Synapse

Program helps performers cope with health problems

By Brian Hsu

Musicans, dancers, singers, actors and other performing artists -only a handful of whom become "stars"—can be viewed as a group of workers facing special risks. Five years ago, UCSF launched its Health Program for Performing Artists to study and devise remedies for conditions such as guitarist's nipple (an irritation caused by the guitar rubbing against the chest) and the sprained ankles to which ballerinas are susceptible.

The program's work was described by its medical director, Dr. Peter F. Ostwald, during a "Brown Bag Tour" in HSW-300 Feb. 7.

The performing artist occupies a precarious position in society," said Ostwald. "These artists are wanted and sought after to give pleasure and entertainment and are a symbol of our culture." However, he added, the majority of artists are underpaid, involved in intense competition and exposed to all kinds of criticism.

Ostwald said that performers face special difficulties from the start of their careers. For example, the violin student is often isolated from his peers because of the many hours of practice involved in the training process. Performing artists also are subjected to the stress involved with performing in public. This stress is much harsher than that experienced by sculptors, painters, writers and others who need not face an audience directly, because the performing artists by nature must work in front of others affect the livelihood of most in the general population can be considered to the performing artist. Ostwald mentioned how violinists could suffer from sore elbows, jaws, and shoulders, while singers can be affected by sore throats or vocal cord nodules. Even drummers can be inflicted with inflamed tendons or sores on their hands. musician Pete Townshend plays his guitar so forcefully during his concert appearances that he describes his resulting finger injuries as "a rain of flesh, fingernails, and

The common cold can also be debilitating to performers. The Health Program for Performing Artists recently treated a renowned West German performer who caught a cold after touring Japan and had to cancel all of his performances in the United States.

The Health Program clientele is composed of 50 percent instrumentalists (such as violinists and guitarists), 30 percent vocalists, 15 percent actors and dancers, and 5 percent personnel involved behindthe-scenes (such as stage managers, technicians and designers). The majority of the patients seen are professionals who perform for a living, while half of these professionals are either unemployed or retired. A minority of patients is composed of students of the arts who are pursuing a professional career, as well as patients known as amateurs who do not have to rely on artistic performances for their



These stylish recycling bins at SF State are an example of designer-businessman Miltch Reid's work. See story at right.

Students present research at Carmel conference

By Kevin Knopf

Fourteen UCSF medical students presented results of their research last weekend at a conference in Carmel. The participants, chosen on the basis of abstracts submitted in November, presented their findings in a poster format or 10-minute talks.

Three members of the UCSF contingent won prizes: Steven Wolfe, for his work in the genetics of hypertension; Andrew Metzger, for his work in the molecular biology of a specific type of brain tumor; and Isabelle King, for her work on the interaction of thyroid hormone receptor and DNA.

The conference provided opportunities for students to examine current research in medicine, interact with other student researchers and attend talks on the joys and frustrations of medical research. Sixteen medical schools from the Western United States participated in the program, which was sponsored by the Western Society for Clinical Investigation, the Western Section of the American Federation for Clinical Research and several specialty groups.

Tony Matan's Experience

One of the students who presented from UCSF was Tony Matan, a second-year medical student. His research was conducted in Dr. David Levinsohn's lab, under the supervision of Dr. Leonard Gordon in the department of Orthopedic

Matan's research involved the phenomenon of reperfusion injury following the reduction of blood flow. When tissue is not perfused with freshly oxygenated blood, a condition called is-

chemia, the buildup of substances called oxygen free-radicals can permanently damage the tissue. Matan studied this phenomena in rats and found that pre-treatment with compounds called oxygen radical scavengers, which disarm the free-radicals, can significantly improve blood flow to skeletal muscle tissue following ischemia. This research has many possible clinical applications, particularly in the field of limb reattachment.

His research involved many hours in the lab collecting and analyzing the data that he obtained from inducing ischemia in the hind-limb of over 60 rats. He presented his results to a general scientific audience on the morning of Feb. 8.

"It was a really good experience," Matan told Synapse, "to be able to present my research to a conference and not feel as much pressure as I might ha a more formal conference. Also, it was a good deadline to have so I could organize my data and get it into a presentable form."

Matan found he wasn't nervous. "I knew my talk well. I might have rewritten it just one last time, but it went off quite well, regardless." His speech, which was not without a certain degree of humor, was well received by the audience. "On the whole," Matan concluded, "it gave me a greater appreciation of the scientific method."

At the student scientific sessions, most speakers were presenting from different fields of medicine, which made for the widest possible range of topics being discussed.

Funds for much of the UCSF students' research and the cost of

GSA contest

Logo sought for campus recycling bins

By Ken Maybury

Early in Spring quarter, specially designed bins will be placed near the campus eateries in an attempt to encourage recycling. To kick off this pilot project, the Graduate Student's Association (GSA) is holding a campus-wide contest to create a logo that will be placed on

Members of the GSA Recycling Committee, co-chaired by Geoff Kwiat; Caroline Acker, and GSA president Sheila Allen, have spent the last few months working behind the scenes to bring the pilot recycling project to fruition.

Allen, who has held several conferences with UCSF Chancellor Julius Krevans regarding the project, reports that he acknowledges the need for a recycling program on campus. Krevans has offered to arrange funding for the purchase and modification of eight receptacles which will be modified into stateof-the-art recycling bins

The bins will initially be placed in four locations: the Courtyard Caffe, Saunders Court, Millberry Union's Terrace Café and the Plaza Grill. Two cans will be placed at each of the sites —one for glass bottles, another for aluminum cans. The bins will have triangular lids with a hole for inserting items to be recycled and will also dispense brochures about recycling.

Arrangements have been made with the Haight-Ashbury Neighborhood Council recycling center, which is located at Frederick and Arguello, to pick up material at the four sites.

