

INNER INFO: **YOUR BLOOD**

KEEP CIRCULATING

By Melva Weber

Good blood circulation is health: body warmth, clear skin, tissues in tone. With proper blood pressure, there is enough resistance from vessel walls to keep blood flowing but not so much that heart overworks or stroke is invited.

Your vascular or blood-vessel system is made up of countless miles of living pipes endlessly carrying blood to virtually every body cell (hair, nails, tooth enamel among exempted tissues); this system carries oxygen and other supplies, removes waste, performs delicate chemistry—it even manages the behavior of such occupants as blood platelets and blood fats, keeping them from congregating in the corridors and causing clots, cholesterol plaques, blockages.

Arteries are the tubes that carry fresh blood to the cells; veins, the ones that bring used blood back. Blood tubes that move a column of blood larger than an inch in diameter: the mighty aorta, major artery outward from the heart; the huge collecting vein, the inferior vena cava, bringing blood from the lower body into the heart's right auricle, starting it on another round trip.

The smaller blood tubes, no less marvelous, reach everywhere in the body, as veins and arteries branch and branch again, graduating down into a micro-circulation of capillaries (the name means hairlike), tubes often finer than hairs. Some capillaries are as short as a fiftieth of an inch; yet, if all these tiny tubes in your body could be joined, the incredibly fine tube would wind several times around the earth at the equator.

Beginning on these pages, all about blood circulation and your health—and how to keep your blood system in top condition.

Blood surges through your body in a remarkable pipeline network

WHEN VEINS GO WRONG

Fat, floppy, bulging veins can be flattened

Varicose veins, painful, unsightly, threatening rupture—can be surgically removed in a process called stripping. Does removal of a blood vessel as big as the greater saphenous vein, running from ankle to groin, impair blood's return to the heart? Vogue asked Edward C. Emerson, M.D., of St. Paul, Minnesota, vascular surgeon, senior editor of *Angiology*, and designer of the first flexible stripping instrument: "This is not a problem because blood returning to the heart travels through the deep veins, which lie beneath the muscles. The superficial veins are not essential."

Stripping veins, said Dr. Emerson, goes back to ancient Egypt; but the operation gained a poor reputation in the United States in the 1920's, largely be-

cause patients were kept in bed after surgery, developed clots in the deep veins, often died suddenly of pulmonary embolism. Likewise, injection treatments lost popularity because injected material moved into the deep veins, also starting dangerous clots. (See Dr. Perkins's comment on today's injection treatments, at right.)

Alternative to surgery for varicose veins is wearing surgical elastic stockings, which come knee-high or as full-length pantyhose. They're available from surgical-supply houses. Dr. Emerson finds the stockings useful for treating patients who should not undergo surgery, for patients in bed, for people who must sit for extended periods.

Are the support hose one buys in a store also useful for vein problems? "They're fine," said Dr. Emerson. "I recommend them for everybody with minor vein problems, or for those who get swollen ankles at the end of the day. Of course, these stockings are not meant to give the two-way compression you get from the surgical hose; but, if your occupation keeps you on your feet, wear support hose. They're very useful."

WHEN YOUR LEGS TURN PURPLE

Wiping out spiderwebs of darkened veins

"Spider veins," fine-line first cousins to and possibly forerunners of varicose veins, appear on ankles, calves, thighs of most adult women, never disappear by themselves. Formerly, injection treatment gave disappointing results, often left scars. Doctors' advice has been—often still is—to use makeup to cover the discolorations, because injections don't work.

Not true, said Manhattan's Richard Perkins, M.D., of New York Hospital-Cornell Medical Center vascular clinic. He's creator of a brief office procedure that truly eradicates the tiny, darkened, often raised veins. "I've successfully treated thousands and thousands of spider veins," said Dr. Perkins. "I use an injection technique, and I can assure you it does work." Works so well, in fact, that Dr. Perkins is busy both practicing and teaching the technique to other

physicians in cities of the U.S., in Paris, Nice, London, Zurich.

Spider veins are surface veins gone wrong. Veins' work is to move blood toward the heart; a slight downward meandering and they may fill with blood, get stopped up. The bit of stagnant blood inside turns dark, shows through skin. You have literally millions of these tiny veins; your circulation will never miss any that are removed.

