



Vol. 2, No. 2 December 1980

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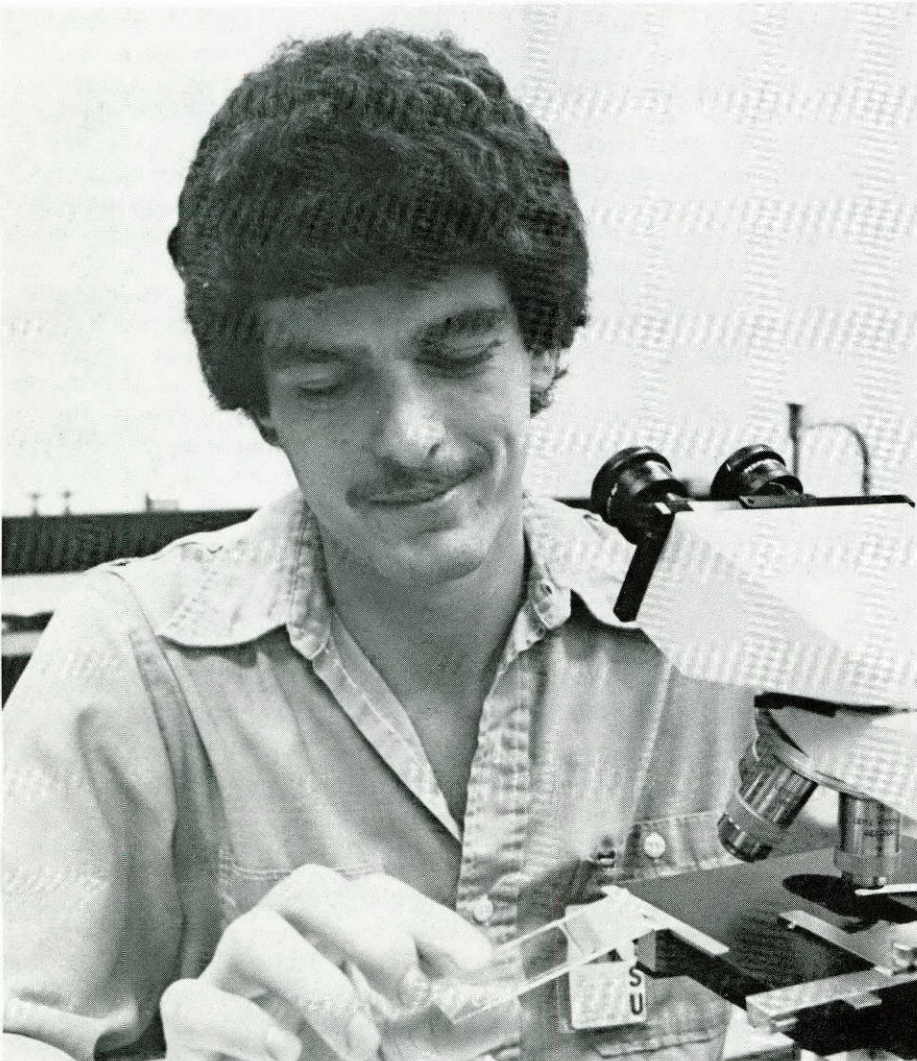
TRICK OR TREATMENT might have been the Halloween choices for children in the pediatrics wing of Hermann Hospital if not for the efforts of the Phi Delta Epsilon medical fraternity. Fraternity members sponsored a party for the kids, who were encouraged to dress appropriately for the oc-

casion. Nicholas Vowell made a terrific Raggedy Andy. The fraternity members, not to be outdone, showed up in some pretty elaborate costumes themselves. For another photo of Halloween hijinks see page 15. (Photo by Gary Parker)



Volume 2, Number 2 December 1980

Family practice specialty popular with students



THE FAMILY PRACTICE SPECIALTY is increasingly chosen by UT Medical School students. John Weaver, a first-year student, not only chose family practice, but rural family practice. He is a recent recipient of a State Rural Medical Education Board grant. Weaver contracted with the board to deliver five years of physician service in a Texas rural area in exchange for financial aid during his medical school years. (Photo by Gary Parker)

By Barbara Short

"Physicians have a responsibility to the public as educators. They should make people aware of their responsibility for their own health," says Dr. C. Frank Webber, professor and chairman of family practice at the Medical School.

The role of educator is one of several roles assumed by the primary care physician. He also may be a family friend, counselor or community leader. The primary care physician engages in family practice, pediatrics, obstetrics and gynecology, or general internal medicine.

Texas needs more primary care physicians, especially in the rural areas. Inner-city neighborhoods, too, such as Houston's fourth and fifth wards, often lack family physicians, said Dr. Sam A. Nixon, professor of family practice, president of the American Academy of Family Physicians and chairman of the Texas State Rural Medical Education Board (SRMEB).

The primary care physician is in a position to be of great service to human beings, Nixon said. The physician can become influential

through continued and personal involvement with his patients.

"The public first demanded there be more family physicians. People want a personal type of doctor they can get to know and consult with on all sorts of problems," said Dr. Jack Haley, professor of family practice at the Medical School and statewide coordinator of preceptorship programs for the Texas Academy of Family Physicians.

A family physician is educated in breadth, touching the entire spectrum of health care, Haley said. Family physicians are trained to handle everything from childhood diseases to pregnancies to counseling patients for mental and emotional stress.

The cause of increasing primary care physicians recently received a boost with the publication of the federal government's Graduate Medical Education Advisory Committee's (GMENAC) recommendations to the federal Health and Human Services agency, formerly Health, Education and Welfare.

The committee recommends
(Continued on page 6)

Chancellor, Regents call for unity at HSC

The University of Texas System chancellor and two members of the Board of Regents met with a group of Medical School faculty members here Nov. 3 to reaffirm their support of President Bulger and to ask the faculty "to work together with the administration."

Chancellor E. Don Walker said that his and the regents' visit to the Health Science Center was prompted in part by "various rumors regarding President Bulger's action removing Dr. Stanley Dudrick as chairman of the Department of Surgery and Dr. Donald Cannon as chairman of the Department of Pathology."

Bulger relieved both chairmen of their administrative responsibilities in the summer. They retain faculty appointments as professors.

"Some rumors," the chancellor said, "even foretell the departure of Dr. Bulger as president of the Health Science Center."

"You have been asked to meet here today in order that these

rumors may be totally and finally dispelled and everyone can get back to making this a first-class educational and health care institution," Walker added.

Statements delivered by Chancellor Walker, Dan C. Williams of Dallas, chairman of the Board of Regents, and Dr. Sterling H. Fly Jr., a regent from Uvalde, and a printed statement issued by President Bulger were as follows:

Statement by Chancellor Walker

In recent weeks there have been circulated within the Health Science Center, and in the community generally, various rumors regarding President Bulger's action removing Dr. Stanley Dudrick as chairman of the Department of Surgery and Dr. Donald Cannon as chairman of the Department of Pathology.

Although varied in content and source, those rumors may be generally summarized as stating that President Bulger is not supported by the System Administration or the Board of Regents and that Dr. Dudrick and Dr. Cannon will soon be back as chairmen of their respective departments. Some rumors even foretell the departure of Dr.

Bulger as president of the Health Science Center.

You have been asked to meet here today in order that these rumors may be totally and finally dispelled and everyone can get back to making this a first-class educational and health care institution.

"President Bulger...had my support as chancellor at the time. He has that support today. He will have it tomorrow."

The actions of President Bulger must be viewed in light of the policies of the Board of Regents of The University of Texas System relating to presidents of the component institutions. The president of each of the component institutions is selected by the Board of Regents in accordance with a formalized procedure involving consultation with an advisory committee composed of administrative officers, regents, faculty, and students. President Bulger was appointed by the Board of Regents in accordance with this procedure.

The Board of Regents is acutely aware of the fact that the respon-

sibilities of the presidency of a component institution may not be imposed upon an individual without giving that individual the authority to carry out those responsibilities. In order to assure that the president of a component institution has the authority to properly discharge his or her responsibilities, the Board of Regents has adopted as a part of its *Rules and Regulations* provisions that confer upon the president the authority to select and remove the administrative officers at the component institution under his or her control. Specifically, Sections 5.1, 5.2, and 5.3 of Chapter II of Part One of those *Rules and Regulations* provide as follows:

Section 5.1. The Board delegates to the Chancellor and the Chancellor delegates to the chief administrative officer of each component institution the responsibility for the appointment and dismissal of all other administrative officers of each component institution, including vice presidents, deans, directors, and their equivalents. However, prior approval of the Chancellor shall be necessary for each such permanent or acting appointment and for each such dismissal whether from a permanent or acting appointment. All such other administrative officers serve
(Continued on page 12)

New phone system saves on long distance

A new computerized telephone system may save the Health Science Center 27 percent of the cost of long distance telephone service. The system, called WATSBOX II, went into effect Nov. 19.

Since that date, anyone making a long distance call at the HSC has been required to dial a two-digit access code plus a five-digit authorization code before placing the call. Each person authorized to make long distance calls has an individual authorization code.

Once the person dials the authorization code, the WATSBOX II computer checks its memory to see if that person is authorized to make in-state, out-of-state or international phone calls, explained Tim Parker, director of administrative services. It then gives a "progress tone" that means, "I'm ready for you to dial."

At the sound of the tone, the person dials the long distance number in the usual manner. If the call is not authorized (such as a person authorized only for in-state calls dialing an out-of-state

number), the caller will get a busy signal. For authorized calls the computer will find the least expensive way to complete the call based on rates that time of day, Parker said.

As part of the WATSBOX system, the HSC leases nine Tex-An lines and eight WATS lines for the continental United States. If all these lines are busy, Parker said, the caller will hear a recorded message that all circuits are busy and the call will be put on hold for up to 30 seconds. If a line becomes available during that time, the call will go through immediately.

If neither Tex-An nor WATS lines are available, individuals authorized by their departments to use Direct Distance Dialing (DDD) may remain on the line, and the call will be completed by the more expensive DDD method. Persons not authorized for DDD will receive a busy signal.

"The administration is not trying to limit people from using Direct Distance Dialing," Parker said. "It is available at the request

of departmental directors, but it costs more for the department. We're just providing a management tool so the departments can control their use of long distance."

At the end of each month, each department will receive a computer printout showing all long distance calls by each individual in that department. It will show when each call was made, to what number, how it was routed (by Tex-An, WATS, etc.) and how long the person had to wait to complete the call.

"It would cost an awful lot to be able to place every call every time, and most calls are not so urgent that they must be completed immediately," Parker said. "We're shooting for a three to four percent blockage rate. That would mean we're using the service pretty effectively."

An added convenience is that a long distance call may be placed from any phone on campus, he said. Through use of the authorization code, the computer automatically bills the call to the

caller's department.

The authorization code must be used to dial 800 (toll-free) numbers even though there is no charge for such calls, he advised. For operator assistance, such as in collect calls or billing to a home phone, the person should dial 0 to reach the campus operator.

The WATSBOX II service has been in use for several years at UT-Austin and M.D. Anderson. Based on their experience, the HSC Office of Internal Audit estimates that the HSC system will pay for itself in about two years. In the past the HSC has not leased any WATS lines and has spent about \$230,000 a year for long distance calls.

Because the computer prints out information on each call as soon as the caller hangs up, it should be relatively easy to locate the cause of any problems. For problems or questions call Cheryl Spitzenberger or Tim Parker, 792-4982.

UT

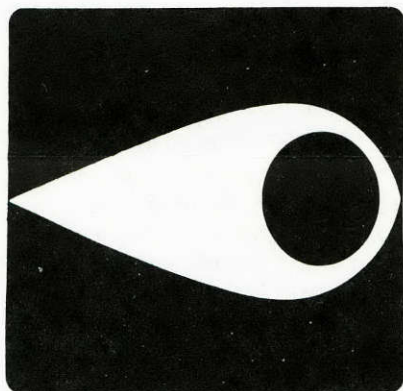
Prevent crime, join Operation ID

By Barbara Short

These days "prevention" is a word you often associate with medicine and health care practices. But, prevention also applies to crime.

"Individuals are ultimately responsible for preventing a crime, such as burglary, from happening to them," said Sergeant Bill Durbin, crime prevention officer for UT Police. "People must take every precaution they possibly can, because the police cannot always be everywhere."

Durbin urges all faculty, students and staff to participate in Operation Identification. This burglary prevention program consists of permanently engraving your valuables with your driver's license number and then displaying the Operation ID sticker to discourage



OPERATION I.D.

burglars.

Durbin stresses that you use your driver's license number for identification, and not your social security number. He has discovered it is almost impossible to trace people or property using a social security number.

"The engraving practice makes valuables easily traceable and the fencing of them by burglars much more difficult," said Durbin. It is now illegal to mark over a personal identification marking, unless you have proof of ownership. People who buy in the resale market should be sure to keep the bill of sale, Durbin said.

The types of household items people should engrave range from home entertainment units to kitchen appliances, tools and office equipment, Durbin said.

He also encourages each department within the Health Science Center to invest in an engraving tool, costing about \$6, to mark all personal items and office equipment, which sometimes is borrowed by other departments. These types of items are calculators, cassette recorders, electric pencil sharpeners or utility carts.

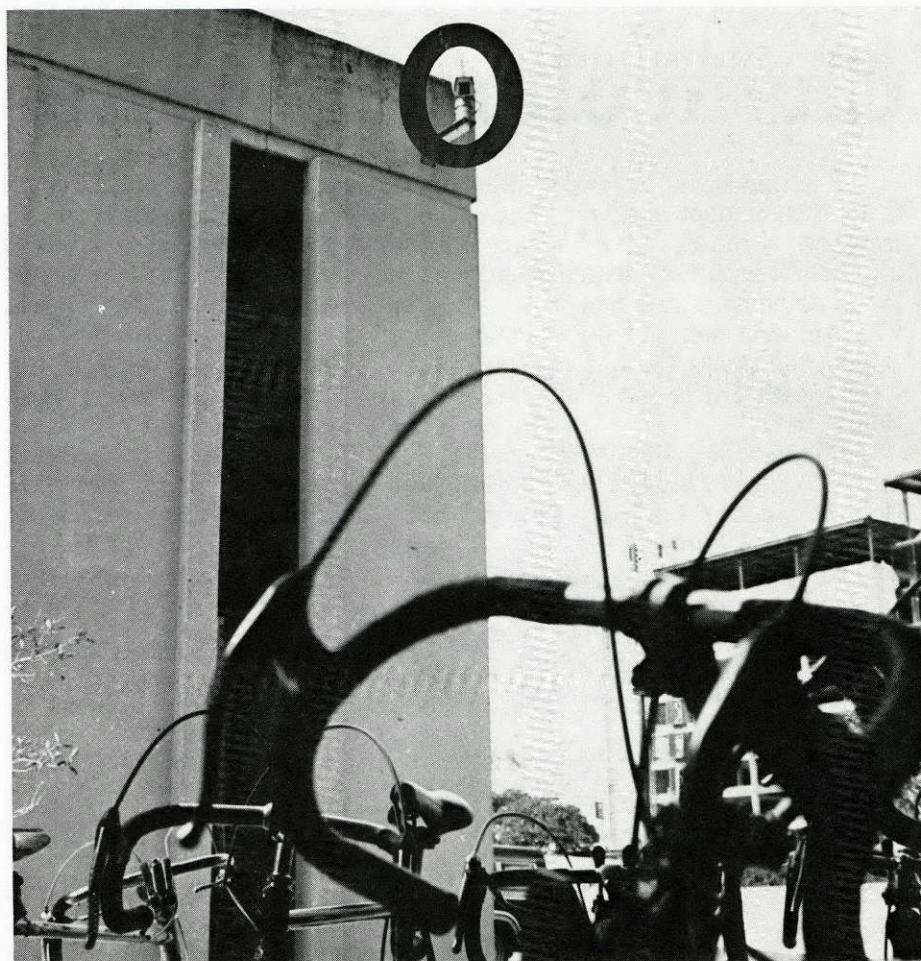
Once you have engraved all valuables, you should make a list of

them, the manufacturer's name and the item's serial number, and where on the item the number is engraved. This will be proof of ownership should any missing item be found. A form to compile the list comes with the Operation ID brochure.

"I am concerned because too few people have signed up for the program," Durbin said. A survey by the Denver police department on Operation ID found that people not participating in the program suf-

fered nearly seven times more burglary than those who were participating, Durbin said.

To participate in Operation ID, call 792-7268 or 792-3350, and ask for Sgt. Durbin or Officer Donna Haddad. They will reserve for you an engraving tool, and make arrangements for its delivery. The UT Police Department has five engravers ready to be loaned and also will provide a brochure and Operation ID stickers.



EYE IN THE SKY—This closed-circuit television camera (circled) is used to monitor the bicycle parking area between the Medical School Main Building and the Freeman Building on the west side. The UT Police urge all bicycle riders to park their bikes in this area to help cut down on bike thefts. (Photo by Gary Parker)

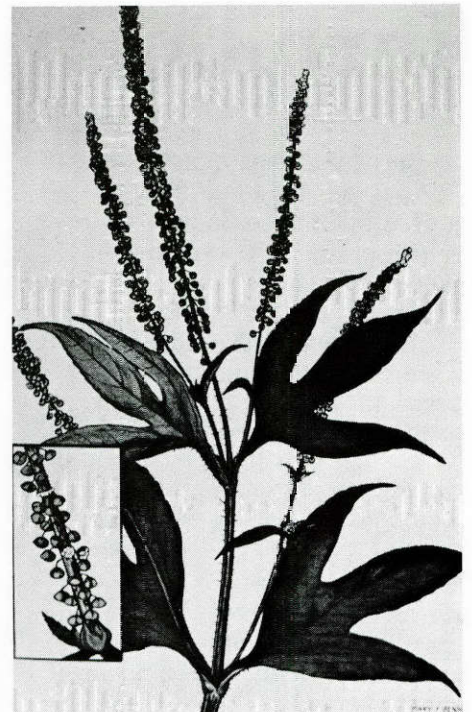
HOUTEXAN

is published monthly by the Office of Public Affairs, The University of Texas Health Science Center at Houston. **Roger J. Bulger**, M.D., president, **Joe Sigler**, executive assistant to the president and director of public affairs.

