
the **BAPHRON**



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 1

January 1, 1979

BAPHR - The First 18 Months

All the forces in the World are not so powerful as an Idea whose time has come.

— Victor Hugo

On July 24, 1977, seventeen individuals of mutual acquaintance met in a San Francisco apartment. While most of them knew the purpose of the gathering, none could predict what direction subsequent meetings might take. But the atmosphere was warm with the enthusiasm and excitement of an idea whose time had come.

This gathering of 17 people turned out to be the initial meeting of what was to become Bay Area Physicians for Human Rights. Since that meeting some 18 months ago, BAPHR has grown in membership at a rate that has astounded even its founders, and has gained recognition and respect among many medical, political, homosexual and non-homosexual individuals and organizations in San Francisco as well as the state of California and many areas of the United States.

The history of BAPHR is an interesting and important story to share. The first several issues of BAPHRON will explore the evolution of BAPHR through these first 18 months.

It may be of interest to ponder on how the idea of our organization came about. Certainly, such an idea had been working in the minds of several of its founders for a period of time. To these people, there was the need among the gay community to be assured adequate health care, and the need on a professional level to provide a foundation for

addressing gay health education and the topic of homosexuality in medical training programs and among our colleagues.

A survey which was completed by 15 of 17 of those attending the initial meeting revealed that the primary purposes and functions for such a group should be (1) to support adequate education on homosexuality in medical school programs, (2) to serve in a consciousness-raising effort for health professionals regarding homosexuality, (3) to organize a physician referral service for gay patients, and (4) to become involved in the political activity of the gay community as needed.

A major inspiration for the formation of BAPHR came from the

Gay People In Medicine (GPIM) committee of the American Medical Student Association (AMSA). One of the many purposes of the GPIM Committee is to organize local support groups for gay medical students. Several of the founders of our organization had been contacted by Paul Paroski and others of AMSA/GPIM who had attended the annual American Medical Association convention in San Francisco in June of 1977 regarding the formation of such a local support group. By July 1, however, it was already apparent that many *physicians* in the Bay Area might be interested in supporting and joining such an organization and the decision was made to form an entity independent of AMSA/GPIM.

(continued next page)



Current BAPHR Officers (left to right): Dale McGhee, Vice President; Darryl Raszl, Treasurer; Bill Owen, Secretary; Dave Kessler, President.

At the July 24th general meeting, a Task Force, which was the forerunner of the current Executive Board, was formed and held its first meeting on August 18, 1977. The five members present discussed such issues as the need to stress to other health professionals that "the gay lifestyle is legitimate"; to offer support to other homosexual physicians in coming out, yet to stress the confidentiality of members who may not desire to come out publicly; to assist in improving medical care for gay patients; and to serve as an educational source on homosexuality and gay health issues within the medical profession.

The second general meeting was held on September 25, 1977, with 28 people in attendance. Topics included proposals for the title of the organization, selection of speakers to attend a fall workshop in Los Angeles sponsored by AMSA/GPIM, and appointment of interim officers for the organization: these were Jerry Strong, M.D., Chairperson; Dale McGhee, M.D., Co-Chairperson; Bill Owen, M.D., Secretary; and Darryl Raszl, M.D., Treasurer.

Task Force meetings on October 9 and 16 dealt for the most part with the general structure of the organization.

Forty one members were present at the third general meeting on October 23, with the mailing list totaling 78. At that time, Bay Area Physicians for Human Rights (BAPHR) was chosen over Bay Area Gay Physicians as the title of our organization. Also, the following committees were formed: Bylaws, Finance, Support, Membership, Educa-

tion, Social Concerns, and Research. Paul Hardman, an attorney representing the Pride Foundation spoke at this meeting and asked members to consider the affiliation of our organization with this foundation.

On November 6, 1977, 15 members attended the Executive Board (Task Force) meeting at which time the topic of categories for membership was discussed, and it was decided that committee chairpersons would be appointed by the president in consultation with committee members, rather than being elected.

An Executive Board meeting was held on November 20 preceeding the general meeting. The Social Concerns Committee reported on its efforts to develop a physician referral list for gay patients; monitoring of discrimination against homosexuals in medicine; monitoring of anti-gay journals and articles; obtaining speakers for monthly meetings; and BAPHR publicity. The Support Committee reported on the possibility of setting up various rap groups for members as well as plans for the New Year's Eve party. It was mentioned that the magazine, *BLUE-BOY*, and the newspaper, *The ADVOCATE*, were interested in interviewing members of BAPHR for articles in their publications. A letter was written to San Francisco Mayor George Moscone informing him of BAPHR and asking his support of our organization.

The general meeting was attended by 48 members with the mailing list at 94. Topics were as per the preceeding Executive Board meeting.

In December the meetings were cancelled in lieu of a New Year's Eve party which was celebrated by

44 members.

On January 8, 1978, the Executive Board discussed the development of the organization's By laws by the Bylaws Committee. Due to the success of the New Year's party, there was a desire expressed by most members to have amore social functions for members of the organization.

Early 1978 found the membership continuing to grow at a rapid rate, with 56 attending the January 15 general meeting and 112 on the mailing list. At this meeting the Psychiatric Issues Committee was approved as a standing BAPHR committee. San Francisco Supervisor Harvey Milk was the guest speaker and told BAPHR members that our organization could best help the gay community by "coming out"; he said that he supported research to present facts in helping to destroy the myths about homosexuality; he supported the program developed by BAPHR of a physician referral service for gay patients, and mentioned that he hoped BAPHR could help in developing a gay health clinic at the San Francisco Gay Community Center; he accepted an offer by BAPHR for psychiatrists in our organization to assist in informing him about current concepts surrounding the origin of human sexuality. (This information would later be used by Milk in his debating with Senator John Briggs on Proposition 6, the anti-gay teacher initiative.) He also offered to place BAPHR in contact with the press and the San Francisco Commissioner of Health, and offered his general support and service for our organization.

(To be continued next issue).

The BAPHRON welcomes your comments on this and future issues. We are also interested in printing articles on a monthly basis (or as pertinent) from each committee; updates on projects or research; reviews on texts or journals; reports on medical, political or gay events in our community; and other articles of general information or interest to our organization.

All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. All letters published will contain the writer's name. Due to spacial limitations, letters will be published at the discretion of the editor.

The BAPHRON is published monthly by Bay Area Physicians for Human Rights P.O. Box 14546 San Francisco, California 94114 Phone: (415) 673-3189

Editor Robert Hindi, M.D.
Staff Sam Thal, M.D.
Bill Owen, M.D.
and others

progress notes

With this first issue of the BAPHR newsletter, another of our dreams has come true. Many of us have long wished for a medium in which we could communicate informally with one another and with our friends. Thanks to the initiative of Bob Hindi and his team this reality has come to pass, and we wish it a long and productive existence!

A beginning such as this is an occasion for stock-taking. Elsewhere in this issue is a chronology of BAPHR's activities since its uncertain inception a mere 18 months ago. The record of growth, recognition, and accomplishment is truly phenomenal. For many of us it is difficult to believe that so much has taken place in so short a time. Some of our more recent members should find this "biography" especially interesting.

The message that there are 250 gay men and women doctors harmoniously banded together in BAPHR is a potent one, for the gay community, for our professional colleagues and politicians, and for the public. Now with similar groups forming in Los Angeles, Philadelphia, and elsewhere, the message will be even louder and clearer. Not only have the readers of the *New York Times* heard about us, but we have also been mentioned in the *National Enquirer*!

The BAPHRON is in need of additional help in the areas of (1) writing—original articles and articles from rough draft, (2) interviewing—monthly speakers and other medical or political figures (3) reporters—to attend certain meetings and events in our organization and community and subsequently write articles to be published, and (4) advertising—we need an individual to coordinate this section. We are seeking individuals to either join the staff or to

Up until now we in BAPHR have sometimes underestimated our potential and impact. Repeatedly, though, we have seen our members rally forcefully to meet a challenge, whether it was to demonstrate our presence at the Gay Freedom Day Parade or to work towards defeating Proposition 6. Most recently, with the killing of Harvey Milk, BAPHR members came to each others' support; we have taken a prominent role in joining with others in our community in a time of crisis.

In addition to the all-important fact of your being a member of BAPHR, you may puritanically be wishing to do more. There is a host of committees and projects searching for energized, committed people. You can be of use any time you feel ready to pitch in, whether it's to lick a postage stamp or help get a million-dollar bequest.

Best wishes to all for health and happiness in 1979, and let's keep making a difference.

Signed: Dave Kessler

President, BAPHR

(This monthly column will give me the opportunity to share with you my random musings and jottings, and also the views and opinions which you communicate to me.)

help when they can. If interested, please contact Bob Hindi, Editor, The BAPHRON, P.O. Box 14546, San Francisco, California 94114, or call (415) 673-3189.

The BAPHRON plans to begin a classified advertisement section in upcoming issues. The purpose of this section should be to provide contacts between physicians seeking educational or employment situa-

po prn

This, the first issue of The BAPHRON, is out. It is the realization of the dreams and needs of our organization dating back to its beginning, and with growth and recognition, the need to extend communications among ourselves and to others.

The formation of BAPHR has presented many questions regarding gay health care and education that our colleagues, our community, our patients, and our friends are asking of us. Now more than ever our convictions are laid ahead. We don't have all the answers yet, but now we must begin to seek them. It will only be in continuing to open up and talk and listen to one another, to hear and express whatever we have to say, to explore our strengths and our weaknesses, our confidences and our fears, to share our efforts and experience, that such answers can be found.

I encourage this coming out among each of us, at general meetings, in the activities and projects of committees, through the newsletter, and while socializing together, and dedicate my efforts to this accomplishment.

My deepest appreciation to all those who gave their time, their ideas, and their motivation to make BAPHR and The BAPHRON a reality.

Signed:

Bob Hindi

Editor, The BAPHRON

tions as well as a variety of other announcements, advertisements, and solicitations. Further details as to requirements, costs, and deadlines for publication will be outlined in subsequent issues. Proceeds obtained from advertisement are non-profit and will be used to offset the cost of this publication. Further information may be obtained by writing to: Classifieds, c/o The BAPHRON, P.O. Box 14546, San Francisco, California 94114.

HARVEY MILK



IN MEMORY

EULOGY FOR HARVEY MILK
San Francisco Opera House
11/30/78
David R. Kessler, M.D.

Harvey has been killed.

He had already given up his privacy and his personal comfort. Finally he gave up his life.

We can allow him to die, or we can keep him alive within ourselves.

We will not forget!

One way we can keep him alive is by remembering his energy, his dedication, his openness, his humanness.

Many of us will remember his humor.

Last January, when he came to speak to the members of the Bay Area Physicians for Human Rights, he told us that he had been considering what he could ask 250 gay doctors to do to further the gay cause. He had talked with some of his staff, and had come to the conclusion that the most important job we could perform would be to write more prescriptions for Quaaludes!

Harvey has asked us not to mourn, but instead to remember what he fought for and to go on with that fight.

Harvey fought for us, and now it is our turn to fight for him.

Harvey said, outloud, for everyone to hear — "I am gay."

"I'm a human being, I know what it is to love and what it is to be afraid, I work hard as a public figure for what I believe in, and I am gay."

He said that outloud, and as he kept saying that, something happened to us. We began to feel not so nameless, not so faceless.

We began to feel growing dignity and pride in who we are and what we are.

Harvey said "Never Again!"

Never again would we stand idly by and watch our brothers and sisters anywhere be oppressed.

Never again would we remain silent when ignorance, lies, or hatred threatened our right to be free.

Harvey said "Come out! Come out, America!"

He asked us all to come out to our families and friends, to the people we work with and to those we shop from.

He wanted us all to do this so that we would shatter the myth, once and for all, that we were freaks, weirdos, or sickies.

Harvey told us that when we came out, and when we organized, we would find that we had many friends.

What a terrible added tragedy that we now have occasion to mourn, not only Harvey, but also one of those very dear friends, George Moscone.

Harvey, like many of us, moved to San Francisco, because he knew that this was a special place, in which he could breathe more freely.

Nowhere else in the world is there such a vital concentration of organized and purposeful gay people.

Nowhere else in the world is looked to by those millions of our scattered, isolated, frightened sisters and brothers as a beacon which offers hope for a more fully human existence.

Harvey felt an obligation to make San Francisco work for all its citizens. He knew that from this base, we, the more fortunate ones, could reach out a helping hand to others who were in more danger.

Harvey knew that we would reach our goals only when we came to feel good about ourselves, and when we banded together to raise our voices in unison for what was right.

Harvey showed us the way. Now is the time for hundreds, thousands of new Harvey Milks to emerge from all over this country.

Two thousand years ago, Rabbi Hillel said:

"If I am not for myself, who will be?

If I am for myself alone, what am I?

And if not *now*, when?"

"DON'T MOURN, ORGANIZE!"
by Andrew Zysman

All of San Francisco has been dealt a harsh blow by the November murders of George Moscone and Harvey Milk. To the Gay Community, the loss was a most personal nature. George Moscone was a great friend of the Gay rights movement, having both appointed Harvey to his first public position, and assembled a working coalition of San Francisco's diverse minority and poor populations, Gays included.

In Harvey Milk, the Gay Community lost a friend, a leader, but most importantly, we lost one of our own. At the candlelight march, where tens of thousands of people paid tribute to Harvey, lesbian singer Holly Near expressed our sadness and commitment to work in Harvey's name:

*"It could have been me,
but instead it was you.
And it may be we dear
sisters and brothers,
before we are through.
But if you can work for freedom,
if you can live for freedom,
if you can die for freedom,
I can too."*

The gay Community is a blessed community, for in times of great loss as well as in times of great victory, we come together and find strength in one another. Only three weeks earlier found us united in victory over Proposition Six, then this horrible loss, and the gatherings began once again.

The struggle continues, and many BAPHR members found condolence and strength in each other. Phone calls to friends, sad gatherings, sharings of stories of Harvey helped us all through.

BAPHR President Dave Kessler spoke at the Opera House memorial for Harvey. Speaking to an overflow crowd of friends, supporters and politicians including Governor Brown and then-Acting Mayor Fein-

stein, David paid a moving tribute to Harvey which is reproduced above. Thanks to the modern wonder of television, thousands of viewers were able to observe Dianne Feinstein ask the eternal question, "What's a Quaalude?" in response to David's retelling of one of Harvey's jokes. Harvey's humor and joy in living shined through in all the tributes that evening, including those of Dave, Senator Milton Marks, Reverend William Barcus and Harvey's assistant, Anne Kronenberg.

Members of BAPHR had been fortunate to have Harvey attend and speak at two of our organizations meetings. He was the featured speaker at our January 1978 meeting just days after his inauguration as San Francisco's first openly Gay supervisor. With all the publicity about his homosexuality, Harvey joked that he was beginning to think that his middle name must be "avowed." Harvey also dropped in on our August meeting, to thank us for our work and to leave us with some words of encouragement.

Harvey found great pleasure in the very existence of BAPHR. He knew that straight America's discovery of a group of over 200 Lesbian and Gay physicians was a historical event of major significance to the Gay movement.

But beyond our simple existence, Harvey felt that BAPHR was in a special position to contribute to the well-being of our community. First and foremost, Harvey urged us over and over to Come Out of our Closets. The impact of knowing that a friend co-worker or acquaintance is gay has a much greater effect upon one's prejudices than any and all of the anonymous education possible.

Harvey saw the needs of the community and spoke to them. He asked us to consider helping establish a Gay Free Clinic, realizing that many of our sisters and brothers do not receive adequate or supportive

health care. He envisioned this clinic in a Gay Community Center, which has incidently just received approval for funding by the Board of Supervisors and has been renamed in Harvey's honor.

Harvey also understood the politics of money. He saw that our government does not as yet recognize Gay couples, and unless strict legal measures are prepared, Gay people's money and property revert to an often hostile family in the case of death. Harvey urged us to write Gay organizations into our Wills, to keep our money in the Gay community and working towards our social goals.

The Gay Community has experienced a great loss, but new leaders and spokespersons are emerging to help fill the void. The amount of creative and directed work that has come out of Harvey Milk's death will prove to be the greatest tribute of all. As Harvey himself declared after one of our election losses, "Don't mourn, Organize!"

The **HARVEY MILK UNITED FUND** was established by friends and colleagues of the late Harvey Milk to help continue the work he began. A non-profit organization, the Harvey Milk United Fund will channel money to a wide range of projects such as Senior Nutrition Programs, the Gay Community Center, state and national legislation supporting gay/lesbian rights, passage of the E.R.A., gay and lesbian cultural projects, and the National March on Washington. The Fund will also seek to establish minority political training programs, continuing Harvey Milk's efforts to encourage minority participation in the political process.

Further information may be obtained from: The Harvey Milk United Fund, One United Nations Plaza, San Francisco, Calif. 94102. Phone (415) 626-0040.

COMMITTEES

Executive Board

Sunday, January 14-7 pm
2200 Sacramento, No. 1303,
San Francisco

Education

Thursday, January 18-8 pm
179 Lower Terrace, San Francisco

General Meeting

Sunday, January 21-7 pm
San Francisco Medical Society
Facility
250 Masonic Ave., San Francisco

Support

Wednesday, January 24-8 pm
545 Corbett Ave., San Francisco

Psychiatric Issues

Thursday, January 25-8 pm
2949 Jackson, San Francisco

Research

No meeting scheduled in January

Psychiatric Issues

The most recent Psychiatric Issues Group meeting addressed the subject: *How do psychiatrists respond to questions from patients and others about the causes of homosexuality?*

Discussion on this topic revealed the following facts and guidelines. First, the motivation for this question needs to be understood in order to frame an appropriate answer. Secondly, there is no single or simple definition of homosexuality (latent vs. active, fantasy vs. activ-

ity, exclusive and predominant vs. occasional or situational). Homosexuality in its many definitions is one of a continuum of varieties of human sexuality.

It is known that the patterns of sexual behavior vary independently of personality types, life styles, intellectual level, presence or absence of mental disorder, etc., and inferences cannot be drawn from one to the other. Meanings and values attributed to homosexuality are culturally determined, as are acceptable patterns of behavior.

A number of specific factors have been identified as having a connection with the development of gender identity and choice of sexual behavior patterns, among them being (1) Genetics, with twin studies showing high concordance, (2) childhood alienation of affection with the parent of the same sex, (3) reinforcement/reward of specific behavior patterns, and (4) an individual's identification with a group to deal with oppression or negative stereotyping.

There is no single or specific cause of homosexuality. Following the principle of equifinality (the same end point in growth and development can be reached through many paths), one can only look at a given individual and (possibly) determine what factors were operative.

Attempts to give simple answers to the complex question lead to further stereotyping which we are trying to avoid. It may be more productive to explore the motivation behind the question and respond appropriately at that level.

We can and should talk about the things which homosexuality is *not*—the beliefs which taken together constitute the negative stereotype: "All homosexuals are stupid; sensitive; artistic; promiscuous; unstable; intelligent; etc., etc. . . ."

Also possibly worth exploring is the idea that humans have or should have the ability to enjoy and understand all experiences. Limitations on this potential can be considered "fixations" whether they be heterosexual or homosexual, promiscuity or monogamy, cognition or affection. Moreover, the existence of such limitations cannot be the basis for self or other criticism since

being "imperfect" is itself an essential part of being human.

Executive Board

The most recent Executive Board meeting was held on December 10, 1978. At that meeting, President Dave Kessler spoke of his feelings of outrage concerning the recent murders of Supervisor Harvey Milk and Mayor George Moscone. He mentioned the Eulogy for Harvey which he gave at the Harvey Milk Memorial Service on November 30 at the San Francisco Opera House. Dr. Lawrence White, President of the San Francisco Medical Society sent his condolences to BAPHR members in regard to Harvey's death.

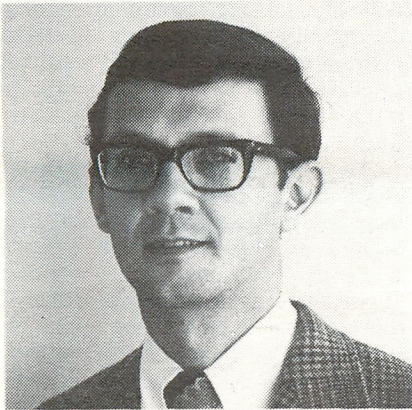
A Harvey Milk Memorial film (by the producers of the film "Gay USA") will be produced within the next couple of months and will involve certain members of BAPHR. In regard to a memorial in honor of Harvey Milk, Dave suggested that BAPHR serve (1) as a conduit for tax exempt funds for gay health issues, and (2) the non-gay health needs of our community.

The ABC network is apparently planning an upcoming documentary on homosexuality—any BAPHR members interested in this should contact Dave Kessler. Also, the local editor of the journal *Medical World News* will be writing an updated article on "Gays in Medicine" which will be published in the next few months.

Recently a New York publisher has contacted our organization in regard to writing a pamphlet on "The BAPHR Approach to Gay Health". Editors of the *SENTINEL* have expressed interest in having members of our organization write a series of articles on gay health issues to be published monthly in their newspaper. Any one interested in these important projects should contact George Riley, Chairman of the Education Committee.

(continued)

Dr. Robert Owen to be January Speaker



Robert Owen, M.D.

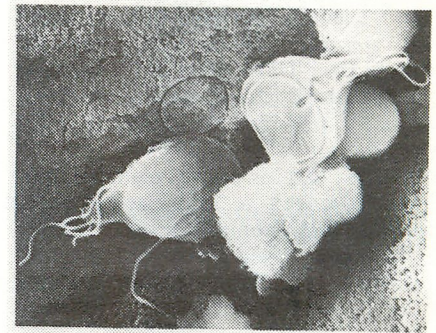
Robert L. Owen, M.D., Gastroenterologist on the staff at University of California, San Francisco, Medical Center and the San Francisco Veterans Hospital, will be the guest speaker at the January general meeting of BAPHR on January 21, 1979 at 7 pm at the San Francisco Medical Society facility at 250 Masonic Ave.

Dr. Owen will speak on the "Veneral Transmission of Enteric Organisms" including Giardia, amebas, Salmonella, Shigella, and hepatitis. A graduate of Harvard Medical School, Bob Owen completed his Medical Residency at Beth Israel Hospital in Boston and the University of California, San Francisco. He took training in Gastroenterology at UCSF and has served as a post-doctoral fellow at the National Institute of Health in the Arthritis, Metabolism, and Digestive Disease Branch.

In 1972 Dr. Owen, in collaboration with Dr. J. L. Hill, published an article in the Journal of the American Medical Association (JAMA) based on his studies of "Rectal and Pharyngeal Gonorrhea in Homosexual Men". He is also the author of sections on gonorrheal proctitis in the textbook *Gastrointestinal Disease* by Sleisenger and Fordtran.

The Western Journal of Medicine in its January 1978 issue published an article on the "Veneral Transmission of Intestinal Parasites" by Bob Owen and colleague Alfred Hurwitz, M.D., based on clinical experience of homosexual patients with mixed amebic and giardial infections.

Shown below is a scanning electron micrograph of two Giardia in the intestine, one showing the ventral adhesive disc by which they attach to the surface of columnar cells (4000 X), taken by Dr. Owen.



Our appreciation is extended to the San Francisco Police Department for contacting BAPHR in regard to input for the Civil Service Exam for police in order to prevent gay bias on this test!

The meeting was adjourned to social hour.

Membership

Membership in BAPHR now stands at about 250 and increases every month. Our membership comes from

almost every specialty including physicians in individual or group practice, physicians involved in government and academics, retired physicians, and residents and medical students in training programs.

The Membership Committee meets to plan ways to increase membership, but the greatest credit goes to all our members who talk to their friends and colleagues and tell them about our organization. This word of mouth effort will continue to be our most important and effective way of spreading the word. Special efforts including mailings to inform medical students and hospital house-officers have also been effective.

The Membership Committee is involved in social functions by which new members can become acquaint-

ted with others and become more familiar with our organization.

The BAPHRON staff meets on a monthly basis with the Membership Committee in coordinating the newsletter.

We also work at our meetings, stuffing envelopes and licking stamps, so if you have ideas on increasing our membership (and a wet tongue!) come and join us.

(continued)

Education

As a first column in BAPHRON, I feel it would be appropriate to introduce and briefly review the recently released *Advocate Guide to Gay Health*. BAPHR has been approached to write a similar guide and David Kessler has accepted the request.

The *Advocate Guide* was written by R.D. Fenwick, a free lance writer specializing in holistic health. He has utilized numerous Advocate medical resources in metropolitan areas with large populations of gays and lesbians. Richard Pillard, M.D., an associate professor of psychiatry at Boston University and a medical advisor to Boston's Homophile Community, provided the overall medical review.

The text is quite readable and the approach is informative, anecdotal and nonjudgemental. After reading it, I am convinced a ghost writer is essential for a layman's book on medical care. For that matter, how many times have we read journal articles that could use one?

The section on sexuality transmitted diseases (STD) is fairly complete and covers the usual ones plus amebiasis, salmonella and shigellosis. Giardiasis and enterobiasis however, are not covered. Epidemiology, symptoms, diagnosis, treatment and prevention are included. The section on lesbian STD is also thorough and the author has struggled to cover both lesbian and gay issues equally well.

The chapter on the hazards of sex has some humorous and not so humorous accounts. Suffocation, rectal tears and fissures, and peritonitis are all covered plus some personal recommendations about lubricants. The San Francisco professional community was used as a

frequent resource for information and such well known names as Gerald Feigan and Muriel Steele were cited.

Fenwick's philosophy seems to be to enjoy ones erotic play and fantasies but to maintain good sense. Much of what we do is remarkably safe unless judgement is severely impaired by too much alcohol and/or other drugs. When acting out passive fantasies he advises not to turn your executive function over to a partner who has taken leave of his senses.

Headings to whet your appetite include: *Is There a Safe Way to Fistfuck; Why Do People Stick Things Up Their Rectum; and What Is SCAT?*. The book includes a sensitive, informative section on sexual dysfunction with a strong emphasis on the emotional components. He describes a number of the Johnson and Masters techniques including those for retarded and premature ejaculation. Hawley McGee (*Our Bodies, Ourselves*) summarizes those dysfunctions experienced by women. What this section is missing are discussions of gay and lesbian emotional problems and treatment and how to talk with a straight physician about homosexuality and the medical and emotional problems that are particular to it.

In the chapter on drugs, Fenwick concludes that alcohol is the most abused drug in the gay community. His approach is no nonsense and gives good advice on personal consumption, how to aid those who are alcoholic (especially recognizing the rule of coalcoholic) and makes a strong pitch for special programs for the gay and lesbian alcoholics. His drug survey seems fairly complete and I suspect its purpose is to discourage excessive drug use as he goes into rather extensive detailed descriptions of overdoses and their consequences. I found it sobering reading.