The person behind the recycling bin design is Mitch Reid, a local businessman, who has designed similar containers now in use at San Francisco State University and at Tilden Park in Berkeley.

In order to involve the campus community in launching this project, GSA has organized a contest to create a symbol or logo that will be placed on each of the new recycling bins. The logo must fulfill the following requirements:

1) It must promote the spirit of recycling.

2) It must be suitable for reduction to a 2 inch by 2 inch format.

The winning entry will be decided by a panel of judges consisting of campus luminaries. The winner will receive a dinner for two at a better San Francisco restaurant!

The contest is open to UCSF students, faculty and staff. Entries should be submitted to the GSA office in MU 244. The deadline is March 16. Their phone number is 476-2233 if you need more infor-

To enter, submit a piece of paper with the design you think should grace the bins. You can add a slogan if you want, but the graphic element is key. Don't forget your name, address, phone number and school/department.



Dr. Peter Ostwald is a performer himself.

in order to express their creativity. Several specific examples of

musicians who suffered as a result of their artistic careers were provided by Ostwald. He described how Wolfgang Amadeus Mozart, achild prodigy, suffered from emotional problems of immaturity, compulsiveness, and excessive gambling. Mozart had scarlet fever and kidney disease, too. His tragically shortened career does not seem remote to a number of modern performers. Leon Fleisher, the San Francisco pianist who lost the use of his right hand, was one of the first performers to openly reveal a disability that abruptly stopped their musical outputs. Similarly, pianist Gary Graffman's performing career ended because of a right-hand dysfunction.

Many injuries that would not

Specialists available through the Health Program include those practicing in the fields of orthopedics, rheumatology, neurology, psychology, and dentistry.

Many of the staff are performing artists themselves. Ostwald, for example, still plays the violin in chamber orchestras and ensembles.

The Health Program is concerned with the entire body of the performer. "Dental problems are considered serious by clarinet players, woodwind instrumentalists, trumpeters, and oboe players because their career depends on how the intrument and the (player's) mouth fit," said Ostwald. all of the the patients are treated for physical illnesses. "Emotional differences account for 35 percent

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Currents

UC sues Eli Lilly over insulin patent

The University of California announced Feb. 7 that it is charging the pharmaceutical firm Eli Lilly & Co. with patent infringement in its commercial production of insulin. The complaint, filed in U.S. District Court in San Francisco, alleges that Lilly manufactures and sells insulin using genetic engineering technology covered in a basic patent issued to UC in 1984.

The patent delineates a genetic code for making proinsulin, a precursor to insulin. The technology was developed by four UCSF biochemists. Lilly does not pay UC for use of the technology.

The suit is the first by the university concerning patent infringement in biotechnology. The suit was filed after negotiations with Lilly broke down.

Student Regent chosen

Jenny Doh, a senior majoring in political science at UC Irvine, has been chosen to serve a oneyear term on the Board of Regents. Doh, 23, came to the United States from Seoul, Korea, in 1974, and attended high school in Bakersfield. She believes the key issue facing California higher education is university growth and its effect on cultural diversity, financial aid and the maintenance of quality education for undergraduate and graduate students.

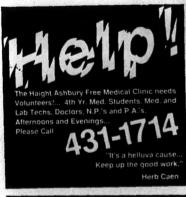
Hep B vaccine price cut

Effective March 1, Student Health Service will reduce its charge for the Hepatitis B vaccine from \$130 to \$108 for the series of three injections. The new price will include both pre- and postvaccination blood tests.

Blood drive raffle winners named

Lloyda French, an administrative assistant and course coordinator in the Department of Family and Community Medicine, and Robert McGreevy, a third-year medical student, were winners in a raffle of blood donation receipts following the Jan. 23 campus blood drive. Each winner received a \$50 gift certificate to the Washington Square Bar and Grill, donated jointly by ASUCSF and Peter Lomax, new owner of the restau-

The campus community donated 177 pints of blood during the drive. The next blood drive will be held April 24.



Plea for return of disks

During a break-in on Feb. 7 at the Institute for Health Policy Studies, about 40 Macintosh disks were stolen. If anyone notices these disks, please contact Lisa Bero at 476-5146. No questions asked. Some of the labels were: "Excel files," "Correspondence," "Teaching," Symposium project,""NIA Grant," "Lipton/Bero NCHSR Grant," "HEP." A calculator and leather portfolio containing research papers are also missing.

Grodsky wins humanities award

Noted UCSF diabetes researcher Gerold Grodsky, a professor of biochemistry and biophysics, has received the 1990 Robert H. Williams/Rachmiel Levine Award for his contributions to science and the scientific community. The award is named for Robert Williams, who founded the University of Washington School of Medicine; and Rachmiel Levine, who is considered the father of modern diabetes research. Both men are known for their humanitarianism as well as their scientific accomplishments.

Grodsky is recognized for sustained major contributions in diabetes research. He particiapted in developing the first system for studying insulin production in cultured pancreas cells, and helped developed the artifical pancreas.

"... And still no sports" wins an Addy

The advertisements devised for UCSF by the Goodby, Berlin & Silverstein agency in conjunction with the 125th birthday celebration have won a prestigious "Addy" as last year's best Northern California campaign geared for television. The ads featured footage of faculty members attired as professional athletes while a voice-over described their real contributions to society.



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UC SAN FRANCISCO

Schroeder to head policy foundation

Dr. Steven A. Schroeder, professor of medicine and a nationally recognized expert in health policy, will leave UCSF to become president of the Robert Wood Johnson Foundation July 1. Schroeder, chief of the Division of General Internal Medicine, was named to the post Jan. 25.

