NIH’s Animal Care Review

An 11-member team from the National Institutes of Health completed a five-day site visit at Penn on Friday in conjunction with NIH’s filing of a new animal care Assurance Statement with NIH to regain eligibility for research grants involving the use of animals. The team, which included three veterinarians, several OPPR staff members and consultants, and a medical dean involved with animal care at his university, made scheduled visits to some facilities, and unannounced visits to some labs and facilities chosen at random. “They were very thorough, very probing in their review,” said Dr. Barry Cooperman, vice provost for research. “The University is continuing to work with NIH on an acceptable Assurance Statement.”

On Monday, The New York Times reported that Columbia University has been notified of a temporary suspension of its eligibility for NIH grants involving the use of animals. According to the Times, Columbia is the third institution in the nation to have its eligibility suspended under the new regulations. City of Hope in California was the first, and Penn second.

Open Meeting on Lab Animals: For investigators utilizing laboratory animals, an NIH official will speak at an open meeting Thursday, February 13, from 10 to 11:30 a.m. Dr. William Raub, deputy director of the Office of Extramural Research and Training, will review current national developments and their impact on Penn. He will also answer questions of interested faculty and staff. The meeting will be in the auditorium of the Nursing Education Building, on Service Road south of the Johnson Pavilion.

Commencement: Nobelist Michael Brown

For the University’s Commencement May 19, the speaker will be Dr. Michael S. Brown, the 1985 winner of the Nobel Prize in Medicine who took both his undergraduate and medical degrees at Penn. He will accept an honorary degree in the ceremonies, which will be moved to Franklin Field this year. Dr. Brown, a 1962 graduate of The College who took his M.D. here in 1966, shared the Nobel Prize last year with his longtime collaborator, Dr. Joseph L. Goldstein, for their joint work in cholesterol metabolism and diseases related to it. At 44, Dr. Brown became one of the youngest Nobel laureates ever chosen, and is the youngest winner of the Penn Medical School’s Distinguished Alumnus Award (1985).

Baccalaureate: Novelist John Wideman

The Baccalaureate address on May 18 will be given by John Edgar Wideman, the PEN-Faulkner Award-winning novelist who was scheduled to speak last year but was prevented by illness. The 1963 alumnus and Rhodes Scholar, who was on the faculty here in 1967-74 and is now professor of English at the University of Wyoming, won the PEN-Faulkner for Sent For You Yesterday. His autobiographical Brothers and Keepers is the latest in a list of highly praised work including the novels A Glance Away, Home, Among the Lynchers, and Hiding Place.

Resignations of VPs Posner and Webber

For separate reasons, two University vice presidents announced their resignations this week. Vice President for Development Ross A. Webber gave a June 30 date for stepping down to return to teaching and research in the Wharton School, where he has been on the faculty for 22 years. President Sheldon Hackney has announced that a national search will be made to fill the vice presidency that covers fundraising, alumni relations and University relations.

Vice President for Administration Gary Posner announced to his key staff Monday that he will leave at the end of February to relocate and marry. Senior Vice President Helen O’Bannon will not undertake an immediate search, but will directly manage the four divisions that come under this vice presidency while taking “a hard look at organizational opportunities in the four areas,” she said.

New Funds for ‘Future’

In a follow-up message to their planning series on Penn’s future, the President and Provost announce on pages 3-4 the details of two internal funds that schools can apply to starting in FY 1987—one to create new educational ventures and interfaces, the other to improve facilities needed for education and research.

On Gary Posner

Mr. Posner resigned in a letter to Mrs. Helen O’Bannon, then revealed it to his staff Monday in a message which appears in large part below.

“Gary has a strong list of accomplishments in his 3½ years he has been here,” said Mrs. O’Bannon. “He is a very good manager who has motivated his people and looked out for the staff across the University.”

Mr. Posner came to Penn from Cornell in 1981 as vice president for human resources, a new post in an area that previously topped out at the executive director of personnel relations. In July 1984, Senior Vice President O’Bannon reorganized all of the areas under her aegis and under the new title Vice President for Administration Mr. Posner headed not only Human Resources but also some areas formerly under Facilities Management—notably dining services, public safety, and business services such as parking, bookstore, mail, telephones, purchasing and the Class of 1923 Ice Rink.