The section on aging was disappointing, perhaps because there just isn't much information on the emotional and social adjustment of

older homosexuals. He is informative on topics of breast and cervical cancer, endometriosis and prostatic disease.

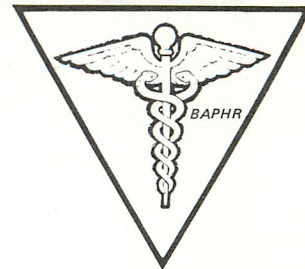
At the end of his section there is a timely digression to remind us to take care of our friends, lovers and community by attending to legal matters, such as wills, and business agreements. Finally R.D. makes a pitch for a holistic approach to health and preventive medicine.

As you can see, I found the book useful and good reading. However, there are no photographs, which has been a problem with such guides. A picture for many of us is more important than hundreds of descriptive terms. Typical case histories would also be helpful. I find myself agreeing with David Kessler—we need to write one of our own that adds to the strengths of this guide and includes those topics not covered that are important aspects of gay health care. The education committee will begin working on this project in the near future, and we will be calling on you to provide input.

By George Riley, M.D. Chairman,
Education Committee

The San Francisco Chapter of the Gay Academic Union will sponsor a panel presentation and discussion on "*Homosexuality and the Question of its Genetic Origin*" at 2 p.m. on Sunday, January 14 at the Western Addition Public Library at 5150 Scott Street (at Geary). Representatives of BAPHR will be on the panel and members are invited to attend.

the **BAPHRON**



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Vol. 1 No. 2

February 1, 1979

AMA Comes Out: Homosexuality Is Not a Disease

The American Medical Association reported that "homosexuality" is being removed from the next edition of the "Current Medical Index and Terminology" as a disease syndrome. The CMIT is an AMA publication of disease syndromes. The change was reported in a letter to Jim Krajieski following an exchange of correspondence between Jim and the AMA.

The AMA was first approached by requesting their current position on "homosexuality." They responded by indicating that "homosexuality" was still listed in the CMIT, but that the AMA had adopted a resolution in 1975 stating "That the American Medical Association supports in principle repeal of laws which classify as criminal any form of non-commercial sexual conduct between consenting adults in private, saving only those portions of the law which protect minors, public decorum or the mentally incompetent."

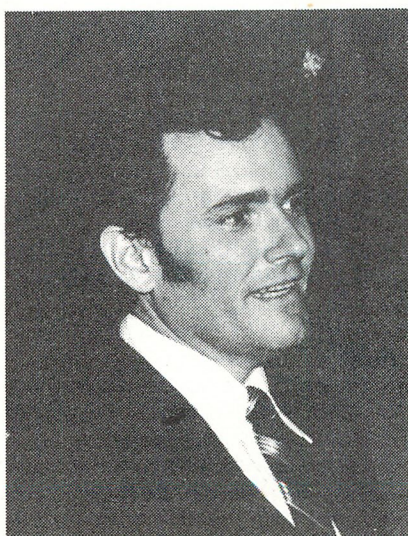
A request was made to the AMA to outline the steps necessary for a change. Dr. Asher Finkel, Group Vice President for Scientific Activities and Continuing Medical Studies, responded with a telephone call suggesting that a letter be submitted to him outlining the desired change and giving reasons for it. This was done and shortly thereafter Dr. Finkel replied stating that they were going to follow the guidance of the American Psychiatric Association in the matter and remove "homosexuality" from the next edition of the CMIT.

While this change may have been made without any input, it was Jim's impression that his letters were useful in at least speeding up the process and that the AMA may have had little if any impetus from its members for such a change.

Jim speculated that there may be a number of agencies and organizations which would be responsive to gay needs and issues but who may not respond simply because of a lack of input.

Supervisor Harry Britt to Meet BAPHR

Harry Britt, San Francisco Supervisor representing District 5, will meet and speak to members of BAPHR at a February dinner meeting. The dinner will be held on



February 21. (Details as to location, menu choices and cost are outlined in the "Committee" section in this issue).

A close friend and confidant of the late Harvey Milk, Harry was appointed to succeed him as Supervisor on January 8, 1979, by Diane Feinstein, San Francisco Mayor.

Supervisor Britt is the current president of the Harvey Milk Gay Democratic Club (formerly known as the San Francisco Gay Democrats). He has also helped to organize San Franciscans Against Proposition 6, and has been active in the District 5 Community Caucus, Action for Accountable Government, the Unitarian-Universalist Gay Caucus, and the Coalition for Human Rights.

Harry Britt grew up in southeast Texas, later married the daughter of a Methodist minister, and himself served as a United Methodist minister from 1960-1968. After

(continued page 2)

journal club

STRANGE BEDFELLOWS

One day before a favorable mention of BAPHR appeared on the Op-Ed page of the *New York Times* on December 13, BAPHR made the *National Enquirer*. Touting itself as having the "largest circulation of any paper in America," it carried a story under the headline, "Gay Doctors' Groups Spreading Across America."

Various psychiatrists and psychologists were quoted as viewing with disfavor the trend set by BAPHR. One said, "It will be disastrous to our society if more groups of gay doctors spring up." Another opined that "It's against the general principles of medicine."

The clingers were supplied by Dr. Harold Voth, senior psychiatrist at the Menninger Foundation, Topeka, Kansas, and well-known homophobe. Among other choice bits, he declared that "You might as well organize alcoholic . . . or drug addict or even transvestite physicians . . . These organizations are saying homosexuality is normal—which it isn't. If homosexuality is normal, them I'm just nuts."

You said it, Harold.

One month later, the *Enquirer* followed up with a two page spread in its January 16 issue, featuring

(continued from page 1)

wards, realizing his incompatibilities with the church and his wife, he moved to San Francisco.

After receiving his Bachelor's Degree at Duke University, Harry completed a Master's Degree in theology at Southern Methodist University. While serving as a Methodist minister in Chicago in the mid-1960's, he was devoted to working with delinquent teenagers, problems faced by the elderly, and in support of civil rights.

Harry has also been active in national politics, involving himself in the campaigns of such politicians as Senator Paul Douglas and Adlai Stevenson III, and presidential aspirants Hubert Humphrey in 1968 and George McGovern in 1972.

stories on the Chicago and Houston murders of young boys. An accompanying editorial asked: "Would you want a homosexual teaching your child?"

"Perhaps someone like John Gacy, the Chicago monster, who had admitted to killing literally dozens of young boys . . .

"Or perhaps a ghoul like Elmer Wayne Henley, Jr., Texas teenager involved in the sex-and-torture murders of 27 teenage boys?

"Do you want a sexual pervert poisoning the minds of your children?

"Make no mistake about it, if a homosexual is teaching your son or daughter, you are exposing the child to 'an emotional timebomb' that could explode at any time."

There were the expected statements from right-wing ministers and from Dr. Max Rafferty (remember him?), including such howlers as the assertion that homosexuals were "more dangerous than normal people because of a perverted hatred for their parents."

In addition, declared Dr. Marvin Ziporyn, "homosexuals are more prone to violence," and Dr. Frank Caprio, a Fort Lauderdale psychiatrist who has written a book on homosexuality, agreed that "homosexuals are often paranoid and too dangerous to be working in our schools because they are prone to violence."

And to think that up until now I imagined that gays were all hairdressers or ballet dancers!

Time in its January 8 issue ran a two page "Essay" on "Homosexuality: Tolerance vs. Approval" in which it managed to talk characteristically out of both sides of its mouth, while simultaneously performing a not-s--subtle hatchet job on gay rights. And I have just been informed that the January issue of *Commentary* (published by the American Jewish Committee) has a long and virulent piece about gays.

Finally, in the December 1 issue of *Psychiatric News* there is the report of a recent interview in Moscow with Professor A. V. Snezhnevsky, a leading figure in Soviet psychiatry. After denying any guilt about the Soviet's political misuse of psychiatry and praising the dramatic reduction in the number

of patients in U.S. mental hospitals over the last several decades, he did find something to criticize on the American psychiatric scene: he and his colleagues deplored the decision of the APA to remove "homosexuality" from the *Diagnostic Manual*.

Maybe we should add his name to the BAPHRON mailing list?

Panel Refutes

Biologic Basis

of Homosexuality

A symposium entitled "Homosexuality and the Question of its Genetic Origin" was held on Sunday, January 14, 1979. Panel participants included Charles Sklar, M.D., Marty Cogan, M.D., and Mark Moskowitz, M.D., and was sponsored by the San Francisco Chapter of the Gay Academic Union.

Panel members gave a very lucid presentation indicating what is known (and not known) about genetic and endocrinologic influences on sexual orientation, gender role and erotic behavior in humans. They provided a critical analysis and a convincing refutation of some of the weakly based and sensationalized claims for a biologic basis of homosexuality.

The panel members agreed that significant data is lacking to validate or support any theory for a genetic or endocrinologic basis for homosexuality—including the hypothesis presented in a recent article entitled "Why We Are Gay" by Dean Gengle and Norman C. Murphy which was printed in *The Advocate* on November 1, 1978.

The panel members made a plea for more responsible journalism in the reporting of scientific findings in regard to gay issues. They called attention to many of the glaring inaccuracies, unwarranted assumptions, and unsubstantiated conclusions which might seriously mislead uninformed readers.

Upcoming Events

- Thursday, Feb. 15 7:00 pm Bill Owen will speak on the topic of "Gay Medicine" at the Old firehouse, second floor, on the Stanford University Campus in Palo Alto. The talk will be sponsored by the Stanford University Gay People's Union.
- Sunday, March 4 9:45 am Bill Owen will talk on "Gay Medicine" to the First Unitarian Gay Caucus at Franklin and Geary Streets in San Francisco.
- Sunday, March 11 9:45 am George Riley will speak on "Gay Mental Health" to the First Unitarian Gay Caucus at Franklin and Geary Streets in San Francisco.
- Monday & Tuesday
March 19-20 Dave Kessler will give a talk on "The Patient Who Is Homosexual" and participate in a panel and workshop as part of a program on "Current Issues In Sexuality and Medical Practice" for health professionals, sponsored by the UCSF Human Sexuality Program at the Ahwahnee Hotel, Yosemite, California.
- Tuesday, March 27 Dave Kessler, will participate in a panel on "Management of Sexual Problems in Medical Practice" at the annual session of the American College of Physicians in San Francisco at the Civic Auditorium.*
- Saturday, March 31 The Committee on Homosexuality of the Northern Psychiatric Society will present a panel discussion entitled "Homosexuality and Psychiatry—New Perspectives" at the annual spring meeting of the Northern California Psychiatric Society. The meeting will be held at the Doubletree Inn, Monterey. Participants will be Don Brown, Carol Cohen, Jim Krajeski and Jim Paulsen. The program will include historical, personal, clinical and research perspectives of homosexuality, followed by an open discussion with the audience.*
- Wednesday, May 16 Dave Kessler will be the moderator of a panel entitled: "Psychotherapy with Homosexual Women and Men" at the Chicago meeting of the American Psychiatric Association. Panel members will include Martin Hoffman, Jean Munzer, and Jim Paulsen.*
- Saturday, June 16 Dave Kessler and Jim Paulsen will participate in a UC Extension Center program in San Francisco on "Homosexuality and Homophobia: New Perspectives". Others on the panel will be John De Cecco and Marny Hall.

*This is the first time that openly gay physicians will be on the program at these meetings.

West Bay Health Systems Agency (WBHSA)

The West Bay Health Systems Agency was established by the Comprehensive Health Planning Act of 1974. This legislation has served to divide the country into health planning regions for the purpose of the rationalization and allocation of health resources and health-related personnel within each region.

The HSA's are each governed by a Board of Directors made up of "consumers" and "providers". Physicians as well as other health personnel are considered providers, and vote for provider candidates on the Board.

The West Bay HSA is currently having elections for provider and consumer members for its Board of Directors. Members of BAPHR who are also members of the WBHSA are encouraged to vote for the candidate of their choice, and one who will support gay and minority related health issues.

BAPHR Athletic Teams Organizing

There are a variety of events held throughout the year in the Bay Area for organized athletic teams (i.e., softball, tennis, and many others). If any members are interested in forming a BAPHR team, please call 524-0978 for further information.

BAPHR Ski Weekend Planned

A weekend of skiing for BAPHR members and guests at Alpine Meadows, North Lake Tahoe, is planned for February 24-25 (Saturday and Sunday). If interested, please call the BAPHR Hotline, (415) 673-3189, to obtain further information.

Dr. Robert Owen: Getting The Bugs Out

Dr. Robert Owen, an internationally published gastroenterologist currently in practice and research in San Francisco, presented an enlightening discussion with over 60 physicians of BAPHR on January 21.

The subject was "the venereal transmission of enteric parasites." The interchange ranged from information about the "Gay Bowel Syndrome" to electron micrographs of giardia organisms on the intestinal mucosa.

Bob related some of the early misconceptions concerning the etiology and transmission of human anatomic orifices, relating that a sensitive innervation system is necessary for one to detect an insect in the ear canal as well as to prevent the spontaneous passing of stool from the rectum. Among other things, this has led to the high frequency of anal intercourse in heterosexuals and homosexuals. Numerous studies have shown that the primary mechanism for the transmission of enteric parasites is by the fecal-oral route.

Bob stated that the incidence of infection with enteric parasites is higher with increased exposure to the organisms through increased sexual contact. He spoke of the high incidence of such infections in homosexual men, in contrast to a lower incidence in homosexual women than in either heterosexual men or women.

The use of bath houses (often with a high frequency of sexual contact and a false sense of security given by the profusity of soap and water in these situations) as well as the mobility due to job relocations were cited as being important factors in the propagation of enteric infections in homosexual men.

Other factors in the spread of venereal diseases are the omnipotent ideas of people in sexual encounters ("I won't get *that* disease"), and the reluctance of many patients with such infections to relate to their physician an accurate history of sexual exposure.

Dr. Owen described the "Gay Bowel Syndrome" as a term used in the past to denote multiple recurrent enteric infections in gay patients who were identified as non-travelers and without immunodeficiencies. These patients often had evidence of concurrent pathologic

conditions such as rectal fissures or condylomata acuminata (venereal warts). The term seemed to be propagated by public health departments due to their concern about funding cut-backs if legislators were aware of the epidemiology of such infections.

In discussing *Giardia lamblia*, an enteric parasite, it was noted that many more individuals are infected than only those who have symptoms. The symptoms are most commonly related to increased gastrointestinal gas production with cramping abdominal pains. These symptoms often resolve spontaneously, but diarrhea may also occur in more severe infections.

Bob stated that as few as 1 to 10 *Giardia* cysts or 100 *Shigella* organisms may produce infection, in contrast to *Salmonella* which requires about 100,000 organisms to be infective.

Bob reviewed the only prospective study on *Giardia* in which cysts of the organism were placed in samples of drinking water given to 123 prisoners at random times. It was found that every person receiving as few as one cyst developed symptoms. The symptomatology related to giardial infections indicates that other changes in the gastrointestinal tract are present, such as those produced by co-infection with viruses.

Electron micrographs taken by Bob Owen had demonstrated that *Giardia* attach to the more proximal bowel mucosa by use of an adhesive disc. There is no evidence of invasion or damage to the intestinal wall by these organisms, even though lymphocytes are often found attached to them in the intestinal lumen.

The recommended treatment for giardiasis is with quinacrine (Atabrine®); metronidazole (Flagyl®) may also be used.

In discussing amebiasis, Bob stated that *Entamoeba histolytica* is the most common agent causative in this infection, yet *Entamoeba hartmanni* may be found in patients with breaks in the intestinal surface epithelium.

Cutaneous lesions may be a manifestation of amebiasis, appearing grossly similar to condyloma acuminata (venereal warts) or cutaneous neoplasm. Bob suggested that a skin biopsy be considered in cases of suspected venereal warts that

don't respond to treatment with podophyllum or other excisive maneuvers.

Note: A symposium on Dr. Owen's observations on the venereal transmission of micro-organisms, which was held in the summer of 1978 at UCSF, will be published in the March 1979 issue of the Western Journal of Medicine. Also participating in this symposium were Dr. Selma K. Dritz, Assistant Director of the San Francisco Bureau of Disease Control in Adult Health, and Dr. Charles Wibbelsman of the San Francisco City Health Clinic.

LETTERS

I was happy to address the Executive Board on my pet subject. I wish, however, that I had had the article which appeared in the San Francisco *Examiner* the following day, January 15, entitled "The Gay Outcasts—Drag Queens".

The group, BAPHR, is fine in so far as it goes, but I believe that it has barely scratched the surface. Its major direction at the moment seems to be an engagement in a crusade for acceptance in the world about us, neglecting, however, a group (minority or majority?) existing within its own ranks.

The group is very difficult to define since it may include the heterosexual, the homosexual, and the sexually mis-assigned, but fortunately or unfortunately it is usually lumped together with the homosexual.

For the moment, I would think that for organizational purposes, those who cross-dress, transvestites, fetish oriented, or the true transsexual might meet together in common interest and gradually evolve as groups for mutual interest and/or help as needed. It may be that already, within the group, are many waiting to be heard, but afraid that they will be used "for entertainment, or to be funny or campy".

Signed: Lloyd Logan

(Anyone interested in contacting Dr. Logan may do so through the following address: Dr. Lloyd Logan, P.O. Box 14546, San Francisco, California 94114.)

BAPHR - The First 18 Months

- Part II

(This is the second article in a series on the history of BAPHR. The first issue of The BAPHRON discussed the founding of our organization in the summer of 1977, and events in its development through January 1978.)

An Executive Board meeting held on February 8, 1978, featured Ann Grogan, Deputy Civil Rights Officer of the California State Department of Health, as guest speaker. She spoke of the importance of her liaison with BAPHR in developing legislation to provide nondiscriminatory health care to hospitalized gay patients. (An advertisement in the *Sentinel* following this meeting regarding solicitation for reports from gays who had experienced discrimination in hospital situations received no response as of the March 12 meeting).

On February 12, the Executive Board met to finalize the Bylaws of our organization. These were presented and approved by the membership at the general meeting the same evening.

Seventy seven members were in attendance at that meeting with the mailing list totaling 140. Speakers were Jerry Berg and Peter Goodman, attorneys from the Save Our Human Rights Foundation.

The Education Committee reported on having a BAPHR member speak on gay issues at a symposium

sponsored by the San Mateo County Psychiatric Residency Program. The interim officers were officially approved; the official BAPHR logo (the caduceus surrounded by an inverted triangle) was selected from 18 designs submitted; and a Personal and Professional Profile survey was distributed to those in attendance.

Thoughts and opinions on BAPHR's "coming out" in regard to the medical community, the gay community in the Bay Area, and the California public in general were discussed at an Executive Board meeting held on March 12. Plans for BAPHR's involvement in the Gay Freedom Day march in San Francisco were initiated at that time.

Due to the problem of finding facilities large enough to hold meetings, the March 19 general meeting was held at an Episcopal Church in San Francisco. Sixty five or the 161 members attended to hear Dr. Stu Loomis, Professor of Counseling at San Francisco State University, give an interesting view on the gay scene in San Francisco in the 1940's and 50's.

At this meeting, it was voted to send \$200 from BAPHR to the Gay People In Medicine Committee of the American Medical Student Association to help in supporting a booth at the AMA Convention (held in the summer of 1978 in St. Louis). Other business at this meeting included the delegation of voting power strictly

to paying members and voting against opening membership to podiatrists.

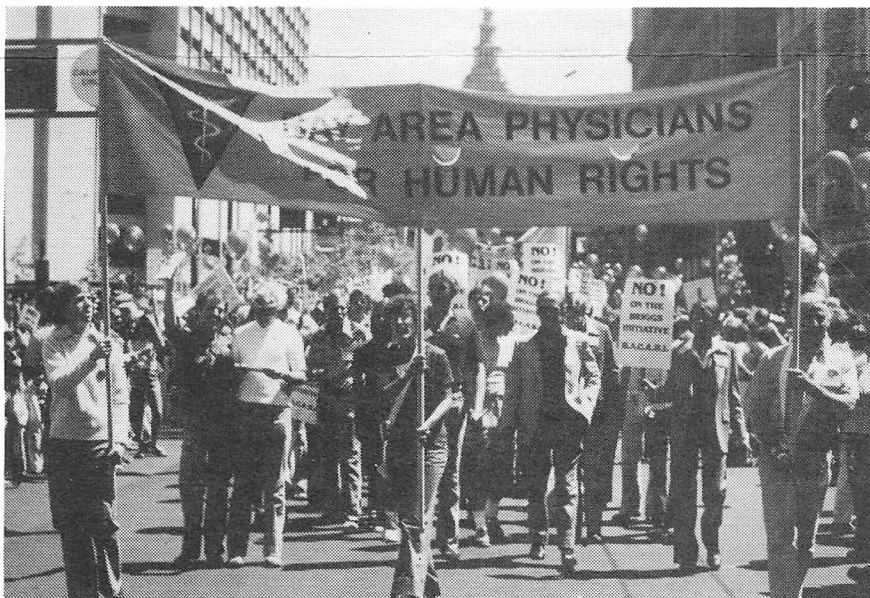
Investigation to obtain tax exempt status for our non-profit organization was initiated at the Executive Board in April, 1978. Election procedures were outlined. The Gay Freedom Day ad-hoc committee reported on the development of a survey regarding the medical care of gay people that was to be taken at our booth on that day.

On April 30, 81 members heard Rick Stokes, a well-known San Francisco attorney and politician, talk about ways in which he felt BAPHR might become further involved in the gay community. He suggested that BAPHR become involved in research dealing with the medical concerns of gay people. He thought BAPHR should develop a Speakers Bureau and discussed the need for outreach to medical school programs as well as to other gay physicians and professionals. Rick also emphasized the importance of lesbian involvement in our organization (this was also stressed during several of the initial BAPHR organizational meetings).

At this May 14 general meeting, attended by 84 members, further development of the Physician Referral List for gay patients was noted. The need for education on homosexuality in the straight community was emphasized. It was mentioned that a few members of BAPHR would be interviewed by the *Advocate* for an article in that newspaper (this was printed in the issue dated September 6, 1978).

On May 21, 56 members met and heard Matt Coles, Professor of Law at the University of California, Hastings and partner in the Gay Rights Advocates law firm, speak regarding the Briggs Initiative (the proposed anti-homosexual teacher referendum).

As of May 21, there were 176 individuals on the BAPHR mailing list, including 117 members and one patron. Dale McGhee, BAPHR Vice President, reported on 92 respondent questionnaires to the Personal and Professional Profile inventory that had been distributed at the February 12 meeting. Official nominations for officers of the organization were made.



BAPHR members promoted our organization and its services at our booth on Gay Freedom Day 1978.

(to be continued next issue)

progress notes

Some months ago, at a BAPHR rap group, a member announced that since he had become actively involved in the organization he had stopped drinking, had become less withdrawn, and had come to feel a new sense of purpose to his life. A born-again BAPHRite!

Perhaps not everyone has had such a dramatic shift in personal equilibrium since mailing in a membership application, but there is no doubt that BAPHR has had a significant impact on the lives of many of us.

The reasons why this should be so are probably not too mysterious. BAPHR brings people together on two of the primary axes of our personal identity—our life-work as physicians, and our sexual orientation as gay people. This is a unique and powerful combination that very few, if any, of us have ever experienced before. Many of us will remember the medical student at one of our early meetings, looking around the room with tears in his eyes, overcome by the emotions of being part of a gay doctors group.

It is fashionable these days to talk about the need for "role models", but how many of us ever had any medical mentors who happened to be gay? Where did we ever learn anything positive about being homosexual?

Inevitably, we have all arrived at this point in our lives disfigured in various ways and degrees with the lesions of our own self-hate. For some, the scars are on the surface, clearly visible for all to see. For others, the aberrations are more hidden, more subtle.

While we each continue to wage our own individual struggles for more thorough self-integration and self-acceptance, BAPHR serves to provide us with mutual support and validation. It is important to know that we do not stand alone, and that, in fact, our numbers are steadily growing. It is good to be in contact with like-minded people with whom we can synergize our strengths and minimize our paranoia and vulnerability.

At times, some BAPHR members have expressed concern that there seems to be an expectation that all BAPHRites should go public. Although this might seem desirable

from one standpoint, it is not realistic at this time or even necessary. It cannot be repeated too often that there is room in BAPHR for people at every level of "outness". While the organization itself and many Executive Board members are out publicly, most BAPHRites are not, and are nevertheless capable of very significant participation.

The thought has crossed my mind, though, that this expression of concern may represent in part the person's own wish to lead a less secretive and divided existence, which is difficult for them to carry out. It does seem to be true that each stage of coming out, whether it be to oneself, into the gay world, or to the non-gay community, is accompanied by a sense of greater personal wholeness and a new release of energy.

At another BAPHR rap group about six months ago, someone said he was having trouble relating to other members' vignettes about anti-gay prejudice. He said that he could not recall ever having been subjected to any discrimination because of his homosexuality, but of course he had never been open about his gayness!

A few months later he had reached the stage where he felt it important to inform a prospective employer about his being gay. Probably because of this, he did not get the job, and had to live through the resulting anger, disappointment, and self-doubt. At the present time, however, he has moved toward an even more publicly gay identity and is very active in BAPHR affairs.

There is a price to be paid (and advantages to be gained) whether one comes out or remains in the medicine chest. For each of us the question must be: In which situation is the price high and the advantages not valuable enough?

Irrespective of our answers, we in BAPHR must, as one of our fundamental tasks, help one another feel better about ourselves as human beings and physicians who happen to be gay.

Everything else that we accomplish will follow from that.

*Signed: David Kessler
President, BAPHR*

SUBSCRIPTIONS to The BAPHRON may be obtained by non-BAPHR members on a yearly basis. The subscription rate of \$12 per year for this monthly newsletter will be used to offset extra printing, handling, and mailing costs. Please make checks payable to BAPHR, and send to: The BAPHRON, P.O. Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletter should be mailed.

The BAPHRON welcomes your comments on this and future issues. We are interested in printing articles on a monthly basis (or as pertinent) from each committee; updates on projects or research; reviews on texts or journals; reports on medical, political or gay events in our community; and other articles of general information or interest to our organization.

All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. The writer's name will be omitted upon request. Due to spacial limitations, letters will be published at the discretion of the editor.

The DEADLINE for submitting material to be printed in The BAPHRON will be the 18th of each month for publication in the following month's issue.



The BAPHRON is published monthly by Bay Area Physicians for Human Rights
P.O. Box 14546
San Francisco, California 94114
Phone: (415) 673-3189

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Staff Sam Thal, M.D.
Bill Owen, M.D.
and others

the **BAPHRON**



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 3

March 1, 1979

BAPHR Reception at American College of Physicians

San Francisco, the city that knows how, will know another first when BAPHR hosts a reception during the ACP annual meeting in the city. The event, to be held Tuesday, March 27 from 6 to 8 p.m. in the Diablo Room of the San Francisco Hilton Hotel, promises to be an enjoyable social occasion as well as another milestone for BAPHR. It will follow the panel on "Management of Sexual Problems in Medical Practice" sponsored by the College at 4 p.m. the same day in which BAPHR president, Dr. Dave Kessler will participate.