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SYMPTOMATIC SALUTE—Facial grimacing and gestures like the one at left are characteristic of children who have chronic nose allergies. If repeated over extended periods of time, this gesture can result in a permanent crease across the lower tip of the nose. Above is the giant ragweed, the king of hay fever excitants. It begins its rampage around mid-September each year and troubles susceptible individuals through early November in Texas. (Photos courtesy of Dr. John P. McGovern)

Runny nose, burning eyes spell allergy

By **Ginger Brown**

You've got all the symptoms—a runny nose, watering, burning eyes, frequent bouts of sneezing and general nasal congestion. You swallow aspirin, decongestants and plenty of liquids, hoping to stave off yet another cold.

But what you mistakenly term a "cold" may actually be seasonal allergic rhinitis, or what is commonly called hay fever, says Dr. John P. McGovern, a Houston allergist and director of the McGovern Allergy Clinic. He is an internationally-respected allergy expert and a professor of allergy and immunology at the Health Science Center and M.D. Anderson Hospital.

Hay fever, the seasonal form of allergic rhinitis (allergy of the nose), affects millions of Americans each year causing considerable physical discomfort and requiring treatment designed to minimize suffering and prevent complications.

"The word allergy is used to define what happens when ordinary substances, such as pollens in the air or some food proteins which do not bother most people, cause harmful reactions in individuals sensitive to them," McGovern said. The offending substances are called allergens; the reaction to them is called allergy.

The offending culprits in hay fever are three groups of plants—weeds, trees and grasses which pollinate at fairly regular times each year. Their pollination periods are referred to as "hay fever seasons" and vary from one part of the country to another depending on the type of plants abundant in that region.

But Texas, with its mild climate, has virtually a year-round hay fever season, the allergist explained. The giant ragweed, the king of hay fever excitants, begins

its onslaught in middle September and troubles susceptible persons usually through early November. Pollens from Johnson and Timothy grass are the major allergens in late spring and summer, and various tree pollens are abundant during early spring.

Atmospheric molds and house dust are year-round allergens that tend to aggravate the condition of seasonal and perennial allergic rhinitis sufferers, McGovern explained.

One third of all chronic illness in children under 17 is the result of asthma, hay fever or other allergic disorders.

"All persons have varying thresholds of resistance to just about everything, such as to alcohol or to pain, and the same is true of allergen levels for allergic individuals," McGovern explained. For example, a person with ragweed sensitivity will have hay fever symptoms if the pollen count exceeds his threshold of resistance.

But many other factors can significantly lower an allergic person's threshold, he said. Infection, a change in climate or temperature, air pollution, nutritional status, emotions, overexertion and endocrine factors can help trigger an allergic reaction.

Although hay fever and other allergies can appear at any age, it is a special problem for the school age child, McGovern remarked. One third of all chronic illness in children under 17 is the result of asthma, hay fever or other allergic disorders. Each year about 36 million days are lost from school or play by children with active allergy.

"But the incidence of illness and days lost from school cannot

accurately reflect the total impact on these children in terms of impaired physical, mental and emotional growth," the allergist explained.

Early identification of an allergy, he says, is the key to helping the allergic child deal with what is often a debilitating condition. "The school health team must be alert and know what to look for, how to treat it and when to refer the child to a physician."

Treating yourself or your family for what appears to be a "common cold" or "sinusitis," when you actually have an allergy, can be harmful, McGovern warned. Overuse of decongestants and drugs containing cortisone can produce undesirable side effects, and many pain killers prescribed for sinus headache are addictive, he explained. Untreated and undiagnosed nasal allergy, in some cases, can lead to more serious disorders of the lower respiratory tract such as asthma and emphysema.

He offers these guidelines on when to go to your family doctor if you suspect respiratory allergy:

—If you have a persistent cough with wheezing or are coughing up mucus, you should see a doctor immediately.

—If you have recurring headaches.

—If you have frequent bouts of excessive sneezing, runny and itching nose, burning of the eyes and nasal congestion.

—If you have frequent hearing changes.

Your physician will determine if your symptoms or your child's are due to allergy and will usually prescribe an antihistamine or an anti-asthmatic drug. If medication doesn't bring relief or if symptoms are unusually severe, he may refer you to an allergist who can more

accurately pinpoint the cause of your discomfort and prescribe specialized treatment, McGovern explained.

"A trained allergist can usually diagnose the allergic disease from the individual's symptoms and physical signs, and skin testing will help the doctor pinpoint the specific offenders," he said. These tests consist of introducing minute samples of the most common allergens into the skin and then checking for inflammation.

The optimum treatment for hay fever is avoidance of the offending pollen. Unfortunately, not everyone can schedule a vacation to another part of the country during ragweed season, but McGovern says staying inside on dry, windy days when pollen counts are especially high can help.

Another treatment used by the allergist to treat hay fever is hyposensitization, which is simply the medical term for allergy shots. The patient is given a mixture of the substances to which he or she is allergic beginning with small amounts in a highly diluted form. Gradually the dosage is increased until the person's ability to tolerate and resist the offending allergens is increased.

McGovern is the author of more than 150 articles and has authored or co-authored 13 books on allergy. The research laboratories at his clinic serve as a training ground for master's and doctoral degree candidates from UT School of Public Health and Graduate School of Biomedical Sciences. Dr. Michael Smolensky, associate professor of environmental sciences at the School of Public Health, oversees research at the clinic.

UT

Enrollment up; nursing decline feared

Enrollment has increased nearly 12 percent for the fall of 1980 at the Health Science Center. There are presently 2,730 students enrolled, 1,431 males and 1,299 females.

The School of Nursing seems to be bucking a national trend of decreasing nursing enrollments. Enrollment here increased from 369 in 1979 to 399, an increase of more than eight percent. Dr. Arlowayne Swort, dean of the School of Nursing, is pleased with the increase though cautious about the future.

"Though our total enrollment is up," Swort said, "the number of new students enrolling this fall actually decreased from the fall of 1979." The nursing school enrolls students four times a year, allowing UT to attract more students at times when other schools are not enrolling, Swort explained.

Like other nursing school

deans and administrators across the United States, Swort fears a continuous decline in enrollment and in hospitals' ability to retain nurses. The National League for Nursing reported in September that total enrollments in RN programs declined 1.9 percent from October 1978 to October 1979. The league expects the trend to continue.

The reasons for enrollment decline are many and complex, Swort said. She feels that some contributing factors are less prejudice against women entering traditionally male professions, the financial attractiveness of business opportunities, and women's desire for greater control over their lives, which is often absent in the nursing environment.

Though the National League for Nursing cites the decline of nursing graduates as a major factor affecting the nurse population, the hospitals' inability to retain their nurses also is contributing to the shortage, Swort said.

Nurses are trained to be patient-oriented, focusing on the

needs of the individual, Swort said. But many hospitals retrain nurses to be task-oriented, with the emphasis on performing a specific job. Many nurses consider this aspect of much hospital nursing to be disillusioning and dehumanizing, Swort said.

Swort feels the retention of nurses could improve if nurses were allowed to return to patient-oriented care. In conjunction with this idea, non-nursing functions, such as housekeeping, pharmacy and X-ray should be delegated to appropriate staff, she said.

Nurses also should have a voice in hospital policy, patient-care planning and scheduling of their own time, Swort said.

At the Health Science Center, the Medical School experienced the greatest increase in enrollment, 37.2 percent, with 708 students, including 534 males and 174 females. This is the first year the Medical School has enrolled four classes, a fact which explains the sizeable enrollment increase.

In 1977 the Medical School

changed from a three-year curriculum to a four-year curriculum. The entering class from 1977 will be the first four-year class to graduate from UT in the spring of 1981.

The Graduate School of Biomedical Sciences reports the largest increase, after the Medical School, of nearly 12 percent. The enrollment totals 214 students, 119 males and 95 females.

The School of Public Health reports an increase of nearly five percent over the 1979 fall figures. There are 257 males and 339 females enrolled, totaling 596 students.

An increase of nearly four percent is reported by the School of Allied Health Sciences. The enrollment is 51 males and 98 females, composing a student body of 149.

The Dental Branch experienced a modest increase of nearly two percent, upping enrollment to 664. The D.D.S. students represent the largest group within the Dental Branch, 488 students comprised of 388 males and 100 females.

Students win scholarships

The American Legion Auxiliary has awarded \$20,000 in scholarships to four students at the Graduate School of Biomedical Sciences (GSBS) who are currently engaged in cancer research at M.D. Anderson Hospital.

Three students, recipients last year, received renewed scholarships. They are Maureen Good, Paul Graef and Alexandra Levintow. Receiving a two-year scholarship for the first time was Michael Nash, who was selected from numerous applicants reviewed by the Student Affairs Committee at GSBS.

In the reviewing process, the Student Affairs Committee, headed by Dr. Ted Pate, professor of physiology at the Dental Branch, examines the students' financial needs, their research topics and the recommendations submitted by their supervisors. Each recipient must also be involved in cancer research at M.D. Anderson. Faculty supervisors hold joint appointments at both GSBS and M.D. Anderson.

The auxiliary began helping students financially in 1971, after learning from former student Peggy O'Neill that scholarships were scarce for students enrolled at GSBS.

Nash is studying under Dr. James East. His topic is "RNA Tumor Viral Genome Heterogeneity." East is the chairman of biology.

Good is researching "Looking at DNA Polymorphisms in Breast Cancer Families." Her supervisor is Dr. Grady Saunders, professor of biochemistry.

Graef is studying with Dr. James Chan, assistant professor of biology, and is researching "Production of Monoclonal Anti-bodies."

Levintow is researching "Heterogeneity of AKR Thymic Lymphomas" with Dr. Ellen Richie, associate professor of pediatrics.



HANDING OVER A CHECK for \$20,000 to Dr. R.W. Butcher, dean of the Graduate School of Biomedical Sciences, is Helen Holcomb. Holcomb is president of the American Legion Auxiliary, which

recently awarded four GSBS students scholarships for \$5,000 each. The students (left to right) are Maureen Good, Michael Nash, Paul Graef and Alexandra Levintow. (Photo by Gary Parker)

Nash not living just a dream anymore

By Susan Fox

When Michael Nash decided to go back for his doctorate degree, no one said it would be easy.

To make a long story short, Mike, at the time of his decision, had only a bachelor's degree from the University of Oklahoma. And like many young college students, he had probably goofed off more than he studied. Consequently, his GPA-grade point average-suffered.

Well, before he could get his doctorate, he had to get his master's. And before any university would accept him into its graduate program, he had to give his GPA a boost.

Night school was the only answer. "It took me three years to build up my GPA," recalls the tall, quiet-spoken Nash, who moved here in 1969 after completing a two-year stint in the Air Force. He began working at M.D. Anderson Hospital in the department of virology—the

same field he studies now.

His determination paid off—the University of Houston accepted him into its graduate program. From there he enrolled into the Graduate School of Biomedical Sciences, and set out to conquer his dream.

Two years have passed. Mike has completed general requirements and already has started on a second research topic. His first study collapsed.

"Graduation is dictated by successful research," he explains. And anything can go wrong. He now is researching tumor viruses at M.D. Anderson.

Mike is 38 years old now—six years older than when he first set out to get his doctorate. Not only is he older than most of his fellow students, but many of his instructors as well. Nothing has gotten any easier.

"It's hard bouncing back from studying all night," Nash says. And

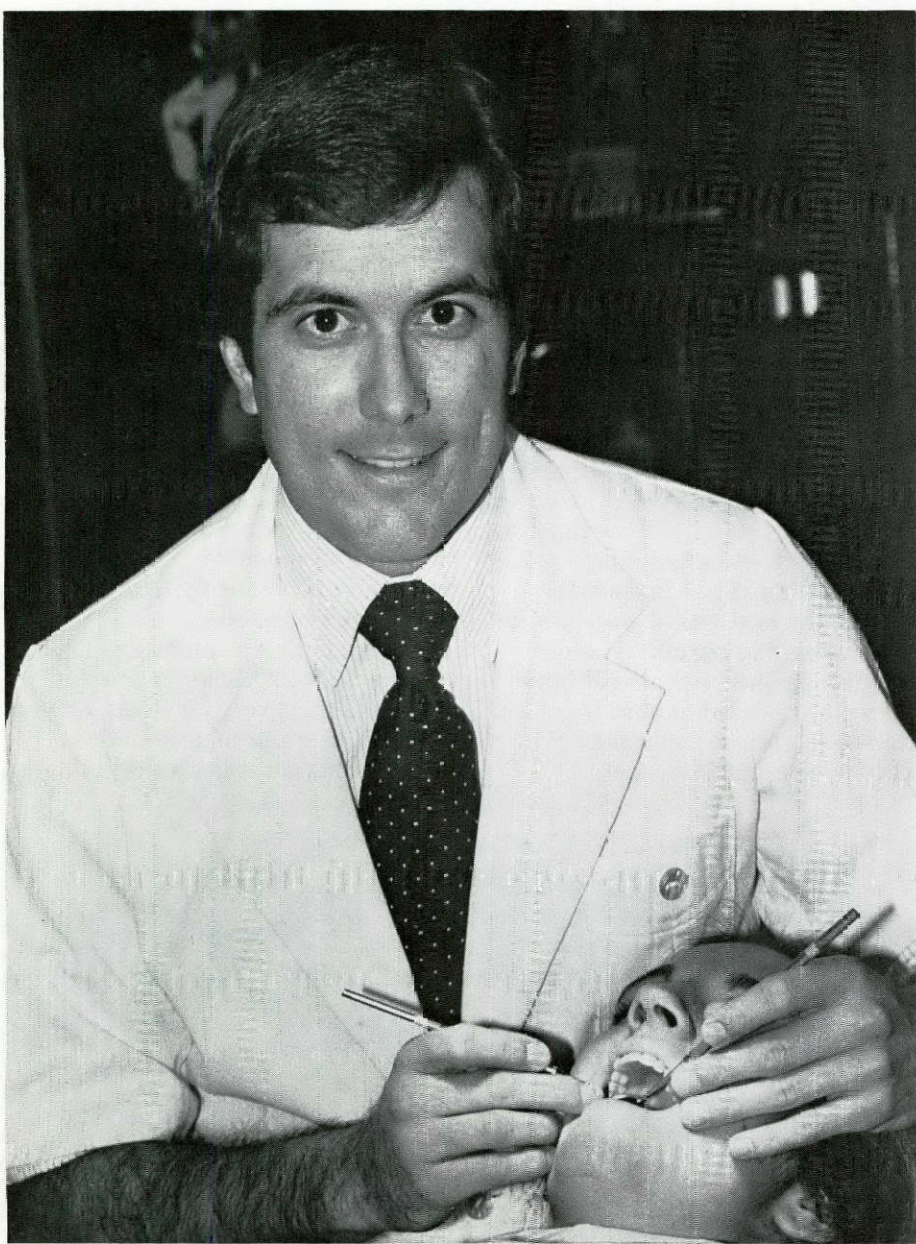
once he gets his doctorate he knows he doesn't have time to "work up the ladder. I just can't fool around.

"There's good and bad. I do have more of an idea of where I want to go (than some of the younger students)," he adds.

There have been some tough times. But there have been good ones, too. Just recently, he was awarded a \$5,000 scholarship by the American Legion Auxiliary.

Getting that scholarship helps a lot, Nash says. "Just living is expensive. I can't go to work and go to school full-time, too. My wife works, but she needs help (with home finances)."

It's been a little rocky for Nash, especially during those first few years. But he'll be the first to tell you that it's been worth it all. He can almost touch that dream.



FIRST FROM THE WEST—Ed Harris, a fourth-year student at the Dental Branch, is the first executive vice president of the American Dental Association elected from a state west of the Mississippi. (Photos by Gary Parker)

Dental Branch students elected ASDA officers

Ed Harris and Britt Ruby of the Dental Branch were elected officials of the American Student Dental Association (ASDA) at the annual session held in Chicago, Oct. 9-12.

Harris, a fourth-year student, was elected first executive vice president of the national association. Previously he was the coordinator for region nine of the ASDA. In 1978 Harris was elected by his fellow students to be a delegate from UT to the ASDA. This is the first year the executive vice president was elected from a state west of the Mississippi, Harris said.

Ruby, a third-year student, was elected coordinator for region nine replacing Harris. Ruby was previously a delegate from UT to the ASDA. He is the third UT student to serve as regional coordinator in consecutive years, an unprecedented situation for any school.

The ASDA, which has 17,000 members, is a student organization which addresses the needs and interests of dental students across the United States, Ruby said. Some of the services provided are national board reprints, term life and disability insurance, professional liability insurance, equipment insurance, magazines and journals, and summer workshops in Washington, D.C. The ASDA also

makes formal recommendations to the American Dental Association and often to the U.S. Congress, Ruby said.

