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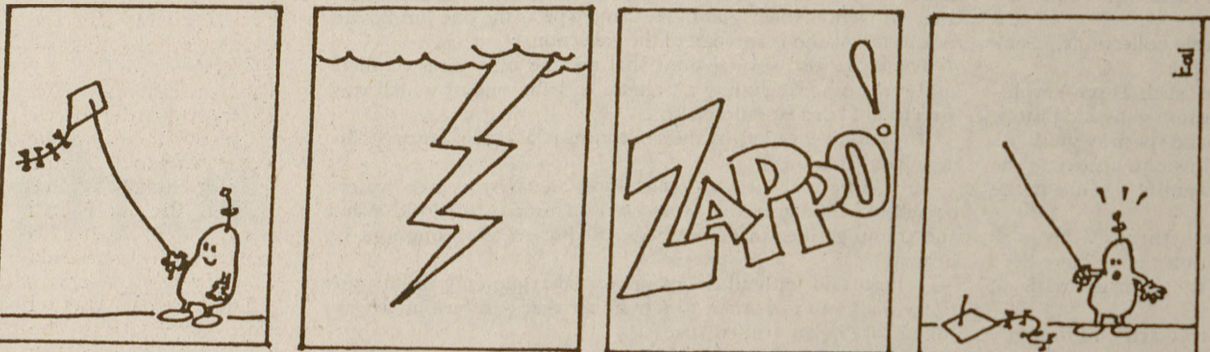
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Violence

Continued from Page 1

timony before a commission investigating the mosque massacre, Barak said the Palestinian bystander apparently died from gunfire by the guerril-

las. Al-Ahli hospital in Hebron said an army bullet killed Hunduq Zahdeh, 34, who was five months' pregnant.

The military had no immediate response to a statement by Mohtasseb Children's Hospital condemning soldiers for firing from the roof and tromping repeatedly through wards

holding 32 children despite their obvious fright.

"The shooting continued all night. The children were very scared and cried all night. They could not sleep," said the hospital's director, Dr. Hisham Abu Ghariyah.

At a Jerusalem news conference,

Trading cards help police improve relations with city youth

The Associated Press

FORT WORTH — In a city plagued by skyrocketing violence between youth gangs, authorities are trying hard to improve their relationships with kids.

One of the newest proposals is to create "police trading cards." Police say they hope the cards will elevate police to "hero status" in the minds of youths — particularly in neighborhoods now troubled by guns, drugs and gangs.

"I wouldn't say we're looking at the trading cards primarily because of the gang problem in Fort Worth. We've been debating it for several years, even before the gang situation was as pronounced as it is now. It's timely though," Lt. Greg Bradley said Wednesday.

"And actually, we hope the cards will be helpful for the kids who are involved in crime as well as for those who are, and maybe remove the barriers that may be there between some kids and officers."

Bradley and Chief Thomas Windham took the idea to the City Council on Tuesday.

"It's not a done deal. We want to make sure we had the council's blessing to proceed further, and don't think we got a yes or no on it yet. We're waiting to embark on it, but I expect we'll get the go-ahead," Bradley said.

The idea of police trading cards isn't new. Other cities in the Dallas-Fort Worth area — including Arlington, Cleburne, DeSoto, Mesquite and University Park — have tried the cards as a means to link kids with officers.

PLO negotiator Saeb Erekat sharply criticized Prime Minister Yitzhak Rabin.

"Rabin talks a lot about peace in English, but his orders in Hebrew to his troops is to continue their terror campaign and massacres against civilians," he said.

research abroad

JUNIOR FULBRIGHT

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Informational MEETINGS

Wed. March 2, 10:15 AM
Thur. March 10, 4:00 PM
251 Bizzell Hall West

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Lugar: 510 RUDDER TOWER
Texas A&M University
Día: Jueves 24 de Marzo
Hora: 6:15 p.m.

Para mayor información comunicarse con Felipe Zambrano - 764-7534

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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 (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)	-	-
Combined	0.1	3
Progesterone only	0.5	3
IUD	-	-
Progesterone	2.0	3
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	-	-
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 CONTRACEPTIVE INJECTION?
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 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.

2. 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.

3. 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 who have first exposure to DEPO-PROVERA 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.

4. 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 an increased 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.

5. 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 up 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 return to fertility, deep vein thrombosis, pulmonary embolism, 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**
Cytidine (aminoglycoside) 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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