

Pubs proposal presented

By LARRY GREGAN

The Committee of Concerned Students Aliming Compromise met for two hours with the residence administration Tuesday evening to present their proposal for re-introducing open pubs to the residences.

The administration was represented by Dean of Men, Robert Smith, Dean of Women, Joy Kidd and Dean of Students, Barry Thompson.

The members of the CSAC committee present were chairman Isabelle Buyelan, Mutt Tweedie representing the Inter-Residence Social Committee, Lindsey Ryerson representing the Residence Representative Council, SRC President Dave Bartlett and Garrick Blain, representing the residence proctors.

The proposal was intended as a compromise between the wide-open

pubs of years past and the closed pubs only regulations now in effect. The proposal included the following:

1) Residence ID's-student ID cards would include information on residence status. Under this arrangement off-campus students would be permitted to attend pubs only as a signed in guest of a resident of the house the pub was being held in.

2) Campus Police-CP's would be compulsory at all open pubs but optional at closed pubs.

3) Limit On Numbers-each residence would be allowed three open pubs per term in the residence. The events would also be co-ordinated so as not to have more than two open pubs in the residence on any given night.

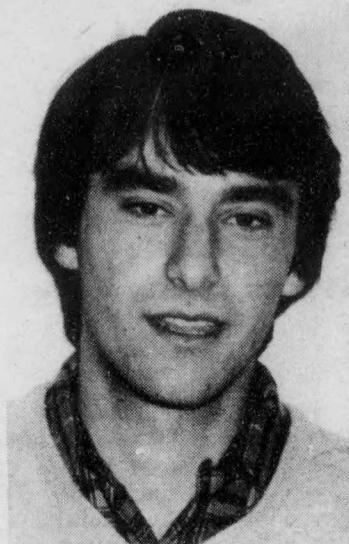
4) Bar Operations-all bartenders must be at least 19 years of age and follow all

the NBLCC regulations.

The members of the administration were receptive to the proposals and said they were now aware of the tension among the residence students. This has resulted in fights, damage to property and what some feel is excessive noise.

The administration will examine the proposals and meet with the students' committee in the near future.

Also newly -elected are....



Dave Laurence
Engineering Rep



Bryce Bowman
Arts rep



Lynn Fraser
Arts rep



Marvin Greenblatt
Board of Governors



Katie Lyons
Senate

French fry fuel

An Ohio State University researcher has figured out a way to cut diesel fuel use by 20 per cent—he just adds french fry grease.

Helmuth Engleman is the mechanical engineering professor who devised the method. He

merely takes grease from a cooking vat, strains it to remove peices of food and then pours it into a school bus. And the bus, according to Engleman is doing just fine, running on 80 per cent diesel fuel and 20 per cent grease. (NEWSSCRIPT)

A bloody good story

By MARCUS A. CURRY

Would you believe that donating blood has entered the competition arena? Yes, thats right, a real competitive exercise. As a matter of fact some members of the houses on campus were encouraged to go and have their names signed off the list because they had a medical or religious reason for not being able to take part in the exercise. To me, the key ideas was, "We won, we had the highest percentage among the houses" another sporting event!

Blood is vital to life and transfusing human blood holds a prominent position in modern medical practice. But what are the problems connected with the use of blood? Well for the unwary there are many. The book "Clinical Hematology" by Professor Maxwell M. Wintrobe, p. 474 says "A frank appraisal of the facts proves that blood transfusion must honestly be regarded as a procedure involving considerable danger and even as potentially lethal." And the "Oasis", February 1976, p. 23-24, which is a United States Government publication, carried an article on the dangers of blood said, "Donating blood can be compared to sending a loaded gun to an unsuspecting or unprepared person...like the load-gun there is a safety lever or button governing the transfusions. But, how many persons have died from gun shot wounds as a result of believing that the lever was on 'safe'?"

Winfield S. Miller wrote in Medical Economics, "No biologic product has a greater potential for fatal mistakes in medical practice than blood. More than one doctor has learned to his sorrow that every bottle of blood in the blood banks is a potential bottle of nitroglycerin." The Southern Medical Journal recently suggested that "Between 3,000 and 30,000 deaths attributable to transfusions" is probably a conservative estimate.

Stanford University's Dr. J. Garrott Allen, a leading expert on the blood problem, estimated that blood transfusions kill at least 35,000 Americans each year and injure another 50,000. (The National Observer, January 29, 1972, p. 1) Just think, these figures are for just one country saying nothing for the rest of the world.

Blood is unique. It is so unique that reference works state that there are some fifteen know group systems. Regarding only one of these groups, the Rh blood group system, it is said that, "at the present time nearly 300 different Rh types may theoretically be recognized." (God, blood and Society, 1972, by A.D. Farr, p. 32). Dr. Herbert Silver from the Blood Bank and Immunohematology Division of the Hartford (Connecticut) Hospital wrote concerning blood matching. He said that "there is a less than 1 in a 100,000 chance of giving a person blood exactly like his own." (The Journal of the American Medical Association,

April 12, 1976, p.1611)

Since blood is so risky, are there alternative therapies? Yes there are. The doctor can "build up the patients blood" before and after surgery with amino acids and oral and injected iron compounds. (The Journal of Thoracic and Cardiovascular Surgery, July, 1974, p. 3). Others include deep hypothermia (lowering the patients body temperature), inducing hypotension (lowering blood pressure); also the use of saline solution, ringers lactate, Haemacel and Hydroscythe starch solution are being used as non-blood fluids quite effectively.

A point to note in all this is, even after you are given a transfusion, this additional blood does not enhance the blood's oxygen-carrying capacity. A recent editorial in Anaesthesia made this significant point, "It is worth remembering also that the

haemoglobin of stored, citrated red cells is not fully available for the transfer of oxygen to the tissues for some 24 hours after transfusion... rapid blood transfusion must therefore be regarded

primarily as a mere volume expander in the initial stages. (Anaesthesia, March 1975, p. 150) So plasma replacement could be done by saline solution, Ringers lactate or laemacce and Hydroxyethyl starch solution to mention a few.

YE OLDE CHESTNUT INN

APPEARING FRIDAY & SAT & SAT MATINEE

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Irish, Bluegrass & Country

Next week & Sat matinee

The Irish Are Back

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