The Perkins technique: slender hypodermic needle goes in, pushes blood out of the darkened vein segment with a micro-bubble of air, injects instead a minute amount of salt solution. Irritated, the vein segment collapses, later grows closed so blood can't get back in. Within days, blocked-off unused blood-vessel tissue is reabsorbed by the body's clean-up system. Vein marks show for less than two weeks, then dissolve.

DOD SYSTEM

WHEN IT HURTS TO SIT DOWN

*Hemorrhoids:
a vein problem*

A special kind of varicose veins, piles or hemorrhoids start with stretched or sagging blood-vessel walls in the anal canal. Pregnancy brings on the ailment in thousands of women.

When pregnancy hemorrhoids are a first-time problem, doctors may favor treating them non-surgically. If you've had hemorrhoids before and they're made really severe by pregnancy and delivery, the veins may be surgically removed in the hospital two or three days after you've had the baby.

Terms to remember in today's hemorrhoid treatment: rubber-band ligatures; cryosurgery; "closed," as against "open," hemorrhoidectomy. Words you'll hear from absolutely every doctor regarding treatment: warm baths. Regarding prevention: keep stools soft; use bran, bulk, fiber in diet.

PAINS IN THE NIGHT: A CASE HISTORY

*Sleep-destroying
cramps? Trouble's
in your circulation*

Susan K., twenty-nine years old, slim, and a rising young executive who is intensely involved in her career. "I think something terrible is happening," she told her physician; "night after night, I wake up with really violent leg cramps; I fling myself out of bed and stand on the leg that hurts and massage it until it relaxes. Next day, the leg is quite sore. I know people get arm pains when they are going to get heart attacks; what about leg pains?"

Susan's doctor, a woman in her fifties, said, "After a thorough physical, I find that, like

many career women, you are in good health but less than fit.

"Those leg cramps at night in an otherwise healthy person almost always denote impaired or sluggish circulation. As a woman who has been through some career pressures myself, let me urge you in the strongest terms to put in at least fifteen minutes of vigorous exercise each day. Walking to your office can help—providing you go about it vigorously. As alternatives, you might use rope skipping, stair climbing, or work out on an exercise bike or treadmill. At your young age, it is time for you to get in shape and stay there."

Susan followed through, started out by walking the first six blocks to work, then catching the bus, now covers the thirty blocks from her apartment to her office on foot, works to improve her stride, outwalks other pedestrians. Leg cramps? Gone, within the first two weeks of the exertion.

Good blood
on the move:
that's basic
to health—
the find of
Dr. William
Harvey,
born just
four hundred
years ago!

CIRCULATION ENEMIES:

Smoking

*Cigarettes change
your blood's abilities*

What does cigarette smoking do to one's blood vessels? William B. Kannel, M.D., chief researcher on the famed Framingham Study in Massachusetts, gave this answer: "The evidence is beyond question: cigarette smoking is harmful. It predisposes one to heart attacks, to strokes at an early age, and to blood-vessel blockage in the legs."

- Smoking causes changes in blood; platelet cells get sticky, making blood over-clottable.

- Decreases blood's capacity for carrying oxygen to the heart muscle by producing carbon monoxide. Animal studies have produced evidence that extra carbon monoxide also damages blood-vessel linings, abetting clots and cholesterol plaques.

- Causes irritability of the heart, with risk of sudden death.

- Liberates adrenalin and noradrenalin, putting the heart under increased pressure. This speeds up heart rate, at the same time depriving the heart of oxygen and making blood clottable.

"The Pill"

*Oral contraceptives
hit blood vessels*

Death rates from circulatory diseases are higher in oral contraceptive Pill-users than in non-users. After almost a generation of oral-contraceptive use, facts on the health risks involved are becoming clearer. Analyzing death rates in twenty-one countries, London's Dr. Valerie Beral calculated risks of death for young women taking oral contraceptives, compared with similar women who were nonusers. For heart disease and high blood pressure, Pill-users' risk of death was five times that of nonusers; for cerebrovascular disease (hemorrhage or clots in the brain), users' risk was twice that of non-users; and for all cardiovascular disease, Pill-users' risks in this young (fifteen to forty-four years) age group were found to be three times those of non-Pill takers.

Two other British studies—one a forty-six-thousand-woman study by the Royal College of General Practitioners, the other

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tips...

