Q. All right.

And part of your qualification as an expert witness here today is that you wrote a number of papers?

A. Not necessarily.

Q. Just a minute.

Many of them for drug companies?

A. The qualification is that I have had experience in this field.

Q. All right.

And part of your experience comes in working closely with drug companies, isn't that true, Doctor?

A. No, I disagree.

Q. All right. Doctor, does the Harvard Medical School receive large grants from drug companies to do studies?

A. I don't know.

Q. You don't know?

A. No, I don't.

Q. Well, you receive grants from drug companies to do studies? A. Yes. The Boston Hospital for Women, yes.

Q. And you are being paid to come out here today and testify?

A. I assume my expenses will be paid, yes. Mr. SINGER. Thank you very much, Doctor.

The Court. Now, just a minute. Do you have something by way of redirect? Mr. Pankow. Yes.

## REDIRECT EXAMINATION

By Mr. Pankow:

Q. Doctor, will you tell us the type of work you do that you have mentioned in connection with your association with drug companies so far as

A. Well, the type of work that I do was to obtain the medication that I desired to begin clinical \* \* \*.

Dr. WINTER.

## CROSS EXAMINATION

By Mr. MAY (continuing):

Q. Doctor, you know the difference between a prospective study and a retrospective study, don't you?

A. Yes, sir.

Q. And a retrospective study is where you look back to see what has happened, don't you?

A. That is correct.

Q. In other words, in your studies that were conducted of the pill, you went back and you looked at people who remained on the pill for a certain period of time.

Am I correct in that?

A. I think that is just the other way around; that in our studies which we conducted, we considered them prospective studies. We followed them during the time that they had—they were on the pill from the beginning onward.

Q. Now, you had about a 75 percent dropout, didn't you, on the studies that

you conducted of persons that started on the pill?

A. Well, this varied from study to study. I think that's rather high, but eventually, of course, it might reach such a figure.

Q. Pardon?

A. Eventually, if we carried it on long enough, it might reach such a figure, yes.

Q. Well, what would you say would be the dropout rate?

A. Well, as I say, it varied from study to study.

Q. Yes.

Well, I'm asking you, Doctor, if you are familiar with the memorandum that was written to you on April 1st, 1963, which says—which is written by Dr. Chien, Director of Marketing Research for Searle and Company?

A. Yes, sir. Q. All right.

I will ask you if you do not recall this statement:

"Although we, ourselves, have not made any large-scale study of the dropout rate, a relatively small number of high volume prescription stores were audited by our personnel in order to discover—in order to follow through the refill pattern of Enovid prescriptions. We discovered that as high as 70 to 75 per cent of all patients who take Enovid do not continue its use beyond three months."