

Foes unite to fight health cuts

By David Smith

After many years of disagreement about health care delivery to ethnic minority groups and the medically indigent, 250 representatives of California county hospitals, public health departments and community clinics gathered last week at a conference in Berkeley to find common ground in the fight against the Reagan era health care cutbacks.

Titled "Community Clinics and County Health Services: Cooperative Strategies for the 80's," the conference was

organized by the Alameda Health Consortium, a coalition of 12 community clinics in the East Bay. The coalition includes such organizations as La Clinica de la Raza and the Berkeley Women's Health Collective.

Keynote speakers from clinic and county offices emphasized the need for coalitions between county health services and community clinics in fighting funding cutbacks by state and federal agencies.

A history of dispute

The dispute between community clinics and county health departments goes back

to the mid-60's. At that time, numerous ethnic and cultural groups, denied medical care by private practitioners and finding indifference or hostility to their particular needs by county health personnel, began to open alternative neighborhood clinics. Typical examples were free clinics for white, counter-culture youths, and clinics for Chicanos, women, and Asians.

Issues such as language differences, patients' rights, geographic and financial availability, the preventive health approach and patient advocacy developed out of community clinic organizers' insistence that health care is a right rather than a privilege.

Already on the scene were the public health departments, which had been traditionally mandated the responsibility for medical care to the indigent and those who didn't fit into standard, fee-for-service medicine. Public health officials often reacted indignantly to the birth of alternative clinics, while private medicine usually exhibited open hostility. Both joined forces at times to challenge the competency of care at community clinics and question the validity of neighborhood, collective organizations in highly profitable profession.

In recent years, the clinics and county health departments have come to see more issues in common, especially as government funding cuts for their services have developed in the wake of Proposition 13 and the

Students submit proposal for UC global peace center

By Carolyn Marshall

A proposal to establish a University of California Peace Institute has been presented by several student groups in an attempt to counter, at least in principle, UC's management of the U.S. nuclear weapons labs.

The idea for the peace center emerged at a June 1981 Board of Regents meeting. At that meeting Governor Brown suggested that UC investigate the feasibility of creating a "Center for Global Security and Cooperation."

Student groups, including the UC Student Body President's Council (SBPC) and the Berkeley Peace and World Order Studies Student

Association, drafted and endorsed a proposal for the Associated Students of UC (ASUC) this fall, to ensure student input into the development of a peace center.

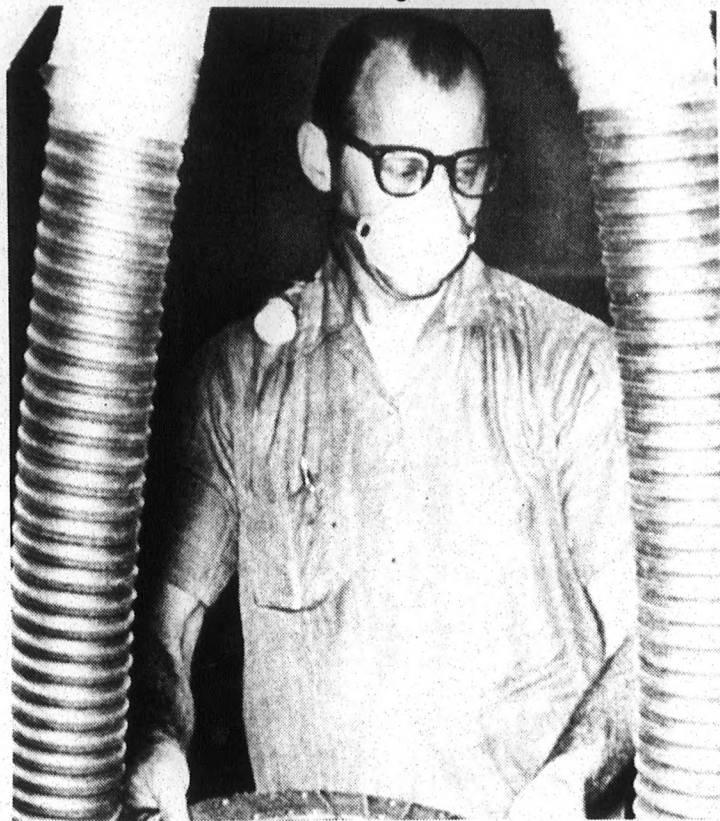
The UC Academic Council recently appointed a special Committee on Global Security and Cooperation to consider establishment of a peace center. The committee was created to explore new ways to control weapons development, and to examine how developing nations effect world conflicts. ASUC has submitted its document to the special committee for consideration.

Dennis Gagnon, a UC Santa Barbara student and member

Continued on Page 5

Continued on Page 4

Fallout from safety change —munition strike spotlights concern over job hazards



Revision of OSHA rules may force more workers to wear masks and respirators, rather than requiring companies to install ventilation systems to combat airborne toxins.

By James Crawford
Pacific News Service

Johnny Bettis would like Ronald Reagan to have the experience, just once, of doing a day's work while wearing a full-face rubber mask with filters. "Let him try it. That might change his mind."

Among workers who use them, respirators rank in popularity somewhere below poison ivy.

However, the president's economic advisers are enthusiastic about respirators as "cost-effective" substitutes for mechanical ventilation. They want to revise Occupational Safety and Health Administration (OSHA) rules to make respirators an acceptable, permanent solution to airborne toxins on the job.

Unions, however, feel that this would simply transfer the burden of maintaining a safe and healthful workplace from employer to employee and they have vowed to fight the plan.

For the 95 members of Oil, Chemical and Atomic Workers Local 3-974, of which Bettis is president, the fight already has begun. Since April 30, they have been on strike for improved health and safety conditions at the TNS Corp. in Jonesboro, Tenn.

Among the disputed issues is a management requirement that workers wear respirators for eight hours a day to avoid radioactive and chemical overexposures.

Penetrators

The plant melts down depleted uranium and machines it into heavy metal "penetrators," or armor-piercing bullets, for the U.S. military. Though the work is hard, with adequate controls it need not be hazardous. But at TNS, the ventilation system is substandard even by management's estimate, and a black haze of uranium dust envelops much of the plant.

Continued on Page 3

political problem. We were interested in the solutions which are technically correct and economically feasible and we wanted the workers to participate in this process," Eppelman said.

During the question period, Eppelman was asked if this meant that the government was using a cost-benefit approach to worker safety.

"That is not our intention," replied Eppelman. "Certain things, such as adequate housing and food for workers on plantations, must be done immediately, regardless of costs. However, we recognize that we cannot have overnight change and that we cannot afford everything right away, thus, certain things must wait."

Power

Eppelman pointed out, however, that if a company states that it cannot afford a certain safety measure, the government has the power to examine the firm's books to see whether this is true.

Three specific industries discussed by Eppelman to illustrate what the government is doing to improve worker condi-

Continued on Page 6

How Nicaragua is repairing its health

By Daniel Wolpert

Nicaragua is a country, ravaged by oppression and revolution, now trying to rebuild and repair the damages to its countryside and people.

This was the picture presented by two speakers who lectured at UCSF on health care in Nicaragua.

The first talk, presented last week, was by Dr. Mario Eppelman, head of the Department of Occupational Health and Safety in Nicaragua. On Monday a lecture was given by Melodie Radler, a physicians assistant who recently worked in Nicaragua for one year. The talks were co-sponsored by five campus organizations.

Both speakers presented slideshows with their talks and discussed how the new Nicaragua government was attempting to improve health care in a developing country.

Eppelman began by pointing out that when the Sandanista government took over in 1978 there were no statistics on workers or worker health, nor were there even accurate census figures.

The new government recognized the importance of occupational health and safety



The new Nicaragua government is developing programs to improve health care in the country.

and established a unit within the Department of labor, continued Eppelman.

