STANFORD UNIVERSITY SCHOOL OF MEDICINE

STANFORD MEDICAL CENTER 300 PASTEUR DRIVE, PALO ALTO, CALIFORNIA

DEPARTMENT OF GENETICS

September 21, 1966

DAvenport 1-1200 Ext. 3032

Mr. Howard Simons
The Washington Post
1515 L Street, N.W.
Washington D.C., 20005

Dear Howard:

This will not be the last article in the Pill series but I think it may be just as well to space the later ones out. Hope my reference to a future report will not be confusing.

In writing this and revising the Loving piece, I am following your advice about shortening the article and about attempting to make only one point at a time. The first article could be regarded as a general introduction and the present piece is then focused on just one issue—the numerology of embolic deaths.

I read Morton Mintz' letter with great interest but had to wonder at several points whether he was confusing me with several other people. However, I can certainly be faulted for leaving any impression about the glibness of newspaper accounts especially if this could be thought (how could it!) to refer to the very extensive coverage that appeared in The Post. Unfortunately, I don't have the privilege of reading The Post as my typical local newspaper. In any case, I really did have headline in mind as many amateurs do when they talk about newspaper accounts. I mean the apology quite sincerely and hope it is not out of place to append it to the article.

It would be rather an exausting job to reply in detail to Mintz or discuss it with you by letter and I hope we can do this in person or over the phone sometime. I wrote to Mintz that I thought he was damning me most for the things I didn't say and this might be a little premature sinceI might eventually get around to it. This is a little amusing since on the other side, what I hear from you is that I tried to put too much in any single article. However, there are some fundamental

differences in outlook about what it is possible for epidemiological investigations to prove and Mintz's letter did provoke me to try to stress this point redundantly if not more clearly in the present piece.

I am also enclosing an abbreviation of the piece on miscegenation. It might be almost as well to run this next Sunday and give me another wekk to ponder further on Pill Number 2. Perhaps I might task you to use your own judgment about this.

My secretary just picked up The New Scientist and pointed out your own commentary on the same subject. Plainly, we do all represent quite a spectrum of views on the situation for which there is plenty of room in this field. I guess I do feel that so much publicity is given to alarming negative assertions about the Pill that it is overweighting matters a bit to bring in the "Scotch Verdict" - this does afterall have the connotation that there really is some basis for the attribution of guilt even if it does not meet the standards of legal proof. If the statistics are so bad "no conclusion possible" would be a fairer statement than the "Scotch Verdict". However, you could well argue that we must lean over backwards to protect the public interest on questions of health. So this puts us right back to where I think we start from:= just what we individually think are the positive advantages of the availability of chemical contraceptives. It might be appropriate to have some members of the other sex, besides we three men, comment on this point.

Sincerely.

Joshua Lederberg, Professor of Genetics

JL/gem

P.S.: Working on shortening the Loving & Loving piece brought it home to me: there would be as much logic or even more in applying the "Scotch verdict" to the assertion that Negroes as a racial group are biologically intellectually inferior, as there is to the assertion that oral contraceptives have killed some women. The honest answer is that we don't know, and the arguments presented so far inboth cases are really pseudo-evidence. In both cases, prejudgment prevails.