

# SYNAPSE

## Embargo affecting health in Nicaragua

By Charles Piller

Ana Calderon, age four, sat listlessly on a bare plastic mat at the public hospital in Chinendega, Nicaragua, about 25 miles south of the Honduran border. She had just come out of an acute asthma attack. She was lucky to be alive.

Bernarda Molina, the intern treating her, explained how the U.S. trade embargo against Nicaragua now bears on the hospital.

Ana's asthma attack was particularly frightening, said Molina, because the emergency room only had one oxygen tank, and another asthmatic was suffering an attack simultaneously. The tank was passed back and forth between the old man and the girl.

Since the embargo began May 7, the bronchial medicine Ana will need after her

discharge has been increasingly unavailable at regional pharmacies. She will be back in the hospital soon, Molina said, perhaps in a few days.

The trade sanctions specifically exempt transfer of medical supplies and equipment. But Ana Calderon's experience, according to the Red Cross, the United Nations' Pan American Health Organization and Nicaraguan government officials, is part of a disturbing trend. The embargo is eroding health care, they say, by adding to existing shortages caused by the war.

Over the past few months, according to Dr. Adolpho Beteta, a Red Cross official in Managua, shortages of medicines of all kinds have reached critical proportions.

He said the Red Cross can no longer

**continued on page 8**



PHOTO BY CHARLES PILLER

Above, health workers and a local militiaman (center) from the small mountain town of La Trinidad, north of the capital Managua, describe an attack last August on their health center. The center's pharmacy was destroyed.

## Malpractice challenge — criminal penalties

*Editor's note: In the following article — part one of a two part series — Senior Associate Editor James Glauber discusses the notion of criminal negligence in medicine. This week, he covers the confusing and controversial question of how gross negligence in malpractice is defined, and whether physicians can legitimately be accused of criminal malpractice. Next week, he will explore how medicine polices itself and whether it is doing an adequate job of eliminating the causes of malpractice.*

By James Glauber

Libby Zion walked into New York Hospital last March with an ear infection. She did not leave the hospital alive. A series of misdiagnoses, contraindicated prescriptions, and inattention led to her death.

Her outraged father, Sidney Zion, is not content with a cozy financial settlement for his daughter's death. He wants the responsible physicians prosecuted for criminally negligent homicide.

His outrage is directed at what he considers the wanton disregard displayed by the medical staff during the events mounting to his daughter's "murder." Zion contends that only when physicians are held criminally accountable for "white coat crime" will such episodes be prevented.

Historically, criminal prosecution of physicians is rare. The reason was made

clear in the case of death resulting from criminal abortion. An Idaho state court argued that criminal responsibility for malpractice is justified only when the negligence is "so gross as to amount to recklessness. Mere inadvertence," it continued, "would not suffice to create criminal liability."

The last successful criminal prosecution for good-faith medical treatment occurred in 1905. A physician was convicted of manslaughter for an operation in which he made large rents in a patient's uterus and pulled her intestines through them. The court found him criminally negligent due to his gross ignorance of the facts of surgery.

The line between such ignorant recklessness and "mere inadvertence" — that is, between gross and simple negligence — is not easy to draw. As San Francisco malpractice attorney Daniel Kelly puts it, "Gross negligence is the difference between being negligent and being damn negligent."

Criminal prosecution for this sort of gross negligence is only clear-cut in rare instances when the law has been violated. Such violations include performing surgery while intoxicated, prescribing unapproved medication or, in Kelly's words "purposeful deviation from standard medical practice." But short of clear-cut violations, the circumstances warranting criminal prosecution are vague.

Medical malpractice has traditionally been included within tort law — a branch of jurisprudence that deals with damage or injury suffered without any violation of the law. Since harm resulting from malpractice is generally unintended, its litigation is geared towards compensating the victim or the victim's family.

Criminal prosecution, on the other hand, seeks to punish or rehabilitate the guilty party. Punishment also protects society from those posing some danger to it. The consistently negligent physician may fall within this latter category.

The situation becomes murkier with the physician once found grossly negligent.

According to Albert Jonsen, UCSF Professor of Ethics, "There are not a lot of bad people in medicine. There are a lot of incompetent doctors. If the malpractice system worked well and really functioned ideally, which it doesn't and never will, what it

should do is penalize incompetence so severely financially that they would give up the business."

But the financial burden of malpractice does not directly fall upon the responsible physician. The physician must pay high

malpractice insurance premiums which, in turn, are reflected in the high price of health care. The only clear profit in this system goes to insurance companies.

**continued on page 8**

## Conference addresses nuclear-age psychology

Approximately 150 people met at Cole Hall Oct. 19-20 for a symposium on the psychosocial effects of the nuclear threat. "Society, Self and Nuclear Conflict," sponsored by Langley Porter Psychiatric Institute, brought together mental health professionals with a more general audience.

The program included formal presentations by well known scholars in the field as well as small group discussions.

Old ways of conceiving war need to be discarded by our leaders, according to keynote speaker Dr. Jerome D. Frank, professor emeritus of psychiatry at Johns Hopkins School of medicine. Conflict, caused by groups seeking to expand their power, had previously been settled through violence.

The mutual destruction assured by nuclear weapons means that war can no longer serve as an international arbitrator, says Frank. Cooperative efforts to build trust and a sense of international community are the psychological prerequisites for abolishing war, in his analysis.

New ways of thinking were advocated by many of the speakers. Richard Lieberman of UCSF's department of psychiatry observed that international relations are characterized by inflexible and uncreative conceptions of action. He attributes this to our intolerance for ambiguity and uncertainty — a problem which can be overcome with training.

Ofer Zur, an instructor at the Institute of Integral Studies, said that war divides the population by sex. Women are less supportive of destruction and killing than men. But

Zur said his research indicated that women's support for war increases when it is justified as helping "oppressed and vulnerable human beings." Men are more attracted than women to legal grounds which seek to justify war.

Other speakers addressed the different ways children are socialized into violent male roles and more passive female roles. The common recommendation of the speakers was to change how children grow up in order to encourage the adoption of more feminine self-images by males.

The unconscious was also a major theme of the conference. Robert Lifton, distinguished professor of psychiatry and psychology at the City University of New York, drew from the writings of Japanese atomic bomb victims for his analysis of "end of the world imagery." It is important that people "imagine their own death in order to live more fully . . . and take steps to maintain human existence," according to Lifton.

