

NEWS OF THE WEEK

graft, says Dr. Conley, because the skin of the neck has the same color and texture as that of the face, and the regional flap, which remains attached to the nape of the neck, comes with its own blood supply. The operation makes possible the removal of skin that has been irradiated and an effective resurfacing of the face.

MATERNAL SMOKING HABITS INFLUENCE PREMATURITY

Cigarette smoking during pregnancy appears to have a definite and detrimental effect on birth weight and prematurity, but no effect on perinatal mortality, according to a team of Navy gynecologists.

Dr. Dwight A. Callagan, executive director of the U.S. Naval Hospital at Great Lakes, Ill., and his colleagues base their conclusions on a study of the records of 48,000 single pregnancies resulting in the delivery of infants weighing over 500 gm at 44 U.S. naval stations around the world between 1963 and 1965. They separated smokers into three groups

INJECTIONS SIMPLIFY BIRTH CONTROL REGIMEN

A synthetic progesterone used to prevent abortion may greatly simplify the contraceptive regimen for many women, says Dr. Edwin R. Zartman, medical director of the Planned Parenthood Association of Columbus, Ohio. One I.M. injection of 150 mg of medroxyprogesterone acetate (Depo-Provera, Upjohn) every 90 days appears to act as an effective contraceptive agent. Dr. Zartman reports that none of 274 women participating in a clinical trial for six months have become pregnant. On average, they have had four pregnancies.

—light, moderate, or heavy—according to whether they smoked half a pack, one pack, or one and a half or more packs of cigarettes a day.

In a report to the annual clinical meeting of the American College of

Obstetricians and Gynecologists in Chicago, they state that the mean birth weight of infants born to heavy smokers is half a pound less than that of the offspring of nonsmokers. Among heavy smokers, they find, 11% of births are premature, based on birth weight. Among light smokers, 8% are premature, while among nonsmokers, only 6% are premature.

But perinatal mortality is not significantly different between the smokers and nonsmokers. The Navy investigators find that the mortality of premature infants, classified by birth weight, is actually lower for the smokers.

In evaluating some major complications of pregnancy, they note that premature rupture of the membranes increases markedly with the amount of maternal smoking. The incidence of pyelonephritis, abruptio placenta, and placenta previa is also higher among smokers, but bears no direct relation to the amount smoked.

On the other hand, pre-eclampsia decreases as cigarette consumption increases, an effect which the Navy gynecologists are unable to explain.

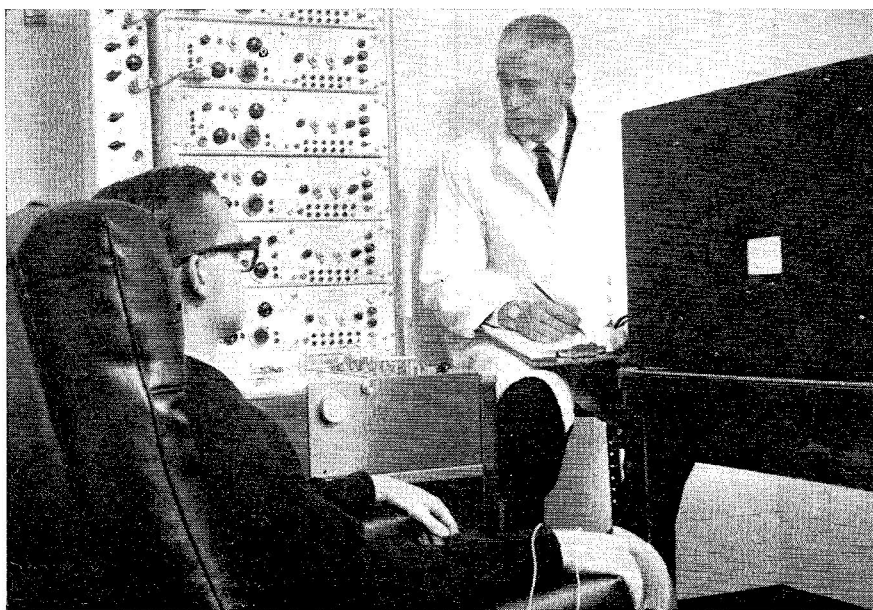
Although many women may continue to smoke in spite of the effects on pregnancy, more and more of their doctors are giving up the habit, according to a report by the Surgeon General (see page 140).

FEDERAL HEALTH AGENCY ACQUIRES LSD STOCKS

Despite the manufacturer's recall of all LSD supplies from physicians investigating the hallucinatory substance, a limited number of clinical investigations will be completed. Four investigators working on projects of the National Institute of Mental Health will be permitted to finish their current studies of LSD in the treatment of alcoholism and mental illness. Nine similar projects of the Veterans Administration will also be completed.

Federal regulations require that the researchers now engaged in clinical studies of LSD must submit investigational new-drug (IND) applications to the Food and Drug Administration. Until it stopped supplying LSD last month, Sandoz Pharmaceuticals was the only holder of an IND application for the drug.

The NIMH has taken possession of Sandoz' residual stock of the substance because U.S. officials want to preserve the only medically standardized samples available here.



The type of psychosomatic symptoms a patient exhibits may be indicative of the degree to which he represses uncomfortable emotions. Psychologist Joseph Reyher (above, right) of Michigan State University finds that good repressors tend to have physical symptoms, while those who repress emotions to a lesser degree appear to have emotional symptoms as well as physical complaints. Dr. Reyher polygraphed the reactions of 24 normal persons to key words from a series of statements made to them while they were under hypnosis. They had been told that they would react angrily to the words. Those who showed the greatest degree of anger repression complained of autonomic nervous system ailments such as headache, nausea, musculo-skeletal aches, tension, and tics. Weaker repressors experienced feelings ranging from frank anxiety, depression, and irritation to terror, panic and rage.