"The initial goals of the department," said Eppelman, "were to train industrial hygienists because none existed before the revolution, oversee

safety in the factories, educate workers about industrial safety and get the workers involved in overseeing their own safety through union safety committees."

"Occupational health and safety is a technical and

Vital Signs



SCHWEIKER FEARS LOSS OF 200 NHSC DOCTORS

Health and Human Services Secretary Richard Schweiker says the government may lose 200 doctors it put through medical school under the National Health Service Corps (NHSC) because of budget cuts suffered by his department.

Schweiker expressed his fear in a letter last month to Budget Director David Stockman. The letter was released publicly last week.

In the letter, Schweiker urges partial restoration of severe 1982 cutbacks in health services. Among the requests are \$9 million for the current fiscal year to pay salaries of 200 NHSC doctors. He said that unless the money is found, physicians will be released from their obligation. Under the NHSC program, doctors are required to work for the government in a physician-short area. NHSC doctors are expected to devote a year of service for each year they received a federal scholarship.

Schweiker also warned that President Reagan's 12 percent across-the-board cuts have reduced Food and Drug Administration (FDA) staffing to the point that the agency is barely able to do its job.

Unless \$32 million of the \$40 million to be cut from FDA is restored, 929 employees will be fired, Schweiker said.

(S.F. Examiner, 11/12/81)

DRUG MARKETING UNDERMINES EFFECTIVENESS

If the marketing strategies of pharmaceutical firms are effective in promoting prophylactic use of new antibiotics, the war against infection by resistant organisms in hospitals may soon be lost, warned Dr. Calvin Kunin at the Third National Conference on Antibiotic Review in Washington.

Explaining that the new and very effective cephalosporins, penicillins and beta-lactams have been very costly for competing pharmaceutical firms to develop, Dr. Kunin expressed concern that the desire for a profitable return on the products is forcing drug companies to sell surgeons on inappropriate prophylactic use. Such preventive use might virtually abolish the effectiveness of the drugs.

Dr. Kunin, co-author of recommendations on peer review audits of antimicrobial drug use in hospitals, noted that this marketing strategy is effective even when drugs are not purchased for the hospital formulary. "Our surgeons have already developed a prophylactic regimen no one has heard of, and on an individual call basis they are breaking through our formulary," said Kunin, chairman of medicine of the Ohio State College of Medicine.

Referring to moxalactam, one of the new miracle bug-pluggers, he said, "I'm afraid there's no stopping this one; it's under clinical investigation in almost every hospital in the country — that's what you call outstanding marketing."

While market competition contributes to the inappropriate use of the new an-

tibiotics, lack of federal research and regulation is also to blame, according to Kunin: "It's the pharmaceutical companies that have done all the research, all the studies. Why? Because the NIH has not seen fit to fund any studies on antimicrobials in medical and surgical care."

The conference found that the task of educating physicians and guaranteeing appropriate use will increasingly be the pharmacist's role. Participants at the conference also suggested that antibiotic use audits and "counter-detailing" in hospitals is necessary to curb overuse of the expensive new drugs.

(Medical News, 11/2/81)

STUDY SAYS 25 MILLION LACK HEALTH INSURANCE

About 25 million Americans do not have health insurance, a federal study has found. Researchers at the National Center for Health Services reported last week that they arrived at that figure by combining 18.2 million year around uninsured Americans with the approximately seven million who are temporarily uninsured.

The study, presented at the recent meeting of the American Public Health Association, was hailed by supporters of national health insurance who have used an estimate of 25 million uninsured people in their arguments.

The study also found that the 179 million Americans with insurance use health services twice as much as the uninsured.

(New York Times, 11/15/81)

PRIVATE PRACTICE TAKES ROOT IN BRITAIN

Thirty-five years after establishment of a National Health Service (NHS), Britain is experiencing the slow return of private practice, according to a recent special article in the *New York Times*.

Private hospital beds are increasing at 20 percent per year while the number of public beds has slipped 15 percent over the last decade. Six percent of the population is now covered by private health insurance in the country which pioneered national health care but has wavered in its restrictions on private care. Discouraged under Harold Wilson, private practitioners are now in renaissance under Margaret Thatcher and tax benefits are now provided for private health insurance.

The trend toward increasing private sector health care may be a popular one if British public opinion surveys are to be believed. A recent poll found 60 percent of Britons favoring private practice while only 20 percent opposed it.

Major dissatisfactions with the NHS arise from elective surgery, for which patients may wait two years. The NHS also fails to pay for preventive care, but this is not covered by private insurance plans, either.

A heart surgery patient hospitalized at a private unit expressed the opinion of many:

Continued on Page 8

Letters

Campus must counter 'ultimate epidemic'

To the Editor:

It is a sad and frightening commentary on the social conscience of this University that, faced with the progressively more imminent prospect of nuclear war, there is no organized effort on the part of faculty or students to avert what is currently being called the "ultimate epidemic."

It seems evident that the effort expended in medical studies, practice and research is meaningless when juxtaposed with the projected environment that will exist in a post "nuclear" world. Yet,

business continues as usual.

It can't happen? If you are willing to look closely, consider the increased access we are providing non-nuclear countries to the tools necessary to join the weapons club; consider the increased "technozation" of warfare which is steadily replacing human judgement with computer printouts; consider what has been reported in recent months in local newspapers; consider, if you will, madmen. The decision to begin a "nuclear" is quickly fading from the realm of rationality into the realm of whim and chance. There are

only four minutes left on the nuclear clock.

It only a fraction of the intelligence and dedication that exists on this campus could be used effectively to counter the trend, how much better a chance we might have. Yet, in this time of crisis, which is really a moral crisis, where is our moral leadership? If the medical community does not rise to challenge this "epidemic," who will? And, if not now, when?

UC staff person
(Requested name
be withheld.)

A reminder of safety procedures

To the Editor:

How safe we are may depend on someone else besides ourselves. Some people continue to unlock locked doors around the campus, especially in ACC.

The UCSF Personal Safety Committee realizes that it can be inconvenient to carry a key or wait for a co-worker to open the door. You may want to step out for "just a minute."

However, because of the physical assaults that have occurred on campus, the Personal Safety Committee has set up safety procedures, including locking doors at off hours, to insure the safety of everyone at UCSF.

The Safety Committee is working to establish procedures that are in the best interests of everyone at UCSF but we need cooperation to carry out these procedures. So,

when you go out a locked door, don't prop it open or unlock it for your own convenience. Think about the other person whose life you are endangering by leaving that door unlocked. Remember, doors aren't unlocked for your personal inconvenience but for your personal safety. Let's help keep each other safe!

The UCSF Personal
Safety Committee

Guatemala's Indians — a silent majority takes up weapons

By Julia Preston
Pacific News Service

SAN MATEO IXTATAN, GUATEMALA — There are 46 bullet holes in the low door. The Indian woman hanging back in the smoky hut knows much but will tell nothing.

"It was like that when we moved in," she said.

Down the stone-paved street, hand-painted letters stand out on the wall of a hut: "EGP." They stand for Guerrilla Army of the Poor, one of four armed leftist groups. Elsewhere in Guatemala it would be an invitation to slaughter at the hands of a rightist death squad. But here no one notices.

Though little word of it gets out, these spectacularly beautiful mountains in western Guatemala already are in a state of undeclared war. Guerrillas and the Guatemalan army circle each other, waiting to strike.

Peasants say the roads are spiked with guerrilla mines. The army takes over huts in the villages, making sudden house-to-house searches and sometimes shooting villagers who don't have identification papers. A traveling photographer in the town square who takes snapshots for such ID papers said he is making a lot of money these days.

Real battle

Despite international accusations of Cuban interference, the real battle for Guatemala will be won or lost here, and in similar villages, far from Cuban — or American — influence.