Mr. Posner’s Message to His Staff

I have submitted my resignation as Vice President for Administration effective at the end of this month.

I have spent 18 years in three fine institutions of higher education. My period of great-

(continued next page)
Memorial: Peter Wernick

A memorial service will be held on campus Sunday, February 9, for Peter Leon Wernick, a 20-year-old junior in The College who died February 2 after a long struggle with cancer. All members of the University are welcome to attend the service, which begins at 1 p.m. in the auditorium of Hillel House at 202 South 36th Street. Liturgical music composed by his father will be sung in memory of the young theater arts major who was to have graduated with the Class of 1987. Peter Wernick is survived by his parents, Professor Richard Wernick of the music department and the musician Beatrice Wernick; and by two brothers, Louis and Adam, both of whom attended the University. In lieu of flowers, the family asks that contributions be made to the Research and Education Fund, Hematology-Oncology, Hospital of the University of Pennsylvania.

SENATE

From the Chair

The Faculty Senate and its Role

On December 6, 1985, I addressed a letter to the members of the Faculty Senate informing them that for the fourth time in a row there was no quorum at the biannual Senate meeting. Because the quorum is so important in carrying out the business of the meeting, I asked those who did not participate in these meetings to let me know, if possible, what usually keeps them away from these plenary meetings. I have since received more than five hundred replies of which more than two hundred had many additional comments beyond the eight specific questions posed in my letter. Several colleagues sent, in addition, independent letters with many observations and remarks.

The first thought that comes to mind is to thank all the colleagues who took the time from their busy work schedules to respond to my questions. Then, the most important conclusion that one can draw from such a massive responseisthat the Faculty Senate at Penn is alive and well. Of course that statement was made twice already in the last two years when more than one thousand faculty members participated in the elections of 1985 and 1984.

Beyond these two points, the responses are very enlightening because they reveal some important concerns of the faculty. Among them three concerns appear again and again and deserve the first level of attention:

(a) Over the years the administration has not paid much attention to the recommendations of the Faculty Senate, so what's the use of wasting time discussing issues and voting on them?

(b) The Senate has been dominated by those holding extreme ideological views, and, therefore, it is displacing and counterproductive to participate in such meetings.

(c) The Senate has been involved with many non-faculty, non-academic issues, and therefore for those who would like to see the Senate focus on issues of direct faculty concern and of a clearly academic nature, the meetings do not constitute activities in which they would like to participate.

These points deserve much discussion on campus, with contributions from all sides of the spectrum. Please consider my brief reflections as only the opening of such a discussion. Concerning the first point above, my experience over the brief two-year period during which I became involved with Faculty Senate matters is that the Senate is, or can be, quite influential in the administration's decision only when there is considerable faculty support for the Senate's position, and when the Senate sticks with issues that directly affect the faculty, such as academic issues and those issues that affect the economic status of the faculty. The extent of the support that the faculty renders to a particular position can, and usually is, expressed in many different ways, one of which, and an important one, is the presence and vote of the faculty during the Senate's plenary meetings. Another very effective way is the work of various Senate committees that frequently meet with the leaders in the administration to discuss and negotiate issues. A third way is, of course, the almost weekly consultation meetings of the three Senate Chairs with the President and Provost.

With regard to the other two concerns expressed by several faculty members in their responses to me, it seems that the impressions linger much longer than the actual situation might justify. The current leadership of the Senate does not really fit into any description of extremes, and its activities and views are not really characterized by a strong ideological bent of any type. I feel comfortable in stating that the current Senate leadership is indeed determined to concentrate its attention on those items that directly affect the faculty at large and that are academic in essence. As for ideological inclinations, the effort is to keep such inclinations at some distance from the business of the Senate and adopt a philosophical posture in the discussions with the administration that is within the realm of moderate liberalism.

This discussion needs, of course, to continue. Along these lines, next week I'll ask you to consider several additional points that faculty members brought to my attention in response to my December 6, 1985, letter.