*For a critical analysis of the conference turn to page 7*



BY WILLIAM DUTTON



## GSA

## Graduate Students' Council meeting

The next graduate students' council meeting will be held on Wednesday, Nov. 6 at 5 p.m. in the chancellor's conference room (S 118). Dinner will be provided.

## GSA Publications Board slots need filling

Three positions on the Publications Board are open to GSA members. At least one position must be filled by a student from the School of Nursing. The Board of Publications governs and publishes Synapse, as well as the UCSF Orientation Manual. The positions are for one year, starting in January. If you are interested, please contact Diana Darnell, president, internal affairs, at x2233.

## Student regent applications

1986-87 student regent applications are now available and must be completed and returned to the Chancellor's office (S-126) NO LATER THAN 5 p.m., Friday, Nov. 8. Call GSA for applications and further details.

## Financial Aid

## Last chance orientation

The last scheduled Financial Aid Orientation is set for Friday, Nov. 1 from 12:10 to 1 p.m. in HSW 301. All first-time UCSF financial aid recipients are required to attend an orientation session. For those students who do not attend the fall session, holds will be placed on winter quarter financial aid checks. If you absolutely cannot attend this session you will need to come by the Financial Aid Office and give us your name, phone number, and days and times you are available for an interview session.

## Report your earnings

Many students underestimate their projected earnings when applying for financial aid because they are unsure of finding employment that will suit their schedules. This is fine as long as revised projections are reported when employment is secured. Please come into the office and fill out a Change in Earnings form whenever your situation changes in order to avoid becoming overawarded and being required to repay aid received.

## A defense against cancer can be cooked up in your kitchen.

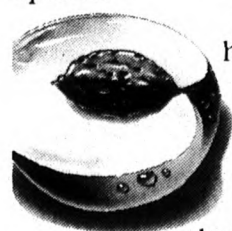


Fruits, vegetables, and whole-grain cereals such as oatmeal, bran and wheat may help lower the risk of colorectal cancer.

Foods high in fats, salt- or nitrite-cured foods like ham, and

There is evidence that diet and cancer are related. Some foods may promote cancer, while others may protect you from it.

Foods related to lowering the risk of cancer of the larynx and esophagus all have high amounts of carotene, a form of Vitamin A which is in cantaloupes, peaches, broccoli, spinach, all dark green leafy vegetables, sweet potatoes, carrots, pumpkin, winter squash and tomatoes, citrus fruits and brussels sprouts.



Foods that may help reduce the risk of gastrointestinal and respiratory tract cancer are cabbage, broccoli, brussels sprouts, kohlrabi, cauliflower.

fish and types of sausages smoked by traditional methods should be eaten in moderation.

Be moderate in consumption of alcohol also.

A good rule of thumb is cut down on fat and don't be fat.

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## Announcements

## Nurses given recognition

Students in the School of Nursing congratulate members of their faculty: Dr. Carroll Estes, her associates, and Dr. Gretta Styles. As noted in Synapse Oct. 3, the Institute for Health and Aging, founded by Estes and located in the School of Nursing, was granted the designation of an organized research unit by the Regents of the University of California.

Styles, dean of the School of Nursing, was selected by Governor Deukmejian to sit on the State Board of Registered Nurses. Styles is highly regarded internationally for her leadership in nursing. We are certain that her contributions will be significant in her new position.

## Impossibility of recognizing genius, Nov. 5

Manfred Eigen, Nobel laureate and director, Max Planck Institute, will discuss the problems of recognizing genius. The program will take place on Tuesday, Nov. 5 at 3 p.m. in Cole Hall. The public is cordially invited.

## Molecular analysis talk, Nov. 5

A seminar will be held on Tuesday, Nov. 5 at 4 p.m. on Molecular Analysis on an Enhancer of Hin-Mediated Site-Specific Recombination. The seminar will be presented by Reid Johnson, division of biology, California Institute of Technology. Place: HSW-302. Any questions, phone Nancy Craig, x5157.

## Integrate systems talk, Nov. 1

Paths of Healing and Wholeness presents "The Integration of Western and Other Systems: A Personal Vision," by Dr. Shirley B. Scott — an approach to healing may well be an important model for healing in the new age. Will be presented on Nov. 1, from 12 to 1 p.m. For further information, call Tom Mapp 666-1995.

## A "Mini epidemic" of Malaria

Returning travellers invariably bring home souvenirs of their travels. Recently, however, some have returned with unwanted reminders of their foreign adventures. Within the last month the Student Health Service has encountered two cases of malaria requiring hospitalization in each case.

In both instances the patients reported failure to take malaria suppressive prophylaxis according to the recommended schedule. Because of the increase in travel to underdeveloped areas of the world by our students, proper predeparture immunization and prophylaxis need to be emphasized. Students who are planning trips of this nature are urged to allow ample time to complete their immunizations and be fully cognizant of precautions needed for travel in these areas of the world. Student Health Service is happy to provide these immunizations at a nominal cost.

## Publications Board positions open

Two positions on the Board of Publications are available for each of the following schools: Dentistry, Medicine and Pharmacy. The Board of Publications is responsible for establishing long-range policy for Synapse. It also publishes the UCSF Orientation Manual. All members of the board are students. Anyone interested in submitting an application should contact the president of his/her respective school's associated student government by Nov. 1 (e.g. a dental student should submit his/her application, written or oral, to the president of Associated Students—Dentistry). The positions are for one year, beginning in January.

## Chicano/Latino Medical Student Assoc., Nov. 9

The statewide fall legislative meeting of the Chicano/Latino Medical Student Association will be held in HSW 303 from 9:30 a.m. to 3:30 p.m. on Saturday, Nov. 9. The meeting includes a discussion on "Changes in Health Care Delivery." All interested students are invited. For more information, contact David Compa at 759-1650.

## Central America Health Rights Group meets, Nov. 7

The Committee for Health Rights in Central America (CHERICA) will meet at 7:30 p.m. on Thursday, Nov. 7 at 1267 Page St. For more information, contact Lynn at 558-8678.

## Dance!

The Chinese Student Association is sponsoring a dance on Saturday, Nov. 9, 9 p.m. to 12:30 a.m. in Millberry West Lounge. All are welcome! \$5 includes refreshments.