- **Surgery:** Doctors these days usually prepare you with low doses of an anticoagulant such as heparin, calculated not to cause unwanted bleeding but to protect you from deep-vein clots in your legs. "Bed rest" is out of style. Instead, chances are you'll be urged to move, exercise, get up and walk. Or do bed exercises directed by a hospital therapist. Before planned surgery, more women are "training" for speedier recovery with exercise programs.
- **Travel:** On an airplane, particularly a cross-continental or overseas flight, do exercises in your seat, in the aisle. Wiggle. Squirm. Get your feet elevated. Team up with a fellow passenger to swap turns using two-seat space for lie-on-back workouts; raise legs toward ceiling.
- **Sitting:** Don't cross legs. Don't keep knees sharply bent, but widen the angle between thighbone and shinbone. Avoid chair-seat pressure at the back

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"THE PILL"

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a seventeen-thousand-woman study by the Oxford/Family Planning Association—found death rates higher in Pill-users than in nonusers, with the extra deaths resulting from circulatory diseases. *The Lancet*, a medical journal, drew up some guidelines and recommendations:

- Using The Pill is riskier if you have high blood pressure, diabetes, or high blood-cholesterol levels; if you smoke, or if you are overweight. With more than one of these factors, you would be wise to consider other forms of contraception.
- In the absence of circulatory risk factors, women under thirty need not stop using The Pill but should stop smoking.

suggested Dr. F. V. Kuenssberg, president of the Royal College of General Practitioners, and Dr. John Dewhurst, president of the Royal College of Obstetricians and Gynecologists.

• Circulatory hazards increase greatly with age in Pill-users. Doctors suggest an "age of reconsideration" around thirty to thirty-five, if you have been taking The Pill for several years. Some women over thirty should consider stopping The Pill, especially if they have used it for five years or more and, in addition, are smokers.

• Women thirty-five to fifty who have used The Pill for extended periods should consider other forms of contraception. ▽

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BLOOD SYSTEM

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of your knees—it squeezes the big, important femoral artery.

Massage for circulation? No. Exercise instead, said Irvine Page, M.D., director emeritus of Cleveland Clinic's Research Division, blood-pressure authority, medical writer, and author. "Now, hear this: you cannot be massaged into a healthy circulation. You really must do it all yourself. Exercise vigorously and faithfully."

Long-distance runners, women and men, have exceptionally good blood-cholesterol conditions, reported Peter D. Wood, M.D., of the Stanford Heart Disease Prevention Program. Compared with otherwise matched nonrunners, the runners had higher HDL-cholesterol levels (the protective lipoprotein that should be kept at high levels), lower LDL, or low-density lipoproteins, and blood-triglyceride levels only 50 percent those of nonrunners.

If you choose not to run: Running for circulatory fitness is very big these days (though big-city people have always done a little—to catch buses and subways, to dodge traffic). But for many women, outdoor running isn't feasible or practical. This from Mildred Cooper, author with husband Kenneth H. Cooper, M.D., M.P.H., *Aerobics for Women* (Bantam Books):

"Confined to the house" Do an indoor exercise like stationary running, stair climbing, or rope skipping. Work from nine to five? Walk part or all of the way to or from your office. Got babies to keep an eye on? Take 'em along. One mother we know straps her thirty-five-pound toddler on the extra seat over the rear wheel of her bicycle. Don't like that sweaty feeling when you exercise? Swim."

And Evalyn Gendel, M.D., consultant on maternal and child health in San Francisco, suggests: "If you stay at home, consider installing a ballet barre—great for working out while you're waiting between laundry cycles!"

If you have high blood pressure: Limiting salt in your diet is the single most important element in high blood-pressure treatment, according to James C. Hunt, M.D., of the Mayo Clinic in Rochester, Minnesota. Reasonable control of salt in food, plus some diuretic medication, will handle high blood pressure in three-quarters of patients, said Dr. Hunt. You don't have to be rigidly restricted; his plan allows patients to lead normal lives, to eat in restaurants, to share family meals. The plan: a sodium-exchange list like those for carbohydrates used by diabetics. The daily sodium allowance is equivalent to about a teaspoonful of table salt. Most Americans, regrettably, use four or five times that amount.

All in the family: If your parents have it, your chances of developing high blood pressure are greatly increased. So said Henry Lynch, M.D., Creighton University School of Medicine, Omaha, Nebraska. The familial tendency probably is carried by more than one gene. Should high blood pressure run in your family, the more reason for special, alert, preventive care, utter obedience to treatment orders once the condition appears.