Remember also that on March 16 there will be a special meeting of the Senate focused on two topics, i.e., changes in the Rules of the Faculty Senate, and the economic status of the faculty (the fringe benefits discussion and the salary report of the Senate Committee on the Economic Status of the Faculty).

Anthony Bo Tuminava
A Program of Investments

February, 1986

In Choosing Penn’s Future, we announced four planning principles that “define our priorities and establish a framework for future decisions.” The first is that “the University’s quality is the strength of its faculty.” In all of our planning we have observed this principle, making faculty salaries a key investment focus. The second principle holds that a strong program of student financial aid is necessary to ensure that qualified youth are not denied high-quality education because of limited financial resources. We have successfully implemented the Penn Plan in response to this need, and we have also invested significant funds in graduate fellowships and other graduate student support. These efforts will continue.

The remaining two principles are no less important. We must strengthen our position in the priority areas of undergraduate education and research excellence. Investment in these areas is particularly vital as we face continuing cutbacks in federal funds for education. National competition for diminishing education and research funds is intensifying, and it is essential that we maintain our status as an institution of first choice and work to enhance our competitive advantage. We have already established endowed research foundations and a special research fund that makes direct awards to faculty, but much more strategic investment is needed in both undergraduate education and research excellence.

Last year, in Investing in Penn’s Future, we proposed the creation of two special funds—one for undergraduate education, the other for research facilities—to further this policy of strategic investment. We are pleased to report that both funds will become operational for Fiscal Year 1987. Over the next five years we expect that each of the special funds will invest up to $10,000,000 in support of these two University priorities. This document describes the procedures and criteria to be used in making awards to Schools from each fund.

Undergraduate Education Fund

Financing for this key effort will come from two principal sources: anticipated growth in annual giving and direct contributions from each of the University’s Schools. We are particularly grateful that this effort has been supported by all Schools at Penn and by special contributions from the Medical Center (School of Medicine and the Hospital of the University of Pennsylvania) and the Wharton School.

The basic aims of the Undergraduate Education Fund were stated in Investing in Penn’s Future and built on the planning efforts described in the initial “Working Paper on Undergraduate Education” and in Choosing Penn’s Future. We underscore here a point stressed in Investing in Penn’s Future: “Academic programs operated by a central administration eventually become orphans . . . What we seek instead is an investment policy in which the Schools use University funds for programs that they have made integral parts of their own research and educational operations.”

Up to 80 percent of the Fund will be awarded to the four undergraduate Schools: Arts and Sciences, Engineering, Wharton, and Nursing. The remaining share will be used to support programs of undergraduate education sponsored by the University’s graduate and professional Schools. Those programs should be developed in partnership with the deans of the undergraduate Schools, particularly Arts and Sciences.

When applying to the Undergraduate Education Fund, each School should refer to its own five-year educational plan, explain its priorities, identify the University funds it seeks, and detail the resources it is prepared to commit in support of each proposed project. We expect that a significant portion of the awards will be for up to three years.
The Black Graduate and Professional Students Association (BGAPSA) condemns the January 17 decision of the Trustees to postpone a decision on divestment until June 1987 as racist and contemptible. The South African regime rests upon the basis of apartheid, which is a form of racism. It therefore follows that investment in South Africa is investment in apartheid and racism.

Further, we believe that apartheid is genocide. It is the holocaust of the Black South African people. The racist regime in South Africa does not send the Blacks to the gas chambers as the Nazis did with the Jews. Instead it sends them to squallid Bantustan "homelands" where they suffer poverty, disease, high infant mortality, famine, inferior education and health care, and slow death. In short apartheid is a living death. It is a holocaust in slow motion.

Moreover, apartheid is modern, 20th century slavery, and investment in South Africa is investment in that slavery. Thus, not only do the Trustees invest in racism, genocide and the South African holocaust, but they are slaveholders as well.

The decision of the Trustees to set certain conditions that must be met by June 1987 is merely a delaying tactic. The plan is full of loopholes, makes no mention of bonds, and requires only that "substantially all" of the conditions be met. This leaves endless room for interpretation and evasion. Finally, the decision betrays a racist mentality. We are convinced that if there were a country where a Black minority oppressed a white majority as brutally as the Afrikaners oppress the Blacks in South Africa the Trustees would not invest in that country for one minute. Let us remember the outrage of Western countries toward the regime of Idi Amin in Uganda. But while the Trustees would certainly never invest in a country where Blacks oppressed Whites, it is permissible in their minds to invest in a country where Whites oppress Blacks.