All physicians and medical students attending the meetings and their friends, as well as all BAPHR members and friends are cordially invited to the reception. Due to late planning, the reception could not be included in the ACP program which had already gone to press. Signs will be displayed in the registration area and at the hotel to notify visitors. For further information in the San Francisco area, call Sam Thal, M.D., FACP at 673-3189.

The ACP program does however recognize a unique feature of San Francisco with a reference to "merry Castro Street" as one of the attractions of the meetings. Doubtless, Castro Street will also be gay.

National Gay Health Conference to be held in New York City

The second annual National Gay Health Conference will be held at Hunter College in New York City on May 18, 19 and 20. The theme of the 1979 conference is "Gay Health Care — Ten Years After Stonewall" in reference to the uprising in Greenwich Village which marked the beginning of the modern gay liberation movement.

The conference is sponsored by the National Gay Health Coalition, an association founded in Philadelphia in May, 1976 and composed of the gay caucuses of several health professional organizations. NGHC members in 1978 included the gay caucuses of the following professions: counselors, sex educators, medical students, psychiatrists, psychologists, public health workers, social workers, nurses and substance abuse workers. The theme of last year's conference, held in

Washington, D.C., was "The Health Closet — Opening the Door on Gay Health Issues".

The organizers of the conference have invited physicians to participate and have expressed the hope that the three Physicians for Human Rights organizations—in San Francisco, Philadelphia and Southern California—will send a joint delegation there. Members of all of the PHR organizations may also lead workshops on gay health topics.

Social activities are being planned to provide an opportunity for participants to meet and exchange ideas with gay health professionals from throughout North America and Europe. Housing accommodations will also be provided if desired. If you would like to attend the NGHC and/or lead a workshop there contact Bill Owen c/o BAPHR.

First BAPHR Dinner Meeting

Seventy physicians filled Jackson's restaurant on February 21 to hear Supervisor Harry Britt at the first BAPHR dinner meeting. Speaking informally, he told of his maturation from a pre-med student to a San Francisco supervisor. Between these he worked at times as a hotel bellman, an auditor, cafeteria worker, employment counselor, and a Methodist minister, giving him a range of life experiences that cannot be obtained from books.

Most of his talk related to his coming out to all his relatives, old friends, colleagues, and classmates when he achieved national recognition as the supervisor appointed to take Harvey Milk's seat on the board. He discussed the important role that gay physicians could also take in letting the country know who gay people are, what we do, and how we contribute to society. At the same time we would be helping ourselves by not wasting our time and energy in pretending and in not being true to ourselves.

A lively question and answer period followed in which he outlined more specifically what we could do in San Francisco to improve the quality of health care and to see that available funds were put to their best possible use.

Our thanks go to Dr. Pat Powell for arranging the excellent dinner and suggestions for future dinner meetings are invited.

LETTERS

Congratulations on Volume I, Number 1! Layout and printing nicely done. The Library received its copy via W. Owen; the Newsletter will now become part of the serial collection of the Library.

May you increase and multiply and some day have a glossy cover and table of contents.

Signed: Paul Wakeford
Librarian, Acquisitions
Division
The Library
University of California,
San Francisco

Upcoming Events

Set Aside April 7 & 8 -- San Francisco Health Fair

The fair will need many physicians to man the site in the Castro area. We will be obtaining VD cultures, providing rectal exams, pap smears, breast exams and general advice on medical and mental health issues, education on drugs, VD, and other sexually transmitted diseases. A special mailing will be sent out for members to sign up for blocks of time near the end of February. We are expecting a large turnout of gays for this event as the event will be heavily publicized for weeks preceding the fair.

Sunday, March 11 9:45 am George Riley will speak on "Gay Mental Health" to the First Unitarian Gay Caucus at Franklin and Geary Streets in San Francisco.

Monday & Tuesday
March 19-20

Dave Kessler will participate in a program on "Current Issues in Sexuality and Medical Practice" for health professionals, sponsored by the UCSF Human Sexuality Program at the Ahwahnee Hotel, Yosemite, California. Dave will be a member of a panel entitled "Male and Female Sexuality" to be held on Monday, March 19, from 6:45-9:45 p.m. During the morning session on Tuesday, Dave will speak on "The Patient Who Is Homosexual" and will participate in a "Workshop on Male Sexual Problems (Case Studies)".

Tuesday, March 27 4:00-5:30 pm Dave Kessler, will participate in a panel on "Management of Sexual Problems in Medical Practice" at the annual session of the American College of Physicians in San Francisco in the Main Arena of the Civic Auditorium.*

6:00 pm American College of Physicians, Annual Meeting, San Francisco. BAPHR will have a reception for physicians attending the meeting Tuesday evening, March 27. This will follow the presentation by Dr. David Kessler on the program that day. For further information in San Francisco, call Sam Thal, M.D., FACP at 673-3189.

Saturday, March 31

The Committee on Homosexuality of the Northern Psychiatric Society will present a panel discussion entitled "Homosexuality and Psychiatry—New Perspectives" at the annual spring meeting of the Northern California Psychiatric Society. The meeting will be held at the Doubletree Inn, Monterey. Participants will be Don Brown, Carol Cohen, Jim Krajewski and Jim Paulsen. The program will include historical, personal, clinical and research perspectives of homosexuality, followed by an open discussion with the audience.*

Wednesday, May 16 8-10 pm Dave Kessler will be the moderator of a panel entitled: "Psychotherapy with Homosexual Women and Men" at the Chicago meeting of the American Psychiatric Association. Panel members will include Martin Hoffman, Jean Munzer, and Jim Paulsen.*

*This is the first time that openly gay physicians will be on the program at these meetings.

progress notes

ITEM: The full-time gay lobbyist in Sacramento has submitted his resignation because of lack of financial support. According to a story in the current issue of the Bay Area Reporter, Steve Badeau, of California Human Rights Advocates, said that while representing the 2 to 3 million gays in California, he is behind in his rent payments, and is owed over \$2500 in back salary by CHRA.

ITEM: The Gay National Educational Switchboard, a project of the Human Rights Foundation, was forced to shut down because of inadequate funding almost before it got started several months ago. This service would have provided an informational and referral hotline for gay people and over the U.S., many of whom are very isolated and frightened.

ITEM: My medical school alumni organization has notified me that they have embarked on a campaign to raise \$370 million for the university (with \$23 million for the medical school) to finance their capital and endowment needs. As part of a smoothly orchestrated appeal, various gift possibilities are enumerated, including the suggestion of a minimum pledge of 2% of my annual income for the next 5 years.

ITEM: Uninformed and biased articles on gay issues continue to appear, even in "respectable" publications with only haphazard response, if any, from the organized gay community. Contrast this state of affairs with the ability of the Anti-Defamation League of the Bnai Brith, for example, to monitor and reply to anti-semitic attacks.

Worthwhile gay groups and causes have been chronically starved for money. They have tended to operate on a shoestring, trying to survive from one crisis to another. More often, ad hoc groups have had to be hurriedly formed to cope with an impending disaster. This is all part of the price we have paid for remaining hidden, uninvolved and disorganized.

With the rising of gay consciousness has come an increased awareness of the need for a whole variety of worthwhile gay projects. Many of these will require considerable amounts of money, available over a continuing period.

The time has come to start planning the establishment of a well-financed, broadly-based National Gay Foundation. This would be the repository for a substantial quantity of gay wealth which would be invested to provide income to carry out the funding of important gay projects of an educational, research, philanthropic and social nature.

Such a foundation would be able to respond in timely fashion to immediate needs for information and cash, and would also be able to support long-range enterprises it deemed worthy. It could sponsor publications and conferences, and underwrite important gay test cases in the courts. There is no point in itemizing this list any further now—we could all come up with any number of additional suggestions.

This foundation would have tax-exempt and tax-deductible status, and would provide a highly suitable mechanism for collecting large amounts of gay money, both by contributions and bequests, and could put it to work in the service of gay causes.

Think of the number of financially comfortable gay people in this country, and the present purposes to which their money goes during their lifetime and after their death. If only some of this enormous wealth could be rechanneled into this foundation, it would be very well capitalized, indeed.

Obviously, this is not something BAPHR could undertake on its own, and it would be separate from any BAPHR foundation that would be established to carry out our own particular goals. Nevertheless, there could be important linkages between the two projects, and some of our members might be interested in having a role in the planning process.

Your reactions and comments would be very welcome.

*Signed: Dave Kessler
President, BAPHR*



vital signs

Lisa Capaldini, first year medical student at UCSF, has just been elected student representative from UCSF to OSR, the student wing of the American Association of Medical Colleges, for a 4-year term. The western branch of OSR will be meeting in Pacific Grove on April 21. Also, Lisa plans to attend the Convention of the American Medical Student Association (AMSA) in Denver on March 21-25. She is being actively recruited to be the co-chairperson of their Gay People in Medicine Committee (GPIM).

Bill Barnaby, one of BAPHR's earliest and most energetic members, and former chairperson of the Social Concerns Committee of BAPHR, was back here recently. Bill moved to Philadelphia last summer where he helped organize a gay physicians group, Philadelphia Physicians for Gay and Lesbian Rights (PPGLR). PPGLR now has over 50 members, including 10 women, has instituted a physician referral service, and is planning to develop a liaison with the Philadelphia Medical Society. For professional reasons, Bill will be relocating back here very soon, has already bought a house in the city, and is job-hunting.

Welcome back, Bill!

Meanwhile in Los Angeles, the Southern California Physicians for Human Rights (SCAPHR) has held its third meeting. SCAPHR now has over 100 members, and has to rent a hotel room to accommodate the crowd that attends its gatherings. They have a man and woman as co-chairpersons, and have expressed an interest in joining BAPHR on an ocean cruise.

(Readers are invited to submit short items involving or of special interest to our membership.)

journal club

MORE TREATMENT?

Toward a New Model of Treatment of Homosexuality; Eli Coleman; Journal of Homosexuality Vol. 3 (4); 1978. Mr. Coleman states statistically what we all know: when approaching homosexuality from an illness model, successful cures are infrequent.

Individual therapy: Curan and Parr (1957), practically no increase in heterosexual behavior; Woodward (1958) some success with male bisexual patients; Bieber (1962) little success after 150-350 hours of therapy for exclusively homosexuals with 50% of bisexuals showing a "significant" shift toward heterosexuality

Group Therapy: about the same statistics

Behavior therapies: the same statistics. These included: modifying sexual fantasies (heterosexual fantasies paired with masturbation—homosexual fantasies were extinguished); anticipatory avoidance conditioning (patients allowed to avoid electrical shock under a variable-interval reinforcement schedule when viewing slides of same sex nudes); covert sensitization (instead of adverse stimulus such as shock, adverse imagery, i.e., nausea was used) and desensitization.

All of the studies fail to externally validate their findings and do not investigate whether there is a similar shift in fantasy material. Since the early 70's the illness model has been seriously questioned and is no longer a viable model in the view of an increasing number of therapists. In fact, Hammersmith and Weinberg (73) and Weinberg and Williams (74) found that homosexuals who have "come out" seem to be the healthiest psychologically, as indicated by a more stable self image, fewer anxiety symptoms and less depression. With this shift, newer treatment approaches have as objectives increased ability to be more open, accepting, and fully functioning human beings. Trust, expression of feelings, and intimacy are emphasized. Assertiveness training, couples counseling, communication skills and sexual dysfunction techniques are being used with increasing frequency and success. Unfortunately, as in the illness approach, research in the area of

facilitating homosexual functioning is fraught with design deficiencies and inadequate data collection.

EXTRAGENITAL GONORRHEA

Two papers from outside the U.S. published late in 1978 reveal once again the high frequency of asymptomatic extragenital gonorrhea in homosexual men presenting to sexually transmitted disease (STD) clinics. This problem was first widely publicized in this country by Owen and Hill in 1972.¹ Pharyngeal and/or anorectal infection was seen in 49% of 278 homosexual men attending venereal disease (VD) clinics in Glasgow and Edinburgh, Scotland² and in 65% of 54 cases of gonorrhea in homosexual men attending a VD clinic in London, Ontario, Canada³. In both the Scottish and Canadian studies, 61% of the patients had urethral gonorrhea but this was sometimes associated with positive cultures from extragenital sites as well, particularly in the Canadian report. Anorectal gonorrhea was asymptomatic in over half the cases in both studies and pharyngeal gonorrhea was virtually always asymptomatic.

It has been suggested that 4 grams of spectinomycin intramuscularly may be an effective treatment for anorectal gonorrhea but in a retrospective study at a gay clinic in New York City, it was found that 7.2% of 125 men who received this drug had cultures positive for *Neisseria gonorrhoeae* five to 14 days after treatment.⁴ Although these may have represented reinfections rather than treatment failures, spectinomycin has one other drawback; it does not abort incubating syphilis.

POSTGONOCOCCAL URETHRITIS

Another Canadian study, this time from Vancouver, indicates a lower prevalence of urethral infection due to *Chlamydia trachomatis* and a lower risk of postgonococcal urethritis (PGU) in homosexual men compared to heterosexual men.⁵ This organism has been thought to be largely responsible for nonspecific urethritis (NSU) and PGU. This study suggests that urethral acquisition of the organism is less likely to be associated with rectal intercourse

than with vaginal intercourse. (Finally there is one STD that sexually active gay men don't have to worry about excessively!)

ENTERIC PROTOZOAL INFECTIONS

A paper from the Gay Men's Health Project in New York City reported on finding pathogenic cysts for *Entamoeba histolytica* and *Giardia lamblia* in 26% of 89 sexually active homosexual male volunteers.⁶ Many of these patients were asymptomatic and thus may serve as a reservoir for sexual transmission of these enteric parasites. The authors felt that anilingus is the major role of transmission of these diseases but that a prospective study is needed.

VENEREAL WARTS

Geo von Krogh, a well known research dermatologist from Stockholm, Sweden, who was a guest at one of BAPHR's general meetings last spring, reports that 1% 5-fluorouracil may be beneficial for therapeutically refractory condylomas of the penis.⁷ Changing the vehicle of the 5-FU from a 5% cream to a 1% solution in 70% ethanol may eliminate the major side effect of the former preparation, which is pain.

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BAPHR - The First 18 Months

- Part III

(This is the third article in a series on the history of BAPHR. The first issues of The BAPHRON discussed the founding of our organization in the summer of 1977, and events in its development through May 1978.)

Jerry Jensen, KGO-TV news anchorman, expressed the opinion that it would take a major advance in gay rights to shatter homosexual stereotypes but he felt that an organization like BAPHR could assist this process. He spoke to 16 members at the June 11 Executive Board meeting and presented some of his ideas on approaching the broadcast media.

It was noted that Dr. Dave Kessler (current BAPHR President) had presented the UCSF Psychiatric Grand Rounds on Homosexuality. Mention was made that the West Bay Health Planning Counsel had announced plans for a regional West Bay Health Systems Agency which was to be developed in the ensuing months (the West Bay HSA is currently functioning—see article in this issue).

The election of officers took place at the general meeting on June 18. Elected to one-year terms were: Dave Kessler, M.D., President; Dale McGhee, M.D., Vice-President; Bill Owen, M.D., Secretary; and Darryl Raszl, M.D., Treasurer. Also at this meeting members of the Women's Caucus of BAPHR pledged a \$500 contribution to the Gay Rights Advocates to support the legal battle against the Briggs Initiative, if it were approved by the voters in November, 1978.

Dr. Paul Dague, Director of Operation Concern at the Pacific Medical Center, spoke on the range of services offered by this program. He mentioned sessions in individual and family therapy as well as groups involving lesbian couples with children and non-gay families with gay children.

The first major event in which BAPHR revealed itself to the public eye was the Gay Freedom Day march held in San Francisco on June 25, 1978. Thousands of people gave their hearty support to the 65 members and many friends who marched down Market Street behind the banner displaying the name and

logo of the organization.

Members staffing the BAPHR booth set up at the post-parade Gay Freedom Day Fair discussed gay health services (including the Physician Referral Service) and talked about our organization with hundreds of interested individuals.

Executive Board members on July 9 resolved that certain members of BAPHR would grant interviews to correspondents of major local newspapers as well as the gay press. The San Francisco *Chronicle* did in fact, print such an article on July 25, 1978).

The Women's Caucus was officially approved at this meeting, the chairperson of which would be an Executive Board member. Plans were initiated for a BAPHR booth to be set up at the Castro Street Fair in August. Also, a bulletin board displaying notices of employment situations, events, etc., was started. The development of a national gay physicians organization was also considered at this meeting.

The July general meeting had a record of 90 members in attendance to hear Dave Kessler give his inaugural address.

Chuck Wibbelsman of the San Francisco City Health Clinic spoke on the effects of financial cutbacks on city health care services, and particularly in the area of sexually transmitted diseases. He encouraged BAPHR to correspond with city and state officials to protect the important services which these clinics provide (BAPHR members subsequently lobbied city officials concerning the proposed cutbacks and funds were restored.)

John De Cecco, Professor of Psychology at San Francisco State University, Director of CHEER (Center for Homosexual Education, Evaluation and Research) and Editor of the *Journal of Homosexuality* commented on research projects underway at that time.

The first major article about BAPHR in the press appeared on July 25, 1978 when the *San Francisco Chronicle* printed a story by Ronald D. Moskowitz entitled "Gay Doctors' Group is First in U.S." This was an informative piece concerning the founding and progress of

Bay Area Physicians for Human Rights. It was based on personal interviews with Drs. Dave Kessler and Bill Owen.

Local response included a very positive and supportive letter from Dr. Laurens P. White, President of the San Francisco Medical Society. KMEL radio and Channel 20 television carried the story on their broadcasts through further interviews with Bill and Dave.

But the impact of this initial public mention of the country's first gay physicians group extended beyond the Bay Area. United Press International, the Associated Press, the British Broadcasting Corporation, the Australian Broadcasting Company, KNX radio (CBS) in Los Angeles, KMOX radio (CBS) in St. Louis were among major agencies which carried news of this event to many parts of the world.

In response to this article, many physicians became aware of the existence of BAPHR, and of the projects and goals of our organization. One important effect was an increase in the number of physicians who volunteered to participate in the Physician Referral Service.

An appeal for support was made by representatives of three other organizations at the August 13, 1978 Executive Board meeting. The speakers included Peter Goodman of the Human Rights Foundation, Chris Kent of Bay Area Committee Against the Briggs Initiative (BACABI) and Jim Foster of the No on 6 Committee.

Other business included a report by the Psychiatric Issues committee on sending representatives to the Northern California Psychiatric Society Committee on Homosexual Issues. A survey by the research committee regarding military experiences of BAPHR members was distributed. It was also determined at this Executive Board that medical students and physicians from outside the Bay Area could join our organization, particularly those who reside in locales where it was unlikely that a similar organization of gay physicians would form.

(to be continued next issue)

foramena

CLASSIFIED ADVERTISEMENTS/ ANNOUNCEMENTS/ SOLICITATIONS

Michael Steele, M.D. and David Stockford, M.D., advanced candidates at the C.G. Jung Institute of San Francisco are planning an eight week workshop on gay depth psychology from a Jungian perspective for gay therapists limited to eight participants. The seminars will cover basic concepts and their clinical usefulness. Personal material will be welcome. Call 563-1767 or 563-3602 for further information.

Congregation Sha'ar Zavav. Serving the Gay Jewish Community. Services: Fridays 8:00 p.m., followed by social hour. Dove Hall, 3543 18th Street, San Francisco. All welcome. Address: Box 5640, S.F., 94101. Phone 626-3131.

Physician Assistant. PA student seeks employer and/or training experience in the S.F. Bay Area. Will graduate 5/79. Can complete final 4-8 wks. with new employer. Contact P. Edgar, 715 10th Ave., S.F. 94118. (415) 752-7735.

The BAPHRON is beginning a classified section. The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines (as printed below) will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

All material for publication must be clearly typed, and include an address or phone number for respondents. Material submitted will be printed at the discretion of the Editor. The deadline for receiving material for publication will be the 18th of each month for inclusion in the following month's issue.

Payment should be made by check payable to: Bay Area Physicians for Human Rights, and mailed with the advertisement to the following address: Classifieds, c/o The Baphron, P.O. Box 14546, San Francisco, California 94114.

Trained Monkeys

There is a story that the membership committee uses trained monkeys to lick the labels on the newsletter envelopes to preserve the confidentiality of the membership list. Although this is not strictly true, members and patrons can be assured that the mailing list is zealously guarded by the secretary and never released for any reason. In fact the membership committee has often worked under the handicap of not knowing who is a member or patron, and has sometimes put up a pitch for membership to someone who already is a member. We don't object to this extra effort because we recognize the importance of a strictly confidential membership.

For those physicians who are still reluctant to join BAPHR as members, we urge you to become patrons. This is a category established in the bylaws which allows the individual to attend all meetings, parties, or other events, receive the BAPHRON and other mailings, but is not a member and has no voting rights. In return, the patron is expected to contribute to the financial support of BAPHR to at least the same degree as a member in his membership category.

There is room in BAPHR for any physician who supports the goals of the organization. Being a patron is one way of doing this.

SUBSCRIPTIONS to The BAPHRON may be obtained by non-BAPHR members on a yearly basis. The subscription rate of \$12 per year for this monthly newsletter will be used to offset extra printing, handling, and mailing costs. Please make checks payable to BAPHR, and send to: The BAPHRON, P.O. Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletter should be mailed.

The BAPHRON welcomes your comments on this and future issues. We are interested in printing articles on a monthly basis (or as pertinent) from each committee; updates on projects or research; reviews on texts or journals; reports on medical, political or gay events in our community; and other articles of general information or interest to our organization.

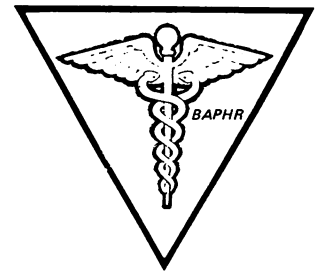
All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. The writer's name will be omitted upon request. Due to spacial limitations, letters will be published at the discretion of the editor.

The DEADLINE for submitting material to be printed in The BAPHRON will be the 18th of each month for publication in the following month's issue.



The BAPHRON is published monthly by Bay Area Physicians for Human Rights
P.O. Box 14546
San Francisco, California 94114
Phone: (415) 673-3189

Editor Robert Hindi, M.D.
Staff Sam Thal, M.D.
Bill Owen, M.D.
Dennis McShane, M.D.
and others



HEALTH FAIR '79 - AN UPDATE

BAPHR works in the gay community April 7th and 8th

Last summer, when NBC's local affiliate, KRON-TV, began preparations for a Health Fair here, no one imagined there would eventually be over 100 sites participating in the Bay Area, with 25 locations in San Francisco alone. And yet, on April 2-8, exactly that will happen as Health Fair Week is observed here and in New York, Los Angeles, Washington, Chicago, and Atlanta. The American Red Cross is serving as the coordinating organization here, in conjunction with the National Health Screening Council For Volunteer Organizations, which is headed by Dr. John Brensike of the National Institute of Health. BAPHR will be participating on Saturday and Sunday, April 7th and 8th, from 11 AM to 5 PM, at Health Center No. 1, 3850 17th Street, between Noe and Sanchez.

While the Fair was mentioned on the sign-up sheet inserted in last month's *BAPHRON*, it might be helpful to reiterate that a health fair is an event at which a variety of free health screening tests and educational exhibits are made available to the community at the same time and place. This approach helps attract more people to the services, uses volunteer time more efficiently, and results in a broader health perspective. The purpose of all health screening is to reduce morbidity and mortality through: (1) early detection of disease; (2) the emphasis of the individual's responsibility for his/her health status; and (3) the provision of the information necessary to meet such responsibility through preventive health education. Health screening cannot replace an examination by a physician, but it does serve the physician and patient in

early detection of problems which might otherwise be left untreated. Screening can also serve as a means of checking the efficacy of a prescribed medical regimen in progress, as well as reassure and encourage participants to continue healthy behaviors.

BAPHR initially became involved in this undertaking last fall when *The Advocate* became interested in sponsoring a site in the Castro area and requested our cooperation. In the intervening months, we have been very active in the planning process and BAPHR is now the chief coordinating organization for our location. Free screening examinations will be included at the following stations: height & weight; blood pressure; visual acuity using the Titmus machine; anemia screening using copper sulfate and finger-stick hematocrit when indicated; Pap smear and breast exam; venereal disease screening and rectal exam; oral screening for gross cavities, oral lesions, and cancer of the head and neck; foot exam; and possibly hearing screening. Medical counseling will be provided for all of the previously mentioned areas as well as for emotional, alcohol, and/or drug-related problems. We hope to provide a series of ongoing lectures and slide presentations on sexually-transmitted diseases, nutrition, aging, and other topics. In addition, a participant may purchase an SMA-25 for \$6 or an SMA-25, T4, and VDRL for \$7. This is the only service at the Fair that will not be provided free. (An individual requesting only a VDRL will receive one free at the VD screening station.) Approximately four weeks after the Fair, when all the laboratory data has been obtained, the participant will be mailed the complete results of the health screening tests;

Continued from Cover Page

duplicate copies will be mailed to the individual's treating physician or organization, eg., Kaiser, outpatient clinic, etc. Follow-up is being arranged for participants with significantly abnormal findings.

Health Center No. 1, so named because it was the first district health facility in The City, is ideally suited for our needs. Located in the heart of the gay community, just two blocks off Castro, it has probably gone unnoticed by most of us. Dr. Hope Corey, Medical Director since the facility was built 16 years ago, has been most generous and cooperative, and is hopeful of increased utilization of the Health Center in the future by all members of the community, both gay and straight.

KRON-TV is spending \$250,000 in advertising for the Bay Area, which includes public service announcements during prime time programs, extensive news coverage, including on-site reporting, announcements in *TV Guide*, etc. *The Advocate* is printing flyers and publicizing our site in the gay community. Supervisor Harry Britt is expected to be at Health Center No. 1 several times during the weekend, and the Mayor and other Supervisors have been invited to attend. Dr. Brensike, from the National Institute of Health, is scheduled to be in town and has expressed an interest in visiting our site. Our efforts may therefore serve as a prototype for future health screenings of gay communities around the country.