Eat for blood vessels' sake: Americans are said to derive almost half their calories from fats, as against carbohydrates and protein. High-fat diets threaten blood vessels with

fatty deposits. The American Heart Association says fats should amount to only 30 to 35 percent of one's daily calories.

What's "normal"? United States physicians generally consider any blood-cholesterol score up to 250 milligrams per milliliter of serum as "within the normal range." But Robert W. Wissler, Ph.D., M.D., of University of Chicago's Donald N. Pritzker School of Medicine thinks that upper level is too high. "Ninety percent of the world's population have serum-cholesterol levels around 150 or lower, and virtually never die of coronary occlusion," he said. Moreover, added Dr. Wissler, patients with levels of 300 to 400 almost always develop angina or total blockage of one or more coronary vessels.

How much cholesterol in food? Your total daily intake of cholesterol in food should be less than 300 milligrams per day, said Robert I. Levy, M.D., director of research at the National Heart, Lung, and Blood Institute. "Unfortunately, the average American intake is between 500 milligrams and one gram. Dr. Levy suggests that one's only cholesterol source be meat. (More about diet and circulation on page 158.)

DISMANTLING DEEP-VEIN CLOTS

Thrombophlebitis—clots in deep leg veins, which are painful, and dangerous should clots break free—gets treated with such anticoagulants as heparin and coumadin to keep blood fluid, keep clots from building up. Clot-dissolving enzymes streptokinase and urokinase help in early stages. What happens when a pulmonary embolism—a clot headed for the lungs—really is at hand? Said Edward C. Emerson, M.D., "Sometimes a small pulmonary embolism, not a life-threatening one, gives a warning. When a small clot hits the lung, symptoms could include shortness of breath, cough, chest pain. A doctor's examination reveals changes in heartbeat and sound. Then it's possible to tie off the vena cava, the big return vein. Also, the surgeon may place a screen inside this vein to catch any clot on its way toward the lung."

"Remember, also, that one can have a superficial phlebitis—a clot in a surface vein. It is not dangerous, but it is painful, red, and hot. This phlebitis is routinely treated by applying heat and keeping the leg elevated."

AMERICA GETS THE MESSAGE: STROKES DECREASE

Today, more and more people know about high blood pressure, more of them are getting blood-pressure checks, more physicians are successfully treating high blood-pressure patients. Especially cheered by such progress is the senior medical consultant of the National Heart, Lung, and Blood Institute's National High Blood Pressure Education Program, Marvin Moser, M.D., of White Plains, New York, because the important factor is awareness, both by the public and by their physicians.

"Just five or ten years ago, if you surveyed a thousand people, about one hundred fifty of them would have high blood pressure, and half of those wouldn't even know it," said Dr. Moser. But, according to two recent surveys, today, only 10 to 15 percent of the people found to have high blood pressure have not been aware of it.

"Even more encouraging," Dr. Moser said: "Ten years ago, only 15 to 20 percent of patients were being effectively treated. By 1973-74, this improved, and about 30

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BEAUTY THAT'S GOOD

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Another scientific bonus, Mr. Gubernick mentions is collagen—a penetrating compound used in several Estée Lauder products and the basic structural protein in the skin. This material holds great promise for the future—by providing the matrix for increased water retention and improved skin elasticity, thereby smoothing dry wrinkles.

Dr. John A. Cella, Elizabeth Arden's vice president of research and development, is also a great believer in putting science to work on century-tested ingredients such as avocado, palm kernel, coconut or mineral oils—all of which can be found in Elizabeth Arden products. "Mineral oil, for instance," he says, "does a lot of nice things. If you put it into a formula with the right ingredients in the right proportions it can cleanse and is not a bad moisturizer. And it won't leave your skin feeling oily and greasy. Or take coloring. By properly orchestrating the ingredients, we can get just about any kind of esthetic effect you want and, at the same time, give you something that is good for your skin. It is frequently a matter of blending." Dr. Cella adds, "We may blend one time-tested ingredient with one that is less well known in order to have both perform better."

One example of a double process is moisturizing—putting a delicate coating on the skin to lessen evaporation, and also using substances that absorb moisture from the air. As Dr. Frank Buchwalter, vice president, research and development of Max Factor, puts it, "The moisture-keeping ingredients include mineral oil, petroleum jelly, silicone fluid, and assorted vegetable oils. Moisture-grabbing ones are lanolin or lanolin derivatives, glycerin, lactic acid, and sodium PCA."

