INDIA continued from page 4

class of India has not faced a similar situation for years." The business publication also noted that "the Bengal peace party is under fire again.

In the minority states of Nagaland and Mizoram there is continuing armed struggle. And in some districts of Bihar and Andhra Pradesh there has been a renewal of armed attacks on police stations and assassinations of landlords.

In the more industrialized state of Maharashtra, the government was forced by growing militancy to compromise in a strike of 450,000 government workers.

INTERNATIONAL REACTION

Internationally, the crisis has pro-

voked varying reactions. The Soviet Union, which has been attempting to extend its influence over India for years, has given all-out support to Prime Minister Gandhi, accepting her thesis that India, not the rule of the Congress Party is threatened by a combined internal and external conspiracy. The USSR, which has invested large sums in economic aid to India, appears to be basing its policy entirely on the political survival of Gandhi. The Soviet press has made no mention of the suppres-

sion of constitutional liberties. China's Phoenix News Agency, however, pointed out that in the face of internal opposition Gandhi had created "a bitter mockery of bourgeois de-

mocracy," and charged that the U.S. was interested in stability in South Asia and con-

cerned that the situation "might deteri-

orate to the point of mass riots or in-

tervention by China or the Soviet Union." Taken as a whole, U.S. official com-

ments seemed to imply that the U.S. was looking for a way to extend its influence in India.

—guardian

GREAT SPOCKLED EOC

What's the latest in the birth control contro-

versy? Which is safer and more effective—pills or IUD's?

—free & frumbling

Medical contraception for women still leaves a lot to be desired. Like all else in medicine and life, you have to make some tough compromises between what you want and what you can get. But it's best to make your choice based on the clearest possible understanding of the facts. Here are a few to think about.

Let's look first at contraceptive effectiveness. This is easiest to measure as the number of pregnancies per 100 women using the method for a year (i.e., pregnancies per 100 woman-years of use). Non-contraceptors with typical sex lives (whatever they are) can expect about 80 pregnancies per 100 woman-years. Women using standard birth control pills, correctly and regularly, will have a pregnancy rate of less than 0.1 per 100 woman-years. That's excellent protection, the most effective, in fact, of all methods except total abstinence or surgical sterilization.

However, once the human factors enter the picture, such as forgetting to take pills or simply refusing to continue because of the occasional nausea or bloated feeling, then the odds don't look so good. Over extended time periods in the real world of human beings there may be as many as 24 pregnancies per 100 woman-years among women who are trying to use standard birth control pills. Using some of the vari-

tions such as "mini-pills" or "sequential" it can be even worse.

The effectiveness of the IUD (intrauterine device, "loop," or "coil") is a different story. Regardless of which brand the doctor or nurse inserts, the pregnancy rate is 2 to 4 per 100 woman-years for the woman whose IUD is cor-

cently in place and checked monthly (feel the string with your own finger). But once again the real world isn't that simple. Actual users of the IUD have from 6 to 16 pregnancies per 100 woman-years—many of them because of uncorrected problems of the device or failure to check it properly. These preg-

nancy rates with the IUD can be improved quite a bit by using second (or third, or fourth) IUD during the middle of the menstrual cycle.

When you're thinking about these unpleasant facts of contraceptive effec-

tiveness, it's helpful to remember that every contraceptive device is not readily available—still too expensive (about $160) but much cheaper than bearing an unwanted child.

Contraceptive safety is certainly something to think about, too. The pills have been linked to a variety of unpleasant effects, but the most serious ones relate to increased clotting in the blood vessels. Deaths due to blood clots in the head, lungs, and heart amount to about 30 per million pill users per year—slightly less for young women, a little more for those over 30 years old. Rarely a complication of oral contraceptives will require hospitalization, but since birth control pills seem to improve things like benign cysts of the breast and ovary, the net effect on hospitaliza-

tion is about zero.

The IUD has a very different safety record in the mortality-risk of about 5 to 10 deaths per million women per year. But IUD wearers have non-fatal complications that result in hospitalization for approximately 5 to 10,000 wearers per year (i.e., 0.5% of wearers per year). These are most often infections or hemorrhages, but they also include such things as pregnancies and perforations of the uterus that might lead to major surgery.

The mortality rates quoted above are unthinking, but it is important to remember that for neither method are they as bad as the risk of death that goes along with being preg-

ant.

Putting all this together, then: birth control pills can be the most effective way to prevent pregnancy if they are used correctly, but they carry a high-

er risk of a fatal complication. If you don't like the IUD, IUD's may be more effective than the oral contraceptives for the woman who has difficulty taking her pills on time. The IUD's mortality rate seems to be lower than that of the pill, but its risk of causing a non-fatal hospitaliza-

tion is something to be concerned about.

If you don't have pregnancy pro-

tection very often, if you're having in-
tercourse only once a month or less, you might be better off relying on a diaphragm or a "non-medical" contra-

ceptive such as foam. They're more of a hassle, but they don't have any bad side effects. The pill, but it's im-

portant to remember that for neither method are they as bad as the risk of death that goes along with being preg-

ant.

Send health questions to: Great Spock-

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