

TEXAS A&M UNIVERSITY  
**are you going?**  
FAC Nov. 25  
Beat the Hell Outta t.u.

**Aggieland Nail Salon**  
Special:  
**Jacuzzi Spa Pedicure \$15.00**

Jacuzzi Spa Manicure & Pedicure \$25.00 w/ coupon	Full Set Acrylic \$20.00 w/ coupon	Solar Full Set \$30.00 w/ coupon	Refill Acrylic \$10.00 w/ coupon
---	------------------------------------	----------------------------------	----------------------------------

OFFERS GOOD MONDAY THROUGH THURSDAY ONLY!!  
One coupon per customer. Not valid with any other offer. Expires 11/14/02

We specialize in pedicures... a Jacuzzi Spa Pedicure involves aromatherapeutic foot bath treatment containing Tea Tree Oil and an ultimate mineral scrub with sea salts that mildly exfoliate and moisturize... and a long foot massage for your tired feet.

1933 S. Texas Ave. College Station, TX 77840  
979-694-3636

Sanitation is Aggieland Nails #1 Priority  
We Accept Aggie Bucks and major credit cards

**KONA KRNCH**  
**NEBRASKA GAME ON THE BIG SCREEN**

**PLUS KNOCKOUT DRINK SPECIALS**  
Throughout the entire game!  
\$1.00 Rita's & \$1.00 Drafts

520 Harvey Rd. (979) 694-4618  
Hours: Mon-Thurs 11am-10pm Fri 11am-11pm Sat 11am-11pm Sun 11am-9pm

ON SALE SATURDAY AT 10AM!  
SOUTHWEST PRESENTS  
**ROBERT EARL KEEN'S Merry Christmas from The Family**

With Special Guests:  
Dec. 19 Todd Snider  
Dec. 20 Rodney Hayden

THURSDAY & FRIDAY, DECEMBER 19 & 20  
**verizon wireless theater**  
www.verizonwirelesstheater.com

Get Tickets at CC.COM

6A  
Thursday, October 24, 2002  
**Campaign spending reaches new high in competitive election year**

(AP) — Candidates for governor are shattering spending records in more than a half-dozen states, and coming close elsewhere, in one of the most competitive election years for the states' top office over the past decade.

In Texas, slick commercials come back-to-back. Phones ring off the hook in Wisconsin. Direct mail, ad campaigns, and phone banks drive expensive campaigns in Maryland, New Mexico and beyond.

Some of the spending is fueled by wealthy candidates, as in New York. Other races are inflated by huge campaign fundraising efforts; that's what's happened in California. Competitive races are driving up the costs in Florida, Illinois and more.

"Money is definitely the name of the game, unfortunately," said Celia Viggo Wexler, research director for Common Cause, a nonprofit citizens group that supports public financing of elections. From pharmaceutical companies to public-employee unions, she said, "there are lots of reasons for special interests to give at the state level. And there are lots of hands out at the state level."

States where records are falling include:  
— Texas: GOP Gov. Rick Perry and Democratic challenger Tony Sanchez have spent a record \$72 million between

the two of them so far, easily surpassing the 1990 record of \$53.4 million in their state.  
— New York: Total spending hit \$89 million earlier this month, driven partly by at least \$40 million spent by billionaire and Independence Party candidate B. Thomas Golisano, who is self-financing his third run. GOP Gov. George Pataki spent at least \$27 million, while Democrat H. Carl McCall, who complained this week that the national party hasn't provided enough financial help, spent \$11 million.  
— New Mexico: Democrat Bill Richardson spent more than \$5.6 million while Republican John Sanchez has shelled out \$1.9 million, breaking the 1998 record of \$5.2 million with the home stretch yet to come.  
— New Hampshire and Wisconsin, where competitive races smashed spending records before the primary races were concluded. More than \$10.4 million was spent by the end of August in Wisconsin, and \$9.6 million in New Hampshire by the GOP nominee alone, multi-millionaire Craig Benson.  
None of the races so far have surpassed the \$130.5 million spent in California on the 1998 gubernatorial race, the highest number found by the National Institute on Money in State Politics, a watchdog group in Montana. But spending in New York and

Texas is nearing \$100 million. Records are falling in many smaller states. Alabama, Iowa, Maryland and South Carolina all are seeing races far more expensive than ever before.

And while all-time highs haven't been reached in California or Florida, eye-popping fund raising has become a campaign issue. First-term Democratic Gov. Gray Davis's huge money lead — he had \$21 million on hand as the month began, after spending \$17 million over three months — has been a target of GOP candidate Bill Simon. In Florida, GOP Gov. Jeb Bush has criticized union money flowing to Democratic challenger Bill McBride.

Both major parties are also contributing heavily to state-level elections with an eye toward the presidential race in 2004. Governors help drive national debates on many domestic issues, and four of the last five presidents served as governors at one time.