## Affirmative action faculty awards

Faculty development awards, as specified by Systemwide Administration, are "intended primarily to provide support for talented junior faculty who hold ladder appointments, but who may encounter unusual obstacles in developing the substantial records in research and creative work necessary for advancement to tenure." Consequently, the first priority of the faculty career development program is to provide assistance to minorities and women, although the program is open to any junior ladder rank faculty member whose application describes unusual obstacles. The deadline for applications is Nov. 7, 1985. More information is available through Academic Services, SSB-Lower Level, x2218.

## Instructional improvement proposals

Faculty and students are invited to submit proposals that meet any of the following goals for the 1985-86 instructional improvement projects:

- Improvement of existing instructional programs;
- Development of new programs;
- Introduction of experimental approaches to instructional content, processes, or resources;
- Teaching evaluation activities.

Applications are available from Academic Services, SSB-Lower Level, x2218. The deadline is Nov. 7, 1985.

## American peace test

To focus attention on the urgency of stopping U.S. nuclear testing while the Soviets maintain their moratorium, Northern California's will be present at the Nevada Nuclear Test Site on Oct. 26 and 27. On the eve of the Geneva summit conference between President Reagan and Soviet leader Gorbachev, San Franciscans will hold a candlelight vigil at Grace Cathedral, 1051 Taylor, at 7:30 p.m., Nov. 18. For more information on these activities, call the San Francisco Freeze office at 621-0858.

## Telephone system cut-over, Nov. 8

UCSF, including Langley Porter Institute, will be switched to a new telephone prefix — 476 — on Nov. 8. This will replace the old prefix, 666. Other changes, in force at that time, are as follows:

- To dial any campus number, use 6 and the present four digits. (LPPI use 67 and the present three digits.)
- To dial off campus numbers in the 415 area code, dial 9 plus the seven digit number.
- To dial off campus in other area codes, dial 9, plus area code and seven digit number. The 6 and 8 access codes and the ATSS dialing system will no longer be used.
- To transfer calls, depress switch hook button once, wait for dial tone, dial new number, wait for ring, replace handle.

# synapse

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

Editor in Chief: Paul H. Katz  
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ISSN 0740-2619

Announcements and letters should be submitted to Synapse, c/o Millberry Union Central Desk before 11 a.m., Friday, the week before publication. Letters shall be published at the discretion of the editors and must be signed; however, writers may have their names withheld upon request. Subscriptions may be obtained through the Synapse office for \$8 per academic year. Synapse seeks to act as a forum for responsible

dialogue between the authors and readers of the campus community, and to represent the spectrum of belief and action. Articles and columns published in Synapse represent the viewpoint of the author and not necessarily that of the editorial staff. Unsigned editorials reflect the majority viewpoint of the staff and not necessarily that of the Board of Publications or of the University of California.



# CURRENTS

## Synapse Features

### UCSF murals show history of healing

By Joseph M. Ho

Although the 1930s were gloomy years of nationwide depression, art flourished, at least in certain parts of the country. For instance, muralists were subsidized by San Francisco's Federal Arts Program, a part of President Franklin Roosevelt's New Deal. They created frescoes which have since then been illuminating various city landmarks such as Coit Tower.

UCSF is privileged to house 12 of these frescoes in the HSW tower and Toland Hall. They are cultural enrichments for those who still manage to find the time and interest to take note of their surroundings.

These murals by Bernard Baruch Zakheim have been faithfully preserved by campus administrators. They capture the interplay of events and individuals who contributed to building the renown and stature that UCSF is enjoying today.

A fresco (Italian word for "fresh") is the product of painting on moist plaster with pigments ground in water. The paint is then absorbed by the plaster to become part of the wall.

One advantage of the technique is that the pigments do not oxidize, but grow

richer with age. The plaster has to be made fresh for the day and the entire process is complicated and time-consuming. The colors must be brushed on swiftly and precisely before the plaster dries — adding a quality of spontaneity.

Zakheim's works differ from others in that marble dust, instead of sand, was mixed with the lime. For the UCSF murals, he chose to use earthen colors — including Venetian red, burnt umber and yellow ochre.

Born into a prosperous Jewish family in 1896, Zakheim left Poland for the United States in his early twenties. In 1930, he developed an interest in frescoes through working with the muralist Diego Rivera in Mexico.

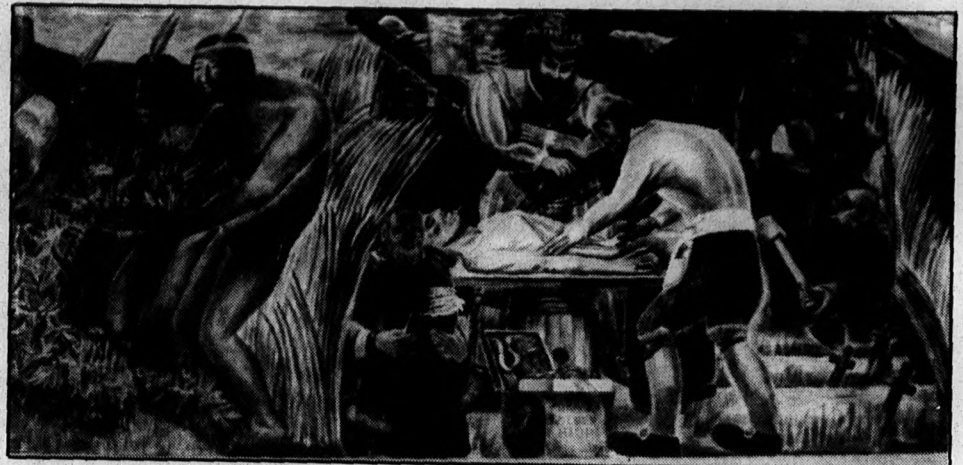
Around 1934, after winning commissions to paint the "Jewish Festival," "Growth" and "Community Spirit" in San Francisco and to work with other muralists on the Coit Tower project, he gained enough recognition to be invited to embark on the UCSF project. It was completed in 1938.

The two large frescoes which now sit conspicuously at the back of HSW 300 and 301 had resided in the original Cole Hall until the old medical school building was demolished in 1967. They depict, in a highly dramatic and expressionistic fashion, ostensibly exclusive bases for healing — science vs. mysticism.