This is the heartland of Guatemala's Indians, who make up 65 percent of the nation's 7 million people. For centuries they've been despised by non-Indians, called "Ladinos," though their labor was absolute-

ly required for cutting cane or picking coffee, the two main export crops.

Many Indians in this region lead two lives. They farm corn on snippets of land with hand tools in the summer. In the winter they migrate with their families to the hot south coast for the cane and coffee harvests.

The dire poverty of the Indians is everywhere evident. The stick huts house men whose stomachs teem with worms, women nearly blinded by conjunctivitis and children who can't smile because malnutrition has eroded the muscles of their faces. Literacy among Indians is less than 20 percent.

Cultural armor

But they also have a shining cultural armor drawn tightly around them. The women wrap their hair in scarlet scarves and wear billowing blouses with exploding stars of color woven across the front. They speak

their own village language, Chuj. And they aren't afraid to ask hard questions about a visitor's purpose: Neither the Maya, nor the Spanish, nor the Ladinos ever conquered them completely.

Long isolated from national politics, there feuds traditionally have been directed at neighboring villages. But now new discontent has drawn them toward a spreading guerrilla insurgency which aims to seize national power.

Yet in San Mateo, the ideologies of left and right are not the driving force. Many of these people are simply fed up with the Guatemalan army. The papers in Guatemala City recently carried curt reports that "unknown men" have murdered 37 people here.

"They weren't unknown at all," said one village resident

Continued on Page 7

synapse

Published by the Board of Publications
University of California, San Francisco, California 94143
Phone: (415) 666-2211

Managing Editor: Andy Evangelista
Asst. Managing Editor: Carolyn Marshall

Staff: Morgan Jenkins, Joy Melnikow, Michael Bader, David Smith, Allison Hall, Dan Wolpert, David Rempel.

Announcements and letters should be submitted to *Synapse*, c/o Millberry Union Central Desk, by noon Friday, the week before publication. Letters shall be published at the discretion of the editors and must be signed; however, the name may be withheld if so desired by the writer. Subscriptions may be obtained through the *Synapse* office for \$7.50 per academic year.

The *Synapse* seeks to act as a forum for responsible dialogue between the authors and readers of the campus community, representing the spectrum of belief and action. Articles and columns published in the *Synapse* represent the viewpoint of the author and not necessarily that of the editorial staff. Unsigned editorials reflect the majority viewpoint of the staff. Unsigned editorials reflect the majority viewpoint of the staff and not necessarily that of the Board of Publications or the University of California.

Campus meeting on LRDP

UCSF is currently restudying its 1976 Long Range Development Plan (LRDP) and is conducting a meeting/hearing on Thursday, Dec. 3, noon-1 p.m., in Toland Hall (UC Hospital).

Due in great part to the economic constraints of the 1980's and efforts to improve community enrichment, campus planning efforts may change in a few major areas from the 1976 LRDP. As part of the effort, the 1976 LRDP assumptions will be restudied and affirmed or changed to meet current academic program needs, new economic realities and community plans.

For example, the 1975 plan originally called for construction of a 15-story Health Sciences South research tower adjacent to the existing Health Science East and West structures. Today, with the university's tight budget, this building is not feasible from a capital funding standpoint. However, the construction of smaller buildings with the same amount of space may be more practical.

The purpose of the Dec. 3 meeting will be to discuss some of the University's preliminary thoughts on the future directions facing the campus in the 1980's. The campus will also discuss some studies currently underway, such as academic program needs, student and faculty housing, classroom and instruction space, traffic and parking, utility use, food services, materials/logistical support, recreation, architectural site plans, open space and landscaping.

The university is interested in thoughts and comments from members of the campus.

Respirator fight result of OSHA changes

Continued from Page 1

Shortly before workers walked out, the Tennessee division of OSHA found uranium concentrations 13 times over the legal limit. Inhaled in sufficient quantities, the dust can lead to kidney failure. And the tinier particles settle deep in the lungs, where they emit high-energy alpha radiation — a confirmed cancer threat.

Two years ago, the workers elected the OCAW to represent them, and by late 1980, the union was pressing for a plant-wide cleanup. Instead, TNS instituted the mandatory respirator rule for workers in dusty production areas.

Employees agreed, but found that the masks interfered with communication and many routine tasks. Also, wearing them for extended periods never was pleasant, with in-plant temperatures reaching as high as 117 degrees F.

Malfunction

Even if employees do wear them, there is growing evidence that respirators do not perform as advertised. In a recent study by the National Institute for Occupational Safety and Health (NIOSH), one highly rated model malfunctioned under the stresses of actual work. Ominously, this was the first time NIOSH had tested any respirator outside the lab.

For at least 11 of the TNS workers who have been tested, urine counts were above limits where permanent kidney damage may occur, according to Nuclear Regulatory Commission guidelines. Some were 15 to 20 times over permissible levels. As a result, several workers had to be taken off their regular jobs and moved to non-production areas.

By early April, negotiations for a new contract were under way. The union proposed that TNS pay an independent firm to study the plant and make recommendations for engineering controls, so that respirators could be phased out. Management refused.

Meanwhile, concerns were growing about radioactive contamination, which monitoring records show was being tracked throughout the plant and



Photo from UAW

Workers find that masks interfere with communication and routine tasks and are not as protective as proper ventilation systems. Also, wearing them for extended periods in high plant temperatures is not pleasant.

probably taken home on workers' clothing.

90 hazards

In his final monthly walk-around, Bettis brought more than 90 hazards to management's attention and warned that not addressing them would ensure a strike. TNS countered with an economic proposal: a 25 percent wage increase over one year, an additional paid holiday, and various benefit improvements.

But the workers saw health and safety, not money, as the issue. The strike was on.

Edward Smith, a spokesman for TNS's parent company, Aerojet Ordnance (a subsidiary of General Tire), disagreed. The strike's overriding issue, he argued, is "the union's desire to gain more control within the company over methods of operation."

He said that TNS is working hard to solve "the very complex airborne dust problem," but that "we're not going to spend hundreds of thousands of dollars on this idea one week,

and that idea a month from now."

Smith had "no idea" when new ventilation might be installed, but maintained that respirators were adequate protection if properly used. Workers' high urine levels were "probably spiked intentionally" or a result of failure "to adhere to the procedures and policies with regard to sanitation prior to giving the sample." OCAW health and safety officials refuted this charge by pointing to the number and consistency of abnormal urine levels over many months.

Weak enforcement

"Obviously, the enforcement of the law is very weak," said Steve Wodka, Washington representative of the OCAW. "That's why we're having to pursue this through collective bargaining."

The union has criticized state regulatory agencies for having what it believes is undue patience with violators of

their own rules. The Division of Radiological Health has cited TNS repeatedly over the past two years. But it issues no fines, and its only sanction — removal of a company's license to handle radioactive materials — rarely is invoked.

The Reagan administration wants to transfer even more enforcement authority to such state agencies. That, combined with a relaxation of federal OSHA rules, promises to leave labor and management increasingly on their own in resolving health and safety problems.

The result may be an increasing number of strikes like the one in Jonesboro. "This plant is just a microcosm," predicted Wodka, "of what could occur right across the country if that rule is changed and employers can strap people into respirators for the rest of their working lives. People will rebel. That's what happened here."

SUNSET OFFICE SUPPLY



837 IRVING STREET
Between 9th & 10th Aves.
TEL. (415) 664-0937

What's the finest barbeque restaurant in town?

Heaven only knows.



770 Sanyan Street
San Francisco 668-2038



GOEMON
JAPANESE RESTAURANT
(BETWEEN 16TH & 17TH AVE.)
SUSHI - SUKIYAKI

(NEAR GOLDEN GATE PARK)
1524 IRVING STREET
SAN FRANCISCO, CA 94122
CLOSED TUESDAY
BUS. (415) 664-2288
HAPPY HOUR: 5-8 p.m. — ONE SAKI (WITH DINNER)

"...one of the City's most remarkable restaurants. Its prices are as low as any in town, yet the food is superlative..."