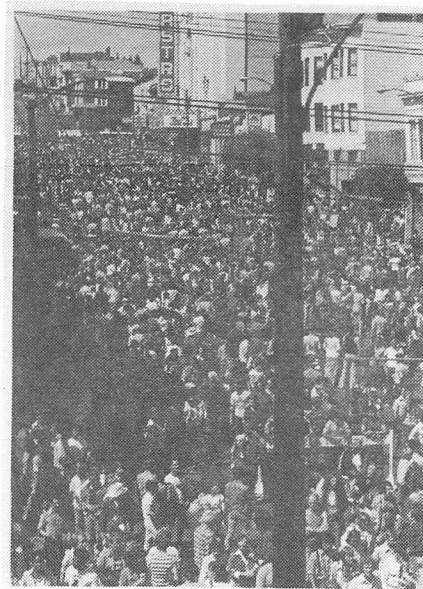
An undertaking of this magnitude would not be possible without the help and cooperation of a great many people. The following organizations have contributed to this effort: California Lesbian Physicians Association, Gay Health Workers, Northern California Dentists for Human Rights, Health Center No. 1, The Advocate Experience, American Red Cross, San Francisco City Clinic, College of Podiatric Medicine, Operation Concern, Pacific Center for Human Growth, and Whitman Radclyffe Foundation. This is the first public appearance for the first three groups mentioned, so the Fair will serve as their "coming out" vehicle.

With less than three weeks to go, we are in the final stages of planning and preparation. The one missing ingredient is *YOUR* participation. Additional volunteers are needed at all stations of the Fair. We especially need members with expertise in general medicine (Internists, etc.) to staff the medical counselling station, where participants will have an opportunity to go over the results of their screening examinations with a physician, as well as receive consultation about specific health/medical problems. Other stations that require particular expertise are the VD screening and recal exam, and women are needed to perform breast exams and Pap smears. All members are strongly encouraged to participate. You could work either (or both!) days from 11-2 or 2-5. On the week before the Fair, training sessions will be held for each station to ensure uniformity of services offered. Those interested may com-

plete the sign-up sheet from last month's *BAPHRON*, or call Richard Andrews (answering service number: 567-4341).

Health Fair '79 is one of BAPHR.s major projects and promises to be a rare opportunity for us to work with our colleagues in providing a valuable service to the gay community. See you April 7th and 8th!

*Richard Andrews, M.D.
Fair Coordinator*



VITAL SIGNS

Report from NYC: When a group there decided on the name of Gay Psychiatrists of New York, they thereupon lost one member who stated he is bi-sexual! A total of about 40 psychiatrists have come to meetings, and about 20 attend each month. They are moving toward a more formal organization and may get incorporated. Interesting.

SCPHR passed its by-laws at its meeting on February 25, and contributed \$100 for the National Convention of Gay People In Medicine. It also voted \$200 to send one or two of its medical students to Denver to attend.

**Jerry E. Berg Speaks
to BAPHR
Implications of Lee Marvin Case**



At the regular general meeting of BAPHR on Sunday, March 18 at the San Francisco Medical Society auditorium, attorney Jerry E. Berg substituted for Irwin Goldman, the scheduled speaker. Mr. Berg, a gay rights activist attorney, spoke on legal problems of gay relationships. He contrasted the marked inequalities in the laws that protect married people and those which apply to other couples and other relationships. The celebrated Lee Marvin case which is now in the courts was discussed and he noted that it may set precedents which would be of interest to gay people. Mr. Berg then described legal methods of protecting estates of non-married individuals and those in other relationships by means such as wills, contracts, and trusts.

The meeting, attended by over 75 BAPHR members, was followed by an informal social hour where the discussion continued and more valuable pearls were gleaned.



Upcoming Events

- Thursday, April 12 9:30 a.m. to 11:30 a.m. Bill Owen will speak on "Special Medical Needs in the Gay Male Community" as part of the UCSF block elective in human sexuality. The location is the Parnassus Heights Medical Building, 350 Parnassus Avenue, Suite 300, Room 7.
- Thursday, April 12 9:30 a.m. to 11:30 a.m. Lesley Anderson will speak on "Special Medical Needs in the Lesbian Community" as part of the UCSF block elective in human sexuality. The location is the Parnassus Heights Medical Building, 350 Parnassus Avenue, Suite 300, Room 7.
- Sunday, April 22 General Meeting, Southern California Physicians for Human Rights. Telephone (213) 276-2341, Los Angeles.
- Wednesday, May 16 8-10 pm Dave Kessler will be the moderator of a panel entitled: "Psychotherapy with Homosexual Women and Men" at the Chicago meeting of the American Psychiatric Association. Panel members will include Martin Hoffman, Jean Munzer, and Jim Paulsen.*
- Saturday, June 16 Dave Kessler and Jim Paulsen will participate in a UC Extension Center program in San Francisco on "Homosexuality and Homophobia: New Perspectives". Others on the panel will be John De Cecco and Marny Hall.

LETTERS TO THE EDITOR

I just wanted to write and thank all the members of BAPHR for your generous support.

We've planned some exciting programs at the Denver convention, and your financial aid will certainly help ensure their success. SCPHR has also come very generously to our aid. (California to the rescue!)

Thanks for your newsletter. It looks great! The local Philadelphia group (now called Philadelphia Physicians for Gay and Lesbian Rights) is just at the bylaws stage, bug progress continues.

Once again please express GPIM's thanks to all of those in BAPHR.

Sincerely,
John Whyte, Coordinator
Gay People in Medicine
Committee
American Medical Student
Association

Because of BAPHR's financial support I will be attending the American Medical Students Association's national convention in Denver this spring.

An issue-oriented association, AMSA has a task force that addresses the issue of "Gay People in Medicine". I hope that as a member of both BAPHR and AMSA I will help to maintain and expand the ties between BAPHR and the Gay People in Medicine task force, as it is clear that both groups can only benefit by awareness of each other's activities and resources. I anticipate that the convention will be an educational and enjoyable experience for me, and I am grateful to BAPHR for facilitating my participation.

Lisa Capaldini
First year medical
student, UCSF

Dear Members and
Friends of BAPHR,

Thank you very much for the lovely flowers and notes which significantly brightened my stay in the hospital. I'm home now, recovering slowly but steadily and should be as good as new in a few months.

Thank you again for your thoughtfulness.

Sincerely,
Don Tusel, M.D.

BAPHR - The First 18 Months - Part 4

On September 6, 1978 a story on BAPHR by Dean Gengle ("Ending the Doctors' Dilemma . . . Bay Area Physicians Come Out") was published in *The Advocate*. Based on interviews with Jerry Strong, Dave Kessler, Dale McGhee, Bill Owen and Bill Barnaby, the article served to inform the gay community about the history and goals of our organization.

An Executive Board meeting was held on September 10 with 13 members in attendance. It was noted that Dave Kessler, President of BAPHR, had spoken at the "Gay Rights Under the Law" symposium at Hastings College of Law of the University of California. Dave also spoke at the first meeting of an organization of gay psychiatrists in New York City. It was also noted that Dale McGhee, the Vice President of BAPHR, had been the featured speaker at the organizational meeting of gay dentists in the Bay Area.

At this meeting the Executive Board officially offered its support to Sacramento area gay medical professionals in the development of their organization. Tax exempt status for BAPHR was further discussed. Bob Hindi mentioned his interest in developing a newsletter for the organization, and plans were started on that project.

Dr. Marny Hall of the Human Sexuality Program at UCSF spoke to over 100 BAPHR members during a general meeting on September 17. It was announced that Dr. Dave Kessler, along with Supervisor Harvey Milk and San Francisco Commissioner of Health Mervin Silverman, would be co-sponsoring a "Physicians and Friends Against Proposition 6" cocktail party and reception.

Plans were outlined for BAPHR's participation in canvassing neighborhoods and distributing pamphlets countering the Briggs initiative as part of "BAPHR No on 6 Day" which was to be held the Sunday before the election.

On September 28, 50 BAPHR members contributed \$5000 to the No on 6 Committee at a \$100 a plate dinner held at the Fairmont Hotel. The featured guest was

television star Ed Asner and entertainment was provided by several local groups. Over 10 per cent of the total seats at this dinner were occupied by BAPHR members. The women's caucus alone sponsored ten of the seats, generating \$1000 for the campaign.

Over 200 members and guests attended the first BAPHR outing held on September 30 at the Shadows resort in Marin County. Facilities at the resort included a pool, hot tub, sauna, hiking trails, volleyball, dancing and a picnic grove where lunch, dinner and refreshments were served from noon until midnight.

As of the Executive Board meeting on October 9, 1978, there were 206 BAPHR members, including 16 women and 20 medical students. There were also 11 patrons. It was announced that KNBR radio, as part of the Northern California Broadcasters Association community ascertainment process, had interviewed Dave Kessler and Bill Owen regarding their feelings about the needs of the gay community. *New Times* magazine also interviewed Bill and Dave for an article which was published just prior to the November 1978 election. Information was presented at the Executive Board on development of the West Bay Health Systems Agency and BAPHR members were urged to join the HSA and participate in developing health policy for gay people in this region.

(to be continued next issue)

COMMITTEES & MEETINGS

To help you plan your schedules in advance, the executive board meetings are held on the second Sunday of each month, and the general meeting is on the third Sunday. The place for each meeting will be announced in the preceding BAPHRON. On unusual occasions where a meeting will conflict with some other event, or for a special speaker who cannot make that date, a change in date may be necessary. Such changes will be kept to a minimum and will be announced in the BAPHRON as early as possible. Members are urged to check meeting dates, times, and place,



DR. STEVEN MORIN TO ADDRESS APRIL MEETING

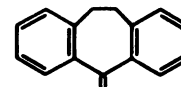
A discussion on the implication of coming out as a professional for lesbian and gay men will be provided by Stephen Morin, Ph.D. in the upcoming April meeting. Dr. Morin is a licensed clinical psychologist in private practice in San Francisco, consultant in medical psychology to the Department of HEW and a member of Medical Experts, Superior Court, San Francisco.

His primary research interests center around the nature and meaning of anti-homosexual bias and recently was co-editor of a recent volume entitled *Psychology and The Gay Community*. Other activities to his credit include co-founder and past chairperson of the Association of Gay Psychologists, and a member of the Task Force on the Status of Lesbian and Gay Male Psychologists of the American Psychological Association.

His talk will shed some interesting perspectives on differences in reactions in coming out professionally between lesbian and gay men.

Please note that this meeting is on the fourth Sunday instead of the regular third Sunday of the month because of Easter.)

Sunday, April 22 at 7 PM
San Francisco Medical Society
250 Masonic Avenue
San Francisco, CA



COMMUNITY RESOURCES

This is the first of a series of articles on gay social and medical resources in the Bay Area. The Whitman Radclyffe Foundation, 2108 Union St., SF 94123, (415) 929-1538 offers individual and group counselling for alcoholism. Their office is on the 2nd floor at the corner of Union and Webster. I was immediately made at ease by the soft beige and brown used in the reception area. Subdued warm colors and furnishings are used throughout the offices. The staff, many of whom are recovered alcoholics, are courteous and knowledgeable. The organization is in the process of consolidation of its focus on the gay alcoholic and reorganization for an expanded, more efficient and effective community organization.

Prospective clients proceed through four free sessions; two are information and two are intake. If treatment is elected, the client enters into a twelve week group therapy program. There is a sliding scale fee for therapy. There are three group sessions per week from 7 to 10 PM; two are in the center and one is outside. Rusty Smith has developed an EST approach with a focus on the individual and his responsibility, alcohol addition and recovery. Underlying emotional issues are addressed as necessary and at a level that is practical and comfortable for the staff and group. (The groups generally have from 10 to 15 members, a leader or facilitator and an assistant who is usually a graduate of the program.) For most of the clients it is the first experience with a support group. The groups are composed primarily of men between the ages of 25 and 35. Lesbians are actively recruited but hesitate to enter treatment because they are outnumbered by the males. (Presently there are four groups in operation.) Followup occurs at three and six months and one year. There are 105 graduates from the past two years and while the program is too young to provide valid statistics, 90% of the graduates to date have maintained their recovery. Co-alcoholics (any person who has an ongoing relationship with an alcoholic) are treated in a separate group. Their illness is subtle and their road to recovery is often as difficult as that of the alcoholic.

The foundation is funded by a number of foundations; the San Francisco Department of Public Health and individual donations. Referrals are derived primarily through public advertising and prior clients. To date there have been few agency referrals and one from physicians. Community outreach is a major priority for the near future and they will be participating with us in the KRON Health Fair. They are forming a new board of directors and would like a gay physician to join it. The board will meet monthly and will set policy, personnel procedures and work towards securing and solidifying resources, i.e., private funding. Anyone who is interested should contact Dan Hart at Whitman Radclyffe.

George Riley, M.D.

CONCERN FOR MAN HIMSELF AND HIS FATE MUST ALWAYS FORM

THE CHIEF INTEREST OF ALL TECHNICAL ENDEAVORS . . .

Albert Einstein (1931)

progress notes

It has become almost commonplace to use the term "homophobia" to refer to the fear and loathing that some non-gay people experience in relation to homosexuality. We have come to recognize that extreme homophobes often have other associated characteristics. They usually have rigid authoritarian personalities, and hold fundamentalist religious beliefs, with a right/wrong view of morality. They tend to hold conservative political and social values, and are very traditional in their thinking about gender roles. They are basically anti-sex and anti-pleasure, and may harbor the secret, frightening thought that they may not be 100% heterosexual.

This we feel we know something about and understand. But is there any homophobia amongst gays? If so, how does it manifest itself, and how does it come about? What are its consequences for the individual, for the gay community, and for all of society? Can anything be done to counteract gay homophobia?

It would surely be surprising if gay people grew to adulthood in our culture without having experienced and absorbed its basically anti-gay bias. In the lifetime of most of us, we have heard references to the "love that dare not speak its name", and the laws dealt with the "unspeakable crime against nature", so "unspeakable" in fact, that it was not always clear to the courts as to which sexual acts were supposed to be included.

The *New York Times*, up until fairly recently, never used the word "homosexual" at all. Instead, a story would appear in its pages about "Bohemians" having been arrested in Times Square. In my earlier years, I remember being confused as to why a group of Czech nationals were creating a disturbance in midtown Manhattan!

Our parents and teachers did not mention homosexuality at all, or if they ever did, it would most likely have been in a manner to suggest its complete unacceptability. Our religious indoctrination followed a similar course. In childhood, our schoolmates would cruelly taunt non-conformers with shouts of "sissy", "homo", "tomboy", and so on. Later we would be subjected to the "faggot" jokes in the public media.

All during this time, it would have been exceedingly difficult to gain any positive feeling about being gay from society at large. In that era there were few, if any, publicly identified gay people to serve as positive role-models. Not many non-gays were willing to speak up for a deviant group which was seen by the experts in the medical and psychiatric profession as being "sick".

We grew up isolated and afraid, having to hide what we were. For long periods in our lives, some of us didn't even realize that there were other gay people, or didn't know how to find them.

Thus, the poison of homophobia was indeed deeply inoculated into us, even though we are not so aware of this now, and are not always sensitive to its subsequent effects.

... (To be continued)

Dave Kessler,
President

BAPHR FINANCIAL STATEMENT

The treasurer reports the following income and expense account statement from October 1, 1977 through February 20, 1979:

	<u>INCOME</u>	<u>EXPENSES</u>	<u>NET</u>
10/1/77 - 9/30/78	\$ 7,620.05	\$5,833.74	+ \$1,786.31
10/1/78 - 2/20/79	\$ 6,109.65	\$3,673.65	+ \$2,436.10
TOTAL:			
10/1/77 - 2/20/79	\$13,729.70	\$9,507.29	+ \$4,222.41

BAPHR SPEAKERS AT FIRST UNITARIAN CHURCH

Representatives of the BAPHR speakers' bureau lectured at two meetings of the Unitarian-Universalist Gay Caucus (UUGC) of San Francisco in early March.

On Sunday, March 4, Bill Owen, M.D., spoke on "Gay Medicine" to 65 people. Dr. Owen's talk included the clinical approach to the gay patient, recent concepts in sexually transmitted diseases and background material on the development of organizations for gay men and women in the health professions.

On Sunday, March 11, George Riley, M.D., spoke on "Gay Mental Health." Dr. Riley's lecture dealt with aspects of coming out, problems with relationships, alcoholism in the gay community and sexual dysfunction, among other topics.

The moderator of the UUGC, Jerry Atkins, noted that the turnout was much greater than usual at both lectures and compared favorably with the record of 90 individuals who turned out to hear former pro-football star Dave Kopay speak in February. He said that caucus members found both talks to be highly relevant and interesting. Mr. Atkins said his Executive Board hoped that additional BAPHR speakers would be featured at First Unitarian in the near future.

If you would like to participate as a member of the BAPHR speakers bureau, contact George Riley at 839-4164. Previous speaking experience is not required. Additionally, your subject does not necessarily have to be concerned with gay or even medical issues. Dr. Riley expects that, as knowledge of our speakers' bureau spreads, the demand for BAPHR members to lecture will greatly expand; therefore participation of as many members as possible would be appreciated and would add to the bureau's flexibility.



WOMEN'S ISSUES COMMITTEE

Twenty women attended the monthly meeting held on March 16. The topic surrounded educating group members as to what risk factors exist in women physicians for suicide, depression, alcoholism and drug abuse. Possible etiologies, what preventative measures could be taken early on and approaches to troubled colleagues once a problem is realized was discussed.

Next month's meeting will center on discussing relationships and how we relate them to our professional lives. A panel is being formed for a presentation.

Current projects include coordinating the PAP smear section of the upcoming Health Fair. Nearly a third of CALPHA members plan to participate. Two members are planning a pamphlet to circulate to the Bay Area women physicians inviting any interested women to join BAPHY and CALPHA.

Lesley Anderson, M.D., CALPHA/BAPHR liaison and acting chairperson of the women's issue committee, informed the Board that Barbara Nylund, M.D. will be assisting her in the chairperson's role. News from gay physicians' organizations in other cities: Southern California Physicians for Human Rights has completed its bylaws and is considering its own Physician Referral Service; Philadelphia Physicians for Human Rights has changed its name to Philadelphia Physicians for Gay and Lesbian Rights.

The Board approved a policy that physicians taking calls on the Physician Referral Service hot line should not provide callers with either their own names or names of practice partners, even as part of a list of several physicians. The policy was approved for ethical reasons and to insure that our impending tax-exempt status would not be placed in jeopardy.

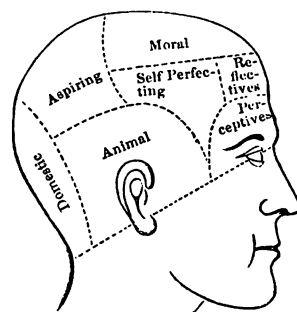
The Board approved the concept of a luncheon meeting between several BAPHR members and Mervyn Silverman, M.D., San Francisco Commissioner of Health. This would serve to open communication between the Commissioner and BAPHR concerning problems such as funding of the city venereal disease clinic

and notification of BAPHR of available job positions, including that of Director of the clinic.

Committee reports were presented. The meeting adjourned to social hour.

It was announced that CALPHA (California Lesbian Physicians Association) had 20 members as of August, 1978. Plans for an outing for BAPHR members and guests at the Shadows resort facility in Marin County were also discussed. Also discussed at the August Executive Board was the problem of obtaining physicians from the Permanente Medical Service Group to serve on the Physician Referral Service. Over 25 per cent of Referral Service calls were from gay members of the Kaiser Foundation Health Plan seeking competent and understanding physicians.

On August 20, 1978 BAPHR sponsored a booth at the Castro Street Fair where gay health literature and the Sexual Minorities Health Issues survey were distributed. Later in the day, at the general meeting, Supervisor Harvey Milk spoke briefly to thank members of BAPHR individually and collectively for "coming out" publicly in the news media. David Goodstein, who was the main speaker at the August 20 meeting, gave an interesting account of his early life experience and his career development which eventually led to his becoming the publisher of *The Advocate*.



No 102. — GROUPING OF ORGANS.

SOCIAL CONCERNS

At the next meeting in April, the following projects will be discussed:

1. Hiring professional fund raisers to help BAPHR expand its financial base.
2. Writing grants for funds from foundations, drug companies, etc.
3. Expanding contacts with the news media and listing media sources.
4. Designing spots for television and other media concerning health topics of importance to the gay community.
5. Developing a series of lectures on gay health for professional societies, hospital staffs, and schools.
6. Preparing packets to help physicians in other cities set up organizations similar to BAPHR.
7. Spread the word about BAPHR to physicians in other cities.
8. Monitor legislation and explore methods of providing input into the legislative

Preliminary work on some of these projects has already been accomplished. Anyone who has had experience, particularly in fund raising is especially invited to the meetings.

At the last committee meeting 18 projects were suggested and discussed for future action. Some of these are short, some more extensive, and they vary from anonymous to activist involvement. A meeting was also arranged with the firm of Horne, McClatchy and Associates to discuss fund raising plans.



All committee meetings, including the executive meeting, are open to all members and patrons of BAPHR. Members are invited and urged to attend any meetings which interest them and to participate in the discussions and work of the committees. The BAPHRON staff also welcomes such participation from members. Y'all come, hear!

foramena

CLASSIFIED ADVERTISEMENTS/ ANNOUNCEMENTS/ SOLICITATIONS

Openly gay physician seeks 3-4 week preceptorship with gay physician. Graduate, London Hospital, U.K., Dick Smith, M.D., 152 Morley Avenue, Winnipeg R3L 0X8, Manitoba, Canada. Phone (204) 475-7507. Collect.

GP seeks work association with other physician(s); arrangement(s) open as beginning new career. Anxious to discuss potential, i.e., sharing space, practice, salary. If interested, call Art Lingousky 547-3132

BAPHR member seeks rmmate to find apt. in SF. Can move anytime. Call Mike at 653-9283.

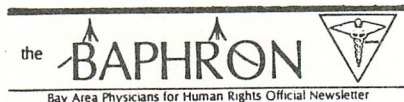
29 y/o male M.D. will start working/living in Modesto 3 days/week and is looking for share rentals &/or colleagues in the area. Call Greg collect 415-824-9524

The BAPHRON is beginning a classified section. The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines (as printed below) will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

All material for publication must be clearly typed, and include an address or phone number for respondents. Material submitted will be printed at the discretion of the Editor. The deadline for receiving material for publication will be the 18th of each month for inclusion in the following month's issue.

Payment should be made by check payable to: Bay Area Physicians for Human Rights, and mailed with the advertisement to the following address: Classifieds, c/o The Baphron, P.O. Box 14546, San Francisco, California 94114.

The acceptance of advertising does not in any way constitute endorsement or approval by BAPHR or the BAPHRON of any advertised service or product.



Professional announcements such as practice locations, office or address changes, and practice associations will be accepted for this section.

All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. The writer's name will be omitted upon request. Due to spacial limitations, letters will be published at the discretion of the editor.

SUBSCRIPTIONS to The BAPHRON may be obtained by non-BAPHR members on a yearly basis. The subscription rate of \$12 per year for this monthly newsletter will be used to offset extra printing, handling, and mailing costs. Please make checks payable to BAPHR, and send to: The BAPHRON, P.O. Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletter should be mailed.

The BAPHRON is published monthly by Bay Area Physicians for Human Rights
P.O. Box 14546
San Francisco, California 94114
Phone: (415) 673-3189

The DEADLINE for submitting material to be printed in The BAPHRON will be the 18th of each month for publication in the following month's issue.

Information on honors, awards, appointments, promotions, publications or presentation of scientific articles by BAPHR members will be published by The BAPHRON at the request of the member. Such recognition of accomplishments by our members is of importance to the goals of our association.

OFFICERS
President David Kessler, M.D.
Vice-Pres. Dale McGhee, M.D.
Secretary . . . William Owen, Jr., M.D.
Treasurer . . . Darryl Raszl, M.D.

The BAPHRON welcomes your comments on this and future issues. We are interested in printing articles on a monthly basis (or as pertinent) from each committee; updates on projects or research; reviews on texts or journals; reports on medical, political or gay events in our community; and other articles of general information or interest to our organization.

The names of individuals mentioned in the BAPHRON does not imply their sexual orientation.

BAPHRON STAFF
Editor Robert Hinde, M.D.
Staff Sam Thal, M.D.
Bill Owen, M.D.
Dennis McShane, M.D.
and others

The opinions of the Editors and staff are expressed only in editorials and represent only those of the writers. Letters and articles submitted for publication are the opinions of the writers and do not necessarily represent those of the officers or the editorial staff of the BAPHRON.

the

BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 5

May 1, 1979

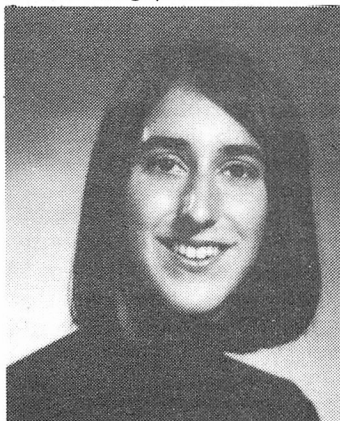
Medical Students Address Gay Issues AMSA National Convention

Last month, two BAPHR members, Andy Zysman and Lisa Capaldini, attended the national convention of AMSA (the American Medical Students Association). Andy, a second-year medical student, acted as UCSF's official delegate, while Lisa, a first-year UCSF student, attended the convention as a BAPHR liaison.

The convention's activities focused on AMSA's primary goals of (1) educating medical students in critical areas that traditional curricula cover inadequately, and (2) lobbying for health care policy changes at the national level. The task of socially-conscious self-education was addressed by over fifty workshops conducted by nationally prominent individuals, medical professionals, and students, while the resolution sessions at which official AMSA policy was debated and voted upon, were educational experiences in themselves.

AMSA, a medical student organization whose bureaucracy and ideology are distinct from that of the AMA's, is a progressive, issue-oriented group, and its organizational structure reflects this. The eleven task forces of AMSA (including Gay People in Medicine, Occupational Health, Legislative Affairs, etc.) act to effectively

direct the energies and expertise of AMSA's members toward vital reform of medical education, health policy, and social injustices. Nowhere was this energy of commitment and enthusiasm more evident than in the Gay People in Medicine (GPIM) task force. GPIM sponsored three workshops, all of which were well-attended and very well-received. Most importantly, GPIM was a *visible* task force and many of its members were openly visible as gay medical students. Indeed, over the course of the workshops, the GPIM membership became even more "out of the closet" as many individuals "came out" in the course of lively discussions about gay issues.



Lisa Capaldini, National Co-ordinator of AMSA Gay People in Medicine.