The foundation is one of the largest U.S. philanthropic associations focused on health care, and ranks among the top six private foundations, with 2.5 billion in assets. It awards some \$100 million in grants annually to improve the health and health care of Ameri-

A member of the UCSF Institute for Health Policy Studies, Schroeder, 50, has conducted numerous studies on health economics, cost containment, use of medical technology, physician use of medical services and care for the elderly, among other subjects.

Cooper named acting librarian

"Richard Cooper has been made acting university librarian while a national search is being conducted for a replacement for late David Bishop," Senior Vice Chancellor for Academic Affairs David Ramsay announced in January. Cooper has been associate librarian here since 1983. He has been involved heavily in day-to-day operation of the library, and in planning for construction of the new library.

Announcements

Attention fourth-year medical students

All fourth-year medical students who requested additional financial aid funds for residency interviews must submit documentation of these expenses to the Financial Aid Office by March 2. Documentation required includes copies of your match letter or letters from hospitals visited and receipts for transportation, lodging, food and other related expenses. Please organize your documents before submitting them to the Financial Aid Office. Spring Quarter financial aid checks will be on hold pending submission of these expenses.

Forum on Resident Hours Reduction Bill, Feb. 20

Speakers with varying perspectives will discuss the California Resident Hours Reduction Bill and several counterproposals on Tuesday, Feb. 20, at 6 p.m. in HSW 301. All are welcome. The bill, soon to be introduced in the California legislature, will limit the resident's workweek to 72 hours.

Soccer team forming

The soccer club at UCSF is attempting to start up a co-ed team to play in the San Francisco co-ed soccer league. The next season starts in April and games will be Thursday or Friday nights at 6:30 p.m. The club particularly needs women players. If you are interested, please contact Martin McMahan (759-5911) or Alan Tower (476-0356) as soon as possible. All games are in the city and there are two seasons per year.

Edilberto Rodriguez Award

Medical students of any class are eligible for the second annual Edilberto Rodriguez Award. The award consists of \$300 in cash and a plaque in recognition of compassionate service, commitment to excellence and dedication in the practice of medicine. The deadline for applying is March 31. For more information and an application form, please contact the Student Affairs Office or Dr. Perez-Stable at 476-8393.

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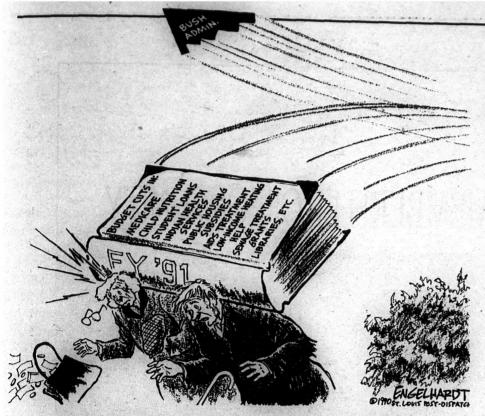
HEALTH SCIENCES SPECIAL SERVICES PROGRAM TUTORIAL PROGRAM

The Health Sciences Special Services Program will be offering tutorial services for the socio-economically disadvantaged and underrepresented students at UCSF. If you need help with any subjects throughout the school year, tutors are available at the HSSSP Office. Contact Carol Stadum at 476-7373, 145 Irving Street, 2nd floor.

CONSUMER PROBLEMS?

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'WELL, SO MUCH FOR THE KINDER, GENTLER NATION'

SHS Mental Health Flan should be reconsidered

To the Editor:

Last spring the Student Health Service (SHS) Advisory Committee approved a plan to extend psychiatric benefits to UCSF students. This plan would have provided up to 50 visits to a psychiatrist or psychologist per student per year, in addition to the ten free visits already allowed. Blue Cross would have reimbursed the users for \$25 per visit as an insurance benefit. The plan would have cost SHS about \$2 per student per month, and would have been funded partly by registration fee money, and partly out of SHS excess reserve funds. Chancellor Krevans blocked the plan because the funding was not "stable" (it was guaranteed for only one year), and because of an alternate proposal for an off-campus counseling center. According to a story by Steve Heilig in Synapse, Sept. 28. 1989, Krevans "asked Vice Chancellor Thena Trygstad to review the various proposals and make a recommenda-

As of this writing, UCSF students are not insured for psychiatric problems beyond 10 visits. There is no counseling center, nor are there concrete plans for one, nor is there funding for one —"stable" or "unstable." There are, however, several students who have exhausted their 10 visits and who are in acute distress. The administration, in a patched-together stopgap measure, is allowing SHS to tap directly into registration fee reserves to cover the cost of treatment for some of these students. This is a humane act, but such open-ended self-insurance out of reserve funds is hardly "stable" funding, Wouldn't it be more prudent to let Blue Cross carry the risk? What can they possibly be thinking?

In fact, the entire issue of "stable" funding is a red herring. Dr. Lourdes Olivares, SHS director, has recently released budget projections which show that SHS could fund the Blue Cross plan for at least the next four years out of excess SHS reserves, without any increase in student fees. So why hasn't the SHS/Blue Cross extended mental health plan been approved?

According to Janice Babula, Assistant Dean of the Graduate Division and Chair of the SHS Advisory Committee, there is a feeling among several members of the administration that the SHS plan deals with only a piece of a larger problem, that we should be looking at "the whole picture." They plan to address this whole picture by adding "wellness" programs to the curriculum and by establishing the above-mentioned counseling center, which would "...provide short term counseling and referral," and offer "...programs such as support groups and workshops on substance abuse, impairment and stress." (July 28, 1989, letter to Vice Chancellor Trygstad, from several administrators). They would focus on preventive programs and short term crisis intervention.