If the worst were to happen and civil war erupted in South Africa, and Penn's and America's investments went up in flames, the Trustees would be more than happy to climb aboard and invest in the "Development" of South Africa. They do not want a revolution because that could lead to their fiduciary responsibilities they would do well to abandon their monstrous investments in South Africa before they have no investments left to withdraw. BGAPSA joins with the Penn Anti-Apartheid Coalition and other organizations in reiterating that we will be satisfied with nothing less than complete and total divestment, immediately.

-Wayne C. Glasker, President, BGAPSA and chairman, Graduate Minorities Council
From the extensive list of Trustee actions on appointments, reappointments, secondary appointments, leaves, and terminations, Almanac with the advice of the Faculty Senate gleams only those actions reflecting movement into or within the Standing Faculty. This includes new appointments and promotions, and chair designations with or without promotion, in all schools. In the health schools, where reappointment sometimes includes movement from the associated faculty (not in standing faculty) to the clinician-educator track (standing faculty but not tenure-acquiring), those actions are published. Note that clinician-educator titles are recognizable by the form of title, "Professor of [affiliated institution]." The following list shows actions from Trustees' minutes of June 13, 1985 through December 20, 1985, representing actions approved at Provost's Staff Conferences leading up to those meetings. Actions marked (*) involve additions to the tenured ranks through appointment, promotion, or conversion.

Appointments and Promotions in the Standing Faculty, 1985

**School of Arts and Sciences**

**Appointments**
- Dr. Thomas W. Abrams as Assistant Professor of Biology.
- Dr. David E. Borges as Assistant Professor of History.
- Dr. Dorothy L. Cheney as Assistant Professor of Anthropology.
- Dr. Harold L. Dible as Assistant Professor of Anthropology.
- Dr. Alan Fife as Assistant Professor of English.
- Dr. Alan P. Fiske as Assistant Professor of Psychology.
- Dr. Samuel R. Freeman as Assistant Professor of Philosophy.
- Dr. Ruth M. Karras as Assistant Professor of History.
- Dr. Kenneth L. Kraft as Assistant Professor of Oriental Studies.
- Dr. George J. Mailath as Assistant Professor of Economics.
- Dr. Alexander Nehamas as Professor of Philosophy.
- Dr. Jerome L. Packard as Assistant Professor of Oriental Studies.
- Dr. Sandra Pouchet Paquet as Assistant Professor of English.
- Dr. Robert M. Seyfarth as Assistant Professor of Psychology.
- Dr. Radwan Ali Shaban as Assistant Professor of Economics.

**Promotions**
- Dr. Christopher B. Croke to Professor of Mathematics.
- Dr. Burt A. Ovrt to Associate Professor of Physics.
- Dr. Peggy Reeves Sandy to Professor of Anthropology.
- Dr. Elaine M. Scarry to Professor of English.
- Dr. Elizabeth S. Spelke to Professor of Psychology.
- Dr. Wolfgang Ziller to Professor of Mathematics.

**Chair Designation**
- Dr. Michael Aiken, Professor of Sociology, as the Thomas S. Gates Professor.

**School of Dental Medicine**

**Appointments**
- Dr. Jorgen Slots as Professor of Periodontics.

**Grad. School of Education**

**Appointments**
- Dr. Lynne Kyoko Edwards as Assistant Professor of Education.
- Dr. Nancy Hornberger as Assistant Professor of Education.
- Dr. Peter J. Kurilloff to Professor of Education.

**School of Engr. Appl. Science**

**Appointments**
- Dr. Hossam A. ElGindy as Assistant Professor of Computer and Information Science.
- Dr. Michael A. Palis as Assistant Professor of Computer and Information Science.
- Dr. Keith W. Ross as Assistant Professor of Systems Engineering.
- Mr. Jorge Juan Santiago-Aviles as Associate Professor of Electrical Engineering.
- Mr. Lokendra Shastri as Assistant Professor of Computer and Information Science.