The three GPIM-sponsored workshops, moderated by GPIM's national co-coordinators Janet Yardley of the University of Massachusetts and John Whyte of the University of Pennsylvania, managed to cover most of the critical gay health issues by addressing both the informational needs of the straight participants and the more support-oriented needs of gay medical students. The first workshop, "Dealing Sensitively with the Gay Patient," featured oral autobiographies by one male and one female gay medical students. After a question-and-answer discussion period, the workshop participants broke up into small groups where GPIM members facilitated role-playing sessions. The role-playing scenarios involved an anxious mother consulting her family about her son's "abnormal behavior" and an asymptomatic male at a VD clinic. By focusing on actual interviewing situations, the workshop not only sensitized the participants to the existence of gay health concerns, but also educated them as to how to deal with these issues sensitively and effectively.

(continued next page)

journal club

The second workshop, "Gay Speakers Training Workshop," was devoted to preparing gay people to speak on gay-related issues. Most of the session was devoted to formulating optimum responses to the oft-heard litany of such antagonistic questions such as "Why do you gay people feel the need to flaunt your sexuality?" The third and final workshop, "Gay Mental Health Issues," was to have featured a brief history of the psychiatric approaches to homosexuality, followed by a panel discussion by four gay therapists. Unfortunately, only one of the four therapists actually made it to the session, but his strongly stated, controversial opinions (e.g., for most people, being bisexual is just an anxious denial of their homosexuality) kept the session from ever approaching dullness. After this session, which featured energetic debate between GPIM members in the audience, a group of fifty GPIM members and friends went out together for a Chinese dinner.

On the final day of the convention, GPIM members convened to set task force priorities for the following year, and to elect a new female national co-coordinator for a two-year term. A national survey of medical school sexuality curricula was set as the primary goal, while other projects will include a survey of residency programs and better publicity for GPIM. Lisa Capaldini of UCSF was elected to replace Janet Yardley as national co-coordinator. Significantly, Lisa's election represents a continuation of GPIM's and BAPHR's mutually supportive association, as BAPHR itself grew out of the GPIM task force!

Lisa also attended the AAMC (Association of American Medical Colleges) regional convention, April 21-24, as UCSF's student representative. Although the student wing of the AAMC has traditionally been a docile group, Lisa hopes to use her four-year office to exploit the bureaucratic resources of the AAMC for reform-oriented survey, including sexuality curricula.

Even before publication, the new book by Masters and Johnson, *Homosexuality in Perspective*, has already been receiving a good deal of media attention. Among the conclusions to be derived from the study are that gays are neither emotionally nor constitutionally sick, that homosexual behavior is learned, and that gays and heteros have more in common than most people thought. One of the researchers was quoted as saying that the book will help destroy the myth that gays are "less than fully functional and less able to enjoy their sexuality."

In fact it turns out that gays may actually have a better understanding of the sexual needs of their partners than do most non-gays. They are able to communicate better with their sexual partners, spend more time at pleasuring each other sexually, and read each other's sexual signals better.

In its coverage of the story in its April 23, 1979 issue, *Time* magazine said that "heterosexuals are generally bumblers in their lovemaking." The senior *Time* correspondent commented on the study, saying "my biggest surprise was to discover how much heterosexuals could learn from homosexuals about closeness, warmth, and communication. I had always assumed that it was the other way around."

So what else is new?

In the same issue of *Time*, the cover story was "How Gay is Gay?—Homosexuality in America." The five page article indicated that "homosexual men and women are making progress toward equality . . . they are gaining a degree of acceptance and even sympathy from heterosexuals, many of whom are still unsure how to deal with them, that neither straights nor gays would have thought possible just the day before yesterday".

The article went on to say that "on the social and psychological fronts . . . the increasing openness and acceptance of gays is startling . . . the most striking evidence of the movement is the astonishing proliferation of organizations dedicated publicly to serving homosexuals, whether out of or still in the closet . . . many are primarily meeting, counseling and support groups for homosexual lawyers, doctors, businessmen, teachers, whatever. . . . The other type . . . is the community service group".

However, "despite these new forms of support, gays still often feel isolated and persecuted. . . . lesbians often feel themselves to be the most persecuted of all."

For the future, *Time* said that "the outlook is for more and more homosexuals to come at least partly out of the closet. 'Just hearing the word gay, reading it in the newspaper, — any of these things make it easier for a person to come out.'"

"Nor can heterosexual society again ignore the subject of homosexuality, as many straights devoutly wish it could. 'Ten years ago, few people knew that they knew a gay person. Today, most kids grow up knowing that they know someone who is gay.'"

The *British Journal of Hospital Medicine* for July, 1978 (Vol. 20:1, 86) ran an article entitled "Hunting Season in America". The author writes that local U. S. bigots are taking aim at an "uppity group of citizens . . . renowned for giving Old Testament prophets apoplexy — male homosexuals". He mentions a "rackety Los Angeles politician" and a "latter-day Carrie Nation, a former Miss America who plugs orange juice on television". For her, "the sin of sins is not drinking booze but eating sperm, although in picking on homosexuals she neatly ignores the fact that a good proportion of American women would merit hell-fire on the same grounds". The things you learn in medical journals!

NCPS Monterey Meeting

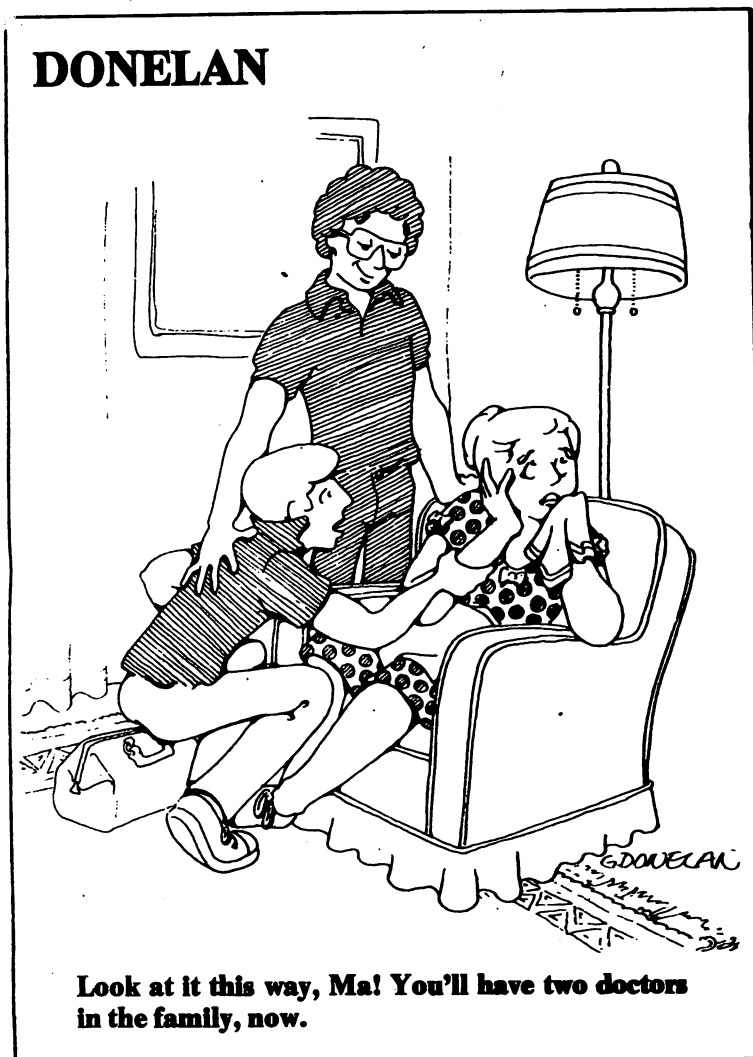
The Committee on Homosexuality of the Northern California Psychiatric Society presented a panel discussion to approximately 80 psychiatrists at the annual meeting of NCPS in Monterey on March 31, 1978.

It was the first presentation of which any of the Committee were aware which included gay physicians speaking to an organized professional group.

Jim Krajieski was chairperson for the program entitled "Homosexuality and Psychiatry—New Perspectives." Tom Lowry spoke on some of the historical aspects of homosexuality. Carol Cohen discussed current research findings stressing some of the work from the book "HOMOSEXUALITIES." Don Brown gave an emotionally stirring account of his experiences as a gay person and a gay psychiatrist. Jim Paulsen discussed clinical issues related to homosexuality focusing particularly on "homophobia."

The formal presentation was followed by a question and answer period. The presentation seemed well received judging from the evaluation sheets completed by those in attendance.

The Northern California Psychiatric Society sponsored a press conference to publicize this particular portion of the meeting. Participants included the panel members and the president of NCPS, Dr. Linn Campbell.



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"WE ARE FAMILY" BAPHR to Co-Sponsor Benefit for California Human Rights Advocates

California Human Rights Advocates (CHRA) will be the beneficiary of a "We Are Family" disco fund-raiser, co-sponsored by BAPHR and several other local organizations. It will be held at the I-Beam on Haight Street on Tuesday, June 12, from 7 to 11 pm.

Admission will be \$10 with a buffet and no-host bar included. Tickets will be available at the door as well as various other locations around town. "We Are Family" T-shirts will also be sold to benefit CHRA.

California Human Rights Advocates, the gay lobbying group in Sacramento, is in need of financial support in order to maintain the political gay voice in California state legislation in the near future. Important homosexual anti-discrimination bills are pending in the state legislature, and the strong gay lobby provided by CHRA is critical to the political future of our community.

Mark June 12 on your calendar for the "We Are Family" benefit, and come join your friends at the I-Beam that night.

To the Editor:

It was a pleasure and an honor to speak at the Bay Area Physicians for Human Rights general meeting in February.

I enjoyed meeting everyone and if there is anything I can do to help please feel free to call on me.

Sincerely,
Harry Britt
Board of Supervisors,
City and County of
San Francisco

How Does Your Health Fair?

On April 7th and 8th, approximately 500 people took advantage of the health screening services at District Health Center No. 1. Thanks to the enthusiastic efforts of almost 150 volunteers, including 45 BAPHR members, the Fair was a great success.

Participants repeatedly commented on the warm and friendly treatment they received. Many of these were elderly ladies who stopped in after receiving flyers from "those nice young men at the corner of 18th and Castro Streets," to quote one of the senior citizens. One man said: "This is the best medical experience I have ever had. I came with my usual apprehension about medical things and left on a natural high. It was wonderful!"

One grandmotherly type at first stared in disbelief when a BAPHR phlebotomist answered her question about what kind of group BAPHR is. Then she said how moved she was that gay physicians would volunteer their time to help not only their own community, but other San Franciscans as well.

Numerous people felt the services they had received were so valuable that they offered to make a donation; several asked if they could help in any similar undertakings in the future.

While the majority of the participants were gay (approximately 65%), it was reassuring to see a harmonious mixture of people from varying lifestyles, backgrounds, and age ranges. About 80% of those attending paid for the optional blood testing, 99 women received Pap smears, and almost 200 men had a rectal exam and gonorrhea culture.

The Fair also served as an excellent opportunity for many of us to work and become acquainted with our gay and straight colleagues.

Two anesthesiology residents and an anesthesiology professor counseling patients were heard to remark that they had forgotten what great fun primary care medicine could be.

The President of BAPHR, obtaining gratification as an amateur photographer, was seen avidly snapping photos of many

of the events taking place around the District Health Center during the weekend.

A noted psychiatrist with a well-established practice apparently found his second career love in ophthalmology as he was observed intently performing visual acuity examinations with the Titmus instrument.

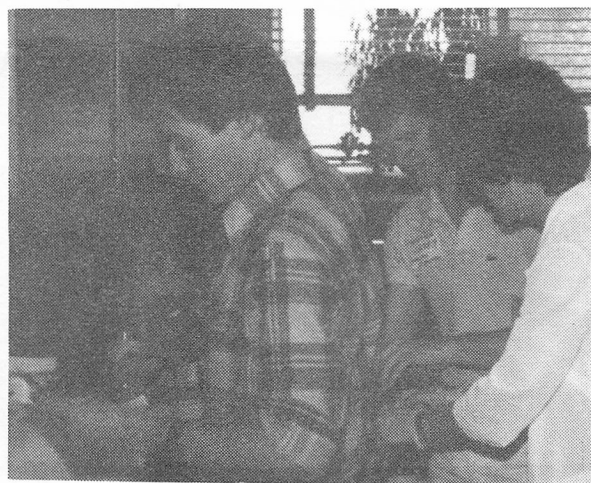
The Fair showed that BAPHR members can work in concert with members of other gay health professions. The California Lesbian Physicians Association, The Gay Health Workers, and the Northern California Dentists for Human Rights contributed a great deal of person-power and time to this effort.

Dr. Hope Corey, Director of District Health Center No. 1, commented that she was highly impressed by the services provided on both days. She invited BAPHR and the other participating groups to use her facility in the future. Possibilities might include the development of a sexually transmitted disease screening and/or treatment program which might potentially become a regular activity of the Health Center.

(continued)



A Few of the Many Participants in the District Health Fair.

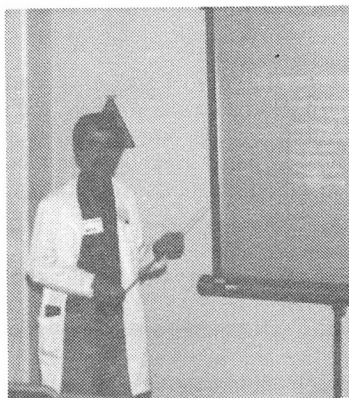


Volunteers at Health Fair Processed Hundreds of Lab Tests.

BAPHR might also cooperate in providing a training course in cardiopulmonary resuscitation to residents in the community.

It seems likely that the Health Fair will become an annual event; NBC already has tentative plans to sponsor similar fairs in over 20 major cities next year. So, for those BAPHRites who missed out on this year's activities, your time will come! In fact, the final work on the current Fair is yet to be completed. The results of the screening exams, including the blood panels, will be mailed to the participants near the end of May. Volunteers are needed to review these results, particularly the SMA-24's, as part of the follow-up plan for signifi-

cantly abnormal findings. This should require only a few (2-3) hours of time, and if interested, please leave a message with Richard Andrews' answering service (567-4341).



Bill Owen, M.D., Giving Talk to Individuals Attending Health Fair.

The Health Fair was an example of human caring and grassroots medicine working at their best. Sincere thanks for a job well done to all the BAPHR members and others who gave so freely of their time and energy, and who, with their cordial and responsive approach, made the Fair a pleasant educational experience as well as a valuable medical service for those who attended.

No one can sufficiently thank Ric Andrews, M.D., the BAPHR organizer of the Health Fair. He spent an incredible amount of time and dedication in preparation of and during the Fair, and is the one person who may be credited with its ultimate success.

GAY DOCTORS' GROUP IS FIRST IN CANADA

Physicians and medical students in Winnipeg have formed the first formal association of gay doctors in Canada.

The Manitoba Physicians for Homosexual Understanding was organized by Dr. J. Richard M. Smith in the fall of 1977, some three months following the founding of Bay Area Physicians for Human Rights. Smith, 35, a graduate of the University of London (England) Medical School, recently completed his residency in internal medicine at the University of Manitoba Health Sciences Centre.

MPHU meets monthly to discuss the problems members have both as gay individuals and as professionals. The group has begun an educational program to try and dispel outdated myths about homosexual

men and women which exist within both the medical and lay communities in Manitoba. MPHU assumed a political role in actively opposing the visit of singer Anita Bryant to Manitoba last spring. The organization is also examining the feasibility of staffing a sexually transmitted disease clinic for gays in Winnipeg.

The physicians' group would like to establish liaisons with gay physicians and medical students in Canada and abroad. It sponsored a reception at the 1978 Canadian Medical Association national convention in Winnipeg for gay people attending that meeting.

MPHU has obtained a fair amount of local publicity. A favorable article about the group entitled "Homosexuality:

Doctors Form Group to Lobby" was published in the *Winnipeg Free Press* on April 26, 1978 and letters by members were printed in both the *Free Press* and the *Winnipeg Tribune*. Another story, "Gay Doctors' Group Speaks Out," was published in the *Meditoban*, the monthly newspaper of the Manitoba Medical Students' Association. And Smith recently participated in a local radio interview about the organization and its goals.

Dr. Smith feels that the MPHU has helped its members to be better doctors for their patients, gay or non-gay. He also believes that the group represents another step in the provision of services to meet the human needs of gay people in Manitoba and is a sign that the gay community in Winnipeg is maturing.

Upcoming Events

Wednesday, May 16 . . . Dave Kessler will be the moderator of a panel on "Psychotherapy with Homosexual Women and Men" at the annual meeting of the American Psychiatric Association in Chicago. Panel members will be Jean Munzer and Jim Paulsen; discussants will be Jean Bolen and John Spiegel.

May 18-20 Second National Gay Health Conference, Hunter College, New York City.

Tuesday, May 22. HARVEY MILK'S Birthday (born 5/22/30)

Saturday, June 2 BAPHR Outing at the SHADOWS

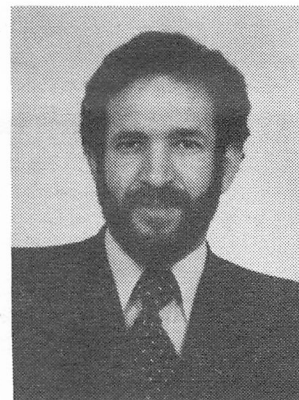
Tuesday, June 12 BAPHR co-sponsors "We Are Family" benefit for California Human Rights Advocates at the I-Beam on Haight Street in San Francisco (see related story in this issue).

Thursday, June 28. 10th Anniversary of STONEWALL

Sunday, June 24 GAY FREEDOM DAY

May

Guest Speaker



Elliott Brender

BAPHR NOMINATIONS TO BE HELD IN MAY ELECTIONS IN JUNE

As provided in the Articles of Association of Bay Area Physicians for Human Rights, the Executive Board, sitting as a nominating committee for the academic year 1979-80, will propose a slate of officers at its meeting on May 13. The officers include the President, Vice President, Secretary and Treasurer.

The nominating committee slate will be supplemented by additional nominations from the floor to be made at the general meeting on May 20. Ballots will subsequently be sent out to all members (excluding patrons). The ballots should be brought to the June general meeting but may be mailed in if a member is absolutely unable to attend.

Each candidate will make a brief statement and will answer written questions from the audience at the June general meeting. Members may then mark their ballots and the votes will be counted. If no candidate receives a majority of the votes cast, a runoff election will be held immediately between the two candidates with the greatest number of votes received.

Although any BAPHR member (excluding patrons) may run for office, it was the unanimous opinion of the Executive Board at its April 16, 1978 meeting that candidates for office be open about their sexual orientation and willing to serve as spokespersons for the organization.

Elliott Brender, M.D., a San Francisco physician specializing in colon and rectal surgery, will speak on "Common Mistakes in Proctologic Diagnosis and Treatment" at the May BAPHR general meeting. This will be held on Sunday, May 20, at 7 pm, at the San Francisco Medical Society, 250 Masonic Avenue.

Dr. Brender attended S.U.N.Y. at Buffalo School of Medicine, and subsequently completed a residency in surgery at Mt. Zion Hospital in San Francisco. He is also the former Chief of Emergency Services at Letterman Army Medical Center in San Francisco.

foramena

CLASSIFIED ADVERTISEMENTS/ ANNOUNCEMENTS/ SOLICITATIONS

EMPLOYMENT WANTED

ATTENTION GAY DOCTORS: I'm looking for a position in a medical office as a medical assistant or receptionist. Excellent qualifications & references. Garland Kyle, 863-3550.

Exp. LVN-ORT seeks emp in SF Dr's office/works well as 1st assist medical or surgical/for complete resume call James Franklin/861-3608 after 4pm/office skills also.

Bd el internist avail July 1 after one yr Inf dis fellowship. Desire comfortable work situation. Pref gay-oriented, but not a req. Midwest trained; research and teaching capabilities; large scale primary care experience. Contact L. Solomon, M.D., 1430 Spruce No. 406; Mpls., Minn. 55403

WANTED

Gay male or female M.D. with experience in emergency medicine and ambulatory care. Part-time position. Call 441-6930.

Medical lab tech wanted. Calif license & general lab required. Parasitology helpful. Boucher & Lippe, M.D.s, 621-4228, Franklin Hospital Medical Office Bldg.

Physician needed for Men's Clinic. Thursdays 12:30-3:30. Salary. Claudia Viek, 776-2103.

The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

All material for publication must be clearly typed, and include an address or phone number for respondents. Material submitted will be printed at the discretion of the Editor. The deadline for receiving material for publication will be the 18th of each month for inclusion in the following month's issue.

Payment should be made by check payable to: Bay Area Physicians for Human Rights, and mailed with the advertisement to the following address: Classifieds, c/o The Baphron, P.O. Box 14546, San Francisco, Ca. 94114.

The acceptance of advertising does not in any way constitute endorsement or approval by BAPHR or the BAPHRON of any advertised service or product.

GROUPS

GROUPS FOR GAY MEN. Small, Suppertime groups, both short and long term, where we explore issues relating to self, other, and community. Helpful for individuals in need of a social complement to ongoing therapy. Consultation with primary therapist available. For information or referral contact Leon McKusick, MS, MFCC, 346-4646, or Harold Booth, Phd, MFCC, 922-9207.

Vital Signs

Dave Kessler participated in a panel discussion on the "Management of Sexual Problems in Medical Practice" on March 27 at the Annual Meeting of the American College of Physicians in San Francisco. A large audience was present to hear Dave talk about the need for doctors to be better informed about gay life styles. He emphasized the importance of combatting negative attitudes about homosexuality so that medical care for gay people does not suffer.

Immediately after the panel, BAPHR hosted a reception at the Hilton Hotel for ACP members, which was coordinated by Dr. Sam Thal, FACP.

Approximately thirty members of BAPHR enjoyed meeting and talking with over thirty ACP members who attended the reception. These individuals represented areas including San Diego, Long Beach, Seattle, Denver, Omaha, Wichita, Minneapolis, Florida, New York, Connecticut, and Montreal.

A photographer representing *People* magazine was also on hand taking pictures for an article on Dave Kessler to appear in that magazine within the near future.

We thank the ACP members for their interest, and hope to sponsor other such social functions in the future.

APA GAY CAUCUS

The Gay Caucus of the American Psychiatric Association is interested in enrolling new members prior to the annual meeting of the APA in May.

The GCAPA will provide an organized focus for gay activities at the upcoming APA meeting in Chicago. Plans for this and future APA meetings include a daily program during the week of the APA meeting listed in the official program, presentation of papers, an annual business meeting, addresses by prominent speakers, a social program, and a hospitality suite.

The Caucus was instrumental in establishing an APA Task Force on Homosexuality in May 1978. Some of the current goals include presenting a positive image of gay psychiatrists, promoting a better understanding of homosexuality and alternate life styles, providing a forum for discussion and support, providing an official voice to address issues and answer critics, and influencing the APA in matters of concern to gay psychiatrists.

The GCAPA will be the first national organization for gay psychiatrists and hopes to work through local groups to accomplish its goals. Individuals may join by sending a check for \$25.00 (\$10.00 for members in training) made out to "GCAPA" to Emery S. Hetrick, M.D., Secretary, GCAPA; 144 East 36th Street; New York, NY 10016. Any questions concerning membership may be directed locally to Jim Krajewski, M.D..

progress notes

Last month, I wrote about the difficulty of a gay person's growing up in our society without deep-seated anti-gay attitudes. How does this show itself, and what effects does it have on our lives and on those around us?

Sometimes the signs of gay self-hate are obvious. Some people openly detest being gay, and are in continual conflict about their sexual activities and fantasies. They consider themselves to be sick, bad, or immoral, and may attempt to deny their gayness to themselves and to others. They fear being found out, may lead very isolated lives, and their sexual encounters may be largely anonymous and impersonal.

Only slightly more covert is the self-contempt and self-ridicule that surfaces in "faggot" jokes and "camp" humor. It is analogous to Blacks telling "nigger" jokes, and Jews talking to each other about "kikes". Psychiatrists have a descriptive, jargon phrase for this sort of thing: identification with the aggressor.

Gay people may find it necessary to adopt highly stereotyped masculine or feminine roles, in response to the internal and external pressures of homophobia. "Bull dykes" and "drag queens" may in large part be acting out, in exaggerated fashion, the roles prescribed for them by a hostile society. For a gay male to feel compelled to be "super-macho" may be the other side of the same coin.

Gays may decrease their career expectations, either out of realistic fear of exposure, or, more likely, because of an inner sense of not being quite good enough. They may punish themselves by self-destructive patterns of drinking, drug-taking, or sexual activity. Because of their hidden negative feelings about being gay, they may be unable to mix love and sex in the same relationship.

Because we are a minority, it is easy for us to think of ourselves as "defective", just as it is very understandable for southpaws in a right-handed world to regard themselves as inferior, rather than merely different. As a result, we may buy into the non-gay myths about monogamy and the "sanctity" of sex. Gay people often seem to imply that "if I weren't gay, then I could meet someone and live happily ever after".

For us as individuals, our own homophobia may make us miserable, alienated and self-defeating. Some lead lives of empty self-absorption, others are compelled to demonstrate a fraudulent heterosexuality. A lot of energy goes into protecting ourselves by trying to deceive others.

To that extent, we are not comfortable and free to be ourselves and to become who we can be. We ourselves may be prejudiced against other sub-groups in the gay community, and we may be reluctant to get involved in constructive gay activities. Various sub-ghettoes based on social class or specific sexual styles serve to heighten the divisiveness that holds us back.

What is the effect of all this on the non-gay world?

The consequences of our own absorbed homophobia have largely been used by the non-gay world to confirm their negative stereotypes about gay people. This came about because those gays who were visible were the ones with little or nothing to lose, while the others, who could have corrected the distorted image, felt too vulnerable to emerge from the closet.

Also, almost completely overlooked, were the important contributions we could make to our non-gay friends by sharing with them the valuable experience we had amassed in several life areas that were now becoming crucial for them, namely, issues of gender role, relationship types, and the uses of sexuality.

(to be continued)

Dave Kessler,
President

*The BAPHRON is published monthly by Bay Area Physicians for Human Rights
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San Francisco, California 94114
Phone: (415) 673-3189*

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All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. The writer's name will be omitted upon request. Letters will be published at the discretion of the editor.

The DEADLINE for submitting material to be printed in The BAPHRON will be the 18th of each month for publication in the following month's issue.

SUBSCRIPTIONS to The BAPHRON may be obtained by non-BAPHR members for \$12 per year (12 issues). Make checks payable to BAPHR, and send to: The BAPHRON, P.O. Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletter should be mailed.

the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 6

June 1, 1979

Ten Years After Stonewall

A History of Gay Freedom Day

by Dale McGhee, M.D.

Adjacent to Sheridan Square in the Greenwich Village section of New York City, is a small, undistinguished restaurant, the Bagel & . On the facade of the dreary building housing this restaurant are several hooks, upon which, for only a few days during every June, is hung a small plaque, which identifies this as having been, ten years ago, the location of the Stonewall Inn.