—R. B. Read
S.F. Examiner's
"Underground Gourmet"

Saigon Royal

Meals prepared with fresh ingredients from our traditional Vietnamese family recipes.
No MSG

Planning a Picnic?

We will prepare Vietnamese picnic boxes for you.

We also deliver box lunches for your meetings.

Lunch: 11-3:30
Dinner: 4-8:30
Closed Sunday

94 Judah St.
681-4010

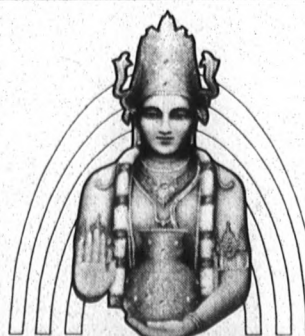
Say Cheese
plain & fancy
cheeses & foods
from all over

San Francisco's Largest Selection

Domestic & Imported Cheeses
Hams • Sausages • Salamis
Domestic & Imported Specialty Foods
Under One Roof
Featuring
Hand Sliced Lox • Smithfield Hams
Farm Fresh Eggs
Party Trays • Box Lunches
Gourmet Gifts

856 Cole St. (at Carl) Mon.-Fri. 10-7
San Francisco Saturday 10-6
665-5020 Closed Sunday

MasterCharge • BankAmericard • Visa
We Ship Via UPS



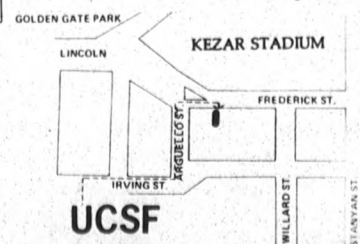
THE HIGHER TASTE
AYURVEDA
RESOURCE CENTER FOR NATURAL LIVING

Located half a block from U.C. Med Center; opposite Kezar Stadium
775 Frederick St., S.F. 94117
Tel. (415) 661-7290

20% Discount to UCSF Students

"Finally, an authentic, reasonably priced, Indian Vegetarian Restaurant in S.F."

Lunch
Mon.-Fri. Noon-3 p.m.
Dinner
Mon.-Thurs. 5-7:30 p.m.
Fri.-Sat. 5-8:30 p.m.



County services and community clinics fights cuts

Continued from Page 1
election of Reagan.

Unlike county health departments and their traditional budgets from the county and state government, community clinics have had to "patch-work" their support and rely heavily upon unpaid, volunteer services. Imagination and a hot typewriter were useful tools during the 60's and early 70's as the Federal government allotted funding for primary care and community health projects through such agencies as the National Institutes of Health. With the introduction of Medicaid in 1965, some clinics found support through collection of fees from the California Medi-Cal program. Finally, local fund-raising through cultural events and canvassing were combined with private grants and donations.

In recent years, budget reductions at the state and federal level have threatened or ended various county and community clinic services. The San Francisco Department of Public Health, for example, eliminated the greater part of its mental health services and several neighborhood emergency aid stations following the 1978 passage of Prop. 13. For the community clinics, reductions in grants and primary care funding have caused service reductions and increased reliance on volunteer workers. Threats by the Reagan administration to make larger cuts in Medicaid (Medi-Cal in California) could further erode the funding base for both clinics and counties.

Under the guise of a new policy called "supply side economics," the Reagan administration has ushered the U.S. back into a "trickle down" fiscal policy, according to Dion Aroner, administrative assistant to Assemblyman Tom Bates of California. The Republican strategy, she noted, involves condensing all federal entitlement funds — Medicaid, Medicare, Aid to Families with Dependent Children, etc. — into "block grants to states" which can be steadily reduced without the administration being accused of hurting one particular group of recipients more than the others. In this way, the "trickle" would dwindle steadily until "we will only be building a defense system together," Aroner remarked, referring to the Reagan administration's growing military budget.



One suggested approach to deal with health cuts is to have community clinics provide primary care while county hospitals provide tertiary care to the medically indigent.

Alameda County Supervisor John George stressed in his introductory address, "We must see the funding (cuts) for community clinics linked to an increasing military budget and preparation for nuclear war...the greatest danger in the world."

In addition, Aroner said, the block grant system allows the federal government to ignore areas of need within counties since it recognizes only county level data. East Oakland, for example, by this method would appear to be well supplied with pediatricians because it is part of Alameda County. Although Alameda County has, as a whole, no shortage of M.D.s, these physicians are located outside of East Oakland and thus can have little impact upon an unusually high rate of perinatal mortality which has been an issue of community struggle there for several years.

The public HMO

The alliance between community clinics and county health services has become appealing to the state government, according to Aroner and Deputy Director of Health Services Cliff Cole. In particular, Aroner noted, the Legislature and Governor Brown are interested in how much administrative overhead can be reduced by combining these previously separate health services. Cole used the term

"organized health system," often heard during the conference, to describe this cooperation.

What the Organized Health System involves was outlined by Cole: prepayment, peer review, case management and common financial and medical management. These are the basic elements of a public Health Maintenance Organization (HMO) as epitomized by the Kaiser programs.

Unlike the large, centralized institutional approach to primary and critical care seen with many HMOs, Cole sees community clinics providing primary care while the county hospitals continue to provide tertiary health care for Medi-Cal/Medicare recipients and persons without ability to pay (the "medically indigent adult" or MIA, in legislative jargon).

"The county hospital outpatient department is not the way to supply primary care," Cole emphasized, a function he felt should continue to reside with the community clinics and other neighborhood practitioners.

The Organized Health System would use Medi-Cal funds as prepayment for care delivered at a later time to recipients. Because of this structure, Cole emphasized, cost control would be put back in the hands of the medical practitioners since a clinic's profitability would rely upon judicious use of limited funds.

Supervisor George, often an outspoken advocate of community health services, noted that there was a substantial group of Medi-Cal recipients

treated by private hospitals. These patients, often with medical complaints requiring less costly but more profitable interventions, are accepted at private facilities while Medi-Cal recipients with more complicated problems or the medically indigent are "dumped" on county hospitals for care. The attention of several speakers was directed to channeling this "cream" of the Medi-Cal recipients into the public or community health care system.

Contra Costa experiment

The only example of a public Organized Health System in the U.S. at this time is the Contra Costa County Health Plan, where Medi-Cal recipients in the central county area and 500 privately enrolled county employees receive health care at three public clinics and the county hospital. Operating since 1973, this public HMO charges \$98 monthly to Medi-Cal for medically indigent adults whose care would cost Medi-Cal approximately \$153 per month if they were receiving care on a fee-for-service basis.

Robert Kaplan, Executive Director of the Contra Costa County Health Plan, said the plan incorporates both clinic and hospital services under a single administration. Kaplan noted this increased the rate of reimbursement the county obtained for its outpatient services while netting the state an overall savings.

When asked about abuse of the system — for example, underserving patients in order to save money — Kaplan said he had received no complaints so far. In fact, he noted that the plan had the best rate of enrollment and lowest rate of disenrollments among private subscribers when compared with HMOs nationally.

As many primary care advocates have predicted for years, Kaplan's organization found a tapering need for medical care among Medi-Cal recipients enrolled in the plan. This he credited to improving health under a preventive and comprehensive health care approach which circumvented the more expensive "crisis" care currently available through emergency rooms for many Medi-Cal recipients.

Other California counties exploring ways to set up their own public HMOs are Monterey and Santa Barbara. James Ringrose, from the Monterey County Department of Health, described a plan involving the assignment of Medi-Cal recipients to a chosen primary care provider who would receive a set monthly fee for the patient's care while determining all referrals

and hospitalizations for that person. Although the plan is drawn up for implementation soon, Ringrose noted that opposition from private practitioners, the county hospital, and the county health officer could delay or defeat it.