One of them shows medicine as practiced in the medieval Europe when surgery was done without the benefit of anesthesia. Psychiatric patients are flagellated to drive out demons and high priests do no more than fumbling with their hapless patients.

Also seen are some tropical islanders using sharpened rocks as crude surgical instruments.

These early "irrational" attempts to heal, are portrayed powerfully — haunting the



PHOTOS BY DAVID CHEUNG

Murals in Toland Hall and HSW were painted in the 1930s.

modern observer with indelible images of pained and frightened looks. "Rational" medicine derived from scientific principles is depicted with a more relaxing tone in the adjoining room.

Modern medicine is shown to be compartmentalized, practiced by competent specialists in aseptic conditions and backed up with scientific research.

Surgeons perform on anesthetized patients in sterile surroundings, pediatricians attend to the young, a psychiatrist counsels his patient humanely and modern equipment aids in diagnosis.

In this mural, the artist cast real people — his friends and campus figures — in their respective roles, including Dr. Chauncey Leake, the founder of the dept. of pharmacology and a loyal advocate of Zakheim.

Aside from its aesthetic functions, this mural also sends out the comforting message to students already spellbound by high-tech science, letting them know they are in the right place doing the right thing.

While the HSW murals carry the motif of medical practices, the ten frescoes in Toland Hall amphitheater include a history of California. Starting with Indian days, they cover the Spanish exploration and pioneer settlement on 14½-foot-wide-by-4½-foot-

high panels.

Some of these echo the HSW murals, with a particular focus on how people from UCSF have contributed to society at large.

One vividly shows the outbreak of bubonic plague in the early 1900s — the mixed reaction of the politicians and public health leaders, and corruption and bravery that stemmed from the epidemic.

Other panels feature such household names as Langley Porter and Herbert Moffitt in laboratory settings, Indian ritual dance at childbirth, Californians' vaccination against smallpox and the Hooper Foundation's battle against botulism. The last panel symbolizes the achievements of science and the often unintended destructiveness it brings about.

A final note on the frescoes in Toland Hall: Since the completion of the murals in 1938, all went well until Chauncey Leake went on an extended leave in 1948.

Some instructors charged that the murals were too distracting to students and succeeded in keeping them veiled with wallpaper for the next fifteen years. When Leake returned to UCSF in the 1960s, he was instrumental in having the frescoes restored with \$14,000 raised by the Alumni-Faculty Association — undoing a Philistine act.

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# El Mansour — out of the ordinary

By Jeffrey S. Glenn

Walk through the door of El Mansour and you suddenly find yourself 10,000 miles away in a Moroccan tent. Padded cushions and leather ottomans surround a series of low wooden tables. North African tunes and enticing scents of the kitchen pervade the air.

There is no silverware on your table. Here you eat Moroccan style, with your hands. To this end, a white bath-sized towel is offered and serves both as a bib and a napkin throughout the meal.

The menu is rather simple. The only real choice is your main dish. While this could be seafood or rabbit, I recommend at least one lamb dish per party — it is particularly well-prepared. There is one price (\$13.75-15.75, depending on the main dish) which includes everything.

Your selection made, the first order of business is to wash your hands. This is accomplished at the table under a stream of warm water poured by the waiter over an elaborately sculptured receptacle.

A lentil soup soon follows. Simply put, it is thick, spicy and terrific. A delightful

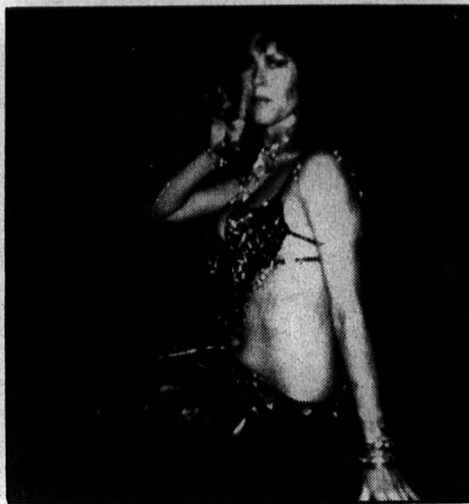


PHOTO BY DAVID CHEUNG

**The attractions at this Moroccan restaurant include more than food.**

blend of cumin, tumeric and coriander season both the soup and the ensuing Mohammed V salad. The latter consists of two coarse purees (eggplant and tomato), carrots and marinated cucumbers. The

marinade has a bit too much vinegar but the eggplant is a success.

The next course is a *Bastela du Chef* — a Moroccan version of a chicken pie. The well-seasoned fowl is baked inside a thin flaky pastry shell and then topped with powdered sugar. This is an excellent dish, the only potential improvement being the provision of a sharp knife to avoid the shredding and crumbling which occurs as you tear it apart, down to bite-sized pieces.

Those who judge Moroccan cuisine by the quality of the couscous may be disappointed here for better is to be had. The traditional palm hearts are absent and the other vegetables are a bit over-cooked and bland.

On the other hand, the lamb is a great choice. I am particularly enamored with the honey and almond rendition. The combination of meat with sweetness affords a pleasant result and plays on the theme of the previous *Bastela*. To cut somewhat the heaviness of this dish, however, the acidity of the Chicken with Lemons works quite well.

A rose water washing of the hands follows the main course — particularly helpful if you

indulged in the honey.

For dessert there are fried bananas (okay if they are your thing), *Chabbakia* (a "Moroccan pastry" otherwise known as deep-fried leftover batter from the bananas



and best left on the plate) and mint tea (sweet but nice). The tea is poured from a pot held a good three feet over the glass. Don't worry, the waiters have good aim.

Much emphasis is put here on creating a festive ambiance in which to enjoy your meal. Besides the ritual hand-washings and stunt-happy waiters, there is a belly-dancer who periodically comes in to liven up the tent. If you are looking for a step out of the ordinary, call 751-2312 for your reservations.