Sheridan Square (which is, in fact, more of a triangle) is a small and drab place, made pleasant and colorful only by the busy montage of humanity that passes by.

There is nothing about this setting, aside from the yearly plaque and a moderate amount of nightly gay cruising, that hints at its historical importance. For this was the site of the

Stonewall Resistance, now annually commemorated and celebrated by hundreds of thousands of gays and other sexual minorities, with parades, demonstrations, fairs, and other special events, on the last Sunday of every June.

During the late sixties, the Stonewall Inn was one of the most popular gay bars in New York City. It operated as a private club, but membership application consisted of paying a dollar at the door. Its clientele were hardly the Castro Clones of today, tending heavily toward effeminate, drag queen, limp wristed types.

At that time, despite the liberal administration of Mayor John Lindsay, harassment, raids, and arrests in gathering places for gays were still commonplace, a fact of life that most gay people had always placidly accepted and endured.

Thus, at 3 a.m. on the night of June 28, 1969, it was not unusual that a small group of police raided the Stonewall Inn, on the pretext that dancing was occurring without a cabaret license. They ordered the group of about 200 patrons to leave, arresting no one, but reportedly roughing up several who were slow to move.



Gay Freedom Day 1388?

(continued next page)

The crowd regathered in the street outside, watching as the police remained inside questioning employees. Initially the group was quiet, but the resentment of having lived through many such incidents ran high, and soon angry shouts at the police emerged from its midst.

Suddenly, someone hurled a garbage can lid at the police through the open doorway of the Stonewall. The startled police charged outside to quash this unruly bunch of sissies, only to be met by a barrage of garbage, garbage cans, and bricks. They quickly retreated back into the bar, and barricaded themselves behind the closed door. The gays, in turn, barricaded the outside of the door with a mountain of garbage cans and whatever sidewalk debris they could find.

Inside, the besieged police called for reinforcements, and within moments Greenwich Village reverberated with sirens and swarmed with squad cars from every direction, led by the Tac Squad.

At the same time, however, word of what was happening spread with lightening speed through the neighborhood, and hordes of other curious and furious gay people rushed to the scene and swelled the ranks of the crowd in Sheridan Square.

The newly arrived police, apparently sensing the explosive potential of the situation, seemed more concerned with rescue of their colleagues, trapped inside the Stonewall, than with direct action against the crowd. For 45 minutes they were taunted and pelted with missiles, including even a parking meter, until they were finally able to force a wedge through the crowd and free the police inside the bar. Having accomplished that, and with little further ado, they soon retreated into the night.

By dawn, the last of the crowd had dispersed, but that dawn greeted not the aftermath of a street brawl, but the beginning of a new era in the struggle for social dignity among gay people, an era to be marked by an unprecedented sense of unity and determined purpose. For the significance of the incident at Stonewall was not that a group of oppressed people had succeeded in humiliating their oppressors, but rather that grass roots activism had developed a common sense of pride and self respect that could be carried on to more important battles in the future.

If gay people were the last of the social minorities to benefit from the turbulent changes of the sixties, they were determined to be the first to benefit from the seventies. And they had learned that in unity, gay people had social power that could command respect.

Refulgent in their victory, crowds of gay people converged again in Sheridan Square during the next several evenings, taunting the heavy police patrols, and in small groups they began marching along the streets of Greenwich Village, arm in arm, singing and chanting.

And in the months to follow, they began to organize. The radicals formed the Gay Liberation Front. The more moderate formed the Gay Activists Alliance, eventually to evolve into the National Gay Task Force. They attracted the attention of the media, and they pressured the Lindsay administration. And the harassment stopped.

One year later, on June 28, 1970, more than 10,000 gay people marched from Sheridan Square, along the Avenue of the Americas, to Central Park. And the following year they marched again, along with similar groups in Washington, D.C. and Los Angeles.

Every year since then, the marches, the fairs, and other special events have been repeated on what is now called Gay Freedom Day, in scores of locales, large and small, across the country, and San Francisco's events have developed into the biggest of them all, with more than 250,000 people involved in last year's parade and celebration.

Bay Area Physicians for Human Rights was privileged to make its public debut as part of the 1978 San Francisco Gay Freedom Day Parade and Celebration. For the nearly 100 BAPHR members who participated, the day was both gratifying and fun. The crowds were overwhelmingly encouraging. The San Francisco *Chronicle* described BAPHR as a herald of the ultimate acceptance of homosexuality by straight society.

Elsewhere in this issue, BAPHR members will find an insert form to use to indicate their interest in participating in the 1979 Gay Freedom Day Parade or helping to staff the BAPHR booth at the fair afterward in the civic center. Organizing the BAPHR participation in these events is an enormous and complex job, and it is critically important that BAPHR members complete the insert form and return it immediately.

Those who were there last year will be undoubtedly eager to participate again, and it is hoped that many more will join in for the first time, on this, the tenth anniversary of the Stonewall Resistance.

Marching up Market Street in fellowship with one's professional colleagues in a gay parade is a great deal like losing one's virginity: beforehand, one is terribly nervous about what might happen, and afterward, one is so exhilarated one can't wait to do it again.

Gay Caucus of APA Busy at Chicago Meeting

Ten BAPHR members participated in activities of the Gay Caucus at the annual meeting of the American Psychiatric Association in Chicago held May 12-18. A variety of business, social, and scientific sessions were provided and, as in the past, the Caucus sponsored a booth and a hospitality suite.

It was evident that the past year had seen a dramatic surge in the commitment of gay psychiatrists nationally, with several local groups now in existence, and with more than half the Caucus members indicating their willingness to be publicly identified to the APA.

A Yale historian presented a stimulating address to a luncheon meeting about the "hidden" early Christian attitudes towards homosexuality. An evening panel on homosexuality and psychotherapy drew close to 100 APA members and was very well received.

The Caucus voted to support the boycott of the 1981 meeting planned for New Orleans, because Louisiana has not ratified the Equal Rights Amendment.

Dave Kessler (President, BAPHR) was chosen President-Elect of the Gay Caucus and will take office next May in San Francisco.

The 1980 APA meeting will be held in San Francisco from May 3-9. Dave Kessler will be working with Jim Krajeski and Ric Andrews in coordinating the Gay Caucus activities. This will be an important opportunity for us to help educate APA members about gay life, and also to show support for the Gay Caucus. Your ideas and involvement are very welcome to help make this an outstanding occasion.

AMSA MEETS IN DALLAS

Lisa Capaldini (a BAPHR member) and John Whyte, National co-ordinators of the Gay People in Medicine task force of the American Medical Students (AMSA) conducted a workshop on gay health issues for the Southwestern region AMSA spring convention on May 5. Lisa's and John's travel expenses were covered by a group of gay physicians in Dallas

who also sponsored a party for gay physicians and medical students in the Dallas area. Both the workshop and the party were unqualified successes. Several students commented that their schools' curricula address gay health issues inadequately, if at all, and express their intention to try to schedule role-playing workshops, similar to the one they had just participated in, at their schools. The party was also a significant catalyst for future gay-focused events as it was the first time the gay physician community in Dallas had met at an organized social event. Perhaps DA-PHR is in the making?

BAPHR MEMBERSHIP— DISTRIBUTION BY SPECIALITY

Aerospace Medicine	2
Anesthesiology	15
Cardiology	1
Dermatology	6
Emergency Medicine	12
Endocrinology	3
Family Practice	22
Gastroenterology	1
Internal Medicine	32
Medical Students	31
Microbiology	2
Neonatology	3
Nephrology	1
Neurology	4
Obstetrics & Gynecology	8
Occupational Medicine	3
Oncology	1
Ophthalmology	8
Orthopedic Surgery	2
Otorhinolaryngology	1
Pathology	9
Pediatrics	14
Pediatric Allergy	1
Pediatric Endocrinology	1
Pediatric Neurology	1
Plastic Surgery	1
Psychiatry	65
Public Health	3
Pulmonary Medicine	1
Radiation Oncology	2
Radiology	7
Rehabilitation Medicine	1
Rheumatology	1
Surgery	6
Urology	2
Not specified	6
Total	279



BAPHR "Comes Out" at Gay Freedom Day Parade in June, 1978

GONORRHEA

In its recently revised recommendations, the Center for Disease Control has elevated three oral drug regimens to equal status with intramuscular penicillin in the treatment of uncomplicated gonorrhea.¹

The four recommended regimens now are:

- Aqueous penicillin G procaine - 4.8 million units intramuscularly at two sites, with 1.0 g of probenecid by mouth.
- Tetracycline hydrochloride - 0.5 g by mouth one hour before or two hours after meals (because food and some dairy products interfere with absorption), four times a day for five days for a total dose of 10.0 g.
- Ampicillin sodium - 3.5 g, with 1.0 g of probenecid by mouth.
- Amoxicillin trihydrate - 3.0 g, with 1.0 g of probenecid by mouth.

A culture should be taken three to seven days after completion of whatever regimen is selected to be sure the organism has been eradicated.

Work also continues on a vaccine against gonorrhea. Researchers at the University of Pittsburgh have found in preliminary investigations that inoculation with a preparation of *Neisseria gonorrhoea* pili results in production of antibody in human volunteers and may be protective.

SYPHILIS

The Center for Disease Control continues to recommend benzathine penicillin G for primary, secondary or latent syphilis infections of less than one year's duration with procaine penicillin as an alternative drug.² For patients who are allergic to penicillin, tetracycline hydrochloride or erythromycin (sterate, ethylsuccinate or base) are recommended.

The regimens and their doses are:

- Penicillin G benzathine - 2.4 million units intra-muscularly.
- Aqueous penicillin G procaine - 0.6 million units intramuscularly daily for 8 days for a total of 4.8 million units.

- Tetracycline hydrochloride - 0.5 g by mouth one hour before or two hours after meals, four times a day for 15 days for a total dose of 30.0 g.
- Erythromycin - 0.5 g by mouth, four times a day for 15 days for a total dose of 30.0 g.

Patients should return three months, six months and one year following treatment for serological testing. Retreatment is begun if clinical signs or symptoms persist or recur, if there is a sustained fourfold increase in titer in a serological test or if an initially high titer in the test does not decrease fourfold within the year.

HEPATITIS B VACCINE

A recent report from the Center for Disease Control in Atlanta indicates that sexually transmitted hepatitis B infections are more common than previously suspected.³ Antibody to hepatitis B surface antigen is a marker of previous hepatitis B infection. In a correlative study in five cities, the prevalence rate of antibody to hepatitis B surface antigen among sexually active homosexual men was 45%. (In San Francisco it was 58%.) The tests were obtained on gay men attending gay community-based clinics in Los Angeles and Chicago and city clinics in San Francisco, Denver and St. Louis. Additionally, 6.5% of gay men tested were found to have circulating hepatitis B surface antigen, which indicates the potential for transmission of infection.

Based on these findings a large-scale trial of a recently developed hepatitis B vaccine is being conducted in New York City and will begin next month in the other five cities.³ In a double-blind study, 1,000 to 1,500 gay men will receive the vaccine and an equal number will be injected with a placebo. The code will be broken 12 to 18 months later for analysis of the results. The killed virus preparation will be administered in two injections, one month apart, with a booster injection six months later. In tests conducted so far on guinea pigs, monkeys, chimpanzees and some

humans, the vaccine has induced antibodies against the hepatitis B virus and has not been associated with any major side effects.

INHALED NITRITES

Two recent articles, through interviews and surveys, point out the lack of information about long term side effects of inhaled amyl or isobutyl nitrite.^{4 5} These papers emphasize the apparent relative safety of these products and point out some interesting facts about their history, manufacturing process and increasing popularity. No controlled clinical trials or animal experiments were quoted, however, and it appears that additional research needs to be performed in this area.

SEXUAL ABUSE OF MALES

An article in the January issue of the Journal of the American College of Emergency Physicians points out that the medical literature offers little guidance in the evaluation of male victims of sexual assault.⁶ The article gives a protocol for evaluation and examination of the male rape victim. The author notes that physicians and emergency department staff must be knowledgeable regarding their responsibilities to these patients, and concerned with the medical, legal and psychological ramifications of sexual assault.

CAMPYLOBACTER SPECIES NOT HOMOSEXUALLY TRANSMITTED

Campylobacter has been increasingly reported as a cause of mild diarrhea. When this species was recently found on a routine rectal culture for *Neisseria gonorrhoeae*, two researchers in London undertook a prospective study in homosexual men to see if there was any relation between *Campylobacter* infection and anal intercourse.⁷

In fifty consecutive rectal cultures in homosexual men presenting to a sexually transmitted disease clinic, no *Campylobacter* species were found.

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The lead article in the January 1979 *Commentary* is a long piece entitled "Are Homosexuals Gay?" Many of the old myths (and some new ones) are raised. Gays suffer from "pervasive inversion" (taking on the attributes of the opposite sex), are "unnatural" because human bodies were designed for hetero sex, and have an increased tendency toward statutory rape. Gay S/M is mentioned together with Charles Manson and the Rev. Jim Jones. Amyl nitrite is cited as the example of dangerous drug use among gays.

The author feels there is no substantial denial of rights or discrimination against homosexuals, and the gay rights issue is a phony one. Even if homosexuality is not a voluntary choice, you can choose to stay in the closet, and that's what gay teachers should certainly do. Of course, some of his best friends are gay.

The *Wall Street Journal* of January 22, 1979 carried a vitriolic essay under the heading "Homosexuality and Nature's Laws". The author indicated his displeasure with liberal politicians who backed gay rights and criticized Dianne Feinstein's statement that she felt a "moral obligation" to appoint a gay supervisor to replace Harvey Milk. This sort of thinking blurred "true distinctions" founded in nature. Those who defend homosexuality as being normal are representative of "a vulgarization of a philosophical anarchism which denies the existence of nature. "This had led to the trivialization of life, the degradation of sex, and could lead to profound changes in the character of our government."

My attack on homosexuality is not an attack on homosexuals . . . However, I would never do any of them (among whom I do number some friends) the disservice of telling them that

homosexuality was perfectly normal, any more than I would tell an alcoholic that I thought his excessive drinking was just fine."

With friends like those . . . ?

Meanwhile, our medical colleagues were reading an article by Dr. Sander J. Breiner, Assoc. Prof. of Psychiatry at Michigan State University on "Sexual Misconceptions" in the January/February 1979 issue of *Current Concepts in Psychiatry*. Dr. Breiner concluded that to believe that doctors, who are poorly trained in sexual matters, are able to understand and help sexually troubled patients is the most dangerous of all the misconceptions he lists. He then, unfortunately, exemplifies this inadequacy himself in his brief discussion of homosexuality. "If in the first seven years of life, the individual has a normal psychosexual development, and his sexual identity is established within the family unit, he will develop into a heterosexual adult. Homosexuality invariably is a symptom of a psychological problem." His one and only reference on the subject—Charles W. Socarides!

Physician, heal thyself!

(Bravo to Jim Krajewski for writing a strong response to the editor and publisher.)

THEN AND NOW

I have presumptuously selected as a title for these reflections that of one of the atypical and less excellent books of W. Somerset Maugham, for many years my favourite author writing in English, which fact dates me, but then I *am* dated, being quite the oldest member of BAPHR and an alumnus of U.C. School of Medicine class of 1939 as it was then called—not UCSF. Although never emerging from the closet (as few did in those times because of the terrible social stigma and the ever-present threat of imprisonment — of Oscar Wilde), Maugham was gay and lived the last decades of his long life with his secretary-lover in his delightful home on the French Riviera. Of humble and far from pleasant beginnings and with a club foot, he took a degree in medicine at London's St. Thomas Hospital (see the distortedly autobiographical *Of Human Bondage*) but never practiced, employing rather,

after the flattering reception of his first book, his talent as a story teller (he never claimed any more august position) to become no doubt to his surprise the "Dean of English Letters" in which I am sure he delighted though he affected to depreciate it, for his subsequent lionization and astounding success made him a fearful snob. In all his voluminous writings only once did he deal with any aberrant sexual behaviour in the excellent short story *The Book Bag* (brother-sister incest) which was initially rejected by *Cosmopolitan* as far too daring though it was only delicately implied! But never, never did he allude in any way to homosexuality.

The nearest thereto and with the characteristic snobbery is the autobiographical character of Elliot in his last excellent book of consequence *The Razor's Edge*.

To his credit must be stated that he often visited San Francisco, the only American city of which he was understandably most fond, and that, like me, he was an ardent devotee of the game of bridge of which he was a very capable player. Furthermore, during the Second World War he fulfilled the really dangerous job of a British intelligence agent of which he later wrote in the fascinating book *Ashendon* which is truly autobiographical if limited in that respect to the "cloak and dagger" stuff including deaths of some charming enemy agents which he contrived—rather to my horror, though I daresay both the danger and the retaliatory deaths are psychiatrically clear which David Kessler's erudition could easily clarify.

Without spurious modesty I think I am justified in saying I have a quite decent sense of humour though it's hardly evident herein; apparently I'm rather morbid this morning—I wakened and began this at 5:30! and who can expect ebullience at that indecent hour?

Also, this is a far cry from medical practice or gay problems "then" as compared to "now" upon which I hope to dilate in later issues.

J. Rex Burnham, M.D.

JRB:ab*

*the ab in JRB:ab is Anita Bryant, a wretched creature but a passable secretary who now needs, I'm happy to say, the \$3.00 per month I can afford to pay her.

Foramina

CLASSIFIED ADVERTISEMENTS / ANNOUNCEMENTS / SOLICITATIONS

GROUPS

Hosts Harold Booth and Don Clark invite BAPHR members to the Second Annual Mental Health Community Benefit Party for Gay Rights Advocates on Friday June 29th at the S.F. Art Institute. \$25.00 donation. Call GRA office for tickets: 863-3624.

WANTED

Gay Brd. El. or Cert. Internist or fam. practitioner needed as associate in rapidly expanding medical practice with ambulatory & major critical care hospital aspects. Part-time or full-time. Requires profound sensitivity & concern for patient needs. Contact Robert C. Scott, M.D. 401 - 29th St. No.206, Oakland, Ca. 94609. (415) 834-1950.

Medical resident needs roommate. 2 br vict flat in Haight. Rent \$200/mo. Avail 8/1/79. Call 564-0425.

EMPLOYMENT WANTED

Bd el internist, Bay Area trained, interested in practice or clinic opportunities. Avail as of 7/1. T. Smith, 3029 California, S.F. 94115. 922-4981.

GROUPS FOR GAY MEN. Small, supportive groups, both short and long term, where we explore issues relating to self, other, and community. Helpful for individuals in need of a social complement to ongoing therapy. Consultation with primary therapist available. For information or referral contact Leon McKusick, MS, MFCC, 346-4646, or Harold Booth, Ph.D., MFCC, 922-9207.

Groups: Long term group of male psychiatrists (in existence for one year) looking for male psychiatrists who are interested in making a long term commitment to a peer group which meets every 2nd Tuesday to discuss personal issues. Those interested call Don Brown, M.D. (415) 540-2601.

Congregation Sha'ar Zavav. Serving the Gay Jewish Community. Services: Fridays 8:00 pm, followed by social hour. 3200 California St., San Francisco. All welcome. Address: Box 5640, SF, 94101. Phone 626-3131.

Michael Steele, M.D. and David Stockford, M.D., advanced candidates at the C.G. Jung Institute of San Francisco are planning an eight week workshop on gay depth psychology from a Jungian perspective for gay therapists limited to eight participants. The seminars will cover basic concepts and their clinical usefulness. Personal material will be welcome. Call 563-1767 or 563-3602 for further information.

The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

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Dr. Brender

Addresses BAPHR

At the May general meeting Elliott Brender, M.D., a colon and rectal surgeon, spoke to the BAPHR membership on the diagnosis and management of common ano-rectal problems. He discussed conditions which have not been described in the medical literature illustrating these with case presentations from his practice. Among the more interesting were injuries associated with playing handball. In a non-judgmental and direct manner he emphasised the importance of preventative medicine and education of gay patients. Many questions from psychiatrists in the audience suggested that the chair and the couch do confer immunity to ano-rectal problems.

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vital signs

In its issue of May 21, 1979, *People* magazine ran an illustrated article entitled "Psychiatrist David Kessler Comes 'Out of the Medicine Cabinet' to Organize a Gay Doctors' Movement". Following the appearance of the article, Dave was interviewed on radio talk shows in Miami, New York, Atlanta, and Vancouver, and was also a guest on a TV show in Cleveland.

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In the first two columns of this three-part series, I tried to describe how we all have absorbed anti-gay attitudes, and what the effects of this self-rejection can be. Now I would like to offer some thoughts about how we can stop hating ourselves.

Many gay people are only too painfully aware of their discomfort about being gay, but others have become very ingenious at concealing this negative inner "program" from themselves. They claim to have escaped anti-gay conditioning, but, unfortunately, this is rarely the case. In gay consciousness-raising groups, for example, multiple layers of shame and guilt are often revealed.

There are some tell-tale clues that are worth paying attention to: when we put down "those" gay people for being X, Y, or Z, and therefore unacceptable, what are we revealing about having brought into society's standards for being a "respectable" gay? Have we become the gay equivalent of Uncle Tom when we permit ourselves, our lovers, and our friends to be dealt with in ways that compare unfavorably with the treatment accorded to non-gays?

And when we convince ourselves that we can't possibly "come out" any further, how much of our rationale is based on realistic vulnerability and how much on our deep-seated belief that to be openly gay means being someone who is defective and justifiably shunned by others?

When we have begun to recognize the reservoir of anti-gay prejudice inside ourselves, the ways this reservoir got established, and the destructive consequences it has on our current lives, we can determine to do something about it.

We can start asking ourselves what there is to be ashamed of and what there is to be afraid of. We can decide

to stop finding fault endlessly with ourselves and our community. We can start to expect treatment as fully worthwhile human beings.

We can hunt for our "Roots" and come to experience "Gay Pride". In recent years there has been a veritable explosion of gay scholarship and publications, which has begun to define our past and present. We can give ourselves permission to explore gay history and gay culture, to find out about the record of accomplishment and oppression.

We can allow ourselves to participate more fully in activities and organizations that help to promote the recognition of gay people as entitled to full human rights. Our enemies are aware of the consequences. They loudly inveigh against gay activist groups because they "seduce" us into believing that we are not "sick" and in need of "cure".

We can look for further areas in our lives in which we can "come out", and thereby steadily reduce the burden of leading a double existence, hiding major parts of ourselves from our relatives and associates.

At this time, when we celebrate Harvey Milk's birthday and observe the tenth anniversary of the Stonewall uprising, it is important for us to gain courage from those examples, we need no longer remain silent. As individuals and joined together in groups, we have the power to change the quality of our lives.

*Dave Kessler,
President*

Upcoming Events

- Tuesday, June 5 Bill Garrard, M.D., will speak at the medical staff conference at Kaiser Hospital, San Francisco
12 noon
- Tuesday, June 12 "WE ARE FAMILY" Benefit for California Human Rights Advocates at the I-Beam, 1748 Haight Street, San Francisco
7-11 pm
- Sunday, June 17 BAPHR General Meeting, San Francisco Medical Society
7 pm
- Sunday, June 24 GAY FREEDOM DAY
- Thursday, June 28. 10th Anniversary of STONEWALL

"WE ARE FAMILY" BAPHR to Co-Sponsor Benefit for California Human Rights Advocates

California Human Rights Advocates (CHRA) will be the beneficiary of a "We Are Family" disco fund-raiser, co-sponsored by BAPHR and several other local organizations. It will be held at the I-Beam on Haight Street on Tuesday, June 12, from 7 to 11 pm

Admission will be \$10 with a buffet and no-host bar included. Tickets may be purchased in advance through Myles Lippe, M.D., 431-0382 (home) or 621-4228 (office). Tickets will also be available at various locations in the city and at the door.

"We Are Family" T-shirts will be sold to benefit CHRA. Surprise gifts, raffles, and door prizes will also be a part of the festivities.

California Human Rights Advocates, the gay lobbying group in Sacramento, is in need of financial support in order to maintain the political gay voice in California state legislation in the near future. Important homosexual anti-discrimination bills are pending in the state legislature and the strong gay lobby provided by CHRA is critical to the political future of our community.

Mark June 12 on your calendar for the "We Are Family" benefit, and come join your friends at the I-Beam that night.

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MEMBERSHIPS MUST BE RENEWED IN LATE JUNE

Letters will be mailed on June 16 to all BAPHR members and patrons along with membership application/renewal forms for the academic year 1979-80. These must be returned by June 30 to guarantee that you will continue to receive BAPHRON and other mailings without interruption.

If you plan to be away from June 16 through June 30, please notify Bill Owen at (415) 673-3189 as soon as possible so that the renewal form can be sent to you before you leave.

AMSA SPRING WORKSHOP

In conjunction with an American Medical Students Association (AMSA) spring workshop, several UCSF medical students and BAPHR members will present a workshop entitled "Dealing Sensitively with the Gay Patient". The program will include short autobiographical presentations by a lesbian and gay male medical student, followed by question and answer period and small group role-playing focused on interview scenarios involving gay client encounters with health care providers. The workshop will be held Sunday, June 3 from 9 to 10:30 a.m. in room HSW 302 at UCSF Medical School.

SEXUALLY TRANSMITTED DISEASES IN GAYS TO BE DISCUSSED IN CHICAGO IN JUNE

The Section of Infectious Disease at the University of Chicago and the Howard Brown Memorial Clinic will be presenting a conference, *Current Aspects of Sexually Transmitted Diseases*, in Chicago on Friday, June 22 and Saturday, June 23, 1979.

The conference will provide leading researchers and clinical practitioners an opportunity to discuss current diagnostic, therapeutic and epidemiologic aspects of venereal diseases, with the focus on sexually transmitted diseases (STD's) in gay people. The symposium will also serve as a forum for the presentation of recent research findings and for the formulation of future research directions and goals.

The sessions are planned to allow approximately 40% of the time for discussion of the data and future directions of research in the area presented. The topics being considered include current aspects of gonorrhea diagnosis and treatment, parasitic infections, herpes, chlamydial infections, hepatitis and health care priorities for STD research and treatment. Speakers include noted researchers such as Wolf Szmunes and King Holmes, who will present the keynote address, "Future Directions in STD Research in Gay Men". Conference attendees are also invited to submit additional reports.