A similar plan developed for Santa Barbara County was described by Albert Lowey-Ball, director of that area's Office of Health Delivery Systems. Lowey-Ball called this system a "capitated primary network with case management" which would designate "entry providers" at clinics, existing health plans, and community clinics for capitation payment based upon the age and sex of Medi-Cal patients they care for.

Although peer review is central to both the Monterey and Santa Barbara plans, neither county executive could provide clear indications of how abuse of the system would be uncovered and corrected.

Both of the county plans required special Federal waivers from the Medi-Cal program in order to qualify as pilot projects.

Principles of coalition

In closing remarks before a plenary session of the conference, Nilda Vargas, Director of La Clinica de la Raza in Oakland, noted that a coalition between community clinics and the county health services would have to respect certain basic needs in the clinics. "If we are to work together, we must be paid equally," she emphasized, referring to a struggle recently before the Alameda Board of Supervisors which resulted in clinics workers receiving a 5 percent salary increase while county health workers received a 9 percent raise. She stressed that county and clinic workers would have to avoid fighting each other in future bids for funding. In addition, she pointed out, the issue of quality care for people from different ethnic backgrounds could not be dismissed in making a coalition with county health personnel who had ignored this issue in the past.

Michael Leahy, Director of Alameda County Health Care Services Agency, concluded remarks by saying that the issue was not finance, but redistribution of wealth from the middle class to the ruling class in the U.S. The reactionary political forces pressing for this upward redistribution of wealth, he explained, will use the finance issue to divide the county and community health services who are, after all, trying to provide medical care to the same needy people.

\$2.49
for 2 nites*

THE DARKROOM

One Free Rental
With This Coupon
(One Per Customer)
Expires 11/30/81
VHS ONLY

VIDEO TAPE RENTALS

THE DARKROOM
843 IRVING STREET
SAN FRANCISCO 544-3623
Mon.-Sat. 10-7 p.m.

For members only. Non-members \$4.99/2 nites. Deposit not required for each tape. MC/VC.

master charge
VISA

THE YANKEES ARE HERE!
THE YANKEES ARE HERE!

We have lots of Nike's fine Yankees in stock for men and women! They are a popular running flat at a still more popular price!
Regular price \$33.95 Special price \$27.50

ON THE RUN
1307 Ninth Ave. (at Irving), San Francisco • 665-5311

Announcements

MARIO OBLEDO AT UCSF

Mario Obledo, Secretary of Health and Welfare of the State of California, will speak on "The Future of Health Care and Human Services for the Poor in California" on Friday, Nov. 20, 7 p.m., in HSW 302.

Other notable speakers from the health and mental health fields will make presentations at this free public forum. All are invited to attend. The program is sponsored by the UCSF Office of Public Service Programs along with the Mission Mental Health Center and two UCSF campus groups — Latin American Campus Association (LACA) and Chicanos in Health Education (CHE). For more information, call x-3206.

HEALTH CARE IN CENTRAL AMERICA SERIES

"Health Care in El Salvador," a slideshow and talk by Jeff Ritterman, M.D., will be presented on Tuesday, Dec. 1, noon, in HSW 303. Dr. Ritterman is a member of the East Bay Committee for Health Rights in El Salvador.

The presentation is part of a series on Health Care in Central America, sponsored by the campus groups Chicanos in Health Education, Health Care Students Alliance, Latinos in Dental Health Education, Latin American Campus Association, and LaRAMA.

HOLIDAY BAZAAR FOR CHILDCARE CENTER

The second annual Holiday Bazaar to benefit the UCSF Child Care/Study Center will be held on Thursday and Friday, Dec. 3 and 4, 11 a.m. to 2 p.m. Craft items will be sold in Millberry Union and baked goods will be sold on the second floor of the Medical Sciences Building.

Handmade picture frames, toys, Christmas stockings, ornaments and many inexpensive gift items will be among the crafts sold. Baked goods will include old-fashioned fruit cakes, holiday cookies and nut breads. The book "The Melting Pot," a recipe book compiled by Child Care/Study Center parents will also be on sale. Proceeds from the Holiday Bazaar are used by the parents to help maintain the Child/Care Study Center.

WOMEN'S NEEDS COMMITTEE LESBIAN CAUCUS

The Lesbian Caucus of the Women's Needs Committee will meet on Tuesday, Nov. 24, noon-1 p.m., in Room N-471 for networking, experience exchange, program ideas, and peer support. The caucus, which meets twice a month, is open to all women interested in these issues.

CLINICAL NUTRITION CONFERENCE

A clinical nutrition conference — which will include case presentations and discussions on nutritional issues in management or current, medical, pediatric and surgical cases — will be held on Tuesday, Dec. 1, 4 p.m., in HSW 303. To schedule cases for discussion and for further information, call Mel Heyman, M.D., at x-2015.

ALLIANCE FOR A NUCLEAR FREE WORLD MEETING

The Alliance for a Nuclear Free World will meet today (Nov. 19) at 5 p.m. in the Millberry Union Residence Lounge. The British film "Counterforce," which explores U.S. nuclear weapons and first strike nuclear strategy, will be shown. The 30 minute film includes interviews with SAC base personnel. A brief general meeting will follow the film.

FILM AND DISCUSSION ON SEXUALITY AND DISABILITY

The Curriculum in Physical Therapy will present a free lecture, film and discussion on sexuality and disability, psychosocial responses to traumatic injury and sexual response cycles in spinal cord injuries as compared to other disabilities. The program will be held on Monday, Nov. 30, 6-8 p.m., in S-214.

Bob Levy, M.A., a counselor and international lecturer, will present his award winning film "Active Partners." Levy, a C5-6 quadriplegic, received his M.A. from San Francisco State University in sexuality and Disability Counseling/Educating. He also trained in UCSF's Human Sexuality Program.

Proposal for UC peace center

Continued from Page 1

of the SBPC, said the proposal has been circulated for review and comment to all UC campuses. An open forum to discuss the proposal and other UC issues will be held at UCSF, Dec. 2, at noon. (Location to be announced)

Gagnon said the student proposal includes three components: education, research and development. He said areas for study will focus on 1) what factors generate attitudes of conflict; 2) causes of regional, national and international terrorism; 3) causes of prison violence; and 4) peaceful and violent attitudes individuals have toward the self.

Students hope to establish peace centers on at least three campuses, Gagnon said. Classes, research provisions, teaching assistantships and annual peace symposiums will be offered if the student proposal is accepted, he said.

In addition to the ASUC and the Governor's proposals, two other groups have drafted recommendations for a peace center. Gagnon said one plan was presented by The York Committee, headed by UC San Diego physics professor Herbert York, who was the first director of the Lawrence Livermore Lab. Another proposal was drafted by Regent Willis Harmon.

While ASUC's proposal addresses the need to study and research the proponents of peace, and Brown's stresses the general need for a center, Harmon's and York's proposals seem to emphasize development of surveillance systems that can verify other weapons systems, Gagnon said.

All proposals must be submitted to the Academic Council, which will make recommendations on the UC Peace

Institute to UC President David Saxon. Final recommendations will be presented to the Board of Regents for approval.

had a different reading of Browns' remarks saying, Brown seemed encouraging on the issue of funding.

Funding has been the major problem for the ASUC proposal, according to Gagnon. Students have estimated the need for \$1 million just to initiate a program at one UC campus. In the face of a systemwide budget crunch, ASUC has suggested raising funds from students, requesting \$2 to \$3 donations per quarter.

UCSF ASUC Executive Director Mark Perez said students met with Governor Brown last week to discuss other funding possibilities for the student-sponsored proposal. Perez indicated that Brown gave little indication as to whether funds could be allotted to such a program.