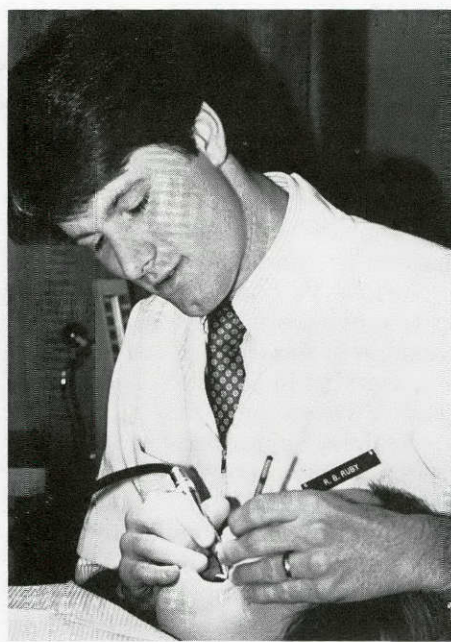
Each of the 60 dental schools in the U.S. and Puerto Rico elects two delegates who attend the annual sessions as representatives of their schools, Harris said.

Each of 10 regions elects a coordinator to moderate and coordinate the biannual regional meetings. The regional coordinators also serve on the board of directors of the ASDA. Region nine, of which Ruby is coordinator, consists of the dental schools in Arkansas, Colorado, Louisiana and Texas.

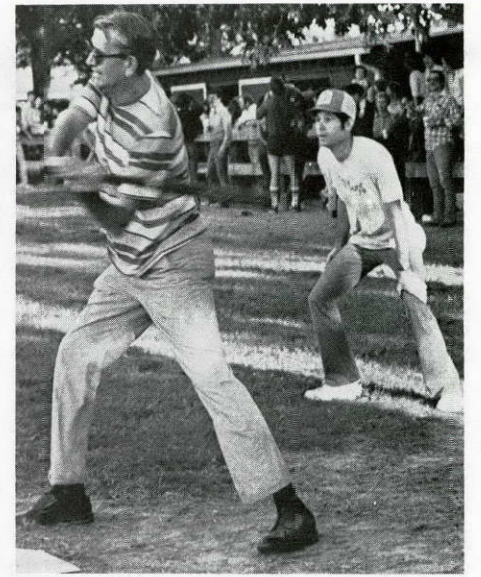
If a delegate, who is elected for a two-year term, is elected regional coordinator, he must resign his delegate position. This has been the case for both Harris and Ruby. Hal Board, a third-year student, is the second delegate from UT. The dental school will hold a special election to determine Ruby's replacement.

Harris received a B.A. in zoology from Texas Tech University in 1975. He considers his home to be Haskell, Texas, where he was raised.

Ruby attended Tyler Junior College and UT-Austin before entering the Dental Branch. Originally from Dubuque, Iowa, Ruby grew up in Tyler and considers it home.



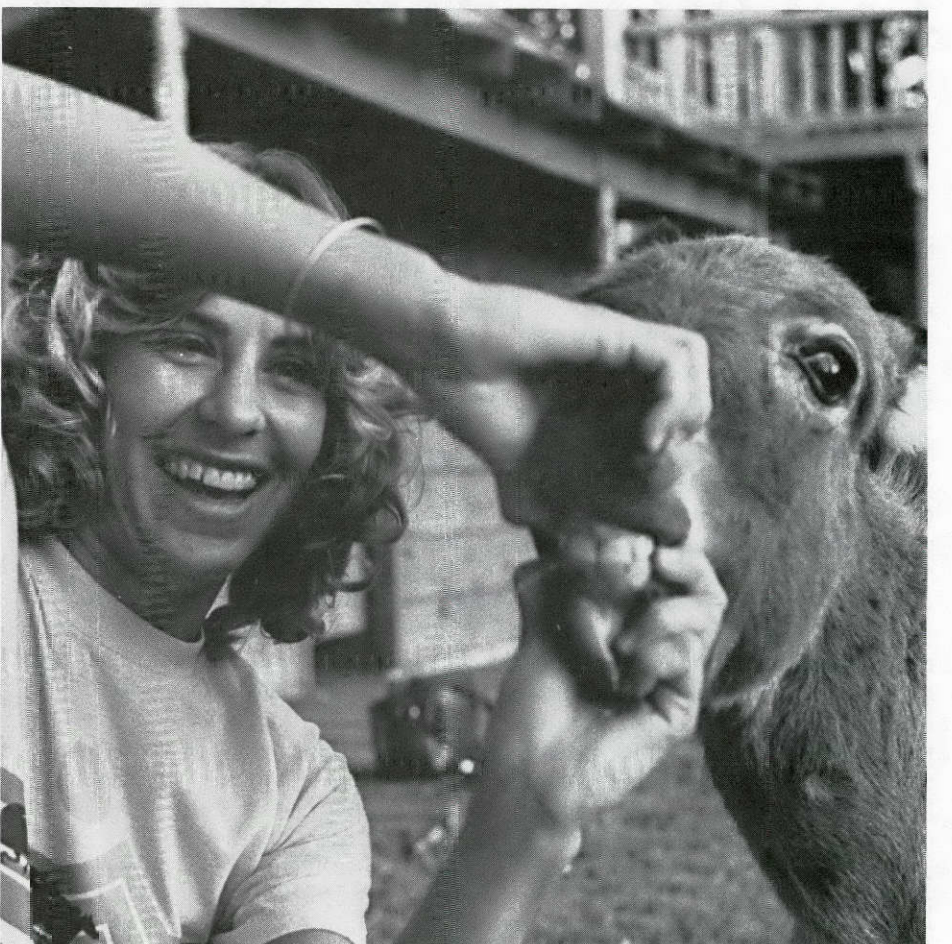
Britt Ruby
Dental Student



TRICE TERRIFIC—Associate dean Frank Trice slams consecutive hits to help his team in the faculty/student baseball game at the annual Dental Branch Picnic at Regal Ranch. (Photos by Tim Fulton, Dental Branch)



JUSTICE PREVAILS—Winning baseball team members at the Dental Branch picnic are group D jurors (standing, from left to right) Tom Roland, Barry Rouch, Ronnie Root, Randy Robertson and Wayne Radwansky holding mascot Amber Radwansky; (kneeling) Gene Omeis, Jim Cook, Curly Phillips and Dick Robertson.



OPEN WIDE—Sophomore dental student Debbie Vinall screens a prospective patient at the picnic.

Team to attempt in vitro fertilization

By Joe Sigler

Sometime in the next few months, physicians at the Medical School and Hermann Hospital will attempt to remove a human egg, fertilize it outside the woman's body and then place it back in the woman's womb for natural maturation to birth.

The procedure is called "in vitro fertilization and embryo transfer" and, when successful, produces what has come to be called a "test tube baby."

"In vitro" in Latin means in glass, that is, in a test tube or in a laboratory setting, as compared with "in vivo," which means within a living body.

Preliminary work and preparation of a laboratory have been underway at UT for several months. Permission to attempt actual fertilization with patients was granted Oct. 17 after several meetings of and detailed review by the Health Science Center's 29-member Committee for the Protection of Human Subjects.

The leader of the team, Dr. Martin M. Quigley, said the first fertilization attempt is probably from three to nine months away.

Another M.D., Dr. Robert W. Jackson, and a Ph.D., Dr. June Z. Kendall, are working with Quigley. All are faculty members in the Department of Obstetrics and Gynecology.

Only two other documented full-term deliveries world-wide as a result of in vitro fertilization have taken place since the first one in England with the birth of Louise Brown on July 25, 1978. The others were a girl in Australia and a boy in Scotland.

Quigley noted that the present success rate of in vitro fertiliza-

tions is between three and four percent.

The most extensive work in this country has been carried out in Norfolk, Va., he said, and the most active work elsewhere is being done in Australia. Groups are also working in England, West Germany, Sweden and France.

Quigley said a number of groups in this country and elsewhere probably are in preliminary studies similar to those in Houston.

The work that needs to be accomplished prior to fertilization attempts, Quigley explained, involves hormone studies on patients to determine as precisely as possible the time of ovulation and attempts to recover eggs from the ovary.

The most important step, to provide the greatest chance for successful fertilization and maturation, is to obtain the egg immediately prior to ovulation, desirably within two hours of ovulation, Quigley said. Urine and blood tests will be made at frequent intervals to check for a surge of gonadotropin, a hormone that matures the egg and increases with the approach of the menstrual cycle.

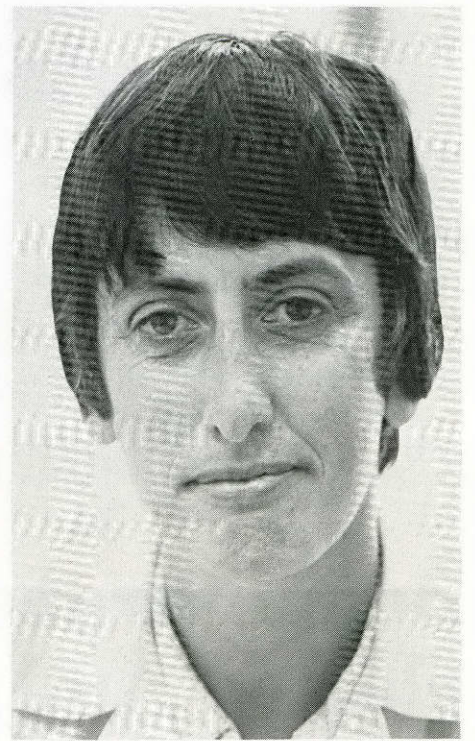
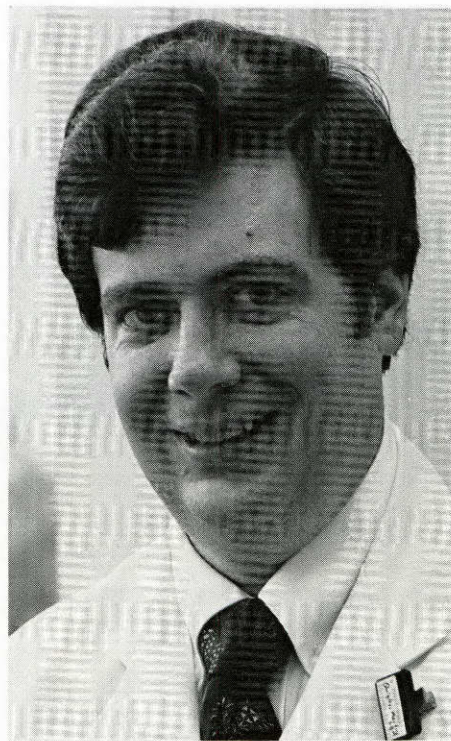
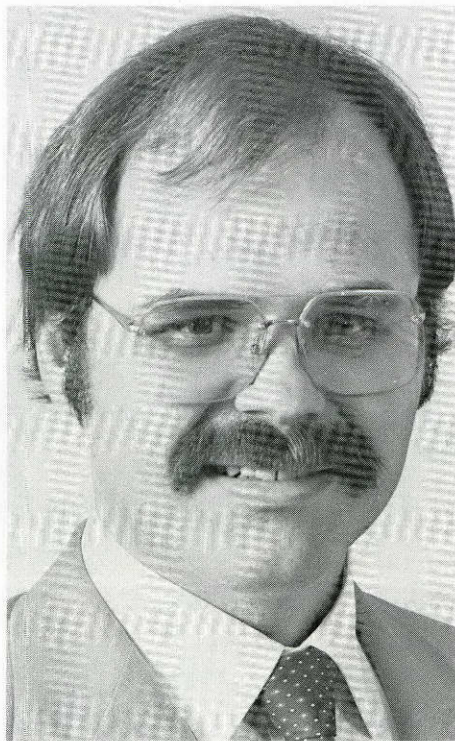
The eggs will be retrieved during a procedure called laparoscopy, in which a needle is inserted through the abdominal wall to the ovary while the patient is under anesthesia. The patient will have had an ultrasound examination of her pelvic area to determine if a suitable egg has developed.

These procedures will be done in Hermann Hospital.

Patient candidates must be referred by a physician, they must be married and unable to become pregnant because of blocked or absent fallopian tubes which cannot be corrected surgically.

None of the eggs removed during these preliminary procedures will be fertilized, Quigley said, but will be studied to compare their development with the measurements of hormone secretion to determine how closely to ovulation they were obtained.

Also, Quigley emphasized, when actual fertilization attempts are made next year, no eggs will be fertilized for any purpose other than for human reimplantation. **UT**



TEST TUBE BABY—Dr. Robert W. Jackson, Dr. Martin M. Quigley and Dr. June Z. Kendall (left to right), assistant professors of

obstetrics and gynecology, have begun preliminary work leading to "in vitro fertilization and embryo transfer." (Photos by Gary Parker)

Primary care practice receives support

(Continued from page 1) that medical students be "strongly encouraged" to enter specialties where a shortage is predicted or to enter general pediatrics, general internal medicine or family practice. Continued support of family practice residency training programs is urged, as is broad-based clinical experience, focusing on the generalist clinical fields.

Special purpose grants for teaching institutions for primary care training in family medicine, general internal medicine and general pediatrics are recommended for continuation.

GMENAC proposes a 17 percent decrease in medical school enrollment based on a predicted national doctor surplus by 1990. However, there are still 27 counties in west Texas which don't have a physician, and with Texas' population increasing so rapidly a physician surplus in the foreseeable future is unlikely, Webber said. If anything, Texas still has a severe shortage, though the condition is improving.

Throughout the report are proposals encouraging rural area

practice. The methods to achieve more interest in serving rural areas are continuing rural preceptorships, and government loans and scholarships for medical students who want to practice in rural or urban underserved areas.

The Texas State Rural Medical Education Board (SRMEB), chaired by Nixon, is a state agency which contracts with medical students for five years of physician service in a rural area, defined as a Texas county with a population of less than 25,000 residents. In return, the student receives financial aid based on need.

John Weaver, a first-year student at the Medical School, is one of the 172 contract-holders with the SRMEB. One is already practicing in Luling, while another is serving the Rockdale area. There are presently 57 contract-holders in residency programs.

Weaver decided to apply for the grant because he wishes to practice in the hill country. "I decided on family practice in a rural area because of the high level of community involvement and the relaxed atmosphere," Weaver said.

"I want to get to know the families I treat."

Weaver, who grew up in Montgomery, graduated from UT-Austin with a B.S. in geology and a B.A. in biology. During his last year at school he worked as a volunteer in the emergency room at Brackenridge Hospital in Austin.

The SRMEB grant is for four years of medical school. The contract-holder is expected to complete his residency within four years of graduation from medical school. At the end of the four years the contract-holder's commitment to rural service begins.

Primary care physician service also is encouraged at the Medical School here. The Family Practice Students Association consists of more than 100 students, including Weaver. Once a month the association sponsors a guest speaker on primary care, Webber said. In the past the members have taken field trips to McAllen, Rio Grande City and Roma.

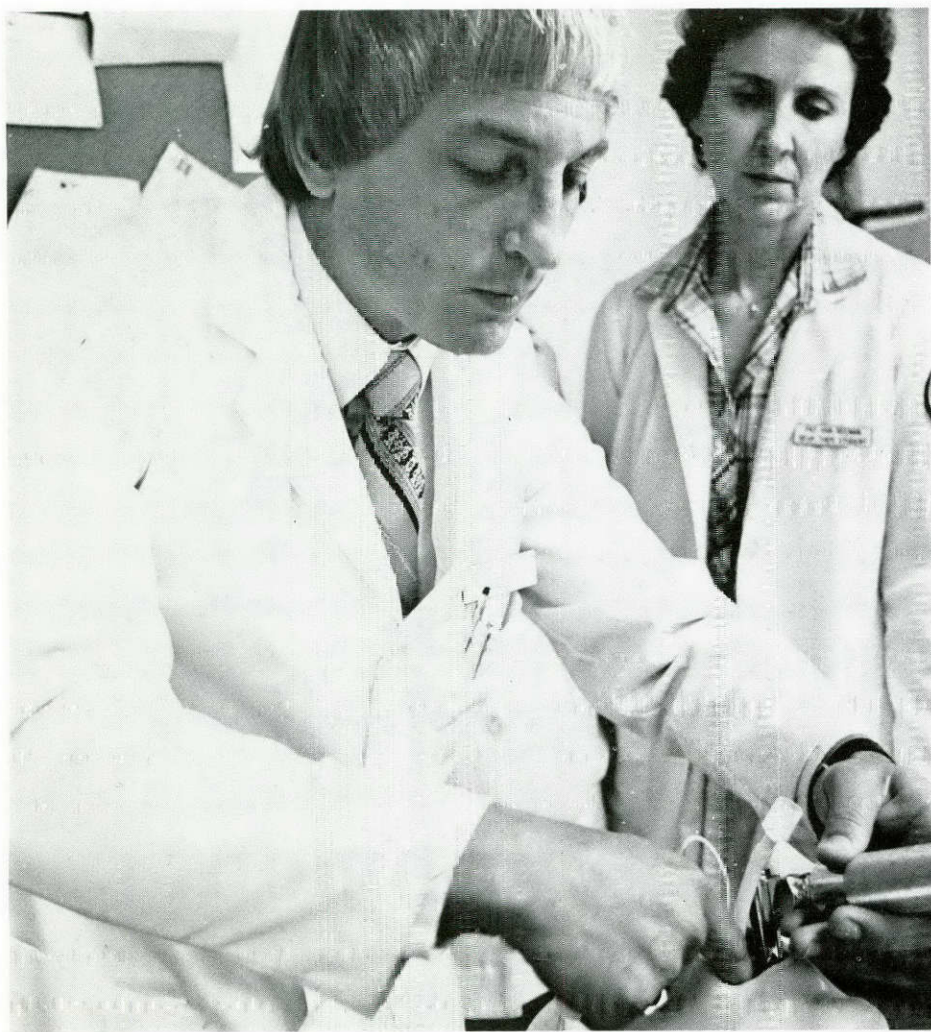
Besides the mandatory family practice clerkship, senior students may choose a preceptorship. A student will go outside of Harris Coun-

ty to a non-urban area and work one-on-one with a primary care physician, Webber said. This allows the student to participate in and observe medical care outside of the hospital and urban environment.

