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FACE'S

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CBS presents a profitable Olympic show

The Associated Press
NEW YORK — Forget Tonya. Forget Nancy. Their made-for-TV drama on skates has left the ice and taken to the road.
What remains is the slick, bloodless, magazine-style packaging of CBS Sports. Determined to avoid the financial bath NBC took at the '92 Barcelona games, CBS has made its Winter Olympics weary, stale, flat — and profitable.
Friday night's women's figure skating final — the anticlimax of the Nancy Kerrigan-Tonya Harding saga — drew a 43.9 average rating and a 64 percent share of the audience — making it the highest-rated Friday in network history.
According to preliminary figures, it was the second-highest rated Olympic broadcast of all time, 91/2 percent under Wednesday's

broadcast that was seen by an estimated 110,530,000 people.
That's the sweet sound of cash registers for CBS, which paid \$295 million for the broadcast rights, and created an Olympics spectacle that could sing and dance, crack jokes and spit silver dollars on demand.
Ah, but the sportsmanship! CBS showed just how badly world-class athletes can behave. How about the ski jumper who "psyched" his rival with premature congratulation? Or the speed skater accused of fouling another racer?
And then, of course, there were Tonya and Nancy.
Contorted by the media to fit the storybook fantasy, they became Nice Nancy, the fairy princess, vs. Terrible Tonya, the nasty girl

from the wrong side of the tracks.
Princess Nancy, whose Jan. 6 leg-clubbing was brokered by Tonya's ex-husband, was supposed to overcome her bruising and claim the gold medal over wicked Tonya.
Instead, reality intruded. Tonya finished eighth and Nancy lost to Ukraine's sweet, waifish Oksana Baiul, a 16-year-old orphan.
Baiul, whose life has been a series of tragedies and whose body had been battered in a practice accident the day before the final, began sobbing inconsolably in victory.
When the awards ceremony was delayed by the search for Ukraine's newly minted national anthem, Kerrigan assumed it was Baiul getting fresh makeup applied.
Sniffed Kerrigan: "She's probably just going to come out here and cry again."

Community

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them," he said. "Not that it makes it right, but it was not a conspiracy to evade the law. I'm a 100 sure percent they'll be cleared."
However, the incidents have left some students less optimistic.
Russell Langley, speaker of the Student Senate, said the scandal will have adverse effects.
"Regardless if this is true or not, it harms the reputation of the University especially in light of all the scandals," Langley said.
"Whatever the outcome, I hope the administration and Board of Regents take strong proactive steps to ensure our credibility is restored and improved. That's the least they can do."

Beth Schreiber, Parents Weekend sub-chairwoman, said she was upset to learn such corruption existed.
"It makes me wonder if there's anything else scandalous going on the students don't know about," Schreiber said.
Some students view the indictments as a step in the right direction.
Student Body President Brian Walker said the University should not tolerate such behavior.
"It's a very positive thing that Bryan-College Station are pursuing the purchases," Walker said. "If something wrong has been done, the law broken, then I hope the University Board can find appropriate measure to deal with this."
Schreiber agreed the action is a positive step.

"Hopefully, if we get the corruption out of the University then this won't happen again in the future," she said.
Margaret Freeman, president of the Federation of A&M Mothers Club, who has questioned University officials about allegations of administrative misconduct, said she has some mixed feelings about the indictments.
"It's a bad thing we're getting adverse publicity but a good thing Aggies are cleaning house to restore our integrity," Freeman said. "When we ask our students to live by a code of honor, we should also expect the same of those who administer the business of Texas A&M."
If nothing else, the indictments have created doubts in the many people's minds, especially as to