**Promotions**
- Dr. John L. Bassani to Associate Professor of Mechanical Engineering and Applied Mechanics.

**Grad. School of Fine Arts**

**Promotion**
- Dr. Arthur Johnson to Professor of Landscape Architecture and Regional Planning.

**School of Medicine**

**Appointments**
- Dr. Stephanie B. Abbulah as Assistant Professor of Medicine at HUP.
- Dr. Leon M. Eslayed as Assistant Professor of Anesthesia at HUP.
- Dr. Robert S. Friedman as Assistant Professor of Anesthesia.
- Dr. Barbara Hoffman Lieberman as Assistant Professor of Biochemistry and Biophysics.
- Dr. Daniel A. Lieberman as Assistant Professor of Biochemistry and Biophysics.
- Dr. Soroosh Mahboubi as Assistant Professor of Radiology at CHOP.
- Dr. David R. Manning as Assistant Professor of Pharmacology.
- Dr. Alison J. McDonald as Assistant Professor of Medicine at HUP.
- Dr. Francis L. Miller as Assistant Professor of Anesthesia.
- Dr. John D. Pigott as Assistant Professor of Surgery.
- Dr. Randall N. Pittman as Assistant Professor of Pharmacology.
- Dr. John E. Pown as Assistant Professor of Radiology at HUP.
- Dr. Richard A. Price as Assistant Professor of Psychology in Psychiatry.
- Dr. Derri L. Shtasel as Assistant Professor of Psychiatry at HUP.
- Dr. Samuel Tier as Assistant Professor of Anesthesia at HUP.
- Dr. Mary Ellen Turner as Assistant Professor of Pediatrics at HUP.
- Dr. Michael McCormick White as Assistant Professor of Pharmacology.

**Promotions**
- Dr. Leon Axel to Associate Professor of Radiology.
- Dr. Richard R. Bartkowski to Associate Professor of Anesthesia.
- Dr. John Timothy Boyle to Associate Professor of Pediatrics at CHOP.
- Dr. Edward B. Charney to Associate Professor of Pediatrics.
- Dr. Maria Erecinska to Professor of Pharmacology.
- Dr. John W. Foreman to Chair of Pediatrics at HUP.
- Dr. Herbert Y. Kressel to Professor of Radiology at HUP.
- Dr. Michael T. Menmut to Professor of Obstetrics and Gynecology at HUP.
- Dr. Milton D. Rossman to Associate Professor of Medicine at HUP.
- Dr. Sanford J. Shattil to Professor of Medicine.
- Dr. Barney B. Wolfe to Associate Professor of Pharmacology.

**Conversions to Tenure**
- Dr. Yih-Fu Shiau, Associate Professor of Medicine, is converted to tenure.

**Reappointments**
- Dr. Charles P. Kimmelman to Assistant Professor of Otorhinolaryngology and Human Communication at HUP.
- Dr. John L. Rombeau to Assistant Professor of Surgery at HUP.

**School of Nursing**

**Appointment**
- Dr. Ruth McCorkle as Professor of Nursing.

**Promotions**
- Dr. Mathy Mezey to Professor of Gerontological Nursing.
- Dr. Judith Smith to Professor of Community Health Nursing.

**School of Social Work**

**Appointments**
- Dr. Michael J. Austin as Professor of Social Work.

**School of Veterinary Medicine**

**Appointments**
- Dr. Mattie J. Hendrick as Assistant Professor of Pathology in the Department of Pathobiology.
- Dr. Michael Koltikoff as Assistant Professor of Pharmacology in Animal Biology.
- Dr. Dean W. Richardson as Assistant Professor of Surgery in Clinical Studies (New Bolton Center).
- Dr. Thomas J. Van Winkle as Assistant Professor of Pathology in the Department of Pathobiology.

**Wharton School**

**Appointments**
- Dr. David F. Babbel as Associate Professor of Insurance.
- Dr. Peter Cappelli as Associate Professor of Management.
- Dr. Patricia Munch Danzon as Associate Professor of Health Care Systems.