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## 1986-87 UC Student Regent Application Deadline

**Applications must be in the Chancellor's Office, S126, no later than 4:30 p.m. on Friday, Nov. 8, 1985.**

Applications are available at the following campus locations:

- Associated Students (ASUCSF), MU 249
- Chancellor's Office, S126
- Graduate Students' Association (GSA), MU 244
- Health Sciences Special Services Program, 1322 Third Ave.
- Millberry Union Central Desk, MU Lobby
- Student Relations, 1310 Third Avenue
- Registrar and Admissions, Upper Level, Student Academic Services Building
- Student Affairs, School of Dentistry, S619
- Student Affairs, School of Medicine, S245
- Student Affairs, School of Nursing, N319x
- Student Affairs, School of Pharmacy, U12

The duties of The Regents include overseeing the financial management of the University, its investments, and its property holdings as well as appointing the President of the University, the nine campus Chancellors, the Directors of the major research centers, and the principal officers of The Regents. The Regents also establish policy in areas related to affirmative action, student fees, admissions and financial aid.

The Board of Regents appoints the student Regent on the recommendation of its Special Committee to Select a Student Regent. The student Regent serves as a voting member of the Board and of its Committees.

The student Regent serves for a one-year term commencing July 1. From the time of appointment as a student Regent, but prior to the

commencement of service as a member of the Board, the appointee holds the title "Regent-designate" and is invited to participate in all meetings of the Board and of its Committees, but without a vote.

During the time a student Regent serves as a member of the Board, he or she must be enrolled as a student in good standing at a campus of the University of California for each regular academic term. A student Regent may not concurrently hold any appointed or elective student government position.

The student Regent is reimbursed for expenses incurred for attendance at meetings of the Board and its Committees. All University fees and tuition are waived for the student Regent during the academic year in which he or she serves as a member of the Board,

Direct questions on the Student Regent application process to:  
Rob Clerisse, Director, Student Relations  
(415) 666-4318



# Steadfast determination carries day

Marie, A True story  
Directed by Roger Donaldson  
Starring Sissy Spacek, Jeff  
Daniel, Keith Szarabajka  
Playing at the Bridge Theatre

## By Stewart Mansfield

Marie, A True Story" is a film that pits the determination of one woman, Marie Ragghianti (Sissy Spacek), against a corrupt phalanx of the most powerful political figures in Tennessee.

Marie is introduced in a dramatic opening scene in 1968 that concludes a phase in her life — her unsuccessful marriage — and initiates a new direction. She takes her three children and moves to live with her mother in Nashville.

Here, she enrolls in Vanderbilt University as a double major, while supporting herself and her kids as a waitress in the evenings. As if this was not enough, she also struggles with a desperately sick son, who is struck down by a mysterious chronic lung condition that requires constant vigilance.

These events are dealt with briefly, yet forcefully. They are crucial in establishing the first insight into Marie's single-minded determination in face of adversity — a quality that emerges as a recurrent theme.

Soon after graduating a fortuitous connection with Eddie Fisk (Jeff Daniels), legal counsellor to Gov. Blanton (Don Hood), establishes Marie firmly in the corridors of power as the first female extradition officer.

Behind the easy charm of Eddie Fisk it is increasingly apparent that here dwells a particularly manipulative mind. He sees a greater role for Marie — not for the people of Tennessee, as she believes, but for the pecuniary benefit of the governor and his entourage.

Marie is appointed by Blanton to chair the Parole Board in 1976. The dictates of her conscience in the face of irregular practices and pressures on her to grant particular pardons and clemencies, forge the raw material of this film. She begins to suspect that clemencies are being sold for large sums of money.

Her dedication to what she believes is right leads to an inevitable conflict — first with Eddie and ultimately with the Governor himself. Gentle coercion followed by veiled threats fail to make Marie conform with the status quo. She is left open to more radical and overt methods of persuasion, designed to force her resignation.

As the two sides retrench, Marie becomes increasingly isolated, except for her assistant Kevin McCormack (Keith Szarabajka), who adopts the role of confidant and moral supporter.

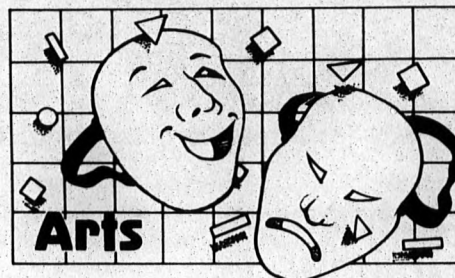
Marie is fired, but responds by filing a law suit against the office of the governor for wrongful dismissal. This sets the momentum for a series of events that conclude with a dramatic courtroom confrontation.

The strength of this film lies in its ability to sweep you up and embroil you in a sequence of events that would not normally de-

mand much of your attention. Director Roger Donaldson consolidates disparate and isolated events, necessary for weaving the backdrop to the story, without losing momentum and focus.

This is accomplished with a tight script and shrewd editing.

The final courtroom scene condenses and pins down the movie's tension. This is cleverly sustained to the final moments when the jury foreman delivers the verdict in a tantalizingly slow, deliberate monotone.



To a large extent a film must rest on its visual images, and one image in particular stayed with me. It was initially manifested as the brightly painted white metal bars rudely slicing across the grim faces of prisoners on death row in the Tennessee State Prison.

This image was later echoed in a hospital as the white bars on the cot of Marie's critically-ill son, whose fate also seemed to hang in the balance. The same rhyme is repeated again as the bright white shafts of light shining through the State Capitol windows into dim echoing corridors — a metaphor of Marie, a prisoner of her conscience as she strolls along those same corridors.

Sissy Spacek is not new to the demands of projecting strong, courageous women. Her performances in "Raggedy Man" and as Loretta Lynn in "Coalminers Daughter" attest to this. Her combination of femininity and vulnerability highlights the fortitude and inner strength that comes to bear in the orbit of such brutish adversaries.

Jeff Daniels as Eddie Fisk masters the synthetic smile, coupled with the vacuous charm of the seasoned political hack. More importantly, he can switch it off and on like a light. This contrasts with Keith Szarabajka, who portrays a slightly zany McCormack with a mix of humor and tragedy.

Don Hood as Gov. Blanton displays such an excessive dose of southern gentility early on, that he leaves one hardly surprised when it fades in adversity to reveal the unpleasantly rough edge of greed and ambition.

Watergate attorney Fred Thompson plays himself in the film, with a not surprisingly verisimilitic panache.

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# Immigration officials "jail" minors

By Gillian Scharff

Jenny Lisette Flores is a 15-year-old Salvadoran girl who was detained for more than 2 months by the U.S. government in a detention camp in Pasadena, Calif. While in detention, Jenny was locked indoors nearly all day long, housed with unrelated adults, given no access to education or recreational facilities and denied visitation with family and friends.