But is this really the "whole picture?" The proposed counseling center would provide only short term counseling. What would happen to the 50 to 60 students per year who need long term psychotherapy and/or prescribed medication? These are the students who most need help. Leaving them out of the "picture" is like painting the Mona Lisa and leaving out the face. Counseling by social workers and group counselors can be cost effective in treating procrastination, lack of assertiveness, stress, exam anxiety, etc. But such counseling is grossly inappropriate for severe clinical depression, metabolically linked disorders, psychosis with suicidal ideation, and other such serious mental health problems. Nor can these problems be adequately treated by "short term crisis intervention." These are not rare problems at UCSF. Last year 10 students were hospitalized for depression or suicidal ideation, and there was one successful suicide.

If a counseling center will not meet the most pressing needs of the students it purports to serve, would it be at all useful? I asked Lance Raynor, a therapist at SHS (and former Director of Mental Health Services for Maxicare Health Plan), how many students might benefit from the sort of group therapy a counseling center might offer. He estimated that of those students who had exhausted their currently allowed ten free

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synapse

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OPINION

Editorial

AIDS conference deserves U.S. Administration support

Communicating a message of apathy and insensitivity about the worldwide AIDS epidemic, President Bush recently declined an invitation to deliver a speech at the Sixth International Conference on AIDS, which will take place this June in San Francisco. Futhermore, he has refused to send a videotaped welcome to the conference, which in previous years, has brought together AIDS specialists and people with HIV disease from many countries.

In addition to his personal rebuff, Bush continues to uphold the past administration's stand on AIDS by supporting an immigration law that imposes travel and visa restrictions on people with HIV disease visiting the United States. The law permits entry of people with AIDS into the United States only for "legitimate public health reasons," such as attending the conference or seeking medical treatment. Hoping to change this U.S. government policy, a number of European and American organizations plan to boycott the conference.

We believe the administration should actively support the ongoing work of health-care workers and researchers to eradicate the worldwide AIDS epidemic. What is needed now more than ever is full-fledged backing for continued research on the prevention and treatment of AIDS. The administration can start by lifting the repressive immigration law, which is largely based on the hysterical and scientifically unfounded belief that you can get AIDS from casual contact. Bush must take the initiative, as did the leaders of the last two host countries—Canada and Sweden—and give this conference the full support it deserves.

Letters

Dog use was humane

To the Editor:

I feel compelled to answer Susan Lo and her letter regarding the use of dogs for the medical physiology class. First, her reaction is not unusual or unexpected. Indeed, it is difficult to see human patients bleed, to see invasive procedures on patients in attempts to help them and to see people die. Yet, that is what a physician is supposed to do; to touch and support patients, to put needles and tubes in patients and sometimes to stop treating patients and take away support so that they can die humanely. All those behaviors need to be seen, learned, and perfected.

The issue then is should animals be used to teach students how to recognize physiological problems and learn how to treat them. Ms. Lo stated she had experimented in rabbits and rats and her complaint was that dogs were used. Dogs are more like humans, hence their value in demonstrating the physiology, and perhaps in evoking the reactions Ms. Lo experienced. The dogs used in these classes and in research are dogs that would be exterminated. By their use in the physiology class, their inevitable death, at least, may teach students physiology and in fact teach students that compassion and knowledge to act quickly (based on physiology) are necessary to deal with ill patients if a physician is to be successful in treating patients.

As a dog, rabbit and rat owner, I have strong feelings about the treatment of animals and feel that the use of any animal is comparable. Nonetheless, I am a strong advocate for the humane use of animals for medical and scientific research as well as for teaching young impressionable physicians about the enormity of their future responsibilities.

Jeanine P. Wiener-Kronish Attending Physician, Intensive Care Unit

Live dog wasn't needed

To the Editor:

Of all the serious issues in these complex times, I had always thought that whether medical schools should do live dog labs was one of those problems which received much more attention than it deserved. Compared to starving children and global warming, the whole issue seemed silly. Until two weeks ago, when I sat down in the dog lab and was confronted with a creature that looked too much like the dog that was waiting for me at home to go for a walk. I was overwhelmed, and since then the issue hasn't seemed as silly.

There is no denying that emotion plays a large role in many people's objections to the dog labs. The emotional bond between man and dog has evolved for a million years such that the dog is like no other animal in its trust,

devotion, and loyalty. The human-canine relationship began as a relationship of convenience, but it has grown into one which involves that stickiest of all human emotions -love. So I can't pretend to deny that my views about dog labs aren't inextricably bound with my emotions, and that's the problem; for some, it's hard to take seriously opinions of "right" and "wrong" that are based not on objective, rational principles, but on emotion. Yet the validity of such views must be acknowledged. If they are only the views of a small minority, obviously they should not be enforced on others. However, if they are widespread, as I believe they may be in this case, then they deserve serious consideration.

Though emotion may be central to many people's opinions, there is also a philosophical issue. If repeated dog labs are not absolutely necessary for the progress and continuation of our scientific establishment, and if in fact there might be alternatives which are just as good if not better (to which I'll return later), then the subtle implication we send by doing these labs is that non-human life is pretty worthless. Doing unnecessary dog labs conveys the attitude that animals have no dignity, that they are nothing more than natural resources, like coal or oil, for us to use as we wish. I believe this in spite of the fact that the animals would have been killed anyway; just because inmates are on death row does not make it morally right to perform experiments on them - they have dignity. Animals high on the scale of intelligence, like dogs, also have dignity -a dignity which we violate with live dog labs.

Another problem with the labs as they now stand is that the number of labs has been reduced such that there are now forty students per dog rather than four. As a result, student-teacher interaction is practically impossible, and the educational worth of the exercise has been seriously undermined. Thus, many of those who attended were quite disappointed by how little they gained from the four-hour ordeal. In addition, many people that I talked to felt that their ability to learn was further compromised by their emotional reaction to watching a live dog being slowly sacrificed. As a result, they had trouble concentrating on the physiological principles being demonstrated. Dr. Zach Hall, in a recent letter to Synapse, argued that the labs are an opportunity for us to learn to distance ourselves from such reactions.