Gagnon, on the other hand,

Gagnon said it is important for students to find funding outside the University so that the ASUC proposal, which he believes will be favored over other proposals, can remain autonomous from other UC decisions.

When asked what effect such an institute could have, Gagnon said it will provide educational and research alternatives to those who oppose weapons development. "It can provide a counterbalance to the work at the weapons labs, at least in a metaphorical sense," Gagnon said. "But it's more than just a principle, because the institute will help train people in peaceful disciplines."

FALL SPECIAL Seventh Ave. Garage

1311 7th Ave. (corner of Irving)

Oil change, oil filter, lubrication. Free safety check, including brake check, cooling system, all belts and hoses. Brake lines, muffler checks.

All For \$19.95

Tune-Up Special
Any Toyota, Datsun, Honda, V.W.
\$29.95 plus parts
Valve Adjustment Extra

Most jobs done in one day.
All jobs guaranteed 3000 miles or 90 days

Please call 665-6370

Good thru Dec. 31

Professional Word Processing
At Typing Rates

books • manuscripts • dissertations
• term papers •
free pickup and delivery

ALL WORK GUARANTEED
415/697-7543

Small Business Computer Services

SENIOR NURSING STUDENTS

AIR FORCE
NURSING HAS:

INTERNSHIP
PROGRAM

EDUCATIONAL
OPPORTUNITIES

TRAVEL
OPPORTUNITIES

BECOME A NURSE
IN THE AIR FORCE

CALL NOW :
CALL COLLECT
THERE IS A DEADLINE
CONTACT:
Richard Boesch
Nurse Recruiter
333 Hegenberger Rd.
Suite #803
Oakland, CA 94621
(415) 273-7435

AVOR
FORCE
A great way of life

THE DARKROOM

25% Discount

on Kodak, Agfa, Ilford

Film and Paper

THE DARKROOM

Kodak and one day processing

at a Special Discount

for U.C.S.F. STUDENTS & STAFF

843 IRVING ST. SAN FRANCISCO, CA 94122 415 566-3606

NOW OPEN!

Sheer Necessities

Hanes
too!
pantyhose



642 Irving St.

Open: 11-6

665-9515

Speakers at UCSF discuss health care in Nicaragua

Continued from Page 1

tions were the banana plantations, mining, and a factory where large amounts of mercury were being used.

In both the plantations and the mines, living conditions for the workers were very bad before the revolution. One of the first projects of the Occupational Health Department, said Eppelman, was to build new houses and eating places for the workers.

While Eppelman stressed that these people still live in relative poverty, the conditions are slowly improving.

One of the biggest projects in the mining industry was improvement of worker education. This began after the national literacy campaign which both Eppelman and Radler consider a major achievement of the new government.

Literary work

During this campaign, which began seven months after the revolution, students traveled to Nicaragua and lived with peasants and workers. In daylight, they worked with the people — at night the visitors taught them to read and write, said Eppelman.

After six months, the illiteracy rate dropped from over 50 percent to about 12.

After this, said Eppelman, worker education was possible and seminars on health and safety were set up by worker committees in various industries. Today, new miners are given a 15 day seminar on safety in the mines before they start work.



Photo by Susan Meiselas/Magnum. From "Medical Aid for Nicaragua"

Among the new programs are ones aimed at improving infant health and preventing malnutrition.

In the factories, many substandard conditions were found by the new government. In one plant, owned by Penwalt, a U.S. firm which manufactures medical equipment and pharmaceuticals, 56 out of 152 workers were found to have permanent central nervous system damage caused by mercury poisoning. The workers had never been told anything about the toxic effects of mercury, said Eppelman.

The government moved to clean up the plant and make the workers aware of the dangers of the mercury. In addition, six-hour shifts were instituted until the clean-up

measures had been taken. Finally, said Eppelman, equipment has been purchased to remove the mercury from the plant effluent.

Accomplishments

"After two years," concluded Eppelman, "we have established over 100 seminars for workers; we have trained industrial safety technicians and hygienists and have 34 people at the national level working on occupational health; we have had over 1200 inspections and we have made occupational health and safety an important national priority."

Radler's talk and slideshow focused on the daily life of the people after the revolution and health care delivery under the new government.

"Daily life is very similar for most people (after the revolution)," said Radler. "But the vision of change exists and you can see evidence of that vision in action every day. You can see that the government is now working for the betterment of conditions for everyone."

Malnutrition and bad sanitation is still a problem in most of the country, said Radler, pointing out that 94 percent of the people who live in the country still receive non-potable water (About 50 percent of the population lives in the country).

Health care has been unified into one national system and an attempt is being made to spread available health care resources into the country, Radler said.

Levels

There are three levels of health care facilities: the health post, health centers and hospitals. Health care is free to all.

The biggest problem described by Radler was the lack of supplies and personnel. Essential medicine was often lacking and often, while in the barrio, Radler said she worked alone with only her Merk handbook to aid her.

Despite this lack of advanced health care, Radler mentioned many programs that

were being developed to improve the health of the population. Two of these were the establishment of rehydration units at health centers to avoid infant death from diarrhea and a program to encourage mothers to breast feed.

Radler said that there was a great deal of resistance to the breast feeding program because of the heavy advertising of infant formulas. However, the program is beginning to catch-on and this is helping to alleviate infant malnutrition.

There have also been campaigns against measles, polio, malaria, and rabies in dogs. The programs have been jointly sponsored by various worker, community and women's organizations, continued Radler.

In addition, Radler talked about how the new government was attempting to encourage cultural events and build the pride and spirits of the people of Nicaragua.

Radler said that although the revolution has a lot of popular support, it does face many economic problems and threats of counter-revolution from reactionary groups inside the country and, possibly, from the U.S.

Quoting a *New York Times* article, Radler pointed out that Secretary of State Alexander Haig has suggested the need to develop military plans "to deal with" El Salvador, Nicaragua and Cuba.

Fine Footwear
OAKWOOD
we baby your feet



Specializing in Quality Comfort & Friendly Service
Large Selection of Walking Shoes for Men & Women
Rockport — Frye — Bass — Birkenstock and more

See Our New Styles of Frye Boots

Now Carrying Leather Bomber Jackets

681-8913
Oakwood Leather
1376 9th Ave.

10% Discount With Ad to UCSF Students & Employees

Good Thru Dec. 31, 1981

Visit Our
New Store
668-3200
Oakwood Shoes
1732 Haight

Faces of Guatemala at war — Indians take up arms

Continued from Page 2

who helped sort out the dead and wounded that night. "They were soldiers from the post down the road. We know them on sight."

Last spring guerrillas of the EGP were holding open meetings in the town square. An informer gave the army a list of names of guerrilla sympathizers, which included nearly everyone in town.

After the EGP marched out of the area last May, two dozen soldiers, some in camouflage and some in civilian clothes, marched into the village just before midnight one night. They singled out 10 houses.

"In most cases they didn't call the people out. They fired on the beds through the doors," said a witness.

A nurse working in San Mateo at the time added: "Some of the children suffered grenade wounds. Their muscle was completely destroyed."

What most outraged San Mateo was a remark which many villagers heard. After two hours, the commander said: "We've done everything we can do here. Our time is up," indicating that they had come purposely to kill, and within a fixed time limit.

Forced recruitment drives by the army also are deeply resented. "Before they only used

to take unmarried men who signed up. Now they come to the house at night and lead men away from their families at gun-point," said a young man.

The villagers feel the military is pinching them economically as well.

Two years ago a Guatemala City logging firm partly owned by the Minister of Defense, Otto Speigler, paid the mayor of San Mateo \$10,000 for trees valued at more than five times that price. Although the townspeople stopped the deal, the mayor fled with the money and the firm now is suing the village for a refund.