Indictment

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purchases of up to \$10,000 in fines and 10 years in prison.
The first indictment alleges Running and Walters misrepresented alcohol purchases on state vouchers by denoting the items as food and soft drinks.
In January, The Battalion obtained several bills from J.J.'s Package Stores listing the amounts and types of alcoholic beverages purchased over the years for the Board of Regents.
However, records show that when the bills were submitted to the University controller for payment, the original bills were replaced with handwritten bills from Ruffino Catering showing the same date and amount of the alcohol

purchases but listing the items as "food, soft drinks, ice and cups."
The bills show the Ruffino Catering's address as 1219 North Texas in Bryan, the same address as J.J.'s Package Stores.
When asked in January by The Battalion to describe his catering business, the owner of J.J.'s, J.J. Ruffino, refused to comment.
According to the indictments, the liquor was originally paid for by a concessions fund, which is a collection of the soft drink sales on campus, and would typically be considered state funds.
However, the indictments state that when the vouchers were turned over to the media they reflected payment from "institutional development" funds and not concession funds.
Turner said although it is illegal to use state funds to buy alcohol, the deception of government officials is a more serious offense.

who should bear the blame.
Freeman said she doubted the secretaries altered the vouchers on their own.
"If these allegations are true, it's very unfortunate," she said. "But I find it hard to believe secretaries would be acting on their own initiative."
Chad King, senior class president, said the matter troubled him.
"I feel bad for the secretaries because I don't think they had full authority to do this," King said.
Schreiber said the blame should be shared by everyone.
"I feel sorry for them because I don't think they would do it on their own initiative," Schreiber said, "but then again it was a personal ethics call they made. They're the ones who are going to have to live with it."

Depo-Provera®
Contraceptive Injection
(sterile medroxyprogesterone acetate suspension, USP)

WHAT IS DEPO-PROVERA CONTRACEPTIVE INJECTION?
DEPO-PROVERA Contraceptive Injection is a form of birth control that is given as an intramuscular injection (a shot) in the buttock or upper arm once every 3 months. To continue your contraceptive protection, you must return for your next injection promptly at the end of 3 months. DEPO-PROVERA contains medroxyprogesterone acetate, a chemical similar to (but not the same as) the natural hormone progesterone, which is produced by your ovaries during the second half of your menstrual cycle. DEPO-PROVERA acts by preventing your egg cells from ripening. If an egg is not released from the ovaries during your menstrual cycle, it cannot become fertilized by sperm and result in pregnancy. DEPO-PROVERA also causes changes in the lining of your uterus that make it less likely for pregnancy to occur.

HOW EFFECTIVE IS DEPO-PROVERA CONTRACEPTIVE INJECTION?
DEPO-PROVERA is over 99% effective, making it one of the most reliable methods of birth control available. This means that the average annual pregnancy rate is less than one for every 100 women who use DEPO-PROVERA. The effectiveness of most contraceptive methods depends in part on how reliably each woman uses the method. The effectiveness of DEPO-PROVERA depends only on the patient returning every 3 months for her next injection. Your health-care provider will help you compare DEPO-PROVERA with other contraceptive methods and give you the information you need in order to decide which contraceptive method is the right choice for you.

The following table shows the percent of women who got pregnant while using different kinds of contraceptive methods. It gives both the lowest expected rate of pregnancy and the rate expected in women who use each method exactly as it should be used and the typical rate of pregnancy (which includes women who became pregnant because they forgot to use their birth control or because they did not follow the directions exactly).

Method	Lowest Expected	Typical
DEPO-PROVERA	0.3	0.3
Implants (Norplant®)	0.3	0.3
Female sterilization	0.2	0.4
Male sterilization	0.1	0.15
Oral contraceptive (pill)	-	3
Combined Progestogen only	0.1	3
IUD	-	3
Progestasert	2.0	-
Copper T 380A	0.8	-
Condom (without spermicide)	2	12
Diaphragm (with spermicide)	6	18
Cervical cap	6	18
Withdrawal	4	18
Periodic abstinence	1-9	20
Spermicide alone	3	21
Vaginal Sponge	-	28
Used before childbirth	6	18
Used after childbirth	9	28
No method	85	85

Source: Trussell et al, Obstet Gynecol 76:558, 1990

WHO SHOULD NOT USE DEPO-PROVERA CONTRACEPTIVE INJECTION?
Not all women should use DEPO-PROVERA. You should not use DEPO-PROVERA if you think you might be pregnant, have any vaginal bleeding without a known reason, have had cancer of the breast, have had a stroke, have or have had blood clots (phlebitis) in your legs, have problems with your liver or liver disease, or are allergic to DEPO-PROVERA (medroxyprogesterone acetate or any of its other ingredients). You will have a physical examination before your doctor prescribes DEPO-PROVERA. It is important to tell your doctor if you are taking any prescription or over-the-counter medications or if you have a family history of breast cancer, an abnormal mammogram (breast x-ray), fibrocystic breast disease, breast nodules or lumps, or bleeding from your nipples; kidney disease; irregular or scanty menstrual periods; high blood pressure; migraine headaches; asthma; epilepsy (convulsions or seizures); diabetes or a family history of diabetes; or a history of depression.