"The skin has an equilibrium factor," Dr. Buchwalter says. "There's an ideal level of moisture for the skin. If you take a long bath, you'll notice that the skin on your fingers puckers up. That is a sign of excessive hydration. If, on the other hand, you visit an arid area like the desert, or travel continuously in an airplane the way airline hostesses have to, or simply live in an overheated apartment, you probably

suffer from dry skin. If you look at dry skin through a microscope, you will see the outer layer starting to fluff off where the natural cementing liquid evaporates into the dry air. Moisturizers prevent this from happening. And that is why our products are so carefully moisturized."

One point that Dr. Maurice Siegel, vice president and director of research of Fabergé, would like to get across is this: The fact that something is natural does not necessarily mean that it is good for you. And if it is synthetic, that does not automatically make it bad. Many natural substances can irritate the skin or cause allergic reactions, and the same goes for a good many synthetic substances. So the important thing is simply to screen out the troublesome ones whether they are natural or synthetic—which, of course, we do."

Summing it up, a well-known independent authority, Dr. William P. Jordan of the Medical College of Virginia, has this to say: "The major cosmetic manufacturers in this country actually try to have zero defects. I have found this basically in all the people I have dealt with. There are sometimes problems with some of the smaller companies that don't have the research facilities. But big companies have very reputable data to support their safety. In fact, there's a lot of overkill, of over-testing. But it is obviously all to the good." ▽

NOTE: This list gives you some idea of the kinds of good ingredients found in some cosmetics and treatments: natural honey, Revlon's Dry Skin Relief Moisture Lotion; wheat germ oil, Germaine Monteil's Acti-Vita Cream; witch hazel, Neutrogena's Acne-Drying Gel; camomile, Orlane's Lauria (eye makeup remover); oat flour, Estée Lauder's Shine Control Lotion; soy oil and corn oil, Chanel's Creme No. 1; apricot kernel oil, Fabergé's Babe Liquid Makeup; silk, Helena Rubinstein's Silk Fashion Moisturizing Powder; PABA, Clinique's Sun Block; corn flour, Christian Dior's Hydra-Dior Lait Demaquillant skin cleanser for dry/sensitive skin; grape-seed oil, L'Oréal's Lip Accents; glycerin, Neutrogena Soap; avocado oil, Borghese's Super-Rich Body Lotion; lecithin, Max Factor's Pure Magic Super Clear Makeup; lanolin, Frances Denney Mild Skin Lotion.

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percent were effectively treated. But today, about 60 percent of patients are being treated effectively and are keeping their blood pressure at normal levels.

"More proof of progress is that deaths from strokes have fallen more than 30 percent within the past twelve years; and this in the critical age group between forty-five and seventy-five years where death is more tragic and untimely. Over three-quarters of strokes are related to, if not caused by, high blood pressure. Now, with still more improvements in treatment, I believe over half of these strokes can be prevented.

"Note that, in very recent years, deaths from heart disease have also decreased. We seem to have America's epidemic of circulatory diseases on the retreat."

TO READ AND USE:

"E" Is for Exercise and How You Can Help Your Doctor Treat Your High Blood Pressure. Leaflets available free from your local

Heart Association.

What You Need To Know About Food and Cooking for Health by Lawrence E. Lamb, M.D. (Viking Press). A big cookbook and guide to low-cholesterol cookery. Charts tell calories, fat, carbohydrate, cholesterol in common food servings.

The Joy of Running by Thaddeus Kostrubala, M.D. (Lippincott, paperback and hardcover). Why you should run, with directions, charts of pulse rates, cardiac outputs. *The American Heart Association Cookbook*, Ruthe Eshleman and Mary Winston (McKay, hardcover or spiral-bound and paperback, Balantine). Useful fat-cholesterol charts, good recipes for heart-sparing.

Aerobics for Women by Mildred and Kenneth H. Cooper, M.D., M.P.H. (Bantam Books). Exercise programs for women of all ages.

The Living Heart by Michael DeBakey, M.D., and Antonio Goto, M.D. (McKay). Specialists write about the all-important pump that runs your circulation. ▽

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FEB 4 1978

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U.S. Orders Cancer Warning for Pill Users

By ROBERT LANE

The Food and Drug Administration yesterday ordered drug manufacturers to issue explicit written warnings on packages of birth-control pills detailing the cancer risks and other health hazards linked with their use.

Under the new regulations, drug companies have until April 3 to include a brief summary of the health risks with each supply of oral contraceptives.