Jenny's story is not unique. She is one of an estimated 2,000 children, ages ranging from 5 to 17 years, being held in detention centers across the country.

Most of these children come from Central American countries, such as El Salvador and Guatemala, to escape the ravages of civil war.

## Analysis

Shortly after crossing the U.S.-Mexico border, they are apprehended by the Immigration and Naturalization Service (INS) and are sent to detention camps.

In a class action suit filed last July, three civil rights groups (National Center for Immigrants' Rights, National Center for Youth Law, and American Civil Liberties Union) charged that the INS is jailing the children in inadequate detention facilities and is holding them for bait to lure their illegal alien parents into turning themselves in.

The INS is holding the children under a

1984 policy that prohibits the release of children on bond to anyone but their parents or legal guardians. The children are not even released to close relatives or to U.S. citizens with legal power of attorney from their parents. The children are held pending deportation hearings, which may take anywhere from a few weeks to a couple of years.

In some instances, the children's parents are not even in this country. Sometimes the parents are here but refuse to come forward for fear of deportation — likely to mean death or persecution.

Most refugees from El Salvador or Guatemala don't even bother to apply for asylum in the U.S. They do not apply because to do so means almost certain refusal and deportation. Only about 2 percent of Salvadoran applications and 1 percent of Guatemalan applications are accepted.

The percentage of acceptance is much higher for refugees from Poland, Afghanistan, the Soviet Union and other countries whose governments the U.S. government disagrees with.

Despite the fact that about 500 people are killed each month in Guatemala, and Amnesty International has proclaimed that country to have the worst human rights violations in the western hemisphere, the INS does not recognize Guatemalans as political refugees.

The story is similar for Salvadorans. Over the past 5 years, approximately 50,000 people have been killed and 500,000 displaced in that country of 5 million people.

Nonetheless, the INS refuses to grant Salvadorans political refugee status.

Thus the parents of the incarcerated children are faced with a cruel dilemma: risking deportation, or allowing their children to remain in the substandard conditions of the detention facilities for an indeterminate period.

U.S. District Judge Edward Rafeedie ruled on Sept. 30 that the INS must provide the children with a statement of their legal rights before it can take action to deport them. Before then, the agency often induced children to sign voluntary departure forms, threatening them with periods of long imprisonment if the papers were not signed.

Two other court actions have been made on behalf of the children. On July 19, U.S. District Court Judge Robert Kelleher ordered the INS to release Jenny Flores, and another Salvadoran girl, Dominga Hernandez, to the custody of court-appointed temporary guardians.

The children still face deportation hearings, but they will at least have a more wholesome living environment during the interim period. On Oct. 1, two attorneys for the incarcerated children were granted their request to inspect the detention facilities in Pasadena, Calif., and Laredo, Texas.

It is hoped that the class action suit, filed on behalf of the 2,000 children, will obtain the release of the remaining children to court-appointed guardians. If the children are released, those who do not have legal family members in this country will need sponsors.

Advocates for the children are compiling



BY WILLIAM DUTTON

lists of legal and health care professionals who would like to volunteer their services on behalf of the children. If you wish to help or would like more information, please contact: Alice Bussiere, National Center for Youth Law, 1663 Mission St., 5th floor, San Francisco, CA 94103 (415) 543-3307.

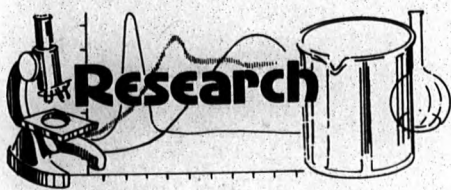
Gillian Scharff is a sanctuary worker who is assisting the National Center for Youth Law — which provided much of the information for this article. She is also assistant chaplain at the Landberg Center for Health and Ministry at UCSF.

# Lab pursues oncogenes to unravel cancer's mysteries

By Logan McOmber

We can thank the military — in part — for an ever-so-slightly better understanding of cancer. Manfred Schwab, a microbiologist with the UCSF Hooper Foundation, decided nine months into a military career that biological science would be a better choice.

Prior to the service, Schwab thought he wanted to teach Latin and Greek — having studied the languages for 15 years. But he turned from both classics and uniforms to



help unravel the extremely complex interplay of events we call cancer.

For more than a decade Schwab had worked with two species of fish that, when hybridized, show the emergence of cancer as a "dominant" trait in a Mendelian fashion. He believes that there is the loss of regulation of a certain gene. That gene overproduces what it is normally set up to synthesize. The product has nowhere to go except where it is not supposed to be — causing cancer.

Schwab intended to follow up this question here. But, as in life, so in science: when

a more interesting project comes up, the original goes to the back burner. In collaboration with other UCSF researchers, he began working on neuroblastomas — cancers that invade nervous tissues of children. Their research has resulted in articles such journals as Nature and Science.

What made the work possible was the discovery, about 10 years ago, of oncogenes, which all people both have and need for gene regulation. They are called oncogenes because they have the potential to go wild — replicating madly — and as a result, causing cancer.

In neuroblastoma, Schwab and the other researchers repeatedly find the hyper-replication, or amplification, of a particular gene called "N-myc."

The phenomenon of amplification and its association with cancer is being studied in mice, fruit flies and yeast, as well as human beings, mainly because it is so complicated in humans. Ideally, cancer in yeast will be simpler — or at least easier to understand.

How does N-myc fit into the cancer picture? According to Schwab, our picture of cancer is far from complete. The hypothesis at this point is of at least a three-part process: initiation, progression, and the stages leading up to metastasis, when cancer spreads from its site of origin.

N-myc fits into stage one. After initiation and progression, the effect of N-myc is to somehow affect the normal growth of cells



PHOTO BY DAVID CHEUNG

Manfred Schwab

so that they begin to multiply in a helter-skelter fashion. N-myc has been there all along, behaving nicely, but it's only in the cancer process that it changes from normal to superabundant production.

Regulatory growth genes such as N-myc "turn off" if put into cells. But if transferred to a mouse, they "turn on," causing a tumor. If then removed from the mouse and returned to cells in the culture, Schwab says, it turns off again.

Why does the oncogene turn on and off? Schwab replies only with a mischievous twinkle of the eye and an invitation to join the many researchers around the world in the quest to understand the elusive mechanisms of cancer.

Logan McOmber is a second-year medical student.