WHAT IF I WANT TO BECOME PREGNANT AFTER USING DEPO-PROVERA?
Because DEPO-PROVERA is a long-acting birth control method, it takes some time after your last injection for its effect to wear off. Based on the results from a large study done in the United States, for women who stop using DEPO-PROVERA in order to become pregnant, it is expected that about half of those who become pregnant will do so in about 10 months after their last injection; about two thirds of those who become pregnant will do so in about 12 months; about 83% of those who become pregnant will do so in about 15 months; and about 93% of those who become pregnant will do so in about 18 months after their last injection. The length of time you use DEPO-PROVERA has no effect on how long it takes you to become pregnant after you stop using it.

WHAT ARE THE RISKS OF USING DEPO-PROVERA CONTRACEPTIVE INJECTION?

- Irregular Menstrual Bleeding**
The side effect reported most frequently by women who use DEPO-PROVERA for contraception is a change in their normal menstrual cycle. During the first year of using DEPO-PROVERA, you might have one or more of the following changes: irregular or unpredictable bleeding or spotting, an increase or decrease in menstrual bleeding, or no bleeding at all. Unusually heavy or continuous bleeding, however, is not a usual effect of DEPO-PROVERA, and if this happens, you should see your health-care provider right away. With continued use of DEPO-PROVERA, bleeding usually decreases, and many women stop having periods completely. In clinical studies of DEPO-PROVERA, 57% of the women studied reported no menstrual bleeding (amenorrhea) after 1 year of use, and 68% of the women studied reported no menstrual bleeding after 2 years of use. The reason that your periods stop is because DEPO-PROVERA causes a resting state in your ovaries. When your ovaries do not release an egg monthly, the regular monthly growth of the lining of your uterus does not occur, and therefore, the bleeding that comes with your normal menstruation does not take place. When you stop using DEPO-PROVERA your menstrual period will usually, in time, return to its normal cycle.
- Bone Mineral Changes**
Use of DEPO-PROVERA may be associated with a decrease in the amount of mineral stored in your bones. This could increase your risk of developing bone fractures. The rate of bone mineral loss is greatest in the early years of DEPO-PROVERA use, but after that, it begins to resemble the normal rate of age-related bone mineral loss.
- Cancer**
Studies of women who have used different forms of contraception found that women who used DEPO-PROVERA for contraception had no increased overall risk of developing cancer of the breast, ovary, uterus, cervix, or liver. However, women under 35 years of age whose first exposure to DEPO-PROVERA was within the previous 4 years may have a slightly increased risk of developing breast cancer similar to that seen with oral contraceptives. You should discuss this with your health-care provider.
- Accidental Pregnancy**
Because DEPO-PROVERA is such an effective contraceptive method, the risk of accidental pregnancy for women who get their shots regularly (every 3 months) is very low. While there have been reports of a possible risk of low birth weight and neonatal infant death or other health problems in infants conceived close to the time of injection, such pregnancies are rare. If you think you may have become pregnant while using DEPO-PROVERA for contraception, see your health-care provider as soon as possible.
- Other Risks**
Women who use hormone-based contraceptives may have an increased risk of blood clots or stroke. Also, if a contraceptive method fails, there is a possibility that the fertilized egg will begin to develop outside of the uterus (ectopic pregnancy). While these events are rare, you should tell your health-care provider if you have any of the problems listed in the next section.