The preceptorship in family practice has become popular at the Medical School. The result of this emphasis on family practice is that 18-25 percent of the graduates over the past four years have entered family practice, Webber said.

Not only is the number of graduates entering family practice increasing, but so is the number of family practice residency programs in Texas, Haley said. There are currently 20 active family practice residency programs in Texas, and in 1981 there will be six new programs. The number of family practice residents has risen from 231 in 1977 to 319 today. In 1981 there will be 48 new positions in family practice residencies, which is a 35 percent increase.

"There is still a great need for family physicians," said Haley, "and that service is the most rewarding type in the world." **UT**



Bartel steps into familiar area as respiratory head

When Ralph Bartel accepted the position as director of the Respiratory Therapy Program on part-time basis at the School of Allied Health he was stepping into a familiar area.

For the last seven years, Bartel has held the same position, full time, at Houston Community College (HCC). And he still does—except on Wednesdays.

He spends Wednesdays here developing a new curriculum that will be implemented next fall. He says the curriculum will especially benefit students transferring to UTSAH from HCC.

The 33-year-old Kansas native is revising the respiratory program with UTSAH school officials, so that students can receive credit for courses already taken at HCC. Specializations will be offered in

respiratory management and respiratory education.

According to Bartel, the new curriculum will save students money, as well as time. After earning their certification at HCC, students will be permitted to enter the UTSAH program as juniors. This system will replace the current requirement that transfer students enroll as freshmen.

Bartel received his B.S. degree from Bethel College in 1969. He completed 96 hours of upper-level respiratory therapy courses at South Texas Junior College, which made him eligible for the registry exam. He earned his M.A. degree in 1978 from a graduate program co-sponsored by Baylor College of Medicine and the University of Houston.

HELPING HER BREATHE is Ralph Bartel, who demonstrates a technique allied health students learn in the respiratory therapy program here. Bartel recently became director of the program on a part-time basis. He still holds the same position at Houston Community College. Looking over Bartel's shoulder is student Pat van Reenan. (Photo by Gary Parker)

Future bright for allied health professions

By Susan Fox

Allied Health occupations are a well-kept secret.

Well, at least they were until the National Commission on Allied Health Education announced the results of a recent study.

There will be an increase in need, and therefore, more jobs, predicts the NCAHE, which just completed a two-year study to determine the future of allied health.

Delivering this good news recently to faculty members and students at the UT School of Allied Health and Baylor College of Medicine was Dr. Robert Kinsinger.

Allied health is in some respects a "new" field. It's also one that is well-suited for leadership, because it is not as traditional as other health occupations.

Kinsinger is vice-president of W.K. Kellogg Foundation — the same foundation that financed the NCAHE's study.

The grant was given to the American Society of Allied Health Professionals, which then formed a commission independent of itself. People on the commission came from colleges, universities, hospitals, trade schools, laboratories and consumer groups who wanted to learn the future status of allied health and how their institutions could complement its growth.

The commission discovered that nurse anesthetologists, cytotechnologists — pap smear technicians — and histotechnologists — people who prepare tissue samples on slides — in addition to many of the other 150 occupations listed under allied health have been largely unknown to the

public.

However, that's changing fast. According to Kinsinger, allied health is in some respects a "new" field. It's also one that is well-suited for leadership, because it is not as traditional as other health occupations. This gives allied health workers an opportunity to take the lead in testing and designing better health care methods.

"Public health and physical fitness are going beyond fad and becoming part of our lifestyles," Kinsinger told his audience here. "Yes, I think we'll see an increase in need."

Interest in health care is climbing and will probably skyrocket by the year 2000, according to the NCAHE report. After all, 40 percent of the population will be 65 years and older by then, and older people are frequent users of health care.

UT examines rural medical shortages

Reports now headlining medical journals say that within 10 years there will be surplus of people in the health field. The number of incoming students, in fact, is getting so high that these reports suggest some schools cut back on their enrollment.

News like that makes it hard to believe the other stories reporting shortages in the health field. But, news of both surpluses and shortages are true. Urban areas will face surplus problems if jobs in the rural areas are repeatedly bypassed by health professionals.

Finding what causes the shortages interests the School of Public Health. Part of a \$148,155 grant awarded to the military

Besides greater health awareness by the public and the increasing number of health institutions, more people also are covered by insurance and are able to pay for better health care, Kinsinger said.

While the demand for allied health workers is increasing, so is the need for more and better education. According to Kinsinger, allied health workers will be assuming more specialized roles in the future.

Competition will be keen, he added, and employers will want more people with degrees, especially master's degrees.

Some colleges and universities already have allied health schools. Kinsinger expects more will be established. In 1966, there were only 2,500 allied health programs on the collegiate level. Today, there are more than 8,000.

placement and referral program here will be used to study and then eliminate problems causing shortages in the rural areas.

The program, which began in 1970, assists war veterans with medical experience in finding a job or getting additional training in the health field.

Helping veterans find jobs is still the main priority. But that priority encompasses much more now—like placing veterans and new allied health graduates in places where they are most needed and working with health institutions to improve work conditions, Dr. Bartholomew Hsi explains.

Hsi head the program and supervises area offices in San Antonio, El Paso, Temple and Tyler.

The NCAHE report also noted that allied health students are getting on-the-job training but at limited places. And that place is usually the hospital.

Kinsinger said there is a need to expand on-the-job training into other settings — like ambulatory facilities, health maintenance organizations and neighborhood health clinics.

Emphasis also will be placed more on continuing education.

The Kellogg Foundation, based in Battle Creek, Mich., is among the five largest private philanthropic organizations in the country. It makes grants totaling more than \$45 million each year for pilot projects in health, education and agriculture.

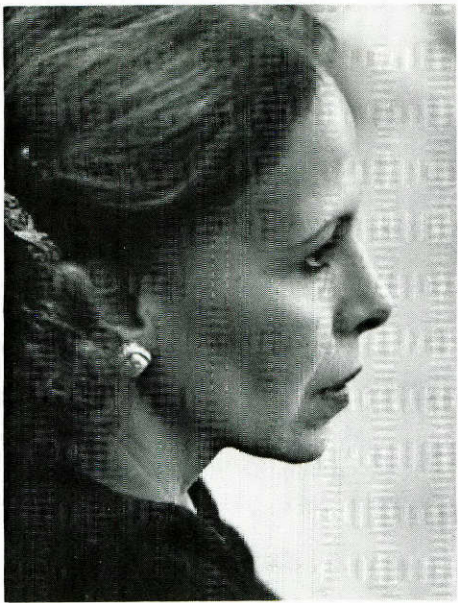
UT

Each office has a staff member there to help the veteran.

The services offered at these area offices and at the School of Public Health are free, according to Hsi. His staff calls various health institutions which may need employees and then sends them a list of eligible people, along with their salary requirements.

The rural areas will receive more consideration and more attention, Hsi stresses. He estimates that between 60 and 70 percent of the veterans who have applied for assistance in getting a job during the last 10 years have been placed successfully.

The remainder of the grant will go toward administrative costs.



FRIENDSHIP AMONG WOMEN—Four emissaries of Mrs. Anwar El-Sadat, wife of the Egyptian president, visited the HSC on Oct. 22. The delegation included (left to right) The Honorable Mervat E-Tellawy, Minister Plenipotentiary of Egypt for foreign affairs; Hermat Mahouz, an international businesswoman; Dr. Zenob El-Soubky, member of the Egyptian Parliament and a noted hematological oncologist; and Dr. Fatma El-Gohary, professor of

water pollution and head of the environmental sciences division of Egypt's National Research Center. The women were particularly interested in comparing notes on women's issues in the two countries. During their visit to the HSC the women also met with President Bulger and toured areas of the TMC relevant to their interests. (Photos by Gary Parker)

Voice Science Lab receives equipment

Speech problems often cause people to feel extremely self-conscious. The spoken expression of their thoughts and feelings may be suppressed for fear of ridicule. Speech problems are commonly thought to be caused by neurological dysfunction, but they can actually be the result of abnormal physical structure and movement of the speech-producing structures—the mouth, tongue, lips and vocal cords.

The Houston Central Lions Club and Arthur Andersen & Co. have donated a \$16,000 signal analyzer to the Speech and Hearing Institute. The signal analyzer, part of the institute's Voice Science Laboratory, is a diagnostic tool used to infer the condition of the speech-producing structures.

The signal analyzer displays a visual representation of an auditory signal such as speech, explained Dr. Dan Kelly, director of the Voice Science Laboratory. This

enables the diagnostician to perform "slow motion" analysis of any portion of that signal.

For example, the signal analyzer can divide a two-second signal into 10 samples of equal length. The diagnostician can better examine each sample independently.

The signal analyzer is financed from the proceeds of the Bill Worrell-Lions Share Celebrity Golf

Tournament, which was held in March, and a donation from Arthur Andersen & Co. The Houston Central Lions Club has sponsored the Voice Science Laboratory for the past two years.

The Speech and Hearing Institute was presented the signal analyzer at an Oct. 7 luncheon meeting of the Houston Central Lions Club held at the institute. The equipment was dedicated in the

memory of Lion James W. Gaston, also a former partner with Arthur Andersen & Co. A plaque commemorating the dedication was affixed to the signal analyzer.

David Paulson, president of the Houston Central Lions, introduced the late Gaston's widow and daughter, Mrs. Mildred Gaston of Austin and Mrs. Janet Erwin of Dallas.

UT

News notes

The "KULF Family Doctor" program features Dr. C. Frank Webber, chairman of family practice and president of the Harris County Medical Society, as a panelist.

Tune-in times for the health tips program are 12:30 a.m., 4:30 a.m., 1:30 p.m. and 8:30 p.m. on

Mondays, Wednesdays and Fridays. The program is also aired at 8:30 a.m. and 4:30 p.m. on Saturdays, and at 2:30 a.m. and p.m. on Sundays.

Free 1981 Crime Prevention Calendars are available from The University of Texas Police Dept. There is only a limited number, so put in your request soon. Call Sgt. Bill Durbin at 792-7268 to reserve yours or send a request to 1708 Main Bldg. (Old Prudential).

The Medical Community Television System (MCTS) has air time available for promotional announcements for professional and medical community events. Please send notices of meetings, conferences, seminars and anything of interest which needs promotion. Information will be written on the character generator for airing on MCTS Channels 4 and 16 between regular programming. Priority will be given on a first-come, first-serve basis.

MCTS broadcasts throughout the TMC from 7 a.m.-5 p.m. Send announcements to Joe Salerno, Control Room, MCTS, 1900 Main Bldg. (Old Prudential), or call 792-4633.

Expedition Research Inc., a placement service for adventurers and explorers, is accepting applications from college students, photographers, scuba divers, mountain climbers, archaeologists, ocean sailors, scientists and other explorers who desire to be placed on various scientific and exploratory expeditions worldwide. For further information call Chris White, col-

lect, at 301-268-3322.

The Professional and Organizational Development (POD) Network in Higher Education is an association of people who share a commitment to improving higher education. The network, which is open to new members, is designed to help its members find resources for renewal—to explore common interests and concerns, exchange information and ideas, forge supportive relationships, enhance professional skills, debate issues of ethics and strategies, and plan for the future.

Dr. Dennis Schaffer, Biomedical Communications, recently attended the POD Network National Conference in Berkeley, Calif. He chaired two panel presentations titled "Career Transition for Administrators" and "Relational Management." Any faculty wanting more information about joining the POD Network can contact Schaffer at 792-7498.

Free Christmas shopping bus service between the Texas Medical Center and the University Village area will be offered by the South Main Center Association every day during the month of December.

The free shopping bus can be caught in front of TWU and will run from 10:45 a.m.-2:30 p.m. Watch for posters describing the route and listing other stops and departure times.

The service is sponsored by the Texas Medical Center Inc. and the University Village Association.



THE HOUSTON CENTRAL LIONS CLUB and Arthur Andersen & Co. donated this signal analyzer to the Speech and Hearing Institute in memory of Lion James W. Gaston, also former partner with Arthur Andersen. From left to right are Gaston's widow and daughter, Mildred Gaston and Janet Erwin, Dr. Dan Kelly, director of the institute's Voice Science Laboratory, and David Paulson, the president of the Houston Central Lions Club. (Photo by Gary Parker)

Blood vessel study sheds light on diabetes

By Ina Fried

When you think of diabetes, you may think of the inconvenience of a carefully monitored diet or the discomfort of daily insulin shots.

But these treatments are not cures. And diabetes is more than just a disease of the pancreas, affecting the level of sugar in the blood.

The effects of diabetes on the blood vessels cause diabetics to have a 1,700 percent greater chance than a nondiabetic to develop kidney trouble. The diabetic has a 2,000 percent greater chance of gangrene, and a 2,500 percent greater chance of severe visual loss.

In the next 10 years, diabetes will be the leading cause of new cases of blindness in patients under 70 years old in the United States.

How do you tell a 30-year-old artist that soon she may not be able to see well enough to work? It's a difficult task that Dr. Charles Garcia would like to find a way to avoid.

Garcia, assistant professor of ophthalmology at the Medical School, is searching for factors that will prevent, or at least slow, the development of visual problems in diabetics.

"Basically, I'm a surgeon treating a metabolic disease," Garcia said. By the time patients are referred to him at the Hermann Eye Center, a cooperative program of the UT Medical School and Her-

mann Hospital, the patients usually have serious visual problems.

Blood leaking into the vitreous (the jellylike fluid in the eyeball) prevents light from striking the retina and being transmitted to the brain as vision. The ophthalmologist has techniques for sucking out the blood and cauterizing the leaking blood vessels, but some visual loss may accompany the treatment, and the problem may recur.

Garcia and Dr. Tom Prager, research fellow in ophthalmology, have developed a method for testing the integrity of blood vessels in the eye. Called vitreous fluorophotometry, the technique involves injecting a dye, fluorescein, into a vein in the arm. Shining a special wavelength of light causes the dye to fluoresce (or give off a greenish light). An hour after injection, the physician can measure the amount of dye that has leaked from the blood vessels into the vitreous.

Measurement taken before and after treatment can show whether the treatment is effective in reversing or stabilizing the disease in the retina, Garcia said.

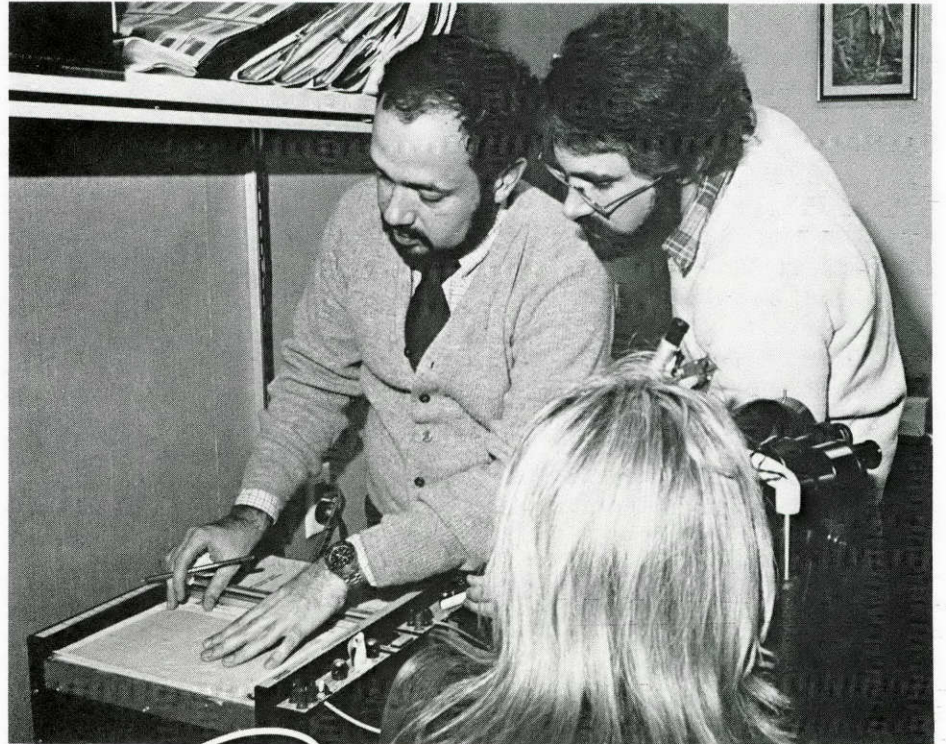
While refining the fluorophotometry technique, the researchers have been developing a large data base of diabetic patients, cataloguing the stage of disease and trying to identify factors at risk for blood vessel disease. The only correlation discovered so far is that the disease of the blood vessels seems to be associated with the duration of the diabetes, Garcia said.

There is some belief that strict control of blood sugar through diet or insulin may control the disease of the blood vessels, Garcia said. Other treatments being investigated include drugs, such as aspirin, and control of blood pressure. Garcia will cooperate with specialists in endocrinology, nephrology, neurology and biochemistry in treating and evaluating patients.

In September Garcia and

Prager gave a paper on vitreous fluorophotometry at a meeting of the International Society of Experimental Research in New York. The method is being investigated at four other locations in the United States: the Illinois Eye and Ear Infirmary in Chicago, Washington University in St. Louis, the University of Wisconsin at Madison and Joslin Clinic in Boston.

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DIABETIC EYE DISEASE—Dr. Charles Garcia (left) and Dr. Tom Prager conduct a fluorophotometry study. The method is promising as a sensitive diagnostic tool for detecting diabetic eye disease in its very early stages. (Photo by Rich Sabo, Department of Ophthalmology)

Vision researcher to speak in Japan

By Eileen Tracy

Department of Ophthalmology

Although there are many features of sight: perception of form, brightness, contrast, depth—to many of us, it is color that fascinates.