However, I maintain that medical school offers us plenty of such opportunities in the course of normal human care that do not require the sacrifice of innocent life. It is easy for any student to observe surgeries and see as many living mammalian organs as they wish. In spite of these considerations, the physiology department insists on continuing the live labs, holding that there are fundamental aspects of a live demonstration

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from page 3

Mental Health

visits, about 20 percent would benefit, provided that such therapy were long term. Lynn Schroeder, an SHS psychiatrist, agreed. A substantial number of these students, cautioned Raynor and Schroeder, would not opt for group therapy in any case, because of confidentiality issues. However, a few students could and would benefit. Thus a counseling center might be a useful addition to the SHS expanded mental health insurance plan, assuming the Chancellor were willing to approve both proposals.

And what about preventive "wellness" programs? Raynor thought that wellness programs were a wonderful idea in theory, but that in practice most students seek help only when they are in trouble, and that to be at all effective, a wellness program would require a vigorous (and expensive) outreach system.

The adminstrators' counseling center plan is typical of the growing trend toward bureaucratic solutions for medical problems. It is well-meaning, but it is designed by administrators, not psychotherapists. According to the psychiatrists and psychologists I have spoken with, there is no "whole picture" of mental illness. Instead, there are a lot of real individuals suffering from real and individual conditions. Successful psychotherapy usually requires therapists with extensive clinical experience, and often involves prescribed medication. Truly effective short term preventive programs do not yet exist, and are not likely to replace the need for long term psychotherapy for a long time to come.

A counseling center—if well staffed and funded—might be a useful addition to extended mental health insurance, but cannot substitute for it. The SHS/Blue Cross proposal would provide good coverage at a very reasonable cost, and funding for it exists for at least the next four years. This plan can be implemented by March 1 if the Chancellor approves it. A better plan does not exist. And students on this campus deserve no less.

Dan Conrad

(The writer was until recently a graduate student in immunology at UCSF.)

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which are not producible by other means. I accept that at present we have no way of simulating the complex, interactive response of an organism, and that it is a valuable learning experience for future doctors to observe such responses. Thus, in the spirit of better education and moral responsibility, I'd like to propose an alternative to live dog labs —a carefully prepared videotape of a live lab expertly designed to demonstate the pertinent physiological principles. The video could be shown to groups of six students at a time, with one teacher per group providing a running commentary —a set-up which exists for our other physiology labs. This would allow interactive discussion, rewinding of important segments, and close-up views. In all, it would be a more valuable learning experience, one which would also allow us to "see the experimental preparation that was and is being used to discover what we know about physiology".

There are two main objections which are raised against the use of videotapes. First, it is pointed out that the responses of each dog, like each person, varies widely, and that the air of unpredictability of a live demonstration is important and would be lost in a videotape. However, it seems to me that there would be just as much unpredictability for a student watching a videotape as a student watching a live demonstration. In each case the student sees one animal and is able to understand that they are witnessing a unique response. The unpredictability could be further ensured by stressing to each group after they had seen the video that it is imperative that they not discuss it with their classmates.

The other argument against the use of a videotape concerns the moment near the end of the demonstration when each student is given the opportunity to touch the dog's fibrillating heart. It is felt that it is important for first-year medical students to know what such a heart feels like. While I'm not in a position to judge the true value of such a sensory experience, it seems to me that, as the only objection which cannot be overcome by a good videotape, there is very little reason that a videotape would not be superior to a live demonstration.

The professors who now run the labs are extremely skilled and experienced and, with the assistance of a good production manager, could produce a video which would be an educational gem of great benefit to students at UCSF as well as other schools across the country. I see this as a real challenge —an opportunity for UCSF to be a leader in the medical community, to institute an alternative which is truly a more effective learning experience, thereby setting an example in keeping with the overriding tenets of medicine —compassion, understanding, and respect for life.

As one final note, I'd like to tease apart the issues of dog labs from the use of research animals in general. There is no doubt in my mind that animal use is justified when it is essential for scientific advancement and the improvement of the human condition. Yet, as everyone agrees, strict controls are required to ensure that such use is in fact necessary and does not overstep our society's standards of what is overly cruel. It is my opinion, as well as the opinion of many others, that these labs do not meet these criteria and thus, should be abolished. It is important that such issues are discussed freely and openly in our society. Thoughtful discussion should not be kept behind closed doors for fear of a small lunatic fringe. On the contrary, open, thoughtful discussion of the matter does more to improve the image of UCSF than would silence.

> Barak Gaster First-year medical student

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Research

attending the conference was provided by the Dean's office at the School of Medicine. The medical students who attended also expressed their thanks to Dr. Diane Colby, Director of Student Research, for her help.

Student Presenters:

Ben Chue (Nutrition/Neurosciences)
Heather A. Colbert (Cardiovascular)
Dev M. Desai (Immunology)
Diane M. Duffy (Perinatology)
Giovanna Shafoori (Metabolism)

John J. Feng (Gastroenterology)
Robert E. Glasgow (Cardiovascular)
Joan Ertel Howley (Perinatology)
Isabelle N. King (Endocrinology)
Kevin B. Knopf (Perinatology)
Anthony J. Matan (Cardiovascular)
Andrew K. Metzger (Neurosciences)
Eric D. Sanford (Pulmonary)
Naomi R. Schechter (Clinical Pharmacology)
Steven Wolfe (Hypertension):

Tony Matan, eating out in Carmel: "I'm



Tony Matan (right), John Feng (center), and Bob Glasgow (left) relaxing after a day of research presentations. Matan was heard to say, "I'm not leaving here until I get gout." Photo by Kevin Knopf

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Something Not So Wonderful

The King and I

By Richard Rodgers and Oscar Hammerstein. Starring Rudolf Nureyev. At the Orpheum Theatre, 1192 Market St., through March 4. 243-9001

By Meryl Shapiro

Imagine Ronald Reagan —instead of Clark Gable— playing Rhett Butler. Then think of what it would be like for anyone other than Rex Harrison to take on the role of Henry Higgins. At this point you should be ready to envision Rudolf Nureyev as the King of Siam, a.k.a. Yul Brynner, in Rodgers and Hammerstein's "The King and I."