The registration fee for the conference is \$25 which includes a luncheon and cocktail reception. The conference will be held at the Midland Hotel and accommodations are available there at a room rate of \$35 per night for a single, \$42 per day for a double. For additional information contact Bill Owen, c/o BAPHR.

the **BAPHRON**



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 7

July 1, 1979

Let's Make a Wish and Blow Out the Candles

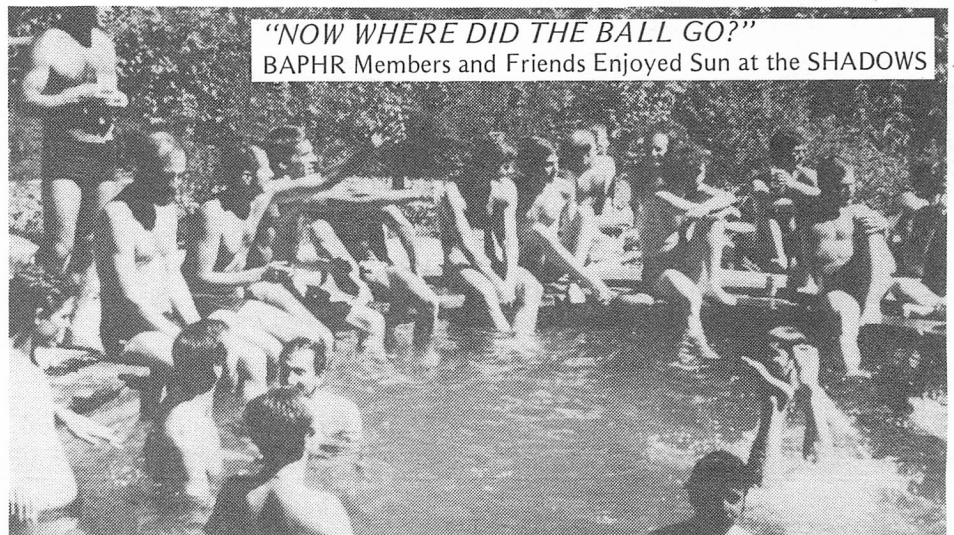
BAPHR's Happy 2nd Birthday

BAPHR's second anniversary is certainly an occasion to celebrate. A year ago, BAPHR had just come out publicly as an organization in the Gay Freedom Day Parade in San Francisco. This year, not only has BAPHR represented itself with a large number of members and friends marching in the Gay Parade, but we have also been involved in many significant events in the gay community and medical profession throughout the country.

Of interest and of no less significance are the roots of our organization.

The first association of gay medical students was the Gay Medical Students Alliance founded in New York City in 1972 (Medical World News 1974 Jan 25:41-52). The second such group was the Chicago Gay Medical Students which was organized in 1973 (Ostrow DG, Shaskey DM. Sex Transm Dis 1977; 4:53-5). Gay caucuses of the American Public Health Association and the American Psychiatric Association were started in 1975.

In early 1976 informal social groups of gay physicians and medical students, notably the Denver Gay Physicians and the California Lesbian Physician Association (CALPHA) also began to meet. These groups have remained informal, however, in that they neither registered their names with local governmental agencies nor developed bylaws.



"NOW WHERE DID THE BALL GO?"
BAPHR Members and Friends Enjoyed Sun at the SHADOWS

In late 1976 Paul Paroski and Bill Siroty founded the Gay People in Medicine (GPIM) committee of the American Medical Student Association (AMSA) (Coste C. The New Physician 1977 Apr:30-3). Because of its broader scope than any gay health association heretofore or subsequently, GPIM is recognized as the first group of gay health workers in the U.S., since from its inception GPIM has not restricted its membership to one health profession or specialty.

continued page 45

BAPHR ATTAINS TAX-EXEMPT STATUS

As this issue goes to press, BAPHR has received official notification from the Internal Revenue Service that its application for tax-exempt status has been approved.

The practical significance and implications of this status will be discussed in next month's BAPHRON.

Featured Guest at July Dinner Meeting

The cliché in the television industry is that everything stops while viewers rush back home so as not to miss a single episode of *Mary Hartman* or *I Love Lucy* or Milton Berle or whatever the latest rage of the season might be.

In San Francisco the opposite happened. People rushed out of their house and away from their TV sets to wait for, of all things, the early edition of the San Francisco *Chronicle* to hit the stands.

For a couple of years—1976-1977—they were standing in line for a daily serial in the *Chronicle* called "Tales of the City" written by Armistead Maupin.

Using fictional characters but placing them in real-life places and situations, the Maupin serial sprinkled "Tales of the City" with insights into new life styles from how to pick-up a date in a gay bar to the recipe for an herbal facial.

The first year's columns have now been rewritten for book form and "Tales of the City" by Armistead Maupin (\$5.95, paperbound) will be published by Harper & Row on August 23, 1979.

The book will be launched on publication day with a party at the Come Clean Center laundromat where, faithful readers will remember, Brian, the macho type from Mrs. Madrigal's rooming house, met Connie, the stewardess from United, by using the classic pick-up line, "Could you tell me the difference between Downy and Cheer?"

For months after the column started readers were trying to find out who Armistead Maupin was. Most believed it was a pseudonym for a well-known, long time San Francisco resident who knew so much about the inner workings of the city that he wanted to keep his identity secret. Other guesses ranged from a society matron to a fifty-five year old drag queen to a recluse who had his copy delivered to the paper by messenger.

Armistead Maupin, though, is a real person and the reason he knows so much about San Francisco is that he, like many of the people in his book, came from elsewhere (he grew up in Raleigh, North Carolina), fell in love with a town, and got to know every part of it. He describes one of his "typical" nights as roaming around

Armistead Maupin

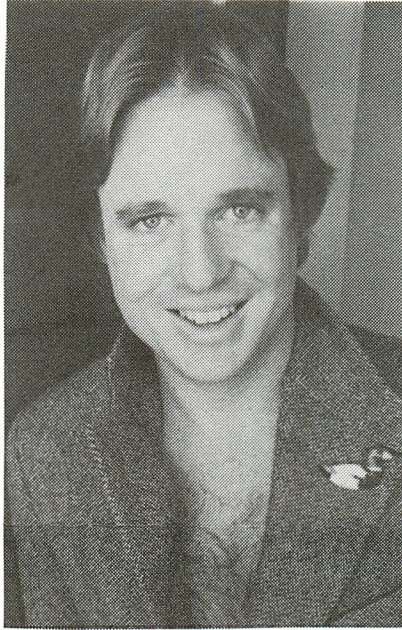


Photo Credit: Kate Kline May

the city, going from Episcopal church services to a garage sale given to benefit a transsexual who needed a breast lift.

After several jobs in San Francisco, Mr. Maupin became an associate editor on the Pacific Sun, a weekly in Mill Valley, California, and it was there that he wrote five episodes of a serial. After the paper suspended its San Francisco edition and Mr. Maupin had moved on to another job, the Pacific Sun serial was taken over by Cyra MacFadden who turned her weekly chapters into a best selling book, "The Serial."

Mr. Maupin, meanwhile, went to work for the *Chronicle* and suggested to them that he carry on the same sort of serial he had been writing for the suburban paper. But, instead of weekly installments, this time they would appear five times a week. "Tales of the City" first appeared on May 24, 1976.

In the beginning, each episode took Mr. Maupin almost five hours to write. When it came to an end many months later he was averaging about an hour and half every day to put together the next installment.

"I draw on my own life as much as possible," he says, "often recreating whole incidents and conversations. I had no grand scheme in mind except to capture as clearly as possible the mammoth practical joke of urban life in the '70s."

A mention of a real place in "Tales of the City" fulfilled a press agent's dream. Out-of-the-way restaurants became raging tourist traps after they were named in the column. Residents learned new things about their own neighborhoods. One citizen was surprised to find that his local roller skating rink, where he had exercised for many years, was the cruisiest place in town—Wednesday nights were straight, Tuesday were gay.

A sex-oriented bath house earned a new lease on life and calls from bogus vice squad cops threatened a raid. During one false alarm, 20 naked patrons fled into a back alley until the all-clear sounded. Mr. Maupin was honored with a life-time pass.

A few readers of the paper were shocked and threatened a boycott. One prominent society figure started a multi-million dollar suit. But San Francisco being San Francisco, most of the town roared with glee and couldn't wait to turn to the last page of the front section to find out what happened next.

After he became famous, Armistead had to limit his party-going. He became bored with constant readers cornering him trying to find out where it was all going to end.

The Ringling Brothers had a "Maupin Night" at which Armistead was Ringmaster. He was Master-of-Ceremonies when 200,000 people gathered at Civic Center Plaza on Gay Pride Day. He has spoken to groups ranging from the Kiwanis Club to Gay Rap to the Jewish Community Center to the Navy Officer's Wives Club.

But perhaps the sincerest compliments were the imitators: the Des Moines *Tribune* carried the adventures of Probitry Prisswillow; in the Washington *Star* you could read about Baby Jill Sloane's adventures in the nation's capitol; The Chicago *Sun-Time's* "Bagtime" had a grocery boy as a hero; and the Boston *Globe* ended its series by having all the characters die from eating infected clams.

But the man who started it all, Armistead Maupin, had the final word. "I didn't write anything that didn't happen," he says. "God knows in San Francisco you don't have to make it up."

Warner Brothers has bought the option on both *Tales of the City* and *More Tales of the City* (to be published next February.)

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BAPHR Participates in Gay Police Recruitment

Jim Krajeski, M.D., has been participating in a community group which has been active in the recruitment of gay candidates for the San Francisco Police Department.

The Civil Service Commission has consulted with the group in the design of the oral portion of the police examination with a goal of eliminating any potential anti-homosexual bias.

The group has provided training programs aimed at assisting gay candidates in successfully completing the examination procedures. Jim has acted as a resource around medical and psychiatric issues and as a liaison with the police surgeon. He has also assisted in designing and presenting workshops for the gay candidates. It is anticipated that a number of gay individuals will be hired in the next few months by the police department.



Ric Andrews and Bob Hindi were among over 15 BAPHR members and many other paraprofessionals who stationed a first-aid area at Harvey Milk's Birthday Celebration on Castro Street in May. The celebration followed a night of violence in San Francisco stemming from a manslaughter verdict for Dan White, Harvey's assassin.

Happy Birthday

Continued from Cover Page

On Sunday, June 19, 1977, during the American Medical Association annual meeting in San Francisco, Paul Paroski met with ten other individuals at Bill Owen's apartment to present the idea of forming a local support group for GPIM in San Francisco.

The founding meeting of Bay Area Physicians for Human Rights, however, took place on Sunday, July 24, 1977, also at Bill Owen's apartment. This was attended by 17 physicians and medical students. It was at that meeting that the name of the organization which was ultimately adopted was first suggested (Minutes, Sunday, July 24, 1977 meeting). Bill presented the concept of having the organization become a local support group for GPIM. Other individuals suggested that we become a committee of a San Francisco based organization (e.g. the Pride Foundation). But throughout the discussions at that first meeting in July, at the August 18, 1977 task force meeting (forerunner of the present Executive Board) and subsequently, it was the opinion of most of us that we should remain an independent organization.

In September, 1977 we registered our organization's name at San Francisco City Hall, opened a Post Office Box, a bank account and subsequently developed our bylaws, all of which established BAPHR as a formal organization. Our bylaws state that membership is restricted to students in and graduates of approved medical schools. Thus BAPHR is, in fact, the first formal and independent organization of gay physicians and medical students in the U.S.

By continuing a close working relationship with other gay health organizations, we will strive to secure and maintain the human rights of members of all sexual minorities.

So make a wish, and let's blow out the candles. BAPHR's history has only begun.

progress notes

Thursday, June 14, was Flag Day.

On the previous afternoon Carl Hill, an English tourist, arrived at the San Francisco International Airport with his lover to cover the Gay Pride Week festivities for the *London Gay News*. He was spotted wearing a "Gay Pride" button, and when questioned by a U.S. Immigration Service official, admitted that he was gay. He was detained, threatened with immediate deportation, and finally released on condition that he appear at the U.S. Public Health Service Hospital to undergo psychiatric evaluation. This presumably would determine whether he was homosexual, a "psychopathic personality" and "sexual deviate", and thus subject to expulsion.

Out of all the outrageous aspects of the case, I would like to focus on one: the attempted use of psychiatric and psychologic personnel for political, discriminatory ends. Presumably the "evaluation" would be forced to conclude that Hill was homosexual, since he had already revealed that. (Would the USPNS doctors be willing to write a report that would challenge the established policies of the system, by, for example, pointing out that homosexuality is not a psychiatric disorder, and that "psychopathic personality" and "sexual deviate" are outmoded, discarded psychiatric terms?)

Happily, a few officials of the American Psychiatric Association expressed themselves as deploring the government actions in this matter, and even stronger statements were issued by some psychologists. As of now, because of the forceful legal interventions of Don Knutson of Gay Rights Advocates, and as a result of the glare of publicity, the Immigration Service seems content to delay any evaluation until the day that Hill is scheduled to fly back to London.

The image of psychiatrists potentially playing a part in a process that seeks to denigrate gay people on the basis of incorrect and outdated concepts is not a pleasant one. We rightly criticize the Soviet Union for its political use of psychiatry, but we need to be equally alert to the dangers of similar abuses here.

Upcoming Events

- Sunday, July 15 BAPHR Dinner Meeting
7 pm
- Tuesday, July 24. 2nd Anniversary—Founding of BAPHR
- Sunday, August 19 Castro Street Fair
- Fri.-Sat.-Sun., Sept. 14-16. BAPHR Weekend at Fife's (Marin County)

foramena

CLASSIFIED ADVERTISEMENTS/ ANNOUNCEMENTS

WANTED

Gay Brd. El. or Cert. Internist or fam. practitioner needed as associate in rapidly expanding medical practice with ambulatory & major critical care hospital aspects. Part-time or full-time. Requires profound sensitivity & concern for patient needs. Contact Robert C. Scott, M.D. 401 - 29th St., No. 206, Oakland, Ca. 94609. (415) 834-1950.

Medical resident needs roommate. 2 br vict flat in Haight. Rent \$200/mo. Avail 8/1/79. Call 564-0425.

In another related case in New Jersey, the Superior Court held that a public school teacher, who was contesting his removal from the classroom in 1972 when he was elected president of the New Jersey Gay Activist Alliance, must undergo psychiatric tests to determine his fitness to teach. The Court held, "with the supportive corroboration of two psychiatrists, that the teacher's actions in support of 'gay' rights displayed evidence of deviation from normal mental health which might affect his ability to teach, discipline and associate with students . . .!"

When these two cases are coupled with the recent psychiatric testimony in the Dan White trial, it would seem time for American psychiatry to clarify its ethical guidelines.

Dave Kessler, M.D.
President

GROUPS

Congregation Sha'ar Zahav, serving the Gay Jewish Community. Services and Oneg, Fridays 8:00 p.m. at Jewish Community Center, 3200 California Street, San Francisco. All welcome. Phone 626-3131.

Groups: Long term group of male psychiatrists (in existence for one year) looking for male psychiatrists who are interested in making a long term commitment to a peer group which meets every 2nd Tuesday to discuss personal issues. Those interested call Don Brown, M.D. (415) 540-2601.

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Vol. 1, No. 8

August 1, 1979

BAPHR GAINS EXECUTIVE CONSULTANT

On July 8, the Executive Committee agreed to contract with Jeff Richards for general consulting in the areas of organizational development and funding strategies on a short-term renewable basis. Richards, who had submitted a proposal for BAPHR's consideration at the request of David Kessler, will work on BAPHR's behalf on a fifty percent time basis.

Richards' previous experience includes work with the Venereal Disease Control Project, Gay Community Services Center, and the Los Angeles Free Clinic before coming to San Francisco. He was also instrumental in the 1976-77 VD Patient Education Project (a joint CDC/L.A. Department of Health Services effort), and was a founder of the L.A. Sex Information Helpline. In San Francisco, Jeff was training director of the Gay National Educational Switchboard.

Presently, Jeff's efforts include assistance to the BAPHR Secretary, the BAPHRON editor, and the Physician Referral Service. Other tasks are a "needs assessment" of the membership in regards to BAPHR, making recommendations towards a small support staff, and study of the feasibility and strategy for private and public monies for general operation and special projects.

"To say that BAPHR is in a unique, and I think promising, position is an understatement," said Richards. "Many factors make BAPHR the logical focus not only of medical and social interest, but a conduit for both members' expertise and possibly available monies to carry out significant

programs over those now offered, and to break new ground again."

Richards can be reached at (415) 861-5884 and is anticipating BAPHR members who have both general and specific concerns and input.



Myles Lippe (chairman, Support Committee) (L) and Jorge Werbin (R) show satisfaction with new BAPHR T-shirts with inscription "Closets Are Health Hazards."

BAPHR PHYSICIAN'S REFERRAL SERVICE EXPANDING

An important aspect of BAPHR community service is the Physician Referral Service. It is this helpful service that people in the community reach when they call the BAPHR telephone number (415) 673-3189.

Since the start of the program the volume of calls has been steadily increasing as more people learned of the BAPHR organization through news reports and our own outreach efforts.

Since the Gay Freedom Day Parade there has been an increase in the calls seeking referral. This is probably due to the information cards passed out at the BAPHR booth at Civic Center.

At present up to twenty calls are coming in every day, mostly seeking physicians in primary care.

The Referral Service is probably BAPHR's greatest community service effort and image builder in the community. The callers repeatedly express gratitude at having a great need finally fulfilled.

There are about fifty physicians who have requested listing on the BAPHR Referral Service. They represent most medical specialties and even medical-related areas such as dentistry and podiatry. More physicians are needed to broaden the service. There is an urgent need for more women physicians, particularly in primary care. The South Bay and Peninsula are virtually not represented and we receive a heavy volume of calls from people needing service in this area.

The basic listing is being revised now as a few more physicians have volunteered following the annual renewal effort. However, if you are not yet listed please call BAPHR now to volunteer. Revisions are made to the service all the time, and your help is needed.

It is gratifying for the physicians who handle the volunteer work of helping the callers to hear of the help BAPHR is providing through this service. Over and over, callers let us know that at long last they are able to frankly discuss their health concerns with a physician. Volunteers

to answer the referral telephone are always needed. Any Member physician who would like to help is urged to call Bill Kapla at the BAPHR number. An answering service or machine is necessary.

By next month's issue of the BAPHRON we expect to have a study ready on the services people are seeking and how well we are able to respond. We'll report on the number of physicians on the list in each geographic area and their specialties.

BAPHR again led professional groups in showing concern for the rights and welfare of gay people by standing up when it truly counted, and offering our help and support to the gay community.

Our hope is to extend our services to gay people in the Bay Area not only by participating in events like Gay Freedom Day, but also by planning and working at gay health fairs, upgrading VD services in San Francisco, and expanding our gay referral service. We hope the membership will continue to respond enthusiastically to other community projects. Not only does this provide support for our family of gay people, but also helps engender a feeling of warmth and solidarity within our own organization. Thanks so much to all of you for making Gay Freedom Day 1979 another successful and memorable time.



Recently elected BAPHR officers were among those participating in Gay Freedom Day festivities. (L to R: Bill Barnaby, Vice-President; Bill Owen, Secretary; Dave Kessler, President; Darryl Raszl, Treasurer).

U.S.P.H.S. Decides CASE CLOSED — CLOSET OPENS

The case of Carl Hill, a gay English citizen who was detained by the U.S. Immigration Service in San Francisco in June of this year, has taken a gay rights slant. Carl, who admitted he was gay to an Immigration official after being questioned about a "Gay Pride" button he was wearing, was subsequently detained and threatened with immediate deportation. He was released on the condition that he appear at the U.S. Public Health Service Hospital, an agency of H.E.W., to undergo psychiatric evaluation.

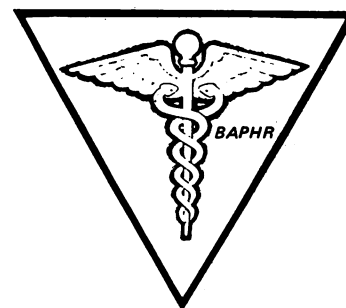
However, the U.S. Public Health Service is about to administer a *nation-wide policy* ordering its Medical Officers to discontinue providing psychiatric evaluations to individuals suspected by the Immigration Service of being homosexual.

Hill's case was brought to the Justice Department by Don Knutson of Gay Rights Advocates at the insistence of Deputy Assistant Attorney General Robert Reuch in keeping the previous anti-homosexual policy. The Justice Department, however, said that they had no say over H.E.W.'s policies, so it seems that Hill and other gay aliens will not be deported on the basis of their sexual preference.

The response to the case on the part of organized psychiatry was quite strong. Two past presidents and the president-elect of the American Psychiatric Association issued statements strongly critical of the action of the Immigration Service. A similar response was obtained from the American Psychological Association. Additionally, the consultant to the Ethics Committee from the Board of Trustees of the American Psychiatric Association stated that the case raises certain ethical issues and questions concerning the abuse of psychiatry.

On the local level, at the request of the Committee on Homosexuality, the Northern California Psychiatric Society adopted a position statement condemning the action of the Immigration Service and reaffirming the strong anti-discrimination position of the American Psychiatric Association. (NCPS also questioned the ethics of a psychiatrist participating in the proposed examination. They referred this question and the issue of the abuse of psychiatry to the APA for evaluation.) Dr. Mel Shabsin, Medical Director of the APA, was present at the NCPS Council meeting when the statement was unanimously adopted with not a word of dissent.

Drs. Dave Kessler and Jim Krajcski, who were both active in mobilizing the support of the psychiatric community, were very encouraged by the response of prominent persons within the American Psychiatric Association. Additionally, the response has had a significant impact on the legal standing of the case. Both Dave and Jim pointed out that the degree of support for the gay movement in national organizations should not be underestimated and that it may often only be necessary to mobilize and organize that support to accomplish significant changes.



BAPHR LAUDED FOR MONTEREY COUNTY TALK

The BAPHR Speakers Bureau has been answering requests for lecturers on the subject of gay medicine.

Dr. Wm. Kapla tackled an assignment in Monterey, speaking to a group of about 20 gay men. They were at a session organized by a mental health worker in Monterey County's Mental Health Association. As the Monterey Peninsula is somewhat conservative, there is no upfront gay physician to help the gay community. The County has even closed the local VD clinic and people have been driving to Salinas for help in this area. As a result of this condition, the group really appreciated the aid of BAPHR in filling a need for information.

The men have been participating in an ongoing workshop program to provide support and education for each other. They wanted BAPHR to help them learn more about gay health matters.

The group was intensely interested in finding out more about sexually transmitted diseases: how to recognize them, how to treat them, and what can be done to prevent them as well. The scheduled one-hour talk wound up as a three-hour discussion with everyone participating. During the evening they loosened up and asked the questions they had long wanted answered but had always been too inhibited to ask of their regular doctors.

A slide program was presented by Bill, graphically showing the symptoms. The group was receptive and appreciative of the effort BAPHR made to provide a speaker.

Since that talk the same group has made plans to expand the program through promotional efforts in gay-oriented businesses. They also plan to make an effort to reach interested servicemen at Fort Ord and students at local colleges. By September they expect to have about 100 people in the program and have asked Bill to return for a repeat of his talk.

Other members are asked to call BAPHR if they would be willing to join in the BAPHR outreach effort through the Speaker's Bureau.

THEN AND NOW — II

Some comparative aspects of medical practice: When but a stripling of a lad in 1920 or 21 after periodic bouts of quite severe cramping lower abdominal pain of twelve to fifteen hours duration for which my father treated me with cathartics (!) or enemata, although he was the dental surgeon at Letterman General Hospital and we lived on Officers' Row in the closest proximity to many of the Army's finest physicians whom, though they were close friends, he was loathe to call to see his son who had, in his uninformed opinion, only a common childhood digestive upset. He did so, however, after an unusually severe and lengthy episode, and I was immediately operated upon for a strangulated inguinal hernia—a harrowing experience in those days beginning with straight ether inhalation anesthesia. The initial most prominent postoperative symptom was dreadful thirst and fluid administration was then by the almost totally ineffective "Murphy Drip" (normal saline solution slowly dripped per rectal tube) and occasional permission to suck a moistened wash cloth. And all this torture had, in my case, to be endured by a frightened and ill 7 year old boy.

After a few days fluids per os were mercifully permitted, but post herniorrhaphy treatment then required three weeks of absolute bed rest inasmuch as it was universally accepted that earlier ambulation jeopardized all sutures!

Naturally many surgical patients, especially in the older age group, succumbed to hypostatic pneumonia despite the "pneumonia jackets" which were routinely ordered to be worn for about two weeks postoperatively. CO₂ inhalations and frequent turning of patients had not yet been introduced.

Although longest, I think, for herniorrhaphies, this lengthy post-op period of bed rest was enforced as well in the case of other surgery for the same spurious reason, and fluid administration, such as it was, was the same.

The few paragraphs above bring to mind the subject of pneumonia—specifically lobar pneumonia of which the mortality was formerly very considerable. Prior to the advent of the

chemo-therapeutic agents (first sulfonilamide followed soon by the less toxic and more effective sulfathiazole) and the antibiotics which occurred respectively during my senior year at U.C. Medical School (then only in San Francisco) and internship at S.F. General, each case of pneumonia was a major and difficult medical problem. First the etiologic organism had to be typed in the sputum, and there are twenty-eight different strains of pathogenic pneumococci. The appropriate antibodies in a horse serum vaccine were then injected, often resulting in severe, at times even fatal, allergic reactions causing, in any case, as much as or more suffering than the pneumonia.

I hope to be spared long enough to share with you recollections of other medical matters in bygone times, notably the now truly shocking methods of handling venereal diseases which I shall, next time—if there is one—discuss, and of American gay life in the 30's and 40's when it was as *sub rosa* as you can get!

J. Rex Bumham, M.D.

THE RELATIONSHIP BETWEEN HOMOSEXUALITY AND ENDOCRINE/GENETIC FACTORS IN MALE HUMANS

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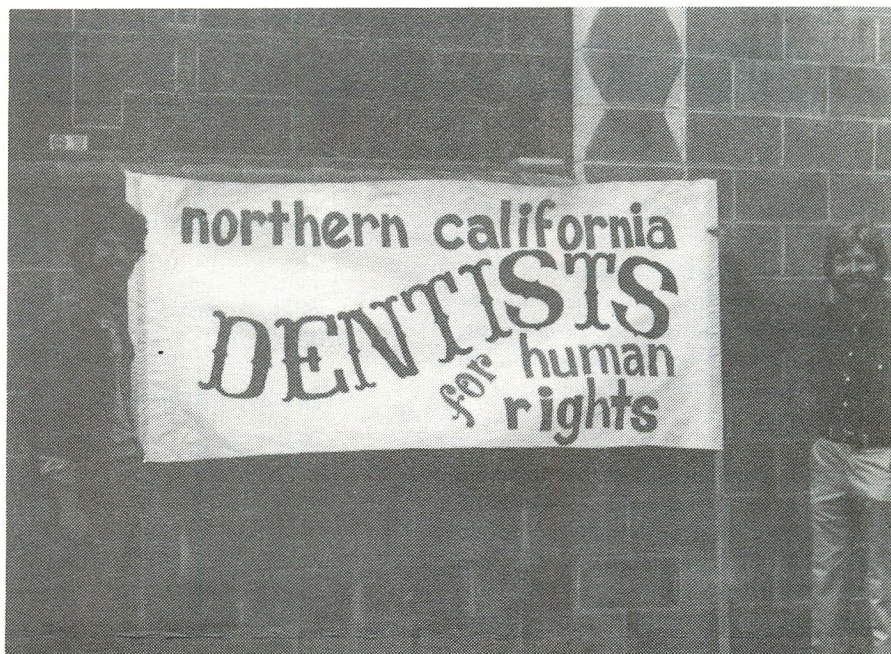
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Gay Freedom Day, Sunday, June 24, dawned and remained a rather gray, windy San Francisco summer day, but even chill winds failed to lessen the spirit of the tens of thousands of gay people who came to declare to the world that "our time has come." Although the size of the crowd was smaller than last year, BAPHR's contingent in the parade swelled to a total of 191 members and friends. For many it was their first participation in a quite public gay demonstration and their first declaration to the world that gay people are indeed everywhere, including the medical profession.