**Conversion to Tenure**
- Dr. Krishna Ramaswamy as Associate Professor of Finance.

**Chair Designation**
- Dr. David Larcker as the Ernst and Whinney Professor of Accounting.

**Conversion to Tenure**
- Dr. Jehosua Eliasberg, Associate Professor of Marketing, is converted to tenure.
Acquired Immune Deficiency Syndrome (AIDS) is a breakdown of the body's immune system, the mechanism which assists people in combating diseases. AIDS is caused by a virus, the HTLV-III virus, which destroys certain cells of the immune system. When these cells are not working, the body is left vulnerable to unusual infections and other illnesses, many of which are life-threatening.

So far, people with AIDS have fallen into a few risk groups; about 73 percent of cases reported nationally since AIDS was first spotted in 1979 have been among gay and bisexual men. Intravenous drug users comprise about another 20%. The remainder of cases are blood transfusion recipients, including hemophiliacs, infants born of mothers infected with the virus, and a few female sexual contacts of males infected with the virus. More than 90 percent of people with AIDS have been men. Most of the cases of AIDS in women have occurred among intravenous drug users. There have been no known cases of AIDS among lesbians attributed to sexual transmission. It is important to note that, with the few exceptions noted above, AIDS is a sexually transmitted disease. No one has contracted the disease through casual or even close daily contact; in fact, family members other than sex partners of people with AIDS have not developed AIDS. Scientists have demonstrated that AIDS is not highly contagious and appropriate changes in one's sexual practices, described later in this pamphlet, should preclude anyone's contracting the disease.

Illnesses associated with HTLV-III infection
Infection with the HTLV-III virus may cause no symptoms or a combination of general symptoms, known as the AIDS-related complex (ARC), which may include fever, weight loss, diarrhea or enlarged lymph nodes. The most serious manifestation of infection with the virus is AIDS. Because their immunity is impaired, people with AIDS become susceptible to a variety of illnesses which are either more severe when seen in people with AIDS or are rarely seen in people with unimpaired immune systems. These include "opportunistic infections," such as Pneumocystis carinii pneumonia, chronic cytomegalovirus (CMV), unusually severe shingles and herpes simplex, and certain bacterial infections (including one which causes a form of tuberculosis). Also, Kaposi's sarcoma (KS), a skin cancer, has also been associated with AIDS.

Symptoms of AIDS
Symptoms of AIDS may appear as early as a few months after infection with the virus but may not appear for as long as five years or more. Many of the signs and symptoms of AIDS are those of other illnesses as well. While it is important to recognize them and seek medical advice, it is also important not to panic when you spot them. It is not unusual, for example, for college students to have swollen glands and fevers, which may be caused by mononucleosis. A number of other ailments, even stress, may cause symptoms, such as chronic fatigue, which resemble those of AIDS. While there is a test which may determine if you have been infected with the virus, there is no specific test for AIDS. However, if you have any of the following symptoms, be safe and see a Student Health doctor:

- Excessive tiredness or shortness of breath for no apparent reason.
- Periodic or regular fevers over 100 F, shaking, chills, or night sweats lasting for more than a month.
- Weight loss of more than 15 lbs. or 10% of normal body weight in 2 months that is not related to diet or increased activity.
- Unexplained swollen glands (enlarged lymph nodes) with or without pain, usually in the neck, armpits, or groin lasting for more than a month.
- Pink to purple, flat or raised blisters or bumps, usually painless, beneath the skin or on the mucous membranes (mouth, nose, eyelids, or rectum).
- Persistent, unexplained sore throat with white patches in the mouth, or heavy cough.
- Persistent watery diarrhea of unknown cause.
- Easy bruising.
- Unexplained bleeding from any orifice.
- Blurred vision, persistent, severe headaches or memory loss.

Diagnosis of AIDS
The diagnosis of AIDS is not made by a single laboratory test or a single symptom. Rather, your doctor makes a diagnosis on a number of factors including your past medical history, your sexual practices, evidence of decreased immune response, and findings on the physical examination. A test for antibodies to the HTLV-III virus has been developed to screen donated blood and to prevent spread of the virus by blood transfusions. When applied to an individual patient, however, this test is of limited use and is not recommended because:

- the test will not tell you whether you will develop AIDS because only a small percentage of those with a positive test will develop AIDS;
- a negative test does not preclude the possibility of your being able to transmit the virus. This is known as a false negative test;
- a positive test may occur in the absence of past or present infection with the virus. This is known as a false positive test;
- the same changes in sexual practices are recommended immediately whether or not you have been exposed to the virus;
- a positive test in your medical record could be used against you by insurance companies, the military, other government agencies, and potential employers.