This classic musical, now playing at the Orphcum, tells the story of Anna Leonowens, a British woman who has come to Siam to teach English to the King's many children (and his many wives). The major subplot involves Tuptim, the King's newest concu-

character embodies. Her terror during the whipping scene and her despair over the death of Lun Tha were equally unconvinc-

The dreadful acoustics in the theatre also presented a problem. I sat in the balcony during the first act, and despite having seen the almost identical movie version more times than I care to admit, I had considerable trouble understanding the words. This was particularly annoying during the songs. For example, "Something Wonderful" is perhaps the most beautiful song in the play; moreover, its emotional theme ("a man who needs your love/can be wonderful") is fundamental to the entire play. Unfortunately, it was incomprehensible. So too was "A Puzzlement," the only chance the King has to share with the audience the conflicts he experiences as a monarch.

Fortunately, there were some highlights. Liz Robertson was excellent as Anna, both

> in her singing and her acting. Patrick A'Hearn (Lun Tha) had a powerful voice and made a perfect young lover. I was especially impressed by Tuptim's play, "The Small House of Uncle Thomas": the costumes were beautiful, and the dancing and choreography were enchanting.

I do have one final criticism of the play itself (i.e. not this particular production). Namely, there is an underlying assumption that Europe's culture, definition of justice, and concept of "true love" is inherently superior to Siam's. No one seems to question that the only way the king can convince the foreign embassadors that he is not a barbarian is to dress his most European-looking women in European

clothes, play European music for European dancing, and discuss European religion over a European meal. Similarly, we accept the Crown Prince's decision to abolish the old "humiliating" and "unhealthy" way of bowing to the king in favor of a decidedly British one: it seems so progressive. We are asked to believe that the schoolchildren's letter, begging Anna not to return to England, would include a line like "Mrs. Anna, do not leave us in darkness!" Finally, although the King is constantly trying to balance his tradition with Anna's "scientific" Western views, Anna never seems to change her mind about any issue. In what is otherwise a wonderful play, this depiction is at best patronizing and at worst racist.



Liz Robertson as Anna, Rudolf Nureyev as Yul Brynner, in

"The King and I."

bine, and her forbidden love affair with Lun Tha. Although the play is dated and the young lovers' lines are corny and the portrayal of the people of Siam borders on nauseating, the relationship that develops between Anna and the King remains potentially engaging, entertaining, and poignant. Unfortunately, the realization of such potential depends upon the quality of the actors, and alas, Rudolf Nureyev is no Yul Brynner.

Yes, he assumes the proper postures and makes the right gestures; sure, he looks dandy in that red satin outfit, his chest appropriately exposed. He comes equipped with a foreign accent -- granted, a Russian one, but then no one ever accused Yul of being authentically Thai. Nureyev can even carry a tune moderately well, whereas Brynner couldn't sing to save his life. Yet Brynner had a certain vitality, a certain presence, that Nureyev simply cannot match. Brynner was compelling in his portrayal of a man who is trying to be the best king he knows how to be; an intelligent, powerful, stubborn man who knows he is right, and yet is unsure about what to do; and a man who needs help but is too proud to ask for it -especially from a woman. Nureyev lacks the power of movement and voice necessary to pull this off. The humor of numerous little details was lost on the audience, and the famous "Shall We Dance?" scene was sorely lacking in sexual tension. Even in his "final battle" with Anna, over whether he should whip Tuptim for her crime, he falls short. Nureyev tosses the whip a few feet away; Brynner hurled it halfway across the room.

Nureyev is not the only disappointment in this production. Susan Postel, who plays Tuptim, has an absolutely exquisite voice. However, she fails to express the sparkle of youth and the glow of young love which her

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-U.S. Circuit Court Judge Leonard B. Sand, overturning a rule against begging in the New York Subways.

Sunset Shoe Repair

"Blessed is the neighborhood that has a good shoe repair shop."

In this time of disposable everything, the \$150 tennis shoe, the cardboard sole and the plastic heel... the shoe repair shop is still busy. Sunset Shoe Repair might have 60 customers come through the door on a Saturday or Monday. About half might have some connection to UCSF. Surprisingly, to me, 80% will be women.

"The most common job we do," explains Glenn Salvador, who has worked there for 11 years "is heels for women's shoes. Replacing chipped heels."

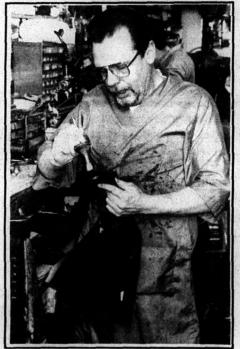
neighborhood notes

As if to illustrate his point, a woman with a large knee brace limps in carrying several pairs of shoes. "I don't think you'll be wearing these for a while," observes Glenn with a sympathetic smile. "What happened?"

"Skiing accident."

The woman, Anne Marie, lives in the upper Haight; Sunset is her shoe repair shop of choice. She says, "I bring them boots and shoes, mainly to work on the heels because they're usually pointed and wear down

The man who will replace her worn-out heels -after Glenn has written up the ticket-is Ed Willers. Willers will drive in a replacement "dowel" heel. It looks like an



Ed Willers learned his trade by modifying his own shoes for orthopedic

aluminum roofing nail with a 1/2 inch piece of black rubber at its head.