They must also provide all dispensers of the pill, including pharmacies and 'planned-parenthood' centers, with more detailed booklets describing possible "serious side-effects which may be fatal" for distribution to the purchaser.

To date, the drug manufacturers had only been required to include a general warning about the dangers of blood clots associated with taking the pill, in addition to a statement that oral contraceptives are of no value in the treatment or prevention of venereal disease.

Nowhere on the packages is there any mention of the cancer risk.

Recent studies have determined that there is a possible link between oral contraceptives and breast cancer, the leading cancer killer of women in the United States. Several studies have also found strong evidence that the female hormone, estrogen, a component of the pill, increases the risk of cancer of the uterus.

The new federal regulation takes note of these and other studies and the compulsory leaflets accompanying the pill will state in part:

"Women who have or have had clotting disorders, cancer of the breast or sex organs, unexplained vaginal bleed-

ing, a stroke, heart attack, angina pectoris, or who suspect they may be pregnant should not use oral contraceptives."

The leaflet will also warn women of potentially serious side effects associated with taking the pill. They include:

- Blood clots in the legs, lungs, brain, heart or other organs and hemorrhage into the brain due to bursting of a blood vessel.
- Liver tumors, which may rupture and cause severe bleeding.
- Birth defects if the pill is taken during pregnancy.
- High blood pressure.
- Gall bladder disease.

Birth-control pill users will be warned that cigarette smoking increases the risk of serious adverse effects on the heart and blood vessels. This portion will end with the statement: "Women who use oral contraceptives should not smoke."

The FDA order, issued to warn the 10 million women who now use the pill and any future purchasers, is the result of a two-year legal battle by Marlene Manes, wife of Queens Borough President Donald Manes, and Rose Kushner, executive director of the Breast Cancer Advisory Center in Kensington, Md.

Together with Queens attorney Martin L. Baron, Mrs. Manes, an opponent of the use of present-day oral contraceptives, and Mrs. Kushner, a victim of breast cancer and the author of "Why Me?", a book about women and cancer, filed suit in September 1976 to compel the government to issue the regulations.

"These pills are potential time bombs in women's bodies," Mrs. Kushner said in Brooklyn Federal Court where the suit was withdrawn yesterday. "These regulations are long overdue and without a doubt will save the lives of thousands of women."

Handwritten: women's health risk

✓
ASH/CIGARISC Show:
Smoking + Pills =
Multiplied Ills

"WOMEN WHO USE BIRTH CONTROL PILLS SHOULD NOT SMOKE."

This warning, which will now be given to the more than 8 million users of oral contraceptives as part of Sec. Califano's new war against smoking, resulted from a petition and testimony from an ASH-sponsored student group named CIGARISC (Citizens Insistent Upon Getting Action Regarding Smoking and Contraceptives).

Students working under the direction of Prof. John Banzhaf, ASH Executive Director, gathered and presented to the FDA a number of recent studies which show that the health hazards of "the pill" are multiplied many times for women who are also smokers.

For example, one study showed that pill users 40-44 years of age increase their risk of death over ten times if they also choose to smoke. Even teen-age pill users are vulnerable to as much as a three-fold increased risk of death if they smoke heavily.

Prof. Banzhaf said that this newly required warning could be particularly important in the face of a rising proportion of smokers among young girls.

"Women who desire the advantages of the pill over other forms of contraception will have a new and powerful additional incentive not to smoke. This in turn may have an impact on teen-age girls who look up to and emulate young women."

A number of birth control pill manufacturers had already acted to provide warnings to their users about the combined risks of taking the pill and smoking.

Sec. Califano publicly credited Prof. Banzhaf and his "Banzhaf's Bandits" as the catalysts for this new proposal on the Today TV show, and in his speech announcing the new program. Prof. Banzhaf says that he plans to continue working with young law students on projects related to smoking.

FILE
Prof. Banzhaf
Califano Facts & Figures Continued

Smoking among teen-age girls has almost doubled since 1964; they are now as likely as boys to smoke.

In a major urban area on the west coast, 1 out of 20 kids is smoking by age 11, and 1 out of 5 (20%) is a smoker by age 12.

SMOKING IS A MAJOR FACTOR IN 320,000 DEATHS EACH YEAR: 220,000 FROM HEART DISEASE, AND 100,000 FROM CANCER.

40% of all cancer in males is caused by smoking.