In August 1983 the University of Pennsylvania Student Health Service in cooperation with other offices at Penn issued a compact brochure, "AIDS: What All Students Should Know." After The Chronicle of Higher Education and other media cited it as one of the few informative pieces on this subject in the country, colleges throughout the nation began requesting copies. This fall the brochure was updated and revised for its third printing and again is circulating widely throughout higher education. It is retitled here as an information piece for all members of the University community.
Taking preventive measures

It is important that you take measures to reduce the possibility of getting AIDS. This may not be easy; it may mean changing the way you think about sex and your sexual behavior. Don't mistake a recommendation of caution for a condemnation of homosexuality or of sexual expression generally.

Most researchers agree that:

1. The exchange of body secretions, especially blood and semen, represents a significant risk. The virus has also been found in saliva and tears, but the risk of transmission from these secretions is believed to be negligible. The virus has not been found in perspiration, urine, or feces.
2. Damage of body tissues during sex can expose you to body secretion, and allow the virus to enter your bloodstream. Anal intercourse is by far the most risky sexual practice, although other sexual practices are also capable of spreading the virus.
3. The virus cannot enter the body through intact skin but must enter through the mucous membranes or an open sore or cut.
4. The greater the number of different sexual partners, the greater the risk.

Lessen your risk by:

1. Reducing your number of different sexual partners.
2. Avoiding exchange of body fluids. Use condoms to avoid the exchange of semen.
3. Avoiding damage of body tissues during sex.
4. Asking about the health status of your sex partners.
5. Taking good care of your body (exercising, getting adequate rest and nutrition, and reducing stress whenever possible).
6. Showering before and after sex.
7. Eliminating use of illicit drugs, especially poppers (amyl nitrite inhalant) and intravenous drugs.
8. Not sharing toothbrushes, razors, or other objects that might be contaminated with blood.

What to do if you think you might have AIDS

First of all, don't panic, and don't try to make your own diagnosis. Call Student Health (662-2850) and set up an appointment with a doctor. At the end of this pamphlet, you will find a list of Student Health doctors who are concerned with AIDS diagnosis and advice. If you feel you need counseling, or you just want to talk to someone, both the University and the Philadelphia community have professionals trained and ready to help. Their names and numbers are also listed below. All communications will be kept absolutely confidential. Don't be afraid to call them; that's why they're here.

What friends and roommates of gay men should know about AIDS

Because AIDS has received so much attention, rumors have developed about how the disease spreads and about how susceptible heterosexuals might be. Because this disease has affected gay men, AIDS has been used to reinforce pre-existing homophobic attitudes. In fact, not a single case of AIDS has been attributed to non-intimate contact with an infected individual. The vast majority of gay men do not have AIDS. You cannot get AIDS from sitting next to a gay person in class, from swimming at a public pool, from eating with your gay friends, or from sharing a bathroom with your gay roommate.

Because of the concern about this disease, caused in part by its many "unknowns," people who previously considered themselves accepting of other lifestyles are afraid to associate with their gay friends. There is no medical reason for this. If you have questions about AIDS, feel free to call Student Health yourself and find out more. And be supportive of gay friends who are, of course, concerned about AIDS.

What if a friend has AIDS?

People with AIDS need the same kind of support you have always given friends. They are likely to feel isolated, and you can help them, socially and psychologically, by continuing to share activities and feeling free to talk as you normally would. At the same time, be sensible: If you aren't feeling well yourself, don't expose friends with AIDS to what could be a dangerous illness for them.

Health care students and others in health care settings

To date the risk to health care workers from exposure to the AIDS virus in caring for patients with AIDS has been shown to be minimal, assuming that normal infection control guidelines for diseases such as Hepatitis B are followed. The AIDS virus is inactivated by common household cleaning agents such as bleach, isopropyl and ethyl-propyl alcohol. If you have questions, Student Health is prepared to answer them.