For sole work Willers turns to his "Threein-one-machine," so-called because it puts soles on, clamps them and trims them. Willers will pass the fixed shoes to Glenn's father, Ray Salvador, who will polish and buff them on another remarkable piece of equipment —an 80 year old finishing ma-



chine occupying most of the store's right hand wall. In a more modern enterprise, this machinery would be concealed behind a partition. God forbid the customers should see the real work going on...

Ray Salvador is the man who owns the business. Originally from the Phillipines, he joined the U.S. Navy at the end of World War II and spent the next 10 years in the military (transferring to the Air Force, with which he served during the Korean War). By the '60s -married and raising three children in San Francisco-Ray was working as a barber at the current location, 621 Irving.

Pointing out the mirrors lining the lefthand wall, he explains that when Mr. Comptonwho for years ran the neighborhood shoe repair store— died in the mid-1970s, he bought all the machinery and changed the nature of his business.

"I always tell him he should have kept his barbershop, too" says Ed Willers with a smile, "and he could have called it 'From Head to Toe.'

Willers' life story is one that would make Alfred Adler nod knowingly (Adler was a contemporary of Freud who taught that our strengths are generally developed in an attempt to deal with our weaknesses.) Willers had tuberculosis as a child, in the days before it was treatable with antibiotics, and spent some 10 years at San Francisco General Hospital. "I was in a cast for seven years," he recounts, "and it stopped the growth in my foot." He wound up with one foot signifantly larger than the other, and learned how to do modify his own shoes for orthopedic purposes. In the process, he learned a craft that would eventually be his livelihood.

Willers is contemptuous of the craftsmanship and materials that go into most shoes being made today. He recommends Rockports, Red Wing work shoes, and some of the brands carried at the big department stores. "When you buy a pair of shoes," he

Continued at right



Glenn Salvador helps a customer

Performers

from page 1

of our patients. These (differences) can be caused by fear and anxiety, depression, drugs and alcohol, or personality disorders,"added

The Health Program receives more than 10 calls a day on their clinical consultation line. The phone number is 476-7373. "(Our program is) not only involved in the training of our own doctors, social workers, and psychologists," said Ostwald. "We also go out to schools and training centers for artists to teach about the prevention of diseases and disabilities." Performing artists with performance-related problems are urged to call for assistance.





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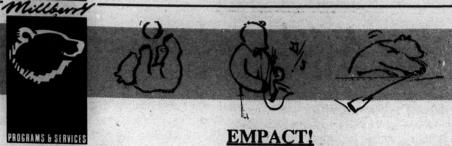
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Classroom dates: March 1 and 6, 7-10 p.m.. Weekend date: March 10-11. Cost: \$45/57; children under 6 free (includes lodging).

Discount tickets are available to students! Tickets for Winter include: movie tickets to UA, AMC, and Pacific Theaters, and discount ski lift tickets to Northstar. Special Events for Winter include: Paul Taylor Dance Company, Sleeping Beauty ballet and more! Tickets can be purchased at Millberry Unions's Central Desk. Ticket hours are: Mon.-Fri. 9 a.m.- 5:30 p.m., For more information call EMPACT! @476-6932.

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The winter intramural leagues are well underway, with a record number 53 teams playing in four sports. Familiar squads took to the hardwood as the basketball leagues opened with fanfare. The Bootables rang up the season's first major upset by handing last quarter's alpha division champions, AOK, an opening game loss. The captain of AOK, Leland Rosenblum, seemed unfazed by the loss, stating, "I think we're all right -our team knows when to peak. Come playoff time we'll be the team to beat."

Final Four jumped out to their traditional 2-0 start as they chomped upon the easy prey of the misguided UC Regents squad. Also winning for the second straight week was Essy Mozzafari's OMAC squad. In the beta division, the steady play and sharp shooting of Short and Slow enabled the team to handle Coming To Play in a closely fought 66-63 contest. Coming To Play, last quarter's unbeaten champions, found themselves alone in the cellar with a second straight defeat.

Perhaps the most thrilling game of the young season came as I Don't Know squeaked by The Zips in double-overtime. The final basket was made with three seconds to go by an inspired "Airborne" Hixson. "Airborne" had a "real" reason to celebrate two days ago as his wife gave birth to Sierra Lefay, a beautiful and healthy baby girl.

The ever-popular Tower Ball season began with an exciting contest between two of the league's finer teams. Schwabelbusen narrowly defeated We Got Screwed, 31-30, on a beautifully executed pass play with two seconds left. The play, known by locals as "The Schwabel Cross," enabled the lumbering frame of 6' 5" Tony Matan to escape free in the end zone after crossing in front of a screen by teammate Christian Pavlovich. Instant replay showed that not only did Pavlovich set a perfect screen, but he also stuck out his tongue and made a terrifying face at a would-be defender, enabling Matan to wander wide open. Other teams to look out for include Dan Doherty's Rong Li squad and Josh Gordon's Hackers.

The Formalins, of indoor soccer fame, found revenge sweet as they handled their nemesis of last season, Shaka, 3-1. Shaka had defeated the Formalins in last quarter's final. Moments after the game, Shawn Becker, captain of the winners, commented, "Our job is not done ... we are not gonna stop winning until we capture a championship!"

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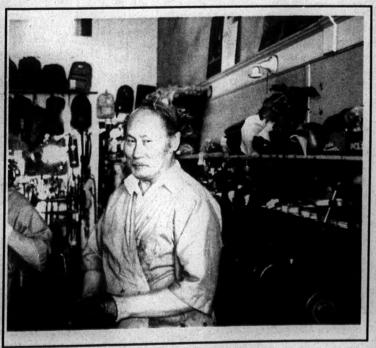


Shoe repair

advises, "make sure that they can be repaired. Ask the salesman: 'Is this shoe repairable? Can the heels be fixed?' See if it has a leather sole and a leather welt... If it's rubberized or a plastic sole, they can't be fixed.