"For me, the question has always been, how do we use color to visually interpret the world around us?" says Dr. Robert E. Marc, assistant professor of neural sciences at the Graduate School of Biomedical Sciences, Sensory Sciences Center, and the Medical School, Department of Ophthalmology.

Marc has been invited to participate in a symposium in Kyoto, Japan, by the Taniguchi Foundation, Nov. 25. A private foundation, the Taniguchi Foundation sponsors symposia in basic sciences such as mathematics, physics and neurobiology. The meeting will be attended by 20 scientists, nine Americans, one from the Netherlands and the rest from Japan.

Marc's color-vision work in the fish visual system is widely known. His recent work on neurotransmitters in the fish visual system is central to some basic issues in color vision. Japanese and European scientists are interested in a variety of animal models of color vision and the Japanese have done extensive work with fish.

While still an undergraduate at UT-El Paso, Marc attended the lectures of Nobel laureate Dr. George Wald on color vision. Already marginally interested in this subject, Marc was so intrigued by Wald's papers—including his Nobel prize lecture—he decided to study the basic mechanisms underlying color vision. "Since then," he says, "all my research has been in vision."

His paper, entitled "Retinal Neurotransmitters, Morphology and Color-Coding" describes the chemical signals that are used by

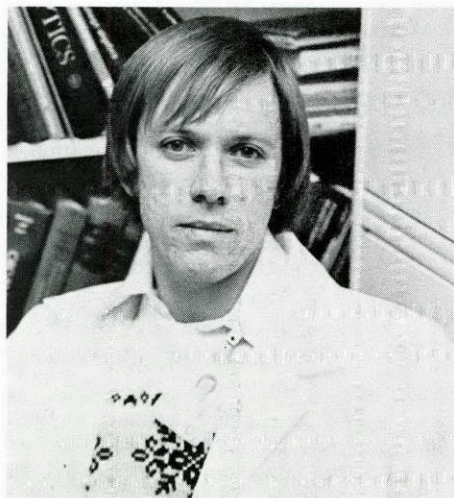
various nerve cells to transmit specific kinds of color information.

"Certain nerve cells use certain chemicals to talk to others," he said. "I am going to describe the various pathways that carry red, and red and green information. It's part of a chemical dissection of color vision."

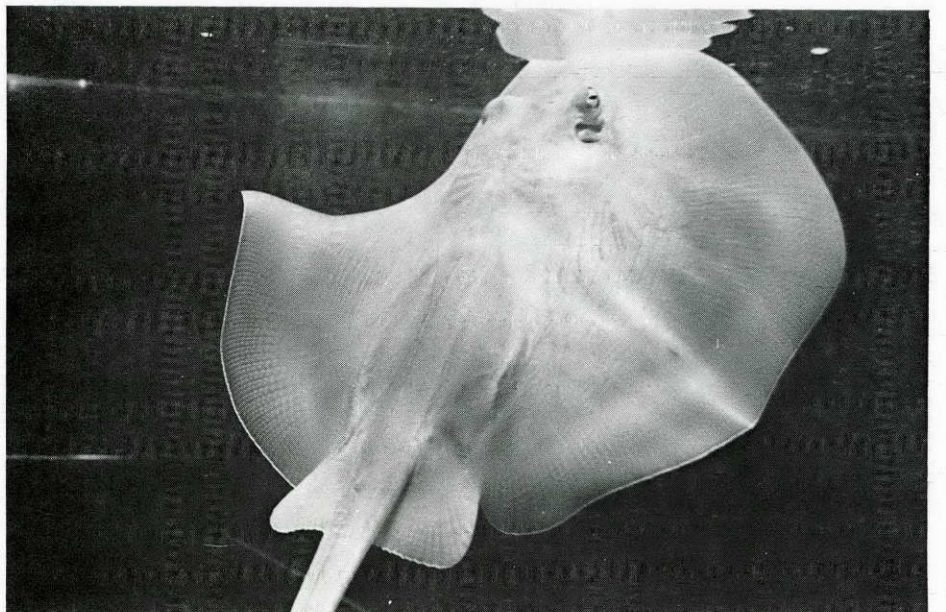
After the symposium, Marc and three other American scientists have been invited to present

public lectures on Dec. 1 at Keio University in Toyko. Marc's paper will be "Neurochemical Classifications of Amacrine Cell Synapses in the Mammalian Retina." This work represents a new facet of research in which he is studying the mechanisms of color vision in the eyes of primates.

The Taniguchi Foundation plans to publish the proceedings of the symposium.



Dr. Robert E. Marc
Assistant Professor
of Neural Sciences



'WELL-DESIGNED ANIMALS'—The stingray is one of the animals with color vision used in Dr. Robert Marc's research. Related to the shark, the ray is thought to be the only animal in that family with color vision. (Photos by Rich Sabo, Department of Ophthalmology)

'Hot' line for cool customers

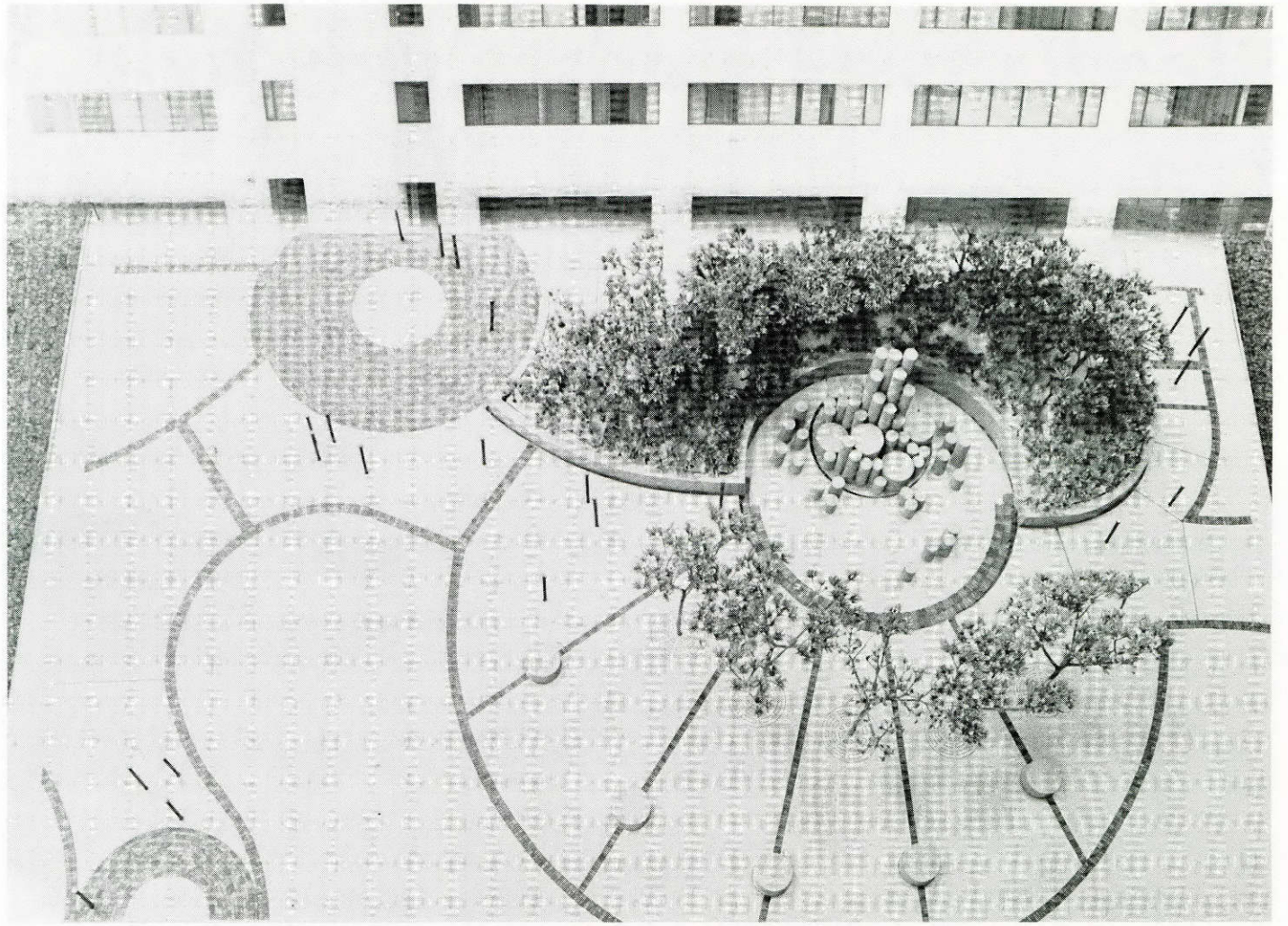
By Cathy Fluornoy
Physical Plant

Too hot or cold?

Department of Energy regulations require minimum summertime thermostat setting at 78° F and maximum wintertime setting at 65° F, unless a special exemption is allowed. Deviations from these parameters are the responsibility of the building occupant. If you require or desire a deviation, the UTHSCH Physical Plant will respond to a request signed by a responsible authority. It is then your responsibility to justify, explain or pay any penalty for the deviation.

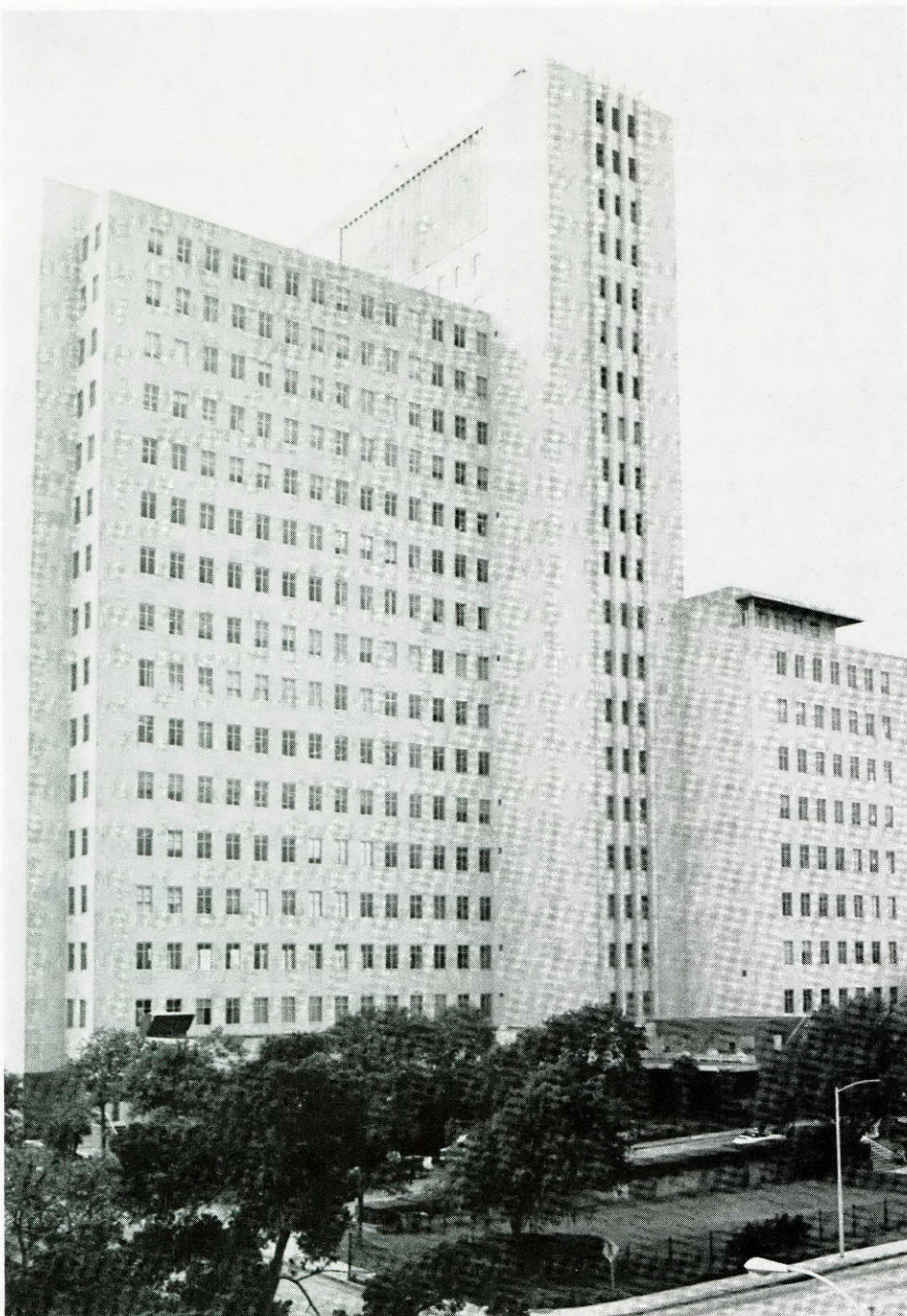
The Utilities Operation section of the UTHSCH Physical Plant is staffed 24 hours each day to ensure that your facilities are habitable. If any utility service is unsatisfactory to you, just dial 792-5807 and report the problem.

Please do not blame all discomfort on thermostat settings. If a sudden change has occurred in room temperatures, there could be a problem with any part of the system. If a problem persists, system adjustment may be necessary.



LANDING FIELD FOR ANCIENT ASTRONAUTS? No, it's a model of the new courtyard between the Medical School Main Building and the Jesse H. Jones Library Building. The project was scheduled for completion in late November, according to Bob McGhee, director of planning. The cluster of cylinders inside the border of trees is a

fountain. The short cylinders spaced along the "spokes" of brickwork are seating areas. And, in case you're wondering, the matchstick-like figures represent the people of the HSC who may already be enjoying the new gathering place. Public Affairs photographer Gary Parker created the composite picture.



THE ROCK IS GONE—The former Prudential Building was officially renamed the Main Building at a meeting of the UT Board of Regents Oct. 24. The 19-story building opened its doors in 1952. Purchased in 1974 by the UT System, the building was vacated by the Prudential Insurance Company's Southwest Home Office in September 1977. Now it is shared by the Health Science Center and M.D. Anderson Hospital. In April 1979 the Prudential name was removed from the building. Two large images of the Prudential "Rock of Gibraltar" were covered last spring. (Photo by Gary Parker)

We get letters...

October 14, 1980

TO: Editor of HoUTexan
FROM: Betty Martin, Administrative Assistant

Dear Editor:

I know that the HoUTexan is always looking for ways to better the lives of the personnel of The University of Texas Health Science Center at Houston. It is for this reason I am writing you of a problem that many of us encounter every day and I have a few solutions.

It's the high rise elevators in the Prudential Building. As everyone knows these elevators run on an erratic and infrequent basis, and each day they seem to get worse. Many of us find ourselves spending large parts of our day waiting to go up or down. How do we correct or alleviate this situation? My solutions are:

1. Prepare a schedule of what times these elevators run and post it by the elevators on each floor. For instance, the shuttle buses have a time schedule to follow; why not the elevators? If you needed an elevator at say 10:00 you could glance at the posted times and select the elevator that fits your schedule. Possibly you could find an elevator leaving at 9:50 instead of having to wait till 10:20 as we presently do.
2. Get the employee relations committee to organize group activities for those waiting for an elevator. Bridge, backgammon, checkers and chess tournaments could be easily done. I have read several books and completed two afghans in the past few weeks while waiting.
3. Self-improvement and college courses could be taught at the elevators. Why not work on a degree in this spare time?
4. Why not announce the arrival and departure of elevators as they do planes at the airports? For example a public address system on each floor could announce "Elevator #3 is arriving at the 15th floor—departing in one minute for the 16th, 17th and 18th floors."
5. Other departments could be utilized in making life on the elevator more tolerable:
 - a. School of Public Health and/or the School of Nursing could provide medical attention to people on elevators by assisting in births (which raises the question would children born on the elevators be illegal aliens and would they have to pay tuition to go to school?)
 - b. The Institute of Religion could provide ministers to assist in marrying and counseling couples who meet on the first floor, marry on the 10th floor and separate before reaching the 18th floor.
 - c. The University of Texas Police Department could provide marshalls to ride all elevators to keep those who get on at 18 from hijacking the elevator to the first floor without making all the stops in between.
6. Repair at least one more of the elevators or let us use the freight elevator during peak hours such as 7:45 to 8:15 in the morning and from 12:00 to 1:00 at midday and from 4:50 to 5:15 in the evening. This seems such an obvious answer that many would think it would be number one on my list but then, if this were carried out what would become of those of us who arrive in our office at 8:20 and say, "Sorry I'm late I've been waiting 25 minutes on an elevator."

HSC addresses issue of cost effectiveness

The problem of cost effective health care delivery is being addressed through both teaching and research efforts at the Health Science Center, according to results of a study by the HSC Task Force on Cost Effectiveness.

The task force of faculty and students was appointed in February by President Bulger. In doing so, he expressed his feeling that the issue of health care costs was one of the most pressing societal concerns and that those in health science universities must be sure that we have focused on this problem in the educational process of tomorrow's health care providers.

In response to a survey conducted by the task force from May through July 1980, 112 courses and 42 research projects involving cost effectiveness were identified. Ninety-six of the 445 faculty responding identified themselves as responsible for the instruction and 37 were responsible for the research.

About 61 percent, or 271 respondents from all areas of the HSC, expressed interest in receiving materials on teaching, research possibilities and funding opportunities in the area of cost effective health care delivery.

A four-part program this year will capitalize on that interest and facilitate communication about health care costs.

1. A series of seminars on various approaches to cost effectiveness in research or curriculum will be held with guests describing their experiences in different en-

vironments.