For more information on AIDS, medical advice, and counseling

Medical advice and information at Penn:

Student Health Service (Maloney Pavilion, HUP). Telephone 662-2850.

The following physicians are concerned with diagnosis and advice:

- Dr. Malcolm Lynch
- Dr. George Bradford
- Dr. Marilyn Ross-Bradford
- Dr. David Smith
- Dr. MarJeanne Collins.

Counseling at Penn:

University Counseling Service (3611 Locust Walk). Telephone 898-7021.

Robert Schoenberg, ACSW

In addition, the following organizations outside the University provide advice about AIDS:

Philadelphia AIDS Task Force Hotline. 232-8055. Call 7 p.m. to 11 p.m. daily.

National Gay Task Force Hotline. 1-800-221-7044, toll-free. Call 7 p.m. to 9 p.m. Monday – Friday.


This brochure was produced at the University of Pennsylvania by:
Student Health Service (215-662-2850); University Counseling Service (898-7021); Office of Student Life (898-6533); and the Office of the Vice Provost for University Life (898-6081).

Third Edition, October 1985
Second Edition, April 1984

© The Trustees of the University of Pennsylvania
EXHIBITS
7 The Search for Extraterrestrial Intelligence: Jon Lomberg, a native Philadelphian and artist who has collaborated with Carl Sagan and won an Emmy Award for his work on Cosmos, will have original paintings from recent projects on display; 9 a.m.-5 p.m., University City Science Center Gallery. Opening reception: February 7, 4 p.m. Through March 14 (University City Science Center).

FITNESS/LEARNING
5 Macintosh User Group Meeting; 6 p.m., Room B-1, Vance Hall. Information: 387-6440
   Special IBM/Penn Threshold User Group Meeting: two demonstrations of the new IBM PC RT; noon and 1 p.m., Room 305 Houston Hall. Information: Ext. 1780.

TALKS
5 Activation-Dependent Interaction of Human Platelets with Monocytes: Lisa Jennings, University of Tennessee; 4 p.m., Conference Room, 7 Silverstein, HUP (Hematology-Oncology Section).
   Present-Day Architecture in China: Liu Kaiji, deputy chief architect, Beijing Institute of Architectural Design; 6:30 p.m., Alumni Hall, Towne Building (Graduate School of Fine Arts).
   Functions of the EIB Proteins in Adenovirus Multiplication and Transformation: James Williams, Carnegie-Mellon University; 4 p.m., Wistar Auditorium (Wistar Institute).
7 Mapping of the Cystic Fibrosis Locus: Lap-Chee Tsui, department of genetics, Hospital for Sick Children, Toronto; 2 p.m., Wistar Auditorium (Wistar Institute).
12 Splenic Control of Malaria and Other Infectious Diseases: Leon Weiss, school of veterinary medicine; 4 p.m., Conference Room, 7 Silverstein, HUP (Hematology-Oncology Section).
13 Six-session Stress Workshop: Thursdays noon-1 p.m., Penn Women's Center. Call Ext. 8611 for information or to register (Penn Women's Center).

Deadlines
The deadline for the weekly calendar update entries is Monday, a week before the Tuesday of publication. The deadline for the March pullout calendar is Monday, February 10. Send to Almanac, 3601 Locust Walk/6224 (second floor of the Christian Building).

New Exhibits
Three exhibits open on and around campus this week: Henry Berkowitz, director of HUP's peripheral vascular noninvasive laboratory, and associate professor of surgery at HUP is also an award winning painter. 63rd Street El (below) is from his selection of oil paintings on exhibit February 4 through March 14 at the Faculty Club. Award winning designs featuring a wide variety of media, including metallic markers, colored pencil, ink and collage, such as Folly For Sale: Janus with His Head in the Clouds (left) by Marco Frascari, assistant professor of architecture, are in the Cret Gallery in the Furness Building, February 7 through April 7. Finally, the paintings and graphics of Jon Lomberg, world famous artist who won an Emmy award for his collaboration with Carl Sagan in Cosmos, will be on display at the University City Science Center Gallery February 7 through March 14; included will be Contact (above).