Glenn Salvador does not plan to succeed his father -an uncle in Detroit runs aclinic and Glenn is going there to be trained as a diagnostic ultrasound technician. His position in the scheme of things at Sunset Shoe Repair is being taken by Eric Gutierrez.

-Fred Gardner



Ray Salvador in front of his finishing machine.



UCSF symposium examines...

What can be done about rising drug prices?

By Charles Piller

The presidents of the United States, the Soviet Union and a pharmaceutical industry executive were given a private audience with God. The U.S. president asked, "When will our unemployment problem be solved?" The Lord pondered, then said, "the year 2020." The president left in tears. The Soviet president asked, "When will a Russian land on the moon?" The Lord paused, then answered, "in 2009." The Soviet too, left sobbing in disappointment. Then the pharmaceutical executive asked, "When will the public image of our industry be favorable again?" The Lord thought for a moment, then left sobbing bitterly.

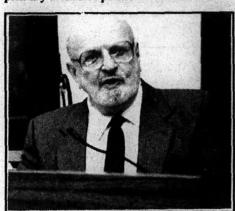
This joke was told by Klaus von Grebmer, head of policy communications for the agricultural division of Ciba-Geigy, to a symposium on the cost of drugs held Feb. 2 in Cole Hall. There are many reasons why drugs are increasingly costly in this country —sluggish regulators, massive research, development and marketing expenses and liability risks among them— but more than any other point, the joke highlighted something everyone could agree on: The industry has a serious, well-deserved credibility problem.

Part of the cause is the high and growing expense of drugs —the U.S. public spent about \$34 billion on drugs in 1987, according to another speaker, Helene Levens Lipton, an associate professor in the School of Pharmacy and Institute for Health Policy Studies. Meanwhile, she added, drug company profits reached \$36 billion last year, and have increased an average of 12 percent a year in recent years.

"In the years of the euphoric faith in progress," before the 1970s, von Grebmer said, there was little attention paid to giving the public the full story on the possible side effects or overall efficacy of drugs. Public skepticism towards the pharmaceutical industry erupted during the '70s, due to a growing number of problem drugs.

The public relations impact on the industry has been severe, according to von Grebmer, leading to profound distrust of the industry and the formation of publicinterest watchdog groups. It has also led to an exaggerated fear of risk that confounds attempts to provide credible and complete drug information, he said. "Society is increasingly unprepared to accept risks, and advocates of unrealistic, zero-risk philosophies are increasingly gaining support."

von Grebmer advocates increased openness by drug companies in their advertising to begin to tackle this set of problems. "Self-praise is never a recommendation," he noted, referring to the primary means of public communication



Milton M. Silverman

drug companies use. A consistent policy of secrecy and media manipulation has created more cynics than believers.

"The chemical pharmaceutical industry must present an image that can satisfy all its critics," he said. Openness about risks and benefits is essential to building public trust, which is critical to promote and preserve entrepreneurial initiative, von Grebmer added.

And the problem of communication to the public, and overall corporate responsibility by drug companies, is as timely as ever, Philip Lee, director of the Institute for Health Policy Studies, pointed out. Lee showed a videotape featuring the massive impact of the dumping of drugs banned or restricted in this country or in Europe, onto Third World markets without regard for the sometimes devastating effects on foreign populations.

The drug companies may be guilty of naked self-interest, and sometimes have been shown to act irresponsibly, but the cost of drug development is also high on the list of reasons why prices are going through the roof.

Most new drugs cost in the area of \$200 million to develop, and take 10 years from discovery to marketing, according to Mark Novitch, executive vice president of Upjohn Company and former deputy commissioner of the U.S. Food and Drug Administration (FDA). The biggest pharmaceutical companies spend from \$400 million to \$800 million on research and development every year, he told the symposium.

This not only leads to high prices, Novitch said, it is causing rapid monopolization of the industry as smaller companies simply cannot raise enough capital to compete effectively. As if to underscore the point, on the day of the symposium, South San Francisco's Genentech — widely considered the nation's premier biotechnology company— announced that 60 percent of its stock was being acquired by Roche, a pharmaceutical giant. A major reason was the skyrocketing expense of research.

Unnecessarily burdensome FDA regulations are part of the problem, according to Novitch. "Some of the regulations occupy a lot of agency time, but don't offer a lot of incremental value in terms of public health and safety," he said. But Novitch did not advocate dismantling the FDA. To the contrary, he said the agency needs massive upgrading of its labs and computers, and should increase the salaries of its scientists to create "an exciting environment to attract well trained people," thereby reinvigorating the regulatory environment.

Lipton offered the plight of the elderly as a means of showing how far out of hand drug pricing has gotten. The elderly will spend about \$12 billion on drugs in 1990, a disproportionate share of the total drug bill. The institutionalized elderly are spending an even greater relative share, she said. Much of this cost is not covered by Medicare or other insurance, she said. Because drug inflation has averaged 8 percent—twice the increase in the overall rate of inflation—during the past few years it has had a profound impact on the standard of living of many older people.

Close scrutiny of drug companies' pricing practices and more detailed information on the degree to which drug costs are covered by insurance are essential, Lipton said, for devising effective federal aid programs that take some of this burden off the elderly.

The symposium was held in honor of Milton M. Silverman, professor emeritus in the School of Pharmacy and Institute for Health Policy Studies, on the occasion of his 80th birthday. Silverman came to the field of pharmacology via an unusual route. After a stint as editor of the Stanford Daily during his college years, he went on to become an award-winning, "pioneer science writer" for the San Francisco Chronical, Lee told the audience.

In order to improve his skills as a journalist, Silverman went back to school to get his doctorate in pharmacology. He joined the UCSF faculty in 1969, and has also served in various government posts, becoming an important force in drug regulation. In recent years, he has worked to expose dangerous and unethical dumping of drugs in the Third World.

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