About that time, "the people from the mountain," as the guerrillas are called, were roaming the nearby forests. They took over the town one Sunday afternoon. The majority of them were Indians themselves, and they held a meeting in the Chuj language to talk about trees and land problems.

The leftist rebels teach Spanish literacy to Indians in their ranks, and insist all full-time armed forces be uniformed — Ladino and Indian alike — as a visible measure of their equality.


Most of the people of San Mateo don't know, and don't care, if the guerrillas are offering them land reform. They like the idea, implied by the EGP name of an army meant to protect Indians. So a core of people in town are willing to grow corn and sew uniforms for the guerrillas. In addition, some already have headed off to the mountains to join the fighting.

Others are frightened by the leftists because they plant bombs in roads and in government buildings and execute local authorities they accuse of being corrupt. Still others are frustrated with them, because they hoped to get guns from them right away. The war in El Salvador and tightened surveillance in Honduras and Mexico apparently have restricted the flow of arms to the guerrillas.

But the hill terrain strongly favors the guerrillas, and time still is on their side. Whether they take Guatemala City or not, they could hold out in the mountains for many years.

At least for now, however, the main wish of people here is not to change but to be left in peace to farm.

IT'S NOT TOO LATE TO MAKE YOUR HOLIDAY RESERVATIONS



GEMINI TRAVEL
LAUREL VILLAGE • 3501 CALIFORNIA STREET, 2ND FLOOR
SAN FRANCISCO, CALIFORNIA 94118
(415) 221-8222


552 - 4122

CHARING CROSS ROAD
previously read books

A LARGE STOCK OF USED BOOKS
NEW PAPERBACKS & MAGAZINES

SELECTED FOR QUALITY

11-6 DAILY | 1687 HAIGHT, NEAR COLE



Midland National Life Insurance Company
One Midland Plaza
Sioux Falls, South Dakota 57193

ARDIST COOPER, JR.

Agent

346 Victoria Street
San Francisco, CA 94132

Res. Phone: 587-6242

\$249
for 2 nites*


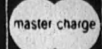
THE DARKROOM

*For members only. Non-members pay \$4.99/2 nites. Deposit for American Express.

The Darkroom Video Club

VIDEO TAPE RENTALS

VHS ONLY




THE DARKROOM
843 IRVING STREET
SAN FRANCISCO 566-3623
Mon.-Sat. 10-7 p.m.

The Haight Ashbury Free Clinic
needs volunteer
4th yr. medical students,
nurse practitioners,
and doctors.
Call 431-1714

"It's a helluva good cause . . .
Keep up the good work."

Herb Caen

Classified Ads

<div><div>WANTED</div><div>1972, 73 of 74 VW bug. Prefer good condition/running car. Will pay cash. Gail (eve.) 648-4523.</div><div>Free lance writer wants to interview a) students whose studies use animals; and b) students who dropped/left courses/careers or are doing so because of the use of animals. Call Ellen at 444-3951.</div></div>	<div><div>NURSING STUDENTS</div><div>Groves Nurses Registry, Inc. is hiring Hospital Attendants for float positions in Acute Staff Relief. Perfect for nursing students with six months or more clinical experience. Work around your school schedule and gain valuable nursing knowledge in various acute areas. In the past six years Groves Registry has helped hundreds of students through school and has long been a favorite of motivated nursing students. Pay is Union Scale. Phone today for an appointment. 433-5950</div><div>MEDICAL/BIOMEDICAL SPECIALISTS. Relocation required. These positions require a Bachelors Degree and registration/certification in your Biomedical Specialty. Openings for: physiologists, microbiologists, biochemists, clinical psychologists (PhD), clinical social workers (MSW), health physicist, radiobiologists, medical entomologists (MS or MA), occupational therapists, health care administrators, pharmacist, engineers. Persons completing their degree in 1982 will be considered. We offer a competitive salary, excellent benefits and promotion from within. Interested applicants should forward their resume to: USAF Medical Recruiting Office, 333 Hegenberger Rd., Suite 803, Oakland, CA 94621. (415) 273-7435.</div></div>	<div><div>Typing service specializing in manuscripts. Transcribing. IBM Selectric II correcting machine. Reasonable rates. My home. Jeanne Murphy, 585-9636.</div><div><div>TYPIST: 90 wpm; Selectric II; technical/medical/manuscript/-transcribing/layout & editing capabilities; good rates; ask for Diane 666-3256/868-0798.</div><div><div>EXPERT TYPING, reasonable rates, correcting selectric, varied typefaces, term papers, manuscripts, resumes, etc., deadlines met. Call 821-0360, after 8 p.m.</div><div><div>EXPERIENCED MEDICAL EDITOR. Books, papers, articles, manuscripts at all stages. Professional, fast, reasonable PENELOPE POST (B.A. Harvard, M.A. Yale). 868-0647.</div><div><div>Need a place to live? Looking for a vacation rental? RENTAL FINDERS 992-5620. Apartments, flats, houses, share, and vacation rentals.</div></div></div></div></div></div>
<div><div>FOR SALE</div><div>MEDICAL FILING SHELVES. 54 sq. ft. of shelf space. 3 tiers on individual sliding racks. \$350 or best offer. Call Marty or Jason, 621-3913.</div><div>New to the Bay Area? You need the San Francisco Bay Area People's Yellow Pages to help you find your way around. 200 pages describes 1100 local organizations offering services such as child care, recreation, legal help, housing, support groups for women, much more. Makes a great gift too. Send \$5.95 to People's Yellow Pages, P.O. Box 312915, San Francisco 94131.</div></div>	<div><div>HELP WANTED</div><div><div>NURSES: RN & LVN Prescheduled staff relief positions available for RN's and LVN's in acute hospitals.</div><div><div>AIDES Nurses Aide positions also available, especially weekend. Phone Today: 673-9791</div><div><div>2107 Van Ness, S.F.</div></div></div><div><div>Wanted: Subjects for ongoing research project. Will pay \$10. Call 666-1108.</div></div></div></div>	<div><div>SERVICES</div><div><div>TYPING SERVICES. On electric typewriter, carbon ribbon, lift-off correction. Manuscripts, research papers, letters. 665-4411.</div><div><div>NUNN BETTER Typing Service. Do it right! IBM Correcting III. Fast turn around. Reasonable rates. Call Tom Nunn 282-1562.</div><div><div>TYPING: on IBM Correcting Selectric, near UCSF, experienced; also light editing available. 566-6474.</div></div></div></div></div>

MOVING?
CALL
TIGER
TRUCKERS
861-5381
FREE ESTIMATES

The Synapse accepts classified advertising. The cost is \$2 for each 20 words. Ads may be sent to the Synapse office, 1324 Third Ave. For more information call 666-2211.

UCSF students may place classified ads at no cost (20 word maximum). Ads are taken at the Synapse Office on Friday, 11 a.m.-1 p.m. Students must show UCSF I.D.

MILLBERRY UNION RECREATION

MU Calendar

Thursday, Nov. 19

FILM: ALAMBRISTA! THE ILLEGAL. A chronicle of a migrant worker's odyssey in the U.S. 5:45 and 8 p.m., Cole Hall, \$1/\$1.50/\$2.

Friday, Nov. 20

FILM: ATLANTIC CITY. See photo/description for details.

Saturday, Nov. 21

FILM: THE HANDMAIDENS OF GOD (Canada, 90 min.) In a Quebec convent live 600 nuns (average age of 60) who share a lifelong commitment to service. Their sentiments about their chosen lives are expressed in the film. 7:30 p.m., Cole Hall, \$3.

Monday, Nov. 23

SLIDE/LECTURE: LIFE EXTENSION SCIENCES. An introduction to the life extension sciences exploring the worlds involved in the conquest of death and aging, by Dr. Paul Segall of UC Berkeley. Noon, HSW 303, free.