"This is off-cycle, so both parties are doing everything they can — Republicans to maintain their momentum from their presidential win, and the Democrats to turn the tide," said Ed Bender with the National Institute on Money in State Politics.

Money has an immediate impact on races. In Texas, Tony Sanchez, a Laredo banker, was a

**Breaking campaign spending records**

Gubernatorial candidates are breaking spending records. Candidates in these states have already spent more than ever before.

Spending, in millions

State	Old record	Current spending
New York	\$41.5 million	\$89 million
Texas	\$53.4 million	\$72 million
New Mexico	\$5.2 million	\$5.6 million
New Hampshire	\$5 million	\$9.6 million
Wisconsin	\$8 million	\$10.4 million
South Carolina	\$9.1 million	\$11.4 million

NOTE: Alabama, Iowa and Maryland also beat their records.

**Symposium**  
Continued from page 1

America becomes more liberal," Hutchinson said. The threat of censorship is a viable force which helps guide the creation and production of American films, said Katherine Kelly, an A&M English professor.

Political leaders thought if viewers saw ideas such as lust, rebellion, or anarchy in a film, they would not be able to control themselves from acting in the same way, Kelly said.

Kelly said there is no end to the development of realism, a style of art intended to depict the reality of everyday life, because realism is a forbidden topic.

"It's a style, not a direct mirroring of life," Kelly said.

**NEWS IN BRIEF**

**UPD searching for driver in hit and run**

The University Police Department (UPD) is seeking a driver of a newer model gray involved in a hit-and-run accident with a bicyclist last week.

The car's passenger side mirror struck the bicyclist as he was heading eastbound on Rountt Boulevard east of Class Street at about 6 p.m. Wednesday, Oct. 16. The mirror struck the victim's back, causing him to bounce against the vehicle and strike the curb, flipping over his handlebars and hitting the pavement as the vehicle drove away.

The bicyclist suffered lacerations to his nose and injuries to his hands. He reported to the hospital following the accident.

Three witnesses helped the victim to his feet after the accident. UPD is trying to locate the witnesses, who may have a better description of the vehicle, said UPD Associate Director Elmer Schneider.

**Experiment**  
Continued from page 1

The phorid flies have been mass produced and screened to make sure they don't target the wrong species.

When attacking, the fly hovers over the fire ant and "divebombs" into it, injecting an egg into the ant's thorax, Drees said.

"It is quite amazing to witness," she said.

The head of the ant falls off before the larva eventually

develops into a mature fly.

"A main concern with this release of the phorid fly has been that it will somehow switch hosts and attack non-target organisms," Drees said. "But much work has gone in to the fly to ensure that it doesn't do just that."

At \$1 per fly, Hickman said a negative aspect of the project is the costly expense of the experiment. The fire ant causes \$1.2 billion in damages each year. Treating an area of land using insecticides costs between \$10 to \$12 per acre, Barr said.

"For large land owners, it isn't efficient or affordable to treat the land more than every few years," he said. "The phorid fly project will make it quite possible for these owners to afford an annual treatment."

Barr said the biological agents could possibly extend the effectiveness of bait treatment for years.

"The project does not expect to eradicate the fire ant though, but will hopefully suppress the population," Drees said.

**Depo-Provera®**  
Contraceptive Injection  
medroxyprogesterone acetate injectable suspension

Birth control you think about just 4 x a year.

**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	0.2*	0.2*
Implants (Norplant)	0.2*	0.4
Female sterilization	0.1	0.15
Male sterilization	0.1	0.15
Oral contraceptive (pill)	0.1	3
Combined Progestogen only	0.5	3
IUD	0.2	3
Progesterast	0.8	12
Copper-T 380A	2	12
Condom (without spermicide)	6	18
Diaphragm (with spermicide)	6	18
Cervical cap	6	18
Withdrawal	4	20
Periodic abstinence	1-9	20
Spermicide alone	3	21
Vaginal Sponges used before childbirth	6	18
used after childbirth	9	28
No method	85	85

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

\*When used as directed.

**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

**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 be developed 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  
• persistent pain, pus, or bleeding at the injection site

**What are the possible side effects of DEPO-PROVERA Contraceptive Injection?**  
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, 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?**  
**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 (13 weeks), then you are probably not pregnant. However, if you think that you may be pregnant, see your health-care provider.  
**Labatory 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:** Cyclosporin (immunosuppressive) is an anticancer drug that may significantly decrease the effectiveness of DEPO-PROVERA if the two drugs are given during the same time.  
**Other Medications:** 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 (13 weeks) 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 essential that the injection be given ONLY during the first 5 days of a normal menstrual period. If used 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 (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.

Rx only CB-75

Pharmacia & Upjohn Company  
Kalamazoo, MI 49001, USA

**Class of 2003**

Get your free SENIOR PORTRAIT made for the 2003 Aggieland yearbook.

Visit AR Photography  
404 University Dr. E., Ste. F (near TC BY)  
9-11:30 A.M. & 1:30-4 P.M.  
Monday-Thursday, or call 693-8183.