WHAT SYMPTOMS MAY SIGNAL PROBLEMS WHILE USING DEPO-PROVERA CONTRACEPTIVE INJECTION?
Call your health-care provider immediately if any of these problems occur following an injection of DEPO-PROVERA: Sharp chest pain, coughing of blood, or sudden shortness of breath (indicating a possible clot in the lung); sudden severe headache or vomiting, dizziness or fainting, problems with your eyesight or speech, weakness, or numbness in an arm or leg (indicating a possible stroke); severe pain or swelling in the calf (indicating a possible clot in the leg); unusually heavy vaginal bleeding; severe pain or tenderness in the lower abdominal area; or persistent pain, pus, or bleeding at the injection site.

WHAT ARE THE POSSIBLE SIDE EFFECTS OF DEPO-PROVERA CONTRACEPTIVE INJECTION?

- Weight Gain**
You may experience a weight gain while you are using DEPO-PROVERA. About two thirds of the women who used DEPO-PROVERA in clinical trials reported a weight gain of about 5 pounds during the first year of use. You may continue to gain weight after the first year. Women in one large study who used DEPO-PROVERA for 2 years gained an average total of 8.1 pounds over those 2 years, or approximately 4 pounds per year. Women who continued for 4 years gained an average total of 13.8 pounds over those 4 years, or approximately 3.5 pounds per year. Women who continued for 6 years gained an average total of 16.5 pounds over those 6 years, or approximately 2.75 pounds per year.
- Other Side Effects**
In a clinical study of over 3,900 women who used DEPO-PROVERA for up to 7 years, some women reported the following effects that may or may not have been related to their use of DEPO-PROVERA: Irregular menstrual bleeding, amenorrhea, headache, nervousness, abdominal cramps, dizziness, weakness or fatigue, decreased sexual desire, leg cramps, nausea, vaginal discharge or irritation, breast swelling and tenderness, bloating, swelling of the hands or feet, backache, depression, insomnia, acne, pelvic pain, no hair growth or excessive hair loss, rash, and hot flashes. Other problems were reported by very few of the women in the clinical trials, but some of these could be serious. These include convulsions, jaundice, urinary tract infections, allergic reactions, fainting, paralysis, osteoporosis, lack of response to fertility, deep vein thrombosis, pulmonary embolus, breast cancer, or cervical cancer. If these or any other problems occur during your use of DEPO-PROVERA, discuss them with your health-care provider.

SHOULD ANY PRECAUTIONS BE FOLLOWED DURING USE OF DEPO-PROVERA CONTRACEPTIVE INJECTION?

- Missed Periods**
During the time you are using DEPO-PROVERA for contraception, you may skip a period, or your periods may stop completely. If you have been receiving your DEPO-PROVERA injections regularly every 3 months, then you are probably not pregnant. However, if you think that you may be pregnant, see your health-care provider.
- Laboratory Test Interactions**
If you are scheduled for any laboratory tests, tell your health-care provider that you are using DEPO-PROVERA for contraception. Certain blood tests are affected by hormones such as DEPO-PROVERA.
- Drug Interactions**
Cytadren (aminoglutethimide) is an anticancer drug that may significantly decrease the effectiveness of DEPO-PROVERA if the two drugs are given during the same time.
- Nursing Mothers**
Although DEPO-PROVERA can be passed to the nursing infant in the breast milk, no harmful effects have been found in these children. DEPO-PROVERA does not prevent the breasts from producing milk, so it can be used by nursing mothers. However, to minimize the amount of DEPO-PROVERA that is passed to the infant in the first weeks after birth, you should wait until 6 weeks after childbirth before you start using DEPO-PROVERA for contraception.

HOW OFTEN DO I GET MY SHOT OF DEPO-PROVERA CONTRACEPTIVE INJECTION?
The recommended dose of DEPO-PROVERA is 150 mg every 3 months given in a single intramuscular injection in the buttock or upper arm. To make sure that you are not pregnant at the time of the first injection, it is important that the injection be given only during the first 5 days after the beginning of a normal menstrual period. If used following the delivery of a child, the first injection of DEPO-PROVERA should be given within 5 days after childbirth if you are not breast-feeding or 6 weeks after childbirth if you are breast-feeding. If you wait longer than 3 months between injections, or longer than 6 weeks after childbirth, your health-care provider should determine that you are not pregnant before giving you your injection of DEPO-PROVERA.

Caution: Federal law prohibits dispensing without a prescription. You must see a doctor to receive a prescription.

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