Many members of the Northern California Dentists for Human Rights marched in the Gay Freedom Day Parade along with other groups of medical providers.

Our Time Has Come

A few brave and enthusiastic souls endured the early morning chill to meet near Spear and Folsom Streets at the somewhat unspeakable hour of 10 a.m. Huddled together sipping hot coffee, this dedicated little band was gradually joined by other members sporting their BAPHR "Closets are health hazards" t-shirts. At 11 a.m. about one hundred of our faithful group began the march to the Civic Center leading other health profession groups such as the Bay Area Gay Dentists, gay psychotherapists, and health workers from San Francisco General Hospital. We were placed conspicuously near the front of the parade along with groups determinedly middle class such as the Golden Gate Business Association, as well as groups on the fringe, represented by "Dykes on Bikes" and "Bay Area Lesbian Witches." For us the march was another "high" rivaling last year's parade with our group receiving constant enthusiastic applause from our gay brothers and sisters all along the parade route.

BAPHR's contingent continued to grow as we proceeded up Market, finally reaching nearly 200 members and friends. We even managed to inadvertently recruit a drag queen or two along the way.

Sometime during the early afternoon our chilled, but still enthusiastic, group arrived at the BAPHR booth in front of the San Francisco Public Library. There many refreshed themselves with California's finest wines and stayed to talk with passers-by, dispense medical information on gay related health problems, and generally to be highly visible to our gay "family." We even managed to recruit a few new gay voters for the November election. No other group at the fair except BAPHR provided this service. In spite of the unfavorable weather more people visited our booth this year than last, with most interest being expressed in locating competent gay primary care physicians. As expected, we received a large number of inquiries about the

Kaiser Health Care Plan. Our difficulty thus far in providing an adequate referral list of gay physicians in that plan has been a source of frustration for some time.

In addition to serving at our booth, several members, organized in the nick of time by Ric Andrews, also provided first aid services at the aid stations in the Civic Center. Working closely with the Gay Health Workers, we fortunately were forced to handle nothing more serious than a few cuts, abrasions, and an occasional mild drug overdose.

A special expression of gratitude must go to Jerry Strong, George Riley, and Howard Goldman, who came out at a completely uncivilized hour on Sunday morning to assemble the booth and to greet the early arrivals at the fair. We also want to thank the many women and men who helped carry the BAPHR banner, and who labored at the booth all afternoon, many well beyond their scheduled time.

NOTICE

Upcoming Events

* * * * *

For those BAPHR members and patrons who have not renewed your membership for the 1979-80 year, we encourage you to please send in your renewal form and dues as soon as possible.

An updated mailing list of members and patrons who will receive the BAPHRON is currently being compiled and will be completed within two weeks, and we want to ensure your continuing monthly issue of BAPHRON.

* * * * *

Sunday, August 19 Castro Street Fair — BAPHR Booth (see details in this issue).

Sunday, August 19 BAPHR General Meeting (see details in Committee and Meetings Section).
7:00 p.m.

Thursday, September 6. Alice B. Toklas Memorial Democratic Club invites BAPHR members and patrons to their 2nd Annual Awards Dinner to be held at the Sheraton Palace Hotel in San Francisco. Cocktails at 6:30; dinner at 8:00. Individual tickets are \$25. For further information please contact Frank Fitch (day — 543-6345; night — 861-4881) or Cappi Patterson (431-1898).

Friday—Saturday—Sunday, September 14-16: BAPHR Weekend at Fife's, Guerneville, Sonoma County (see details in this issue).

Foramina

CLASSIFIED ADVERTISEMENTS/ ANNOUNCEMENTS

EMPLOYMENT WANTED

37 y.o. physician desires associate general medical practice. Adolescent-young adult medicine, areas of interest; also experienced in E.R., ophthalmology, and radiology. Write: 1817 Fairmont Drive, Tuscaloosa, Alabama 35405.

CERTIFIED HOME HEALTH CARE AIDE seeks clients . . . (particular interest in terminally ill). ALLEN KLEIN 431-1913.

SERVICES

Designer's Optics is now open to provide the community with fashion eye wear and contact lenses at 2324 Market Street (near Castro). We sincerely request any of our fellow members who would be interested in our services to call us at 431-4890, or to drop by and discuss any special needs he/she may have.

ROOMMATE WANTED

UC MED RESEARCH ASSOC SEEKS ROOMMATE TO SHARE PRESENT 2 BDR APARTMENT (LOCATED NEAR PRESIDIO GATE) OR OTHER MODERATE COST ARRANGEMENT IN SAN FRANCISCO. CALL DAVID (415) 921-3560.

GROUPS

Congregation Sha'ar Zahav, serving the Gay Jewish Community. Services and Oneg, Fridays 8:00 p.m. at Jewish Community Center, 3200 California Street, San Francisco. All welcome. Phone 626-3131.

The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

All material for publication must be clearly typed, and include an address or phone number for respondents. Material submitted will be printed at the discretion of the Editor. The deadline for receiving material for publication will be the 18th of each month for inclusion in the following month's issue.

Payment should be made by check payable to: Bay Area Physicians for Human Rights, and mailed with the advertisement to the following address: Classifieds, c/o The Baphron, P.O. Box 14546, San Francisco, Ca. 94114.

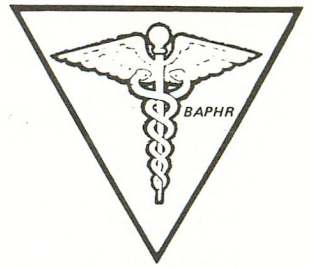
The acceptance of advertising does not in any way constitute endorsement or approval by BAPHR or the BAPHRON of any advertised service or product.

APA Organizing Media Response

It was learned that the American Psychiatric Association will respond to misleading or inaccurate statements concerning psychiatric aspects of homosexuality.

Jim Krajewski discussed the matter with the Assistant Director of Public Affairs for the APA who indicated that in the past the APA has responded to misleading statements in magazines such as *TIME*. An example of an article to which the APA could respond would be one which suggests that homosexuality is a psychological disorder. It would be helpful for individuals to send copies of misleading articles to the APA with an indication of the issue involved to which they should respond. Material should be mailed to Ron McMillen, Assistant Director of Public Affairs, American Psychiatric Association, 1700 Eighteenth Street, N.W., Washington, D.C. 20009.

the **BAPHRON**



Bay Area Physicians for Human Rights Official Newsletter
Vol. 1 No. 9

September 1, 1979



Never, for the sake of Peace and Quiet,
Deny Your Own Experience or Convictions

—D. Hammarskjold

journal club

THEN AND NOW — III

Further comparative aspects of medical practice: *Venereal Diseases*. Quite apart from the shameful stigma occasioned by these epidemics (for such in effect is what they were and are) I, at least, cannot but shudder when contemplating the devastating regimens of treatment we formerly imposed on these sufferers, particularly in the case of lues and gonorrhoea. For other V.D. (i.e. yaws, granuloma inguinale, lymphopathia venereum, and venereal warts or herpes) the methods were far less heroic than for the first mentioned and most widespread offenders—and I feel the word “heroic” is here advisedly employed, for I always felt profound sympathy for these patients and respect for their heroism in returning week after week, month after month, and in the case of even early syphilis, year after year for the treatments which ranged from relatively mild to severe discomfort, to exfoliative dermatitis, and even rarely to death.

The situations described above and the treatments outlined below, I need hardly say, were those in effect prior to the merciful advent of the chemotherapeutic agents during my senior year at U.C. Medical School, and of the antibiotics during my internship at S.F. General Hospital.

Early, secondary, early or late latent SYPHILIS: 6 weeks of an intravenous arsenical (arsphenamine (Doctor Ehrlich's 606), neoarsphenamine, or mapharsen) administered by third year medical students at night at the U.C. Clinics Bldg. Extravasation of the least amount of the arsenical caused immediate severe pain and early erythema and swelling, usually requiring morphine and hot packs for relief.

These six weeks of arsenic were followed at once by eight weeks of bismuth intragluteally after which the same arsenical-bismuth program was resumed for a minimum of two years! (There were, I seem to recall, 2 or 3 7-14 day intervals of treatment-free rest during those 2 years.)

There was either no fee or a very nominal one for attendance at these

weekly clinics, and obviously the patients constituted all types and most strata of society. I was only twenty-three then, and always unprofessionally surprised to see in the line of ladies awaiting their bismuth with their dresses hiked up baring their buttocks so many sweet looking ones who reminded me of my mother or grandmother.

For G.P.I. or tertiary syphilis: The torment of hyper-thermia which never failed to remind me of some of the less commendable procedures of the Spanish Inquisition.

The unfortunate patient was placed in a tightly sealed casket-like cylinder somewhat similar to a Drinker Respiration with only the head protruding to the outside through a snugly fitted foam rubber collar.

He or she was swathed in a sheet and several blankets, and the interior of the coffin (which it indeed sometimes became) had batteries of high wattage electric bulbs. The prescribed treatment therein was to raise the patient's temperature to 107-degrees and maintain it at that level for eleven hours! (And I, even in a cool room, enter into a most unpleasant delirium at any time when I reach even 102-degrees.) Of course a nurse was in constant attendance to sponge the patient's face (big deal), frequently administer fluids, and continually monitor the temperature. The tragedies which were none too rare occurred of course when the brain's temperature regulating mechanism lost its governing function, and despite all attempts to halt the mounting temperature, it continued to soar to a fatal conclusion.

The undependability and general inefficacy of this rather barbarous procedure always reminded me a little (albeit in a different context) of that damned Murphy Drip to which I referred to in an earlier issue, insofar as providing for a patient's comfort and well being is concerned.

Of course it can be argued that, in a way, the patients selected were already, in a fashion, in extremis, and that we really then had nothing better to offer. The best that could be expected of the survivors was not, of course, regeneration of irreparably

damaged cerebro-spinal tissues, but cessation of further advance of their destruction after the patients were returned to a State Hospital or analogous facility.

Well, this *has* really been a depressing look into the past. Next time Gonorrhoea which, if not fun and certainly no picnic—I refer to its former treatment, not its acquisition—was at any rate significantly less harrowing in most instances, though not in all.

J. Rex Burnham, M.D.

HEPATITIS IN GAY MEN TO BE TOPIC OF N.Y. CONVENTION

A scientific session entitled “Endemic Hepatitis in the Gay Male Population” will be presented at the annual American Public Health Association (APHA) meeting in November. The convention, to be held this year in New York City from November 4 through November 8, will be the 107th for the APHA.

The session on hepatitis in homosexual men, scheduled for Tuesday, November 6, 1979 from 8:30 to 10:00 a.m., is co-sponsored by the Medical Care, Laboratory, and Epidemiology sections of the APHA, the American Venereal Disease Association, and the Gay Public Health Workers.

Two papers will be presented. “Hepatitis B in Male Homosexuals” is a study of the prevalence and incidence of hepatitis B infection among male homosexuals in five U.S. cities, including San Francisco. “Hepatitis B Vaccine on the Horizon” is a report about the two large-scale double blind trials now underway on populations of gay men in several U.S. communities.

A panel of gay health professionals will address the issues raised by the two presentations. The coordinators of the Gay Public Health Workers have invited interested members of BAPHR to sit on this panel. For further information, contact Bill Owen, M.D., c/o BAPHR, prior to September 1.

progress notes

In the last several weeks two inter-related events occurred which will have an important positive impact on BAPHR's future.

The first of these was notification by the Internal Revenue Service on June 21 that we had been granted tax-exempt status. We had filed for this some time ago, and were eagerly awaiting word about approval.

Several immediate benefits will accrue to us as a consequence. Our mailing, if sorted appropriately, can now be sent at reduced rate — no small matter considering postal costs these days and BAPHR's very limited budget. Also, members can now deduct from their taxes what they pay for dues, dinner meetings, and other expenses related to participation in BAPHR's professional projects.

We have asked to be included under the lobbying provision of the IRS Code, which would allow BAPHR to "carry on propaganda or otherwise attempt to influence legislation" up to about 25% of its overall activities. BAPHR is prohibited from "participating in any political campaign on behalf of any candidate for public office", but, of course, this would not

preclude individual members from actively supporting nominees of their choice.

Being tax-exempt should make it much more feasible for us to receive substantial contributions, grants, and bequests from a variety of sources. Increased, stable revenue seems essential if BAPHR is to move forward, or even to continue to carry out its current commitments.

BAPHR has grown very rapidly in its two years of existence and has already exerted a tremendous influence. Enthusiasm and morale have been high, and members have been willing to volunteer their precious free time to the nuts and bolts jobs, such as sending out our mailings, putting out the Newsletter, and coordinating our Physician Referral Service.

Without this sacrifice, BAPHR could not have succeeded. However, it is unrealistic and unfair to expect already overworked physicians to contribute their energy indefinitely toward maintaining all of BAPHR's administrative and substantive work. "Burn-out" is now being experienced, and no wonder. We cannot maintain

the pace of the last two years with our present structure. Not only will we be unable to advance but cut-backs in our service will be inevitable.

What to do? An idea which evolved, and was approved in principle at a recent General Meeting, was that BAPHR explore ways of acquiring salaried executive and support staff, and the money to pay them.

And this brings me to the second of the significant events mentioned at the outset.

BAPHR has decided to hire a consultant to help with organizational planning and development. He is Jeff Richards, who has impressive professional experience and personal characteristics. He has agreed to work with us, on a temporary and part-time basis in assessing our present personnel, office space and other administrative needs. He also is being asked to help us find ways to subsidize current BAPHR projects, and to advise us on funding for a whole range of potential future undertakings. We welcome his participation, and hope that many of you will have the opportunity to meet with him.

These two developments are moving us into an exciting and necessary phase of consolidation and growth, out of which will emerge an even stronger, more productive BAPHR.

David Kessler, President

Executive Consultant Reports Possible Directions

At the August, 1979, General Meeting, recently hired Executive Consultant Jeff Richards gave a brief summary of his analysis of BAPHR's current outlook. Initially, Richards made a distinction between immediate concerns and BAPHR's long range planning and potentials. He noted that because the bulk of the current budget is devoted to production of the BAPHRON, relatively few dollars are available with which to establish and maintain the consulting and secretarial time necessary to secure long term funding. Both Richards and the Executive Board feel that the BAPHRON and the Physician Referral Service are presently attractive candidates for external funding.

At the August 12, 1979 meeting of the Executive Board, Robert Hindi, M.D., and Richards were asked to develop a plan for non-member BAPHRON donor support from pharmaceutical companies, Bay Area busi-

nesses and professionals. Richards and Hindi pointed out that such donor support was especially important given the current need to centralize BAPHRON production with a single full-service firm with an increase in costs. This action will both free the Editor to concentrate on quality, develop new articles and oversee planning and policy, as well as lessen dependence on increasingly short volunteer member time.

Richards has urged a uniform and comprehensive collection of caller data as the first step in seeking funds for the Physician Referral Service. This action, in addition to the high visibility and community usefulness of the service, will make possible an approach to a variety of funding sources to meet present overhead costs and allow for future refinements in the program. An example would be development of educational materials as an adjunct to the high quality telephone referral and

counseling function.

Should the membership and Executive Board wish to pursue monies for educational and scientific projects making use of BAPHR's tax-exempt status, reputation and membership expertise, Richards said that grants may be sought in a variety of areas. However, he cautioned that few if any funding agencies other than private donors would give immediate funds for organizational operation or administrative overhead alone. In time, BAPHR can form an operations income from membership dues and donations, private donor gifts and the "indirect costs" provisions of grants received for specific projects. Immediately, however, BAPHR costs for consultant and secretary time will likely need to be met by outside BAPHRON support (thus freeing funds currently budgeted) or by deductible gifts from the membership and non-members.

THE BAPHRON is published monthly by Bay Area Physicians for Human Rights
 P.O. Box 14546
 San Francisco, California 94114
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All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. The writer's name will be omitted upon request. Letters will be published at the discretion of the editor.

The DEADLINE for submitting material to be printed in The BAPHRON will be the 18th of each month for publication in the following month's issue.

SUBSCRIPTIONS to The BAPHRON may be obtained by non-BAPHR members for \$12 per year (12 issues). Make checks payable to BAPHR, and send to: The BAPHRON, P.O. Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletter should be mailed.

Upcoming Events

Thursday, September 6. . . . Alice B. Toklas Memorial Democratic Club invites BAPHR members and patrons to their 2nd Annual Awards Dinner to be held at the Sheraton Palace Hotel in San Francisco. Cocktails at 6:30; dinner at 8:00. Individual tickets are \$25. For further information please contact Frank Fitch (day – 543-6345; night – 861-4881) or Cappi Patterson at 431-1898.

September 14-16. BAPHR Weekend at Fife's, Guerneville, Sonoma County. (Call 431-0382 or 431-7681 for details).

October 28-30 AMSA/GPIM Fall Workshop – Region X (Friday–Sunday) (Western U.S.), U.C.S.F.

Foramina

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 Resume: 497-7512 (W) / 964-6593 (H).

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Jewish Gay High Holidays. Congregation Sha'ar Zahav. Phone 626-3131 for information. Celebrate with us.

The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

All material for publication must be clearly typed, and include an address or phone number for respondents. Material submitted will be printed at the discretion of the Editor. The deadline for receiving material for publication will be the 18th of each month for inclusion in the following month's issue.

Payment should be made by check payable to: Bay Area Physicians for Human Rights, and mailed with the advertisement to the following address: Classifieds, c/o The Baphron, P.O. Box 14546, San Francisco, Ca. 94114.

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the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 10

October 1, 1979



BAPHR Task Force Calls on S.F. City Clinic

Five members of BAPHR's Social Concerns Committee made a site visit to San Francisco's City Clinic during August to learn more specifics of the clinic's operation. The clinic, located at 250 Fourth Street, is San Francisco's public health venereal disease testing, treatment and epidemiology center.

Meeting with Michael Sands, MD, PhD, Clinic Medical Director, the committee members spent several hours asking questions about clinic procedures, funding, overall philosophy and referrals. Dr. Sands also lead the group on a brief tour of the facilities.

Initially, Dr. Sands gave basic statistical information. The clinic currently has in excess of 75,000 patient visits yearly; testing and treatment for gonorrhea and syphilis is available without charge to clinic patients. Routine VD testing offered to non-symptomatic gay men includes a VDRL serologic test for syphilis and a rectal culture only for gonorrhea. Routine urethral and pharyngeal cultures are not currently offered for screening. Males presenting with a urethral discharge receive a Gram

stain on the premises and a culture for confirmation. Dark field microscopic examination of suspicious lesions for *T. pallidum* is also available. At this time, City Clinic is offering hepatitis B antigen and antibody testing on request as part of a Center for Disease Control hepatitis B immune globulin study. Other sexually transmitted diseases (i.e., venereal warts, trichomonas, herpes) may be diagnosed or treated at the discretion of the attending physician and within the capabilities of the facility. According to Dr. Sands, informal referrals or consultations to private physicians or other health care specialists are made for diagnosis and treatment of enteric diseases or when other gynecologic or proctologic treatments are necessary.

The clinic has attracted national attention because of the large percentage of gay male clients in the clinic's population. For this reason several studies have been conducted at the clinic. A specialist in infectious diseases, Dr. Sands recently conducted his own study for the treatment of rectal gonorrhea, and subsequently routinely uses ampicillin (7 grams p.o.) in one dose, taken with probenecid in preference to APPG.

Dr. Sands also cited a small but significant cost savings as a factor in his revised treatment of rectal GC.

Funding for the clinic comes from a variety of sources, Dr. Sands explained. Testing and treatment funds are primarily city/county and state-supported functions, while casefinding is largely provided by USPHS employees and direct funds. Dr. Sands impressed upon the BAPHR visitors the financial limitations with which he operates. Because of Proposition 13-imposed cutbacks in local funding, he does not project any future funding increase to handle an increase in patient visits or to expand the range of services. Additionally, Dr. Sands does not presently foresee use of physician assistants or nurse practitioners in the clinical setting due to city Civil Service limitations. He does expect to continue to apply for special studies funds, however.

The BAPHR Social Concerns Committee met later to discuss impressions from the visit. The committee has developed a task force approach, and is looking further into the public health aspects of sexually transmitted diseases in the city's gay population. □

BAPHR Eligible for United Way Contributions

In discussions with United Way in San Francisco, Executive Consultant Jeff Richards has learned that *BAPHR* meets the criteria for that agency's "Donor Option" plan. During United Way's annual drive, now in progress, *BAPHR* will receive earmarked donations when donors request and complete a special Donor Option Pledge Card from United Way and specify *BAPHR* as recipient of the pledged donation.

It had earlier been found by Bill Owen, MD, *BAPHR* Secretary, that the organization meets the four criteria of the special program: operation in the state of California, tax-exempt agency status under IRS Section 501 (c)(3), provision of human services, and a volunteer Board of Directors.

"Members and friends of *BAPHR* can now pledge part or all of their United Way contribution to *BAPHR*," said Richards. "This could be an important means of financial support for *BAPHR*'s community projects and help to cover on-going organizational costs. This is a step separate from seeking to become a member agency of the United Way campaign."

Richards pointed out that at present the Pacific Center for Human Growth in Berkeley, which provides a range of services targeted to "sexual minorities", is an example of a member agency receiving several thousands of dollars annually for program support. He said the *BAPHR* Executive Board will be examining that option in the future.



Jeff Richards, *BAPHR* Executive Consultant.

BAPHR Booth Builds Health Awareness

Castro Street, perhaps the "gayest" street in the world, was host to the fifth annual Castro Street Fair on August 19th. *BAPHR* was again represented with a booth staffed by members who gave information on health matters, the *BAPHR* Physician Referral Service, and other *BAPHR* activities. This year the booth was shared by the Lesbian Health Workers who offered additional information on Lesbian health issues.

Located on 18th Street near Castro, the booth was also a convenient meeting and resting spot for *BAPHR* members enjoying the fair. Some then volunteered to help staff the booth and to relieve the hard working members behind the counter.

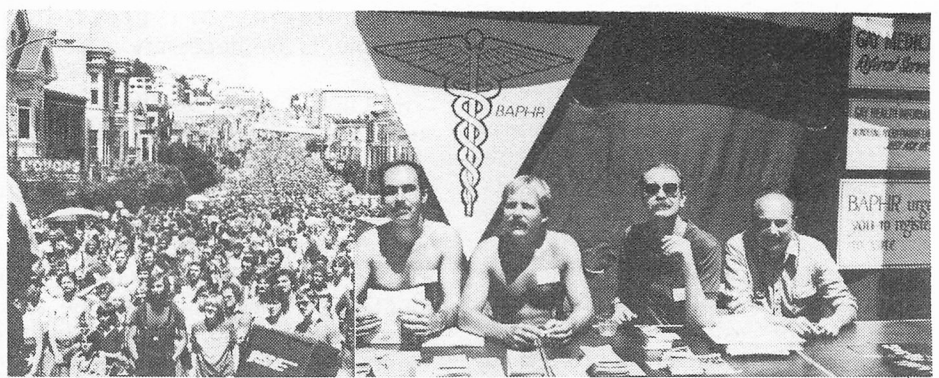
The location of the booth off the main street was at first disconcerting when it appeared that some of the fair visitors might miss it, but when the street became crowded with tens of thousands, this became an advantage—there was some space and quiet to talk with those who came by.

The ever-popular *BAPHR* buttons with the inscription, "Closets Are Health Hazards" were again available. Information sheets on sexually transmissible disease, the com-

mon and less common enteric diseases, and general health problems were also distributed.

The work involved in transporting the booth, setting it up, and taking it down was very considerable and our thanks go to all those who helped in this labor of love as well as those on the front lines.

Once again we enjoyed meeting, socializing, and providing health services to a major community event. □



BAPHR members staffing booth at Castro Street Fair (L to R): Dave Dassey, Bill Kapla, Jerry Strong, and Sam Thal.

po prn

A big welcome to BAPHR's new associates: Jeff Richards (Executive Consultant) and Mark DeWolfe (Secretarial Assistant). It is an enormous fortune for BAPHR to have acquired their talents to assist with a multitude of tasks and projects.

It brings to mind the call received several months ago by a Bay Area physician who was seeking information about the Physician Referral Service. Apparently after numerous attempts to reach us which were thwarted by busy signals or telephone answering devices, he did manage to get hold of a live voice on our end, to which he responded, "It is obvious that you need more girls in your of-

face." Well, doctor, we hope this resolves your problem (even though the office is still in the making).

For those of you who haven't heard, the BAPHR weekend at Fife's September 14-16 was spectacular! Over 60 BAPHR members and friends mingled with another 150 or so Fife's weekend guests to indulge in sunshine, pool play, disco dancing, enjoying quiet moods along the Russian River and under the stars, re-meeting old friends and socializing with new. An additional feature of the weekend was the involvement of San Francisco therapists Joe Brewer and Gary Walsh, who specialize in gay relationships. They co-lead 2 well-attended sessions in which many participants talked about personal feelings, awareness of being gay, and approaches to the conflicts and fears of coming out. We look forward to the next BAPHR social outing and hope even more of you can attend.

Congratulations to Stephen Lachs, a gay Los Angeles official appointed to the California Superior Court by Governor Jerry Brown. It is encouraging that an individual with such outstanding experience and qualifications was judged on merits and not sexual preference.

...And this is what the National March on Washington for Lesbian and Gay Rights is all about. To be held October 14, it also may be the first time that many people in this nation will hear about homosexuality since Anita Bryant's "coming out".

With much of the work in the monthly publication of the BAPHRON now being handled by Jeff and Mark, as well as the wonderful people at Lightning Press—Glenn, Sam and Jo—we will be spending more time obtaining information and articles on

Continued on page 62

Ralph K. Davies Medical Center To Expand Neighborhood Medical Services

