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Depo-Provera
Contraceptive Injection
medroxyprogesterone acetate injectable suspension

DEPO-PROVERA Contraceptive Injection (medroxyprogesterone acetate injectable suspension, USP)

This product is intended to prevent pregnancy. It does not protect against HIV infection (AIDS) and other sexually transmitted diseases.

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 (13 weeks). To continue your contraceptive protection, you must return for your next injection promptly at the end of 3 months (13 weeks). 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?
The efficacy of DEPO-PROVERA Contraceptive Injection depends on following the recommended dosage schedule exactly (see "How often do I get my shot of DEPO-PROVERA Contraceptive Injection?"). To make sure you are not pregnant when you first get DEPO-PROVERA Contraceptive Injection, your first injection must be given **ONLY** during the first 5 days of a normal menstrual period **ONLY** within the first 5 days after childbirth if not breast-feeding and if exclusively breast-feeding **ONLY** at the sixth week after childbirth. It is a long-term injectable contraceptive when administered at 3-month (13-week) intervals. DEPO-PROVERA Contraceptive Injection 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 (13 weeks) 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
Intrauterine (IUD)	0.2	0.2
Female sterilization	0.2	0.4
Male sterilization	0.1	0.15
Oral contraceptive (pill)	-	-
Combined	0.1	0.3
Progestin only	0.5	-
IUD	-	-
Progestasert	2.0	-
Copper T 380A	0.8	-
Copper T 380A (with spermicide)	2	12
Diaphragm (with spermicide)	6	18
Cervical cap	6	18
Withdrawal	4	18
Rhythm/abstinence	1.9	20
Spermicide alone	3	21
Vaginal sponge	-	-
used before childbirth	6	18
used after childbirth	2	28
No method	85	95

Source: Trussell et al. *Obstet Gynecol* 1990;76:558-567

Who should not use DEPO-PROVERA Contraceptive Injection?
Not all women should use DEPO-PROVERA. You should not use DEPO-PROVERA if you have any of the following conditions:
• if you think you might be pregnant
• if you have any vaginal bleeding without a known reason

Birth control you think about just 4 x a year.

- if you have had cancer of the breast
- if you have had a stroke
- if you have or have had blood clots (phlebitis) in your legs
- if you have problems with your liver or liver disease
- if you are allergic to DEPO-PROVERA (medroxyprogesterone acetate or any of its other ingredients)

What other things should I consider before using DEPO-PROVERA Contraceptive Injection?
You will have a physical examination before your doctor prescribes DEPO-PROVERA. It is important to tell your health-care provider if you have any of the following:
• 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
• a history of depression
• if you are taking any prescription or over-the-counter medications.

This product is intended to prevent pregnancy. It does not protect against transmission of HIV (AIDS) and other sexually transmitted diseases such as chlamydia, genital herpes, genital warts, gonorrhea, hepatitis B, and syphilis.

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 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?
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 it 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 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.

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 whose first exposure to DEPO-PROVERA was within the previous 4 to 5 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. Unexpected 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 [13 weeks]) 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 uncommon. If you think you may have become pregnant while using DEPO-PROVERA for contraception, see your health-care provider as soon as possible.

5. Allergic Reactions:
Some women using DEPO-PROVERA Contraceptive Injection have reported severe and potentially life-threatening allergic reactions known as anaphylaxis and anaphylactoid reactions. Symptoms include the sudden onset of hives or swelling and itching of the skin, breathing difficulties, and a drop in blood pressure.

6. 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 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 (possibly ovarian pain or bleeding at the injection site)

What are the possible side effects of DEPO-PROVERA Contraceptive Injection?
1. 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 11.8 pounds over those 4 years, or approximately 3 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.

2. 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, hot flashes, and joint pain. 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?
1. Missed Period:
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 (13 weeks), then you are probably not pregnant. However, if you think that you may be pregnant, see your health-care provider.
2. 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.
3. 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.
4. 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 breast 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 2 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 (13 weeks) given as 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 essential that the injection be given **ONLY** during the first 5 days of a normal menstrual period. If you are following the delivery of a child, the first injection of DEPO-PROVERA **MUST** be given within 5 days after childbirth if you are not breast-feeding or 6 weeks after childbirth if you are exclusively breast-feeding. If you wait longer than 3 months (13 weeks) between injections, or longer than 6 weeks after delivery, your health-care provider should determine that you are not pregnant before giving you your injection of DEPO-PROVERA.

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Reel Critique

Do It For Uncle Manny
Directed by Adam Baratta
Starring Adam Baratta, Shane Edelman and Kari Wurher

Shane Edelman and Adam Baratta play Danny and Stuart, two college friends who are reunited at Stuart's producer-uncle Manny's mansion in Hollywood.

Danny is a struggling actor currently waiting tables to make ends meet and Shane has not had a date in three years.

The two young men head for a night on the town in Uncle Manny's Rolls-Royce and with his Rolex.

Some of the funniest moments in the film are Stuart's tantrums when he realizes the watch, which cost \$250,000, has been stolen and his "suave" moves while trying to pick up girls at a nightclub.

A series of mishaps and misunderstandings lead the guys to spend an entire day chasing a watch, "seducing" maitre d' Colin Mochrie of "Who's Line is it Anyway?" and getting their car fixed by a stoned mechanic played by Danny Nucci.

Nucci plays the typical Cheech and Chong character perfectly.

Louie Anderson makes an unforgettable appearance in the movie as a tow truck driver who mistakes Danny and Stuart for Jon Favreau and Vince Vaughn of Swingers.

The film's message is "in Hollywood, image is everything."

In *Do It For Uncle Manny*,



PHOTO COURTESY OF FORAY PRODUCTIONS

nothing is as it seems and the audience will definitely need and want to watch the second time to fully appreciate the film and its message. (Grade: B+)

—Lizette Reese

Morrow
Continued from page 3A

latest CD, *Outside The Lines*. "He's kind of a mentor to a lot of us," Morrow said of Maines. "He's taken our music, mine and Pat's in specific, and really gone from a dude on his couch with a guitar to a nice sounding song with full instrumentation, and a well-produced song, a well-produced group of songs for that matter."

"The other artists ... want to go to a guy like

Lloyd (Maines) who can produce a song for a decent amount of money, and not charge. He's very conscious of your dollar, he's very frugal, but he knows how to do Morrow said.

As for success, Morrow said he has seen everything beyond his wildest ambitions. "I quit performing and writing songs only a few hands stop working and my brain stops working."

"Why do I do it? Because I love it, me," Morrow said. "Everything that is around and pour into my music."

TAMOR
Continued from page 4A

According to the TAMOR constitution, to become a member of A&M Off-Road, one must view a club safety video and receive a TAMOR sticker before they take to the roads. Off-roading can be very dangerous and many precautions must be taken to ensure the driver and passenger's safety.

"Sometime in the fall semester of 1999, we were at

Devil's Den in San Antonio," Wolverton said. "One of the club members was going to try and go up a hill after a couple of others had tried it by spinning their tires. He said he was going to go until he started spinning his tires. As he ascended the hill, his tires never started spinning. He ended up rolling end-over-end and side-over-side a couple of times. He had to be taken to the hospital, along with the passenger. Thankfully, both of them were OK."

According to Wolverton, A&M Off-Road is a club of good people who are willing to help each other out and together to share their passion. "I think that people get sport a negative reputation because of the irresponsible person that tears up property," Wolverton said. "We do several things to help the off-roading community look better to the public, including highway clean-up, trail clean-ups and responsible off-road driving."

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