptance of the pills by women who reject other methods of birth control for a variety of reasons—expense, aesthetic aversion, sexual mores or sheer laziness. In Decem-