85% of deaths from bronchitis, emphysema, and other lung diseases would not happen if people would stop smoking.

Unborn children whose mothers smoke during pregnancy may be stillborn or developmentally deficient because of this smoking.

EACH YEAR SMOKING ADDS BETWEEN \$5 and \$7 BILLION TO HEALTH CARE COSTS, AND \$12 to \$18 BILLION IN LOST PRODUCTIVITY, WAGES; AND ABSENTEEISM.

Women who take birth control pills and who smoke are up to 50 times more likely to have heart attacks, particularly if aged 30 or over.

Babies absorb nicotine before birth, with clear effects on their respiration and other vital signs.

Certain industrial workers (e.g., asbestos and cement workers) run dramatically increased risk of serious diseases if they also smoke.

Smoking is a major cause of heart disease, respiratory disease, and cancer of the lung and other sites.

Smokers are approximately ten times more susceptible to lung cancer than nonsmokers.

Smoking among physicians has dropped from 65% in 1950 to 21% by 1975.

OVER 37 MILLION PEOPLE -- ONE OUT OF EVERY NINE AMERICANS ALIVE TODAY -- WILL DIE PREMATURELY BECAUSE OF SMOKING.
women age 20-24 health



JANESVILLE, WIS.
GAZETTE
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JAN 31 1973

Hooked on Tobacco

In the course of the battle of the cigarette, which has been getting hotter year by year, there seems to be a slight gain of non-smokers over smokers, but it is almost imperceptible.

Added to the common reasons given for non-smoking are new and impressive warnings that smoking poses dangers we never realized — especially to women.

Everyone knows that smoking is bad for the heart, the lungs and other organs and some functions of the body, but many smokers ignored them, choosing to continue finding solace or whatever pleasure there might be to watching curling smoke until the habit had them firmly in its clutches.

Then came the Pill, now used by about 10 million women, but only now are women being warned that those who smoke had better avoid the birth control pill.

The Food and Drug Administration commissioner, Donald

Kennedy, a biologist, will require birth control pills to come with new warnings about their health risks. He says that 3 million to 4 million women who smoke cigarettes and take the Pill increase the risk of suffering fatal heart attacks and strokes, especially after age 35.

Such dire warnings should be ominous enough to persuade a great many to change their lifestyle and, indeed, many women already have sworn off smoking. No doubt most of them are happy with their decision. Meanwhile, the discouraging scene includes millions of youngsters in school who, due to peer pressure, personal desires and in imitation of their elders, become hooked on tobacco, some of them perhaps for life. It is a characteristic of youth to ignore the usual warnings and admonitions, but one may hope that this time the discoveries of the harm that smoking can do will reach the consciousness of more young people.

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PHILADELPHIA, PA.
BULLETIN
D. 540,851—S. 637,545
PHILADELPHIA METROPOLITAN AREA

JAN 29 1978

No smoking with The Pill

There's a new and very important reason to quit smoking for some 2.4 to 4 million American women. The Food and Drug Administration is making it known, forcefully, that cigarettes and birth control pills don't mix. That is, a woman who smokes and also uses the pill substantially increases her risk of having a heart attack or stroke.

And starting in April, that message — along with other warnings about pill side effects — is to accompany all packages of oral contraceptives dispensed by doctors, pharmacists, or clinics.

Caution signals about pill usage have been flashing in rapid succession over the past few years as early studies of pill users begun in the last decade have been completed. We've all heard the litany of problems: increased risk of blood clots, certain side effects that can signal something seriously wrong, higher death rates among older women who take the pill, and others.

But the cigarette connection is what may really get the attention of many women. They will be forced to choose between giving up cigarettes or giving up what for

many is a convenient and effective method of contraception.

We're glad the FDA is insisting that women be provided with a more detailed description of the risks that go along with pill usage. Since 1970 the FDA has required that a brief warning leaflet accompany pill packages; the new warning is to be much longer and more detailed. Certainly the section which describes the risks for cigarette smokers should command the attention of all women who smoke.

We hope all who might be tempted to ignore printed matter that accompanies medication would listen to the words of FDA Commissioner Donald Kennedy. He told a press conference, "The new FDA message is both loud and clear: If you take the pill, don't smoke; if you must smoke, find another method of contraception."

Indeed, Commissioner Kennedy said that quite apart from cigarette smoking he personally would advise his own wife or daughter to use some method of birth control other than the pill.

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