# Nuke conference ignores key political issues

By Cheryl Hall and Katarin Jurich

The conference on Society, Self and Nuclear Conflict held here Oct. 19 and 20 focused on social and psychological aspects of nuclear war — but at the expense of addressing the role of activism in balancing the nuclear equation.

Instead, physicians, psychiatrists and other mental health professionals, and students got a steady stream of interesting, but sometimes misleading intellectual analysis.

The first day of the conference was billed as an examination of the psychological and social roots and dimensions of nuclear conflict. But the psychiatric perspective was the sole framework for analysis.

Social and political considerations and factors in the individual's experience of the nuclear threat were consistently excluded in favor of psychological factors alone.

This was evident in the keynote address, when Jerome Frank, professor emeritus of

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# Criminal liability

continued from page 1

The cost of malpractice insurance has in no small part contributed to the current economic crisis of the health care system. Efforts to control premiums have targeted the monetary awards of malpractice settlements.

Intensive lobbying by doctors and the insurance industry resulted in the Medical Insurance Compensation Reform Act (MICRA) of 1975. This law limits to \$250,000 the award for pain and suffering in malpractice cases.

Claiming that it is impossible to quantify

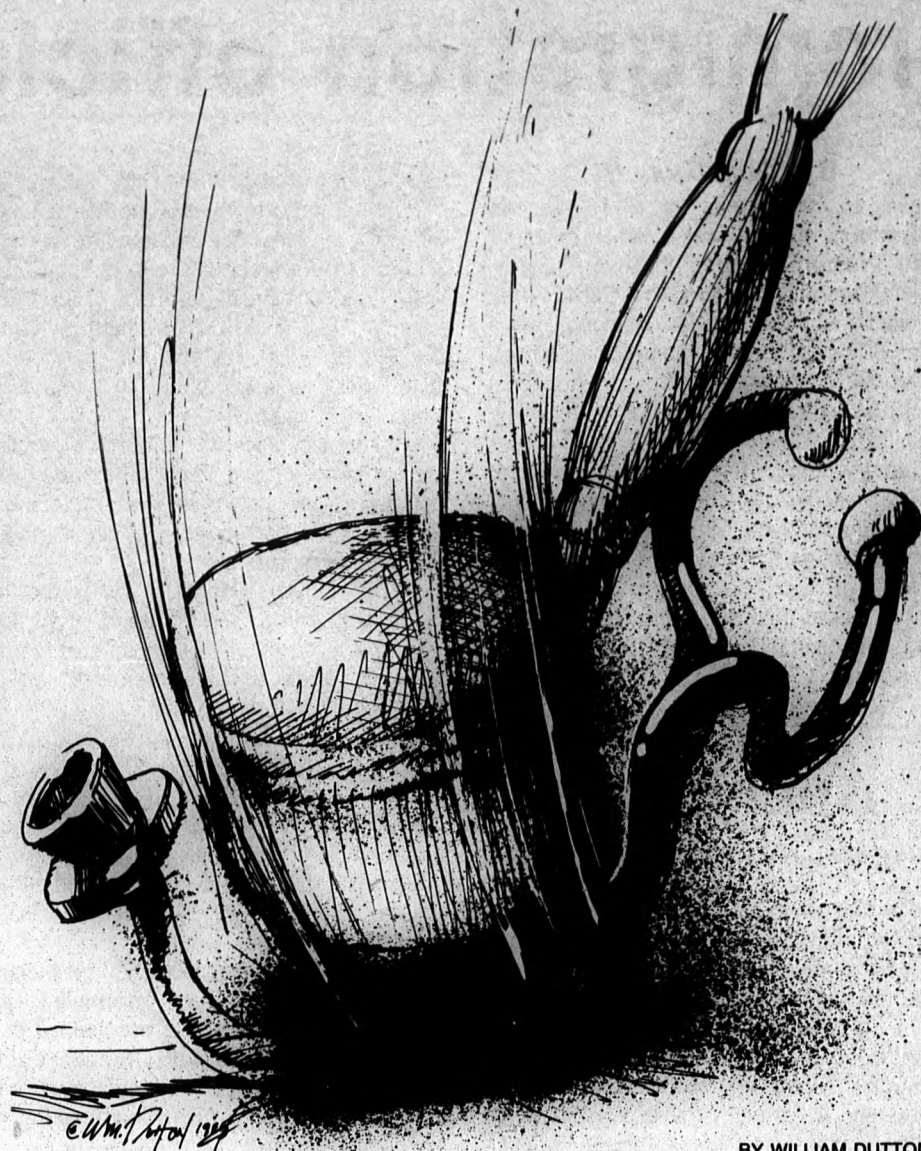
ly, who represented Fein, finds MICRA unconstitutional because it treats people unequally under the law.

He poses the case of a surgeon who paralyzes a patient on the operating table and then driving home paralyzes someone by rear-ending her. In the first case the most that the victim can collect is \$250,000 for pain and suffering, but in the latter case there is no such limitation.

"So we've singled out one particular segment of society. We treat them differently and treat the victims differently," Kelly concluded.

The 1975 law also placed a limit upon the fee lawyers can collect on a contingency basis in a malpractice suit. Kelly acknowledges that this may dissuade some attorneys from accepting malpractice cases. "It may lessen the amount of malpractice cases being brought but it doesn't remedy the situation of malpractice. So it's remedial in the sense that it's merely going after the payout and not the source of the problem," he said.

Few would say that MICRA attacks the source of malpractice. The issue is whether the financial burden of malpractice should be used as a means of deterrence or as an agent of punishment. Surely there is no incentive to commit malpractice. Rather, incompetence generally underlies gross malpractice. At issue is whether incompetence can be restrained by the negative consequences it creates.



BY WILLIAM DUTTON

## Analysis

pain and suffering, advocates say that creating a ceiling discourages frivolous malpractice claims and the spiraling costs they create. Legitimate cases, they say, are still fairly compensated.

Critics argue that MICRA is patently unfair. It is designed, they counter, to protect physicians and profit insurance companies, whose combined legislative influence is considerable.

Last week the U.S. Supreme Court left the law intact by refusing to review the case of Lawrence Fein. Fein had challenged MICRA after his \$500,000 award was halved by a trial judge to \$250,000.