2. A resources center for cost effectiveness materials will be established and made available to all faculty. The resources will include articles, books, audiovisual aids and pertinent data from faculty and other sources.

3. Several seed grants, each up to a maximum of \$5,000, will be awarded to faculty with research interests in these issues. The grants are seen as adequate to provide for organization of data, technical assistance or computer time which might provide the background necessary for attracting outside funding.

4. A conference will be held late in the academic year with invitations for papers going particularly to those schools where programs have been tried for affecting the behavior of students or practitioners.

The task force was staffed by Marcia Willis, special assistant to the president for community health affairs. It presented its report to President Bulger in late October.

"A principal finding of the study, then, is that not only is there already activity in the HSC as a whole," the report states, "but that the concentration of that activity is reflective of the current national pattern in cost related research and education."

"Nationally, all schools of public health and many schools of medicine have programs which focus on cost effective health care. The survey shows that in this university virtually all of the reported research (97 percent) and

an overwhelming majority of the courses (68 percent) are located in the Medical School and the School of Public Health."

Of the 112 courses identified by responding faculty, only one is a formal economics course, the report says. That course is Health Economics II, offered by the School of Public Health. It emphasizes cost-benefit analysis and cost-effectiveness analysis, widely used techniques for decision-making in situations where significant or sensitive social choices must be made.

"While there is no identified trend nationally in the fields of nursing, dentistry and allied health sciences," the report continues, "some respondents from the three schools in those disciplines did report that they are already involved in formal and informal teaching on cost effective health care."

"Research interests and project foci of responding faculty were

found to be in areas generally recognized as critically related to the control of health care costs. Those areas include: utilization of laboratory tests, appropriate use of imaging procedures, the role of information systems in medical recordkeeping and audit practices, preventive medicine, technology assessment, health care financing, and alternative modes of health care delivery."

The task force had two sub-committees: the curriculum sub-committee, chaired by Dr. Doris Ross, associate dean of the School of Allied Health Sciences, and the research sub-committee, co-chaired by Dr. Richard Grimes, associate professor of behavioral sciences in the School of Public Health, and Dr. James Thomas, associate professor of internal medicine in the Medical School.

For a copy of the complete report, contact Marcia Willis, 792-4897.

Elevated roadway called 'investment in future'

A proposed mile-and-a-half elevated roadway from the Texas Medical Center to a 100-acre tract of UT land would be an important "investment in the future," according to Dr. John C. Bartlett, vice president for planning and institutional studies.

The UT System Regents have authorized a study to determine the feasibility of constructing the roadway. The Houston firm of Turner-Collie-Brader was appointed as consulting engineer to work with a planning committee from the Health Science Center and the UT System Office of Facilities Planning and Construction. Discussions have begun with TMC, Inc., to coordinate with other institutions which would benefit from a roadway.

Such a roadway could reduce travel time for standard buses from as much as 25 minutes to about four minutes, President Bulger said.

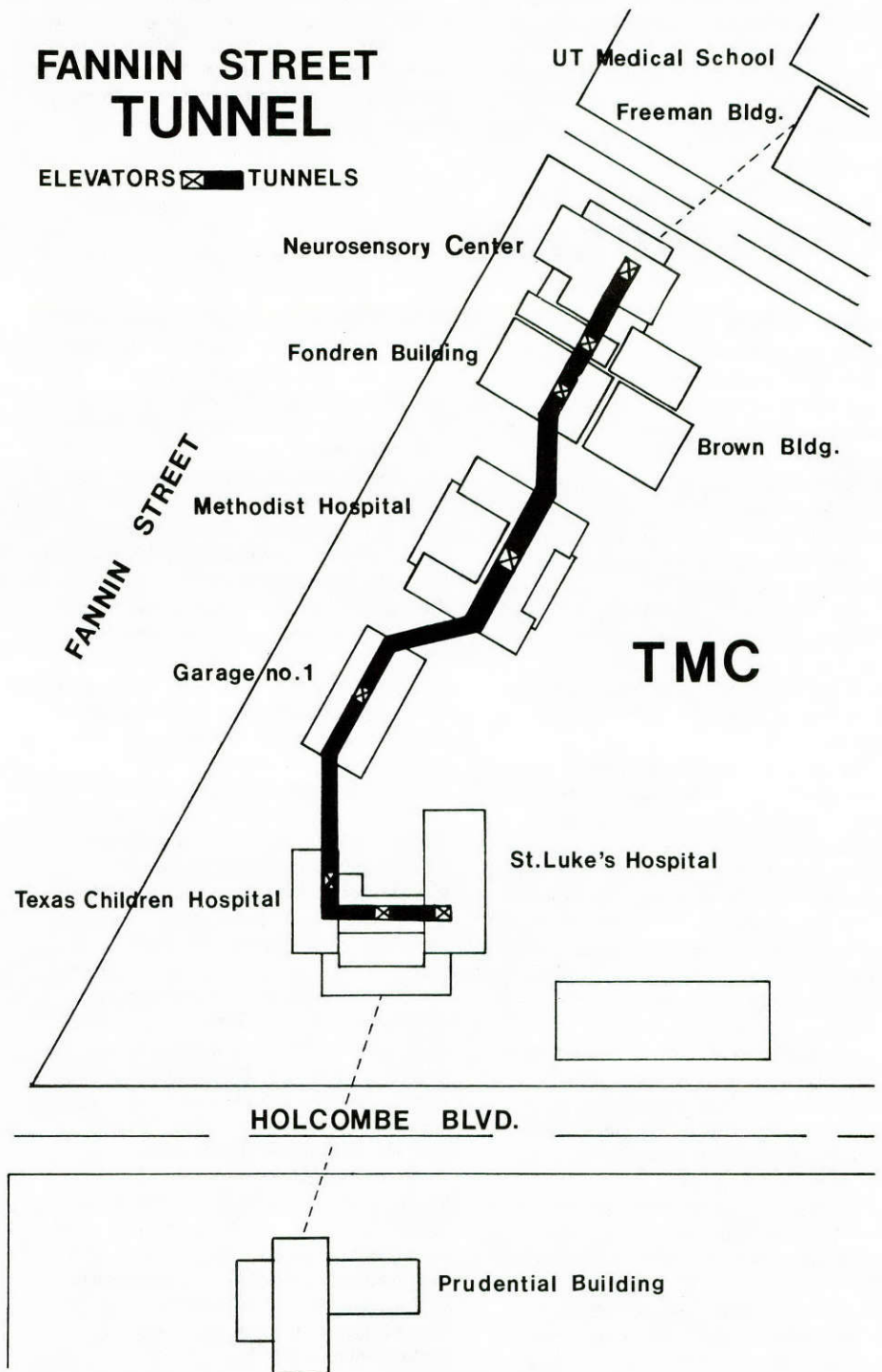
Tentative plans for development of the land include construction of student housing, HSC general services and various academic and patient care facilities for both the HSC and M.D. Anderson Hospital. The site is

south of the National Guard and Marine Corps Armory along Old Spanish Trail and bounded by Knight Road on the west.

The elevated roadway could bridge major traffic obstacles between the site and the TMC: Holcombe, Braeswood and Old Spanish Trail.

Previous studies by TMC will serve as the basis for planning. The roadway is envisioned as a cooperative project with TMC, Bartlett said. It could help relieve traffic congestion in the medical center by connecting the Brown Lot and other remote parking lots with institutions along a route from the 100 acres to Hermann Hospital.

"The roadway can be anything from just an elevated roadway with limited access for buses all the way to a fully-automated people and materials moving system," Bartlett said. It could also provide a right-of-way for electronic connections, overhead utilities and a pneumatic tube system to move patient specimens and paperwork similar to one now in use at the Mayo Clinic.



NEITHER RAIN NOR SNOW? It may not snow in Houston, but a tunnel going almost from one end of the Health Science Center to the other can protect you from the hot, cold or wet weather. Walking north, you can take St. Luke's blue or yellow elevators or the Texas Children's red elevators to the ground floor and follow the signs to Garage No. 1, Methodist Hospital and the Neurosensory Center. To enter at Methodist Hospital, take the H, I, J or K elevator. At the Neurosensory Center you enter the ground floor patient lobby across the street from the Freeman Building. Cross the lobby to the left, then turn right and follow the signs to Methodist and St. Luke's Texas Children's Hospital. The tunnel is not a dark, scary place during the day. It seems just like a well-lighted hallway. However, at least parts of it are closed from 9 p.m.-6 a.m. (Map by Gary Parker)

UT System officials support Bulger

(Continued from page 1)

without fixed terms and subject to the pleasure of the chief administrative officer of the institution and the aforesaid approval of the Chancellor.

Section 5.2. The Board delegates to the Chancellor and the Chancellor delegates to the chief administrative officer of each component institution the responsibility for the permanent or acting appointment of department chairmen, department heads, and their equivalents. Such department chairmen, department heads, and their equivalents serve without fixed terms and subject to the pleasure of the chief administrative officer of the institution.

Section 5.3. The Board endorses the principle of reasonable faculty and student consultation in the selection of administrative officers of the component institutions, and the primary operating units, and expects the chief administrative officer, as he deems appropriate, to consult in the selection process with the representatives of the faculty and student body. However, the chief administrative officer of the component institution is responsible for executing the duties of his office and consequently shall not be bound by nominations to administrative positions in his institution by campus selection committees, and The Handbook of Operating Procedures of each component institution shall so state.

President Bulger's action in removing Dr. Cannon and Dr. Dudrick from their respective departmental chairman-

ships was completely within the authority given him by the Board of Regents under these rules. President Bulger consulted with me in advance of taking this action. He had my support as chancellor at the time. He has that support now. He will have it tomorrow.

I want to further assure you—and this will be confirmed by Chairman Williams and Regent Fly—that President Bulger has reported on this matter in detail to the Board of Regents, and he has the support of the Board.

In closing, I wish to make one last thing clear to all of you: it is **not** in the interest of the Health Science Center or of The University of Texas System that the rumors and allegations that have circulated in the past several weeks continue. Those rumors and allegations are divisive and are not in keeping with the degree of professionalism expected of you as members of the faculty and as residents of this institution.

Specific charges and supporting evidence against any individual are one thing, but rumor and innuendo are quite another. The first is entirely appropriate and should be brought to the attention of the administration of this institution. The latter have no place at this institution or any other institution within the System.

Any further campaign of rumor, suspicion, or unfounded allegation will be viewed as a deliberate attempt to disrupt the orderly administration of the Health Science Center, and those responsible for such activity will be

dealt with to the full measure provided in the *Rules and Regulations* of the Board of Regents. I will make no further statements regarding this matter and will not entertain any questions.

I ask all of you to return to your assigned duties and responsibilities and to work together with the administration to make this institution fulfill its ability to become one of the foremost health science centers in the nation.

Statement by Regent Williams

As Chancellor Walker has said, any rumors to the contrary notwithstanding, the Board of Regents has been fully briefed regarding the changes in leadership of the Departments of Surgery and Pathology at the Houston Health Science Center. The changes in leadership have been handled in accordance with the *Rules and Regulations* of the Board of Regents. The divisive rumors that are circulating here must stop. Institutional stability demands it.

Dr. Bulger will remain president of The University of Texas Health Science Center at Houston. Dr. Walker and Dr. Bulger have the support of the Board of Regents in moving ahead to build this institution into one of the first class.

Statement by Regent Fly

I want to confirm what Chairman Williams and Chancellor Walker have said.

The primary purpose of this institution is teaching, research and patient care. When the time and talent of the faculty and students are diverted from

these purposes by divisive and unfounded rumors, the quality of the institution suffers.

Dr. Bulger in his day-to-day role as president and Dr. Walker in his capacity as chancellor have my support in moving ahead with the job of managing The University of Texas Health Science Center at Houston.

Statement by President Bulger

I am happy that I have the express support of Chancellor Walker and the Board of Regents. I trust that the faculty and residents of the pathology and surgery departments of the Health Science Center will now devote themselves fully to the business at hand and forego further divisive activities. I will insist on it.

I will have no statement regarding the circumstance which led to my decision to remove either Dr. Cannon or Dr. Dudrick from their positions as chairmen of their departments. We are already involved in litigation over my decision and I do not wish to say anything that may complicate or prejudice our position. This is the advice I have been given by the attorneys handling this matter and I shall follow it.

I intend to devote my full attention to my duties and responsibilities as president of the Health Science Center. I expect everyone else to do the same with regard to their duties.

UT

Newsmakers

Medical School

Dr. Catherine Damme, assistant professor of community medicine, participated as an intern in Columbia University School of Law's three-week course "The Project for the Study and Application of Humanistic Values in Law," held in Stowe, Vt., during July. Damme is the course coordinator for the medical jurisprudence course given at the medical school.

Dr. Marvin E. Chernosky, chairman of the department of dermatology, attended a meeting of the American Academy of Dermatology as a member of the board of directors in Chicago on Sept. 13.

Dr. John H. Harris Jr., department of radiology, has been elected chairman of the Board of Chancellors of the American College of Radiology.

Dr. Stephen B. Tucker, department of dermatology, presented a lecture on "Cutaneous Vascular Tumors" at the Dermopathology Conference sponsored by the pathology department of M.D. Anderson Hospital, Aug. 17-22 in Houston.

Dr. C. Frank Webber, chairman of family practice, was a guest speaker at a symposium on Modern Concepts in Health Care sponsored by the Adult Education Committee of Congregation Beth Israel on Oct. 23.

Dr. Cheves M. Smythe, professor of medicine, was a panelist at a symposium also sponsored by Congregation Beth Israel on Oct. 15. The symposia were two of a three-part program.

Dr. William S. Fields, chairman of the Department of Neurology, was an invited guest and speaker at three international meetings in late October.

In Paris he delivered the Charcot Lecture (named for a founder of modern neurology) at Sal Petriere Hospital, discussing the roles of medicine and surgery in the treatment of patients with transient ischemic attacks.

Earlier Fields addressed the Con-

gress of Thrombosis and Hemostasis in Monaco, where he talked on the current status of medical management of ischemic stroke prevention, and spoke at a satellite conference near Nice on cell adhesion.

Dr. Salvatore J. Enna, associate professor of pharmacology and neurobiology, presented a lecture on "Possible Neurotransmitter Mechanisms for the Central Effect of Benzodiazepines" at the Texas Research Institute of Mental Sciences symposium, "Biology of Anxiety." The symposium, sponsored by the Office of Continuing Education, Texas Department of Mental Health and Mental Retardation, was held Nov. 5-7 in Houston.

Dr. Carl M. Sandler, department of radiology, presented a paper co-authored with **Dr. Barry Toombs** on their experience with computed tomography in the evaluation of blunt renal injuries at the Annual Scientific Meeting of the Radiologic Society of North America, Nov. 16-21 in Dallas.

Toombs presented a paper co-authored with Sandler on the conclusions drawn from a retrospective review of the use of computed tomography in the diagnosis of acute chest injury at the same meeting.

Dr. Stanley J. Dudrick recently received the Alumni Citation from Franklin and Marshall College in Lancaster, Pa., for "distinguished professional achievement." Dudrick, a 1957 graduate of the college, was honored for pioneering the development of hyperalimentation, an intravenous feeding process.

Dental Branch

Dr. Angela Cunha will be in the Department of Unit Restorations for the next year on a Rotary Foundation Scholarship. Cunha, who is here to receive informal training, is a 1976 graduate from the School of Dentistry of Volta Redonda in Rio de Janeiro,

Brazil.

Dr. Barbara Boyan-Salyers, assistant professor of microbiology, was a "Goals and Objectives" panel member of the mineralization component of the Soft Tissue Stomatology and Nutrition Program Branch at the National Institute of Dental Research in July and August, in Bethesda, Md.

Boyan-Salyers also presented two papers at the Gordon Research Conference on Structure, Chemistry and Physiology of Bones and Teeth in July in Meriden, N.H.

Dr. Kenneth O. Madsen, department of physiology-nutrition, presented a lecture on "Anticaries Potential of Seed Coverings and other Naturally Occurring Substances" to the American Association of Cereal Chemists during the week Sept. 21-25 in Chicago.

Dr. Samuel Dreizen, professor and chairman of dental oncology, presented a lecture entitled "Oral Complications of Cancer Therapy" at the Eleventh Annual Official Session of the American College of Prosthodontists on Oct. 10 in San Antonio.

Timothy A. Sloan, dental student, presented a table clinic entitled "Iontophoresis in Modern Dentistry", a revised method for the treatment of hypersensitive dentin, at the American Dental Association Annual Session held Oct. 11-16 in New Orleans.

Dr. Barry Hinderstein, associate professor, gross anatomy department, delivered a lecture on his environmental research in Texas regarding the impact of wildlife, especially avian species, on the health and stability of urban ecosystems, at Hampshire College, Amherst, Mass., June 14-18.

Dr. Samuel Dreizen, professor and chairman, department of dental oncology, presented a lecture on "Metabolic Diseases Involving the Oral Cavity" at the II International Course on Oral Medicine, held at the University of Puebla, Mexico, Aug. 14-16.

Dreizen also presented a lecture on "Oral Complications of Cancer Therapy" at the 6th Annual Cancer Conference for the Dental Profession in St. Louis on Sept. 27. The conference was sponsored by the Missouri Division of the American Cancer Society and the Missouri Dental Association.

GSBS

Dr. Tommy C. Douglas, assistant professor, will be a visiting assistant professor at California Institute of Technology through Dec. 31, 1980. Douglas began the visiting professorship on Sept. 15.



