## ne needed at UNB

dous" psycological damage later. He saireported cases had indicated lax of consultation between the students and their parents about the abortion and resulted in a permanent estrangement

-but

the the

said,

n the How-

does,

d for

the

iend,

r or

s the

ssion

safe

rtion

there

lved.

week

is go

range

ative

efore

oman

thout

men-

Most effecive of birth control methods, he said, was the estrogen - prospecterone pill. These have been known, however, to cause nausea, weight gain and irritability in some cases.

The doctor denied any links between the pill and cancer. Estrogen has the potential to alter the clotting mechanism but there is not sufficient quantity in the pill to have any effect. Large scale surveys have shown no increase in bood clot formation for those taking the low-dosage pill.

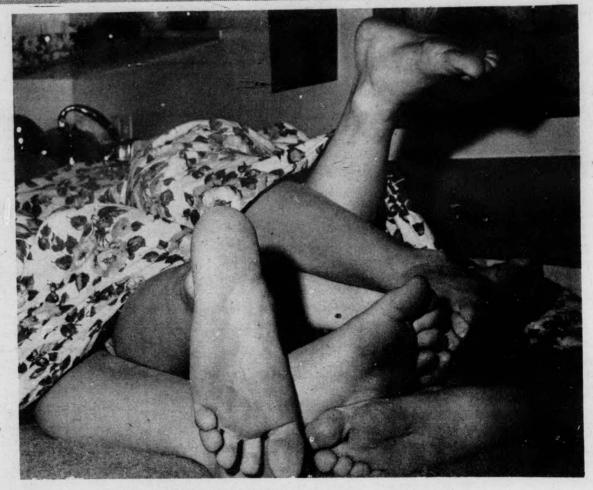
There are two types, both guaranteed affective after a month. One method is sequential, that is one estrogen is taken for the first two weeks and a prosgesterone the third.

The second method, a combined pill, had been generally accepted as more reliable. The sequential pill, however, has had fewer reported side effects. Tingley suggested a regular Pap smear, breast examination, weight and blood pressure check for those taking the pill.

There is no explicit age limit for those who want the pill, Tingley said. Parental consent is a legal requirement for those under 19 but this has never come under a judicial ruling.

"By far the majority of physicians," he said, "do not consider age as a limiting factor in giving birth control advice to the sexually active. In most of these cases the pill is used."

A contributing element to birth control ignorance, said the doctor, is the emphasis on the women's responsibility. "Our government puts all the onus upon women-which is wrong. Men should know as much about birth control as women but



Venereal disease is a not uncommon problem . . .

generally know much less."

Venereal disease is another social problem "pretty common" on campus according to Tingley. Most of his cases are men and he supposed this was due to the more obvious symptoms which occur among men.

Gonorrhea is the major complaint with occasional-occuring perhaps once every two years-case of syphilis. The syphilis is reported imported from larger cities.

Alcoholism is another concern of Tingley's. While alcoholics aren't made on campus, he said, there does seem to be an atmosphere condusive to irresponsible drinking.

Researchers still don't agree if alcoholism is based on inherited traits, said Tingley, or if the tendency evolves in early childhood.

"I don't think alcoholics are made on campus," he said. They had the potential before they came here. The alcoholic who only hurts himself and his family is less of a problem than the drinker who on a drunk kills somebody in a car accident."

The doctor said acts committed while one was inebriated could have life-long psychological effects. He gave one example of a woman who had copulated while drunk and later had an unwanted pregnancy.

Campus life promotes poor social drinking habits, he said.

"The most important factor is peer influence. Students don't take the chance to think what their drinking habits should be."

The social effect of alcohol abuse is far worse than smoking marijuana, said Tingley. He said the medical profession should provide facts and the public should make decisions based on this research.

Malnutrition and lack of physical fitness is another on-campus social ill attacked by Tingley. Conditions are bad on UNB and across Canada, said the doctor. "If a person keeps fit," he said, "they have greater assurance of a lengthy life. The average Canadian is a slob compared to the average Swede."

The average Swede he said, contrary to Canadians, control their weight and exercise. He stressed the importance of eating the correct quantity, eating regularly and consuming food with nutritional value.

"Canadians don't participate enough in those things which would be good for physical development," he said. Leisure time is spent in front of television and in taverns when there should be more cycling, swimming, cross country skiing and walking.

These problems indicate the need for preventive medicine development on campus. Such a practice, he said, could best grow gradually, taking advantage of people as they consulted the doctor, rather than trying to attract students to group discussions, for example. He has considered having a nurse hired as a student health councellor who could work on a one-on-one basis.

Much of the problem on campus, he said, is centered on the students' need to define their lifestyle, "the pattern by which you chose to live your life." tingley said he spent nine years establishing his mode.

A lifestyle, he said, needn't be synonymous with entering the mainstream of society. Universities have the potential, through their sheltered atmosphere, to allow students to reflect and choose this pattern, he said.

"Too often," he said, "we fall into a lifestyle rather than do anything to determine it. This could lead to a chronically unhappy life."

The university's role in guiding students this way has been neglected, he said. Universities are too academically oriented. A student with communication problems can study here, obtain a degree and leave with their communicative abilities little improved.

University curricula, he said, need to include or give greater emphasis on physical fitness, nutrition and communication. Faculty have given this some consideration, he said.