Physicians are the only group that enjoys such an award ceiling in liability cases. Kel-

# Nicaragua health care

continued from page 1

stockpile emergency supplies due to rising demand for everything from antibiotics to sutures. His biggest fear is that Nicaragua's state-of-the-art central blood bank, newly installed by the Red Cross, will be difficult to maintain.

The Red Cross provides most of Nicaragua's emergency medical transport. Despite the embargo exemption, Beteta said his agency has had increasing difficulty getting essential supplies, particularly parts for U.S.-built ambulances.

Many of the approximately 50 health facilities damaged or destroyed during attacks by the contras — U.S.-backed counter-revolutionaries — have remained closed due to supply problems, according to Nicaraguan authorities.

Both the embargo and U.S. efforts to end international lending to Nicaragua have further reduced scarce foreign exchange needed to purchase medical supplies, according to Dr. Miguel Marquez, local director of the Pan American Health Organization.

He said the embargo also causes expensive shipping delays by forcing cargo through indirect shipping routes via other Central American nations, Canada or Spain.

"Shipments that normally take about 15 days on the average," Marquez said, "now take about 45 days."

Robert Levine, spokesperson for the U.S. Treasury Department which enforces the embargo, denied that any intermediate stops between the U.S. and Nicaragua are required.

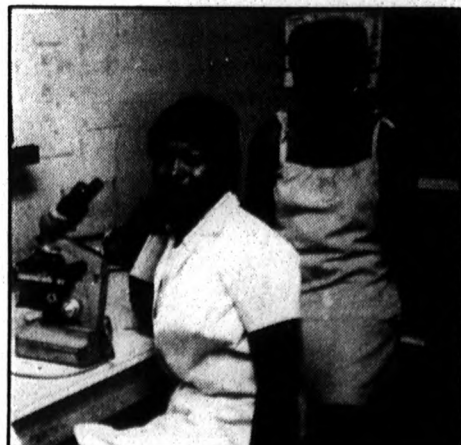


PHOTO BY CHARLES PILLER

Lab workers in the public hospital in Chinendega are forced to make due with only two microscopes—due to a lack of proper light bulbs.

Nevertheless, Nicaragua's Vice Minister of Health Dr. Rigoberto Sampson said the increased time and costs caused by the embargo have caused him to seek alternatives to U.S. medical supplies whenever possible — although establishing new trade relationships takes time. He added that U.S. companies have also stopped offering credit, further delaying purchases.

Nicaragua is weighed down by its already heavy investment in U.S. medical supplies and equipment. Spot checks at private and public hospitals and clinics in Managua and other towns revealed almost exclusively U.S.-manufactured laboratory instruments, many of which were not working.

In Chinendega, two out of four microscopes were out of use for want of correct lightbulbs, a typical problem. The hospital director, Dr. Ricardo Cuadra, said "everything has gotten worse since May, 1985. Particularly those things basic to the work — scalpel blades, sutures and gloves."

This lack of supplies has sharply curtailed elective surgery across the country, according to the Health Ministry.

Calling the embargo "more symbolic than

real," State Department spokesperson Gregory Lagana strongly disputed these claims.

"The embargo is not very tight. The Nicaraguan economy has been in large part wrecked by the Sandinistas anyway." He claimed that Nicaragua can get most medical machinery and pharmaceuticals from U.S. subsidiaries or other companies in Latin America.

Sampson and others counter that in some cases U.S. subsidiaries do not stock vital supplies, or are unwilling to deal with the Nicaraguans.

Cuadra says the Costa Rican affiliate of U.S. pharmaceutical giant Roche Laboratories, for example, will no longer sell to his hospital. As a result, he says he is forced to pay more and wait longer for European goods.

Lagana dismissed comments from the Red Cross as tantamount to those from "a Sandinista Party member," because "the Sandinistas virtually took over the Red Cross."

Jose Aponte, international services officer for the U.S. Red Cross National Head-

quarters in Washington, confirmed that as an independent voluntary organization, each national Red Cross agency must be recognized by the government. But Aponte said that no national branch has ever been accused of violating the international principles of impartiality and neutrality.

Beyond the sparsely stocked hospitals and pharmacies, the embargo may be affecting Nicaraguans' health in other ways.

Because those U.S. manufactured pesticides most effective for controlling mosquitoes are no longer available, incidences of malaria and dengue fever are rising, Sampson said.

In other places, pesticides themselves are causing the problems. Douglas Murray, an American who directs a pesticide safety program for the international relief agency CARE, said that the embargo has forced them to search for protective equipment from new sources.

"The delays are critical — a number of poisonings will take place due to this," Murray said. "The embargo is raising the risks workers face in the cotton fields."

Pacific News Service

# Conference analysis

continued from page 7

psychiatry at Johns Hopkins University, claimed that "power is morally neutral." The comment seemed anachronistic, at best, in the post-Hiroshima era, at a conference aimed to understand the social as well as the personal components of nuclear conflict.

Another speaker asserted that in today's world, the public demands "rapid, serial and linear images" in order to understand any phenomenon. Implicit in this perspective is a "blame to victim" posture which ignores the benefits which accrue to those who produce and present those rapid images to the public as its basic information source.

The gender and war presentation, though an engaging psychodrama, was remarkably bound to culture and class. The images of gender, and of men and women in war, vary between nations and across economic classes within nations. The analysis of gender issues was exclusively related to the upper middle class.

Little attention was paid to the importance or significance of activism on the nuclear question. The issue of recruitment of peo-

ple into nuclear movements was glossed over with a concerted avoidance of questions of race, class and culture in the recruitment process.

Other than Physicians for Social Responsibility there were no representatives from other groups in the area who are actively engaged in nuclear issues. This is regrettable, given the plethora of anti-nuclear organizations here.

Activism tended to be relegated to the individual psyche. The solution suggested for the anxiety of the nuclear era is to try to increase personal tolerance for ambiguity and uncertainty. By asserting that the public and elected leaders are unable to tolerate ambiguity and are unable to assimilate complex information, the speakers offered an apology for current international relations.

Implicit in such an analysis is the ethic, "forgive them, for they know not what they do." To foster such a lack of accountability at the national level while recommending increased individual responsibility suggests that individual solutions can solve national problems — a case disproven throughout history.

As a program aimed toward such a salient and socially important topic as nuclear conflict, this conference was a disappointment.

Cheryl Hall and Katarin Jurich are graduate students in Sociology at UCSF.