Saturday, Nov. 28

FILM: JAGUAR. (Ghana, 93 min.) Three young men from Niger leave their traditional roles and journey to Ghana for money and adventure. 7:30 p.m., Cole Hall, \$3.

Tuesday, Dec. 1

FILM: HOT PEPPER. Filmmaker Les



Susan Sarandon and Burt Lancaster star as inhabitants of a seedy summer resort in director Louis Malle's **ATLANTIC CITY**, to be shown on Friday, Nov. 20, 6:30 and 8:30 p.m., in Cole Hall. Dope and dreams are the substance of this mix of comedy, oddball sweetness and a splash of ugly reality. \$1.50 UCSF students and MU members, \$2 general admission, \$1 children.

Blank's portrait of Clifton Chenier, the accordion master of "Zydeco," the music that blends the rhythms of Cajun French with African undertones. Noon, Cole Hall, free.

Thursday, Dec. 3

SLIDE/LECTURE: SAN FRANCISCO AMERICAN MT. EVEREST EXPEDITION, 1981. This "First in Tibet" expedition will describe the first attempt since 1921 to climb the East

Face of Mt. Everest, the highest point on earth. 8 p.m., Cole Hall, \$2.50 UCSF students and MU members, \$4 general admission.

Friday, Dec. 4

FILM: YOJIMBO. Kurosawa's satirical comedy matching a wandering Samurai against two merchant families battling for a country town. 6:30 and 8:30 p.m., Cole Hall, \$1./\$1.50/\$2.

Outdoors Unlimited

Monday, Nov. 23
Sign-ups begin for:

Basic Canoe Clinic, starts, Dec. 2

Day Hike, Mt. Tamalpais, Dec. 6

Tuesday, Nov. 24

Tune Up Your Cross Country Ski Equipment Night, 6:30 p.m., OU Center.

Monday, Nov. 30

Sign-ups begin for:

Adventure Ropes Course, Dec. 12

Canoeing, Navarro River, Dec. 12-13

Telemark X-C Ski Clinic, Dec. 12-13

Skiing, South Tahoe, Dec. 22-27

Skiing Lesson, Dec. 29-Jan. 3

Outdoors Unlimited activities are free with the exception of any equipment rental or lodging that might be necessary. To participate, sign up at the Outdoors Unlimited Center and attend any pre-activity planning sessions.

Outdoors Unlimited is located at 24 Kirkham St. and is open 11:30 a.m.-1:30 p.m. and 4-6 p.m., Monday-Friday. For more information call 666-2078.

VITAL SIGNS

Continued from Page 2

"If I can afford certain things, I'd just as soon spend money on having good treatment."

Such testimony from satisfied customers cheers American Medical International, which will operate ten private hospitals in Britain by next year. But native health care planners often share the concern expressed by Hugh Elwell, a health care consultant: "There is a danger that, as the private sector grows, a two-tier health care system could develop."

Such a disparity is already apparent in the nursing staff in the public and private sectors. Though largely trained at public expense, as are British doctors, many of the more talented and skilled nurses work only in the private sector for wages higher than those of the NHS.

(New York Times, 11/2/81)

CRIB DEATH LINKED TO HORMONE LEVELS

Findings of unusually high hormone levels in babies stricken by sudden infant death syndrome may pave the way for a simple blood test to identify infants in danger of crib death, researchers say.

According to a study by Drs. J. Tyson Tildon and Marlo Chacun published in the November issue of the *Journal of Pediatrics*, autopsies of 50 victims of the mysterious syndrome showed that 44, or 88 percent, of the infants had abnormally high levels of a thyroid hormone called triiodothyronine, or T-3.

Dr. Tildon, who heads the University of Maryland's Sudden Infant Death Syndrome

Institute, said the discovery of the high T-3 levels of the victims, sometimes four times greater than those of babies in the study's control groups, marked the first time researchers had found a link to the syndrome that could be detected in the bloodstream. About 7,000 infants die from the syndrome each year. Thirty to 50 percent of all infant deaths in the U.S. are attributed to the syndrome.

Researchers are now trying to develop blood tests that could be used to determine T-3 levels of living infants. Dr. Tildon emphasized that scientists do not yet know if the high levels of T-3 caused the syndrome or simply indicated other conditions behind the sudden deaths.

(N.Y. Times, 11/6/81)

PROPRANOLOL HEART ATTACK TRIAL COMPLETED

A recent study by the National Heart, Lung, and Blood Institute (NHLBI) has found that beta-blockers such as propranolol may reduce mortality after myocardial infarction by as much as 26 percent.

Previous European studies had shown that the drug may lengthen the lifespan of heart attack patients, but they were slow to gain recognition in the U.S. where the use of beta-blockers was thought to be counterindicated in the treatment of myocardial infarction.

The results of the NHLBI study, recently published in the *Journal of the American Medical Association*, have made headlines in the American media. The report describes the findings of a multicenter experiment in

which 3,800 men and women who suffered heart attacks were maintained on either propranolol or a placebo.

Life table analysis of the randomized, double-blind test showed that the group receiving the beta-blocker experienced a cumulative mortality of eight percent after 30 months while those on placebo had a 10 percent mortality from all causes.

An independent board reviewed data from the experiment semiannually to determine whether the experiment should continue. In October the board decided that data sufficiently demonstrated a significant difference in the two treatments and recommended discontinuing the experiment. NHLBI accepted the suggestion and curtailed the experimental trial.

(*Journal of the American Medical Association*, 11/6/81)

INCREASE IN HEALTH SPENDING BIGGEST IN 15 YEARS

Nearly \$1 of every \$10 spent by Americans in 1980 went to health care, according to a recent government study.

The study, conducted by the Health Care Financing Administration, also found medical costs growing at a pace far faster than the whole economy. According to the study, America's 1980 medical bill was \$247 billion, an increase of 15.2 percent from the 1979 figure and the biggest rise in 15 years. In contrast, the gross national product increased 8.8 percent in the year.

Inflation, population growth, greater use of health services, more doctors visits and more surgery were reasons

for the increase, according to the administration, a division of the Department of Health and Human Services.

According to the study, the health care bill averaged out to \$1,067 per person. Federal, state and local governments spent \$450 per person or 42 percent of the total.

Talented employees sought

Staff employees who are musicians, dancers, artists, cooks, writers, decorators, or who possess other creative talents and innovative ideas, are needed to help plan and participate in the Pre-Founders Day Kickoff celebration on Friday, Feb. 19.

The Founders Day Committee, composed of 15 staff employees, has proposed several activities for the day. These include the sale of

The figures, published in the fall issue of the *Journal Health Care Financing Review*, showed that Americans in 1980 spent about \$99.6 billion on hospitals, \$46.6 billion on doctors, \$20.7 billion on nursing homes, and about \$79 billion on dentists, drugs and medical supplies.

(New York Times, 10/31/81)

authentic food dishes prepared by various ethnic groups and sold at minimum charge in decorated booths. Instrumental chamber ensembles and dancers will begin the festivities and perform throughout the day.

Staff persons with talents, abilities and time are needed to help make the "Kickoff" a success. Interested persons may contact Lucia DeLeon at x-2880 (after 2 p.m.).

Financial Aid Column

Entering Interviews

Any student receiving financial aid for the first time in 1981-82 should have attended one of the entering interviews held during the Fall Quarter. Students who did not attend one of these sessions must make an appointment to see a counselor. This should be done before the Winter Quarter. Each interview lasts approximately one hour.

Budget Surveys

Budget surveys were sent to financial aid recipients on Nov. 10. Students should complete this and return it as soon as possible. This survey will be one of the components used in establishing a financial aid budget for the 1982-83 school year.

Application for 1982-83

Financial aid applications for the 1982-83 school year will soon be available and are due back by Jan. 15 for continuing students. Announcements will be posted in the student affairs offices and around campus as soon as forms are ready to be picked up. The announcement will also appear in this column.