BIRTHDAY REUNION—Ruth Hinojosa celebrated her 86th birthday at the home of her daughter Bonnie C. Flores, who works in building management at the Anderson Mayfair, and her son-in-law Ernie M. Flores, project specialist at the HSC Physical Plant. Flores enlarged his patio for the barbecue, which was attended by Mrs. Hinojosa's children and their spouses from Ocean City, Md.; Sacramento, Calif. and Pittsburgh, Calif. All grandchildren and great-grandchildren from Houston and many friends also helped to celebrate the occasion. (Photo by Ernie M. Flores, Physical Plant)

Associates sponsor lecture series

By Barbara Baker

Last year nearly 3500 Texans died before their first birthday. And the United States, which 25 years ago had the lowest infant mortality rate in the world, now ranks eighteenth.

Dr. Eugene Adcock, associate professor of pediatrics and of obstetrics and gynecology in the Medical School, cited those statistics during the first of a series of health promotion lectures sponsored by the Associates of the Health Science Center, as he discussed ways that infant deaths can be prevented.

Adcock said that Texas, which has the second highest birth rate in the country, has an infant mortality rate greater than the national average. He commented that the infant mortality rate (number of deaths in the first year of life) is one way of evaluating the delivery of health care.

Through the Turner Neonatal Intensive Care Unit at Hermann Hospital, and through outreach programs in community hospitals, UT is working to improve the chances for critically ill infants within a 150 mile radius of Houston, Adcock said.

To reduce infant mortality, three "A's" are essential, he explained.

The first is **availability** of medical care. He said that many risk factors can be identified during pregnancy, allowing doctors to prepare for difficulties the child

might experience at birth. If problems are anticipated, arrangements should be made to deliver the baby in a hospital equipped to deal with them, he said.

The second "A" is **accessibility**. Adcock said that specialized care for the high risk mother and child should not be limited by geography or ability to pay.

Finally, the treatment should be **acceptable** to the family and to the community doctor who must deal with the mother and child after discharge from the specialized care center at Hermann.

At the Turner Neonatal Intensive Care Unit, care goes beyond sophisticated life support systems and other technological advances. Every effort is made to provide individualized care and to include parents in the care of their child while he or she is in the unit. Also, through an innovative Parent Education Program, parents are trained to continue care once the child has gone home, the pediatrician noted.

Even though most neonatal problems can be predicted before birth, there are a small number which cannot. For that reason, babies born at Hermann are given a five-step screening examination in the delivery room to identify any unforeseen difficulties, Adcock explained.

UT is also reaching out to community hospitals to help them stabilize critically ill newborns un-

til they can be transferred to an intensive care unit at one of the larger hospitals. A special nurse/physician team can be dispatched via ambulance or Life Flight to ensure the safest transport of the critically ill newborn.

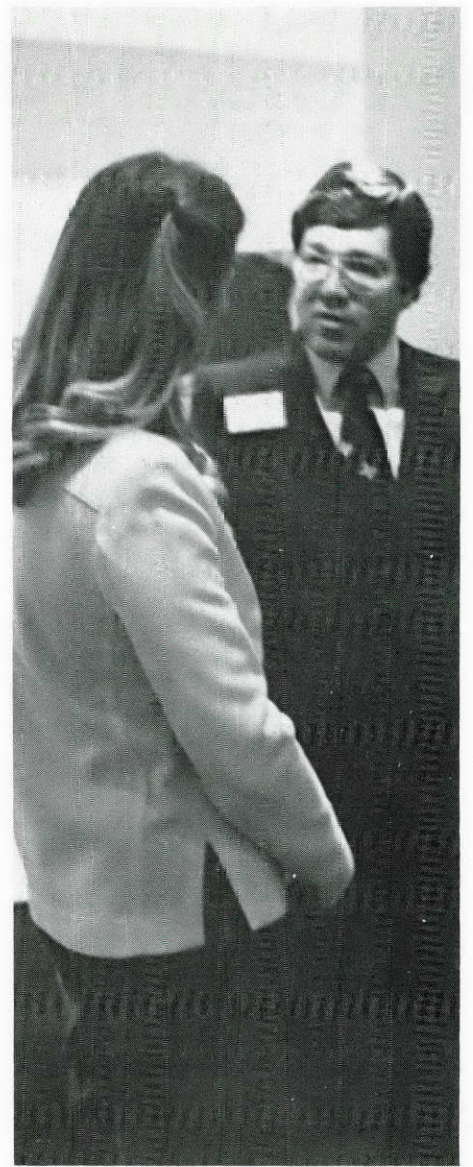
Also, a hotline is open for physicians to call specialists at the Medical School if they have questions about the treatment of a patient, Adcock said.

Following the lecture, Adcock answered a number of questions from the audience about Rh factor, maternal nutrition, Sudden Infant Death Syndrome and other factors known to contribute to infant deaths.

The Associates is a group, sponsored by the HSC Development Office, whose purpose is to serve the continuing health education needs of UT graduates (from all UT components) in the Houston-Harris County area. They are sponsoring a series of four health promotion lectures during 1980-81. The public is welcome to join the group, and all the lectures will be open to the public.

The next lecture, scheduled for Jan. 14, will be a panel discussion of exercise and its effect on health, with particular emphasis on jogging. For more information about the Associates or the lecture series, call the Development Office at 792-4279.

UT



ASSOCIATES LECTURER—Dr. Eugene Adcock discussed factors affecting an infant's chances of survival during the first health promotion lecture being sponsored by the Associates of the HSC during 1980-81. Following the lecture he chatted with audience members during a wine and cheese mixer. (Photo by Wendy Goodridge)

Etc.

Dental Branch—Instructional Development

Jennifer Brown, TV-film specialist, became the bride of Bill Shropshire of Texas Commerce Bank on Nov. 8. Reporter: Diane Broberg

Dental Branch—Unit Restoration

Dr. Huynh T. Xuan, associate professor, recently changed his name to Dr. Xuan Huynh (pronounced Win). In the Far East last names are written first. Huynh changed to the American order because he was recently naturalized a United States citizen. Reporter: Diane Broberg

Physical Plant

Walter Walczuk, maintenance supervisor, is back on the job and doing fine after undergoing major surgery on Sept. 22.

Joyce L. Miller was promoted to administrative assistant in Physical Plant, replacing Cheri Spitzenberger who transferred to Administrative Services. Both changes were effective in mid-October.

Mary Lamar Cancino and her husband, Enrique, are the proud parents of a baby boy, Richard Alexander, born on Sept. 29 and weighing 8 lbs. 5 oz. Lamar is administrative clerk at the Physical Plant South Main Shop. Reporter: Cheri Spitzenberger

Print Shop

June Gilliam and her husband are the proud parents of a baby boy, Garland Gilliam Guillory, born on Oct. 24 and weighing 7 lbs. 12 oz. June is an administrative clerk for the Print Shop at South Main. Reporter: Cheri Spitzenberger

Dental Branch—Biochemistry

Eunice Newlin retired from the Dental Branch on Sept. 30. She had been employed in the Outpatient Division-Nursing for 10 years and was serving as a Dental Dispensary Assistant II at the time of her retirement. Newlin was honored by a luncheon given by the department. Reporter: Mary Ann Davis

Medical School—Histology

Eugenie Couvillon became the

bride of Todd Holman, a fourth year UT medical student, on Sept. 20. Couvillon is the histology secretary.

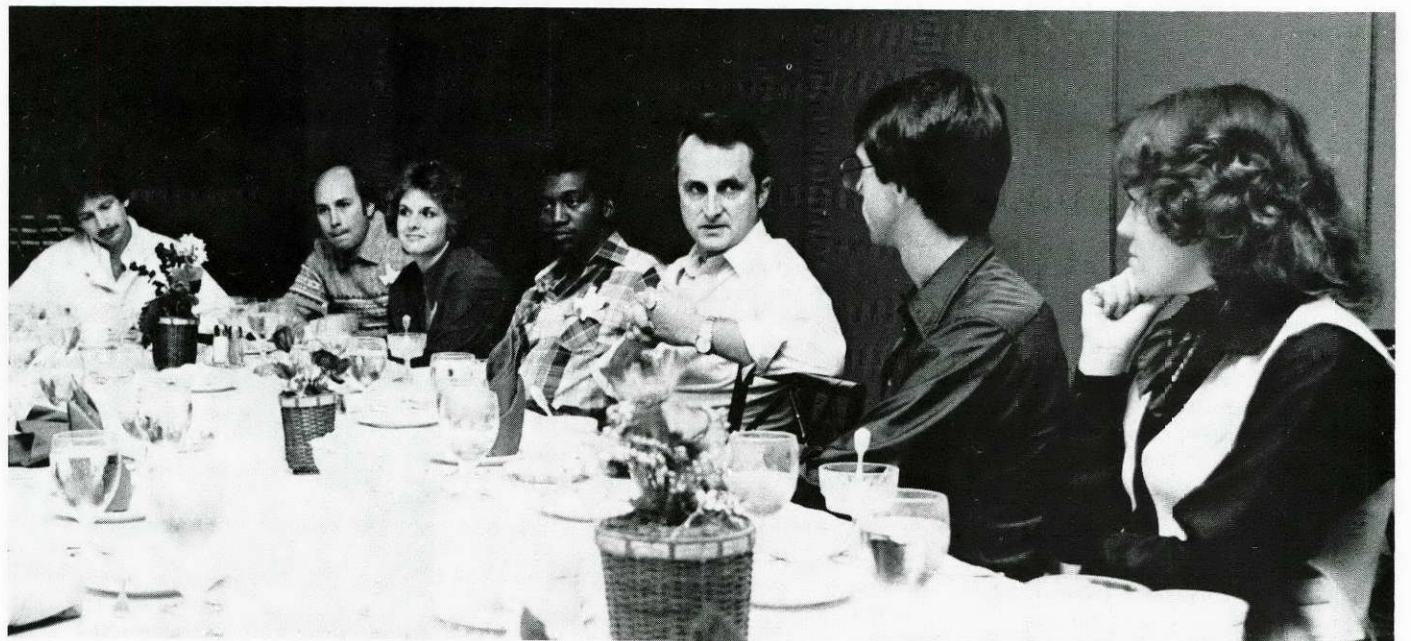
Allied Health—Radiologic Technology

Joe Foley coordinated a chili cookoff sponsored by the Houston Area Radiologic Technologists Society (HARTS) on Oct. 25 at the Prudential Picnic area. Seventeen teams entered, and 300 people attended. Gene

Weatherall, Emergency Medical Services, served as Head Judge. Reporter: Joe Foley

School of Public Health—Environmental Sciences

Congratulations to Dr. Michael Smolensky and his bride, Nita, whose marriage occurred on Oct. 18. Smolensky is associate professor of environmental sciences.



STUDENT INTERCOUNCIL of the Health Science Center plans student activities for 1980-81. Scheduled events include an Open Forum with President Bulger on Dec. 3 and a student Christmas Party on Dec. 5. Activities for 1981 may include a trip to Mardi Gras, speakers on various subjects and movies. Bulger met with the Intercouncil members for lunch at the Houstonian Inn, Nov. 1, to discuss the upcoming activities and problems many students face. From left to right are Ray Gillespie, Dental Branch; Henry Grage, GSBS;

Theresa Giddings, Nursing School; Ron Elmore, Dental Branch; President Bulger; Mark Payne and Nancy Vernon, Medical School. Other Intercouncil members include Paul Mabry and David Burns of Allied Health; Alan Coleman, Dental Branch; Linda Lopez, GSBS; Jose Molinar and Norwood Knight-Richardson, Medical School; Nanette Abt and Megume Yukawa, Nursing School; Araceli Garza, Barbara Bukowski and Connie Sanchez, Public Health. (Photo by Gary Parker)

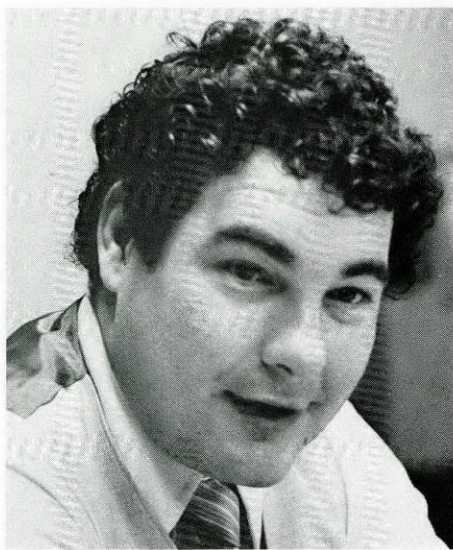
Purchasing director notes changes in state rules

"You tell me what it is you want, and I'll tell you where you can get it and do it within sound business practices." This is the philosophy of Brian Yeoman, the recently appointed Health Science Center Director of Purchasing.

Formerly the assistant director of purchasing here, Yeoman has returned from UT-Dallas where he was director of purchasing. He has a master's degree in political science with emphasis in public administration and worked in the purchasing department at the University of South Dakota for two years.

"The trend in purchasing in the state of Texas is very clearly toward greater centralization at the state level," Yeoman said. Because of this, the amount of documentation required from the local purchasing department has increased three-fold in the last two years. At the same time, the volume of transactions in the HSC has increased by 25 percent.

"Many of the faculty and staff may be unaware of the dramatic changes in the statutes regulating purchasing by state institutions," Yeoman said. "Under the old statutes, services were exempt from competitive bidding and from oversight by the central procure-



Brian Yeoman
Director of Purchasing

ment agency. Now everything from garbage and trash removal to the design and fabrication of scientific instruments is covered by the statutes. Another change is that federal grant fund purchases are now subject to the state regulation and oversight.

"We still perform the purchasing activity locally but the central procurement agency in Austin sees those transactions. They can refuse and have refused payment on state

funds if something is done improperly," Yeoman said.

In addition, the state procurement agency can take away the authority to purchase on federal funds if all documentation is not in order.

"Currently, the purchasing department is realigning personnel and re-establishing priorities to respond to the changes in environment," Yeoman said. "We promise that service will improve; turnaround will improve; and we'll save you money."

The department is planning an automated order entry system for the four major scientific companies with which the HSC does business. Through the use of these computer links, orders will be processed immediately.

As part of the department's

reorganization, buyers are getting intensive training. Each buyer will be responsible for specific areas. For instance, one buyer will handle all photographic equipment; one will handle all chemicals; and one will handle all furniture.

"This specialized buyer will remain the same individual for a year, so you'll know to whom you need to speak when you have an informational request, concern or complaint," Yeoman said.

He is also writing a procedures manual and a handbook to help people in other offices understand purchasing procedures. Until these are ready, persons with questions or problems should call Yeoman or one of three purchasing coordinators: Marilyn Miller, Donna Schneider or Jeff Darling, 792-4980.

MCTS producer wins Heart Association award

By Betty Martin, HSC-TV

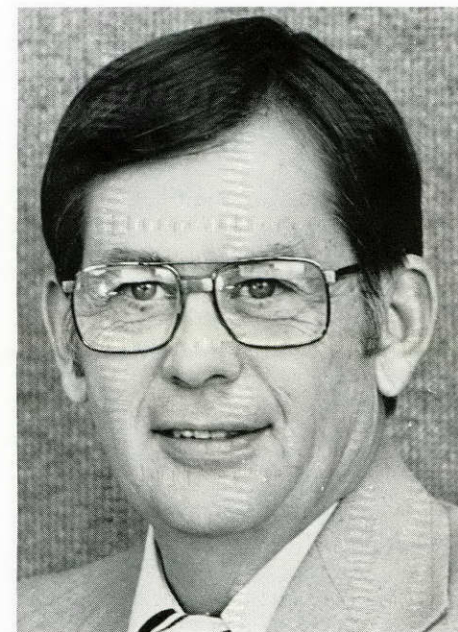
Gene Allen, associate producer at the Health Science Center's Medical Community Television System (MCTS), has won a national award from the American Heart Association.

Allen received the Howard Blakeslee Award for Television in ceremonies at Miami Beach, Fla., Nov. 15. The award is for a series of seven television reports on heart disease, treatment and prevention which were telecast by KPRC-TV in February. The on-camera reporter was Dr. Charles Berry, former NASA Flight Surgeon and former president of the Health Science Center.

The reports described the diagnosis, treatment, risk factors and changes in lifestyle which can affect the course of heart disease. They were taped at various locations at the Texas Medical Center and featured center personnel.

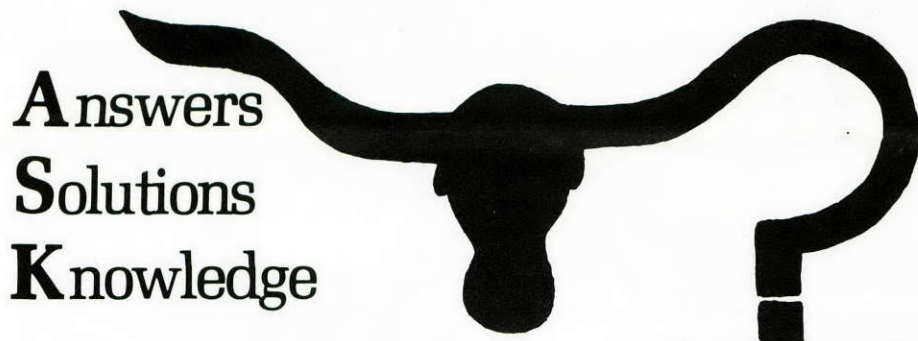
The award is named for Howard Blakeslee, former science editor of the Associated Press and a founder of the National Association of Science Writers.

Allen is a former staff member



Gene Allen
Associate Producer, MCTS

at KPRC-TV and was a documentary producer at KTVY, Oklahoma City, before joining MCTS in September. MCTS serves the entire medical center with four channels of information and educational programming.



Compiled by Belinda Parker

If you have a question or problem, call 792-4266 or write ASK, HoUTexan, Room 533, Main (former Prudential) Building.

Q: What can an HSC employee do to avoid hassling by bill collectors and damage to his or her credit rating when Blue Cross processes a claim incorrectly and takes so long to correct the error that a bill from a doctor and/or hospital becomes more than 90 days past due?

A: At time of claim you will need to find out if the doctor and/or hospital is going to file the claim or if you are responsible for filing it. Often, you will have to pay in advance and get your reimbursement from BC/BS.

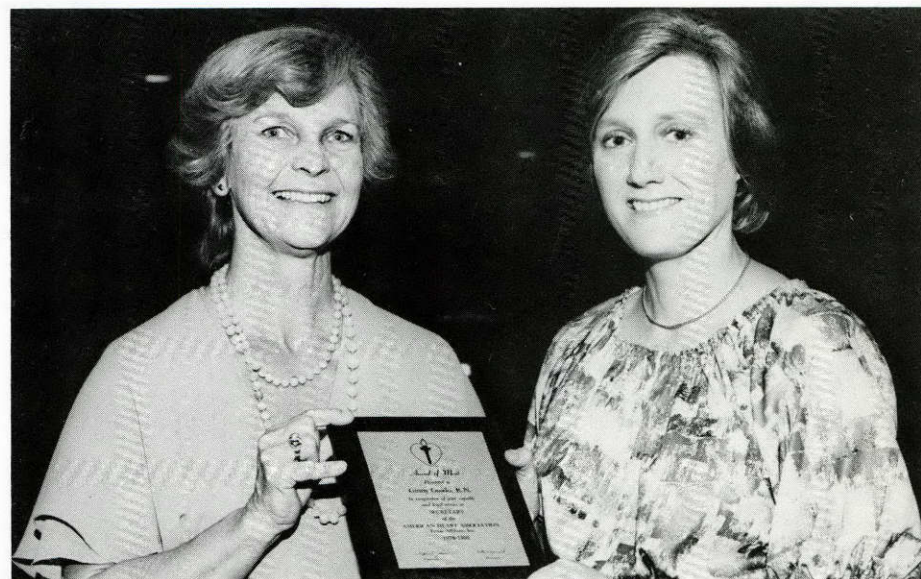
Probably the most important thing to remember is to act promptly once you feel there could be a problem. Contact Personnel at each stage even if you have a question on how to file a claim. Personnel can help straighten out things, should a problem occur.

If after filing, payment has not been received in four to six weeks, you may call BC/BS Customer Service at the Houston office at 797-1618. That office has direct computer terminal assistance from Dallas claims office. Nancy Peterson is our representative. If you speak to anyone else, be sure to keep that name. If you feel there still might be a problem after speaking to Customer Service, please don't hesitate to call your Sr. Personnel Representative for an appointment. Come to the appointment with copies of all bills, the claim forms, any correspondence and the name of the person you contacted by phone. Personnel can then follow up on the claim. -Clough Shelton, Personnel Director

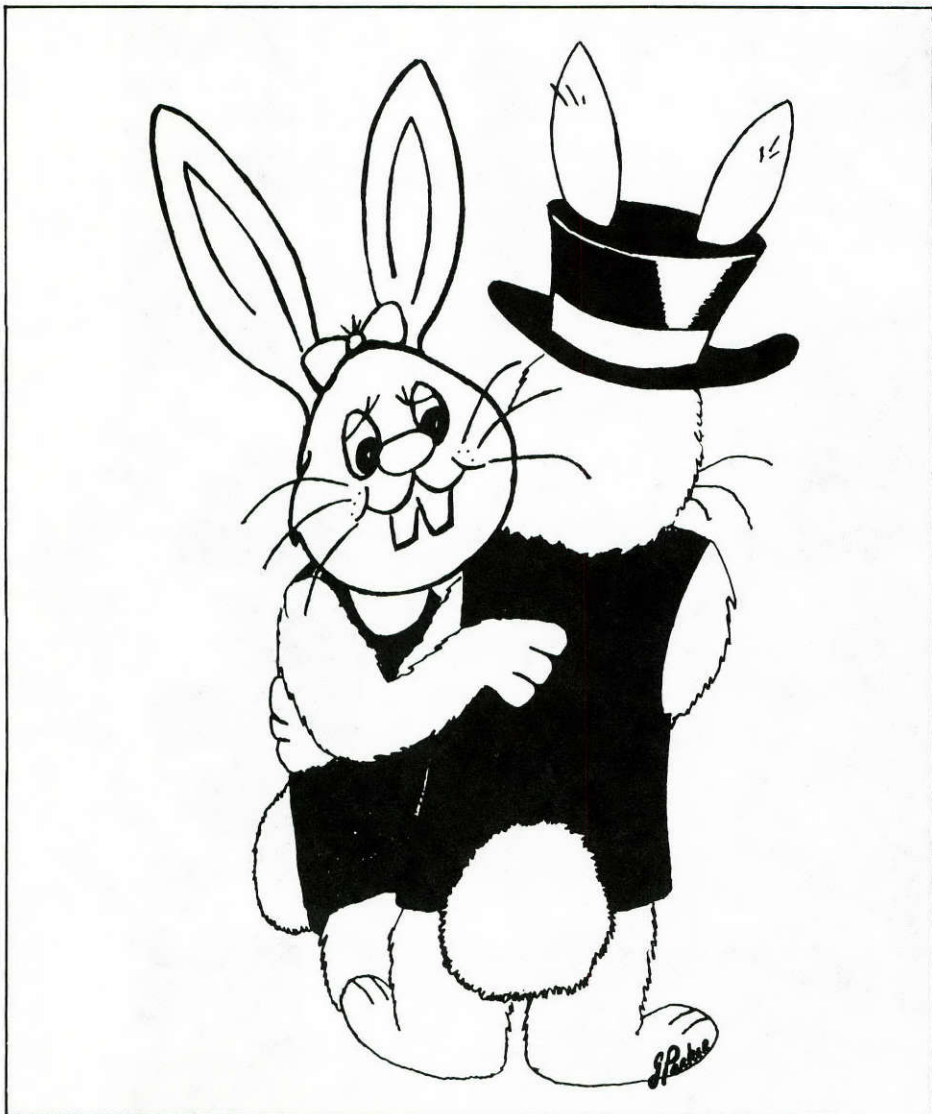
The quickest way to avoid hassles from bill collectors is to straighten out any disputes at the source. Start with the procedures outlined above, whether with BC/BS or any other insurer. As long as an insurer, hospital or physician's office is aware of a legitimate dispute regarding a bill, it is extremely unlikely that a collection agency will get involved.

Should a collection agency be involved, however, both federal and state law give consumers protection from abusive collection practices. Article 5069-11.01 through 11.11, Vernon's Revised Civil Statutes makes a series of practices (including coercion, abusive language, unreasonable telephone usage and others) misdemeanors and gives consumers the right to damages as well. Further, Article 9016 makes it a crime to knowingly report false information to a credit reporting bureau. Should you be contacted by a bill collector, you should inform them of your dispute including particulars and persons you have dealt with. Above all, don't ignore a billing you think is in error; it's very unlikely to just go away. -Keith Lindloff, UTHSCH Attorney

An article that appeared in the October issue of HoUTexan (Vol. 1, No. 12, pg. 4) outlines tips on avoiding delays on claims. Extra copies of the issue can be obtained by calling the Office of Public Affairs, 792-4266.



HAVE A HEART-Ginny Guido (right), assistant professor in the School of Nursing, receives an American Heart Association, Texas Affiliate 1980, plaque of appreciation as outgoing secretary from Jan Sanders, chairperson of the board. Awards ceremonies were held in conjunction with the affiliate's 45th Annual Meeting of the Members in Dallas in September. Guido has been a volunteer with the American Heart Association for 10 years.



Off center

By Barbara Baker

Ready for a lot of good news? In these days when it seems that everything either gives you hypertension or cancer, it's nice to find that some things—even things that are pleasurable in and of themselves—are also good for you.

DAYDREAM BELIEVER—The next time you are chastised for daydreaming, you simply can plead sanity. A psychology professor at the University of Minnesota has found that most people spend 30 to 40 percent of their waking hours daydreaming, and he says that such behavior is not only normal, but healthy.

Dr. Erick Klinger says that the mind naturally takes breaks from concentrated thought, and that thoughts which occur during daydreaming can lead to creative insights. Thank goodness, or this column would never get written.

PUCKER POWER—Rodgers and Hammerstein had the right idea when they admonished us to “whistle a happy tune.”

In a new book called *Vita Breathing*, Phyllis Cunnyngham informs us that “most people, soon after the age of four, lose the natural breathing pattern they were born with, and with it their ability to get their full quota of oxygen.” As a result they become starved for oxygen, tense and depleted.

Enter whistling. That tuneful exercise can “extend your exhalation of breath and make your inhalation a reflex of this longer exhalation.”

Whatever that means, Cunnyngham assures us that it's very healthy. Let's hope she's not just

full of hot air.

EMBRACEABLE YOU—If you've been feeling starved for affection, your malnutrition may be more real than you imagined. Social scientist Virginia Satir told the American Orthopsychiatric Association that “our pores are places for messages of love...physical contact is very important.”

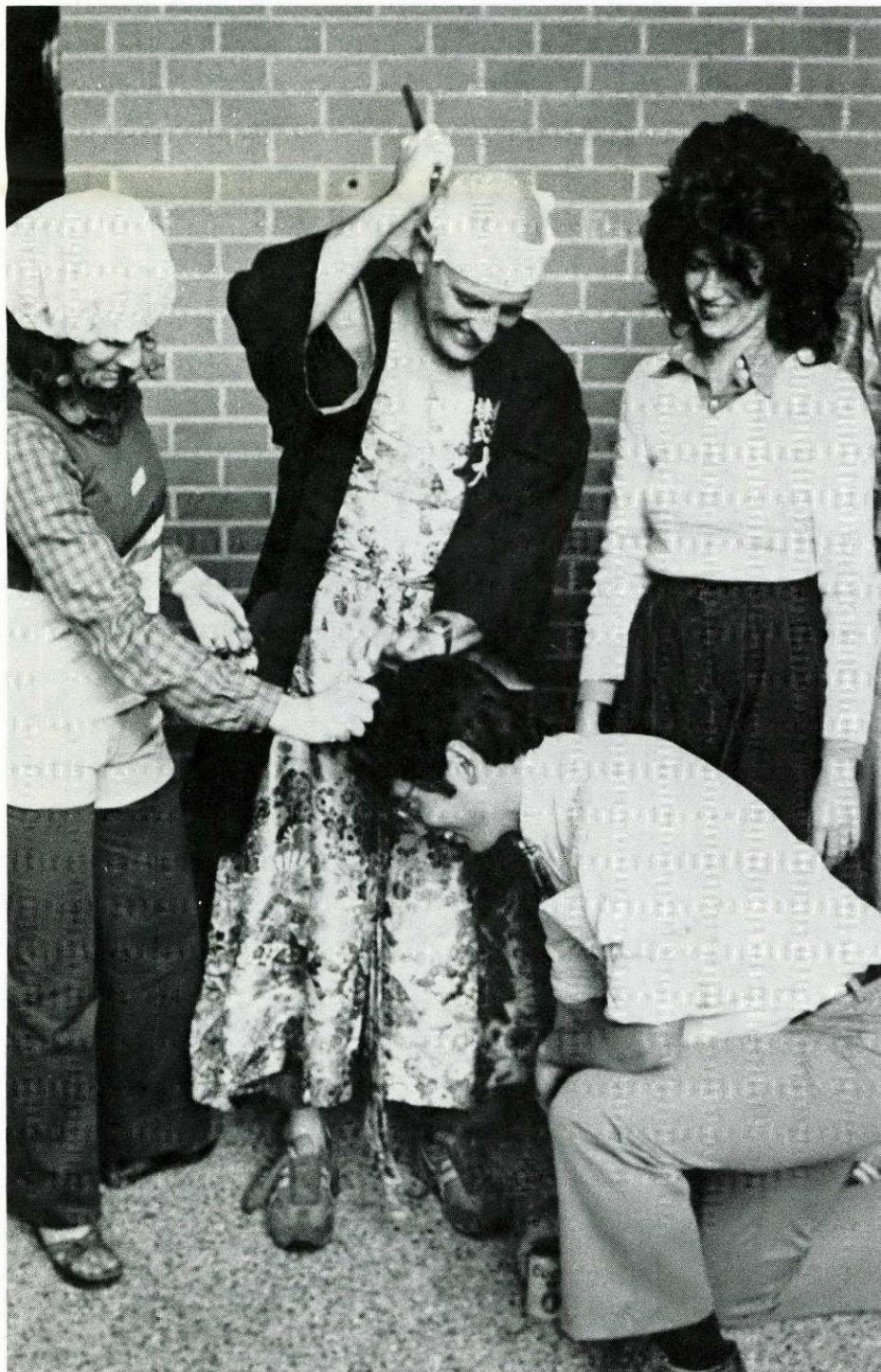
Her prescription: four hugs a day for survival, eight for maintenance and twelve for growth. She offers no hint as to what happens if you overdose.

A PAT ANSWER—Here comes Peter Cottontail, limping down the bunny trail. At least he will be limping if he suffers from thatcripler of young bunnies—atherosclerosis, better known as hardening of the arteries.

But Peter et. al. can take heart in the finding of University of Houston researcher Robert M. Nerem and associates. They found that a kind word, a pat on the back and a scratch behind the ears are effective therapy against hardening of the arteries in rabbits. The next question to be explored is whether similar treatment will work for humans.

Nerem believes that the social-psychological environment a person is in can influence his blood chemistry. He didn't say where he got the idea of correlating affection in bunny rabbits to atherosclerosis, but his findings were significant enough to be published by *Science*.

The editors of *Science* undoubtedly know what they're doing, but you have to admit that the whole idea sounds a little hare-brained.



SAMURAI AND GSBS DEAN Dr. R.W. Butcher (center) practices the chivalric code of Bushido on Dr. Tom Goka (kneeling) while bystanders (left to right) Dr. Beth Maxwell and Mary Ellen Whitworth look on. True personalities emerged that day as faculty members and students celebrated Halloween at a Friday afternoon beer bust. Butcher wears an authentic samurai costume, which he borrowed from a friend. (Photo by Gary Parker)



A PAT ON THE BACK—In honor of Dental Assistants Recognition Week, Oct. 19-25, Trudy Weaver presents “A 21 Bun Salute to Dental Assistants” tee shirt to Dr. Isaac Konigsberg, chairman of community dentistry and director of the Dental Assisting Program at the Dental Branch. The Department of Community Dentistry employs 25 certified dental assistants in the Dental Auxiliary Utilization Program. There are 10 students in the Dental Assisting Program, for which Weaver is an instructor. The shirts were a project of the Houston District Dental Assistants Society. From a report by Trudy Weaver. (Photo by Arturo Rodriguez, Dental Branch)

Calendar

Monday, December 1

The Catholic Student Center, 1703 Bolsover, offers the Liturgy of the Eucharist each weekday at 5 p.m. The Liturgy of the Eucharist is offered at The Institute of Religion (TMC) each weekday at 12:10 p.m. For more information call 526-3809.

Wednesday, December 3

UTHSCH Division of Continuing Education: Selected Topics in Cardiology, the 26th Annual James J. and Una Truitt Lecturer, Dr. Adolph Matthew Hutter Jr., associate professor of medicine, Harvard Medical School. Continues through Thursday, Dec. 4. For information call 792-4671.

Noon. Open Forum with Dr. Roger J. Bulger, president of The University of Texas Health Science Center, Room 3001 MSMB. For more information contact your school's Intercouncil representative: School of Allied Health—Paul Mabry, David Burns; Dental Branch—Ray Gillespie, Alan Coleman, Ron Elmore; GSBS—Henry Grage, Linda Lopez; Medical School—Mark Payne, Nancy Vernon, Norwood Knight-Richardson; School of Nursing—Nanette Abt, Theresa Giddings, Megume Yukawa; School of Public Health—Anna Garza, Barbara Bukowski, Connie Sanchez.

Thursday, December 4

8 p.m. Rice University Free Concert: Rice Chorale, Gwyn Richards directs a program of sacred Christmas choruses, Rice Memorial Chapel. For information call 527-4933.

Friday, December 5

Deadline for submitting research proposals to be reviewed by the Committee for the Protection of Human Subjects. For information call 792-5048.

2 p.m. School of Public Health Colloquium: Multi-Hospital Systems, SPH Auditorium. Speakers: Sam Raz, doctoral candidate; Dr. Richard Grimes, associate professor of health services administration; and Dr. Michael Decker, associate professor of public health administration.

Bridge entry due for Recreation Center intramural program. For information call 792-5885.

8 p.m. Christmas party for all UTHSCH students, sponsored by the Student Intercouncil. Details to be announced. For more information contact your Intercouncil representative, as listed above under Wednesday, Dec. 3.

Saturday, December 6

The Catholic Student Center, 1703 Bolsover, offers the Liturgy of the Eucharist every Saturday at 5 p.m. and every Sunday at 9 and 11 a.m. The Sacrament of Reconciliation also is offered each Saturday, from 3:30 to 4:30 p.m. or by appointment. For more information call 526-3809.

Thursday, December 11

Noon. Program on Aging: Preferences in Gerontologic

and Geriatric Education: Comparison of Medical Students, Their Educators and General Practitioners. Speaker: Dr. Alvin J. Levenson, associate professor of psychiatry and behavioral science, Neurology department, 7037 MSMB. For more information call 792-4779.

Wednesday, December 17

Afternoon. Christmas Party for all UTHSCH faculty and staff, Prudential Lounge. Invitations detailing the event will be mailed.

Friday, December 19

Meeting of the Committee for the Protection of Human Subjects. For information call 792-5048.

Wednesday, December 24

Christmas Holidays continue through Friday, Dec. 26.

The University of Texas Health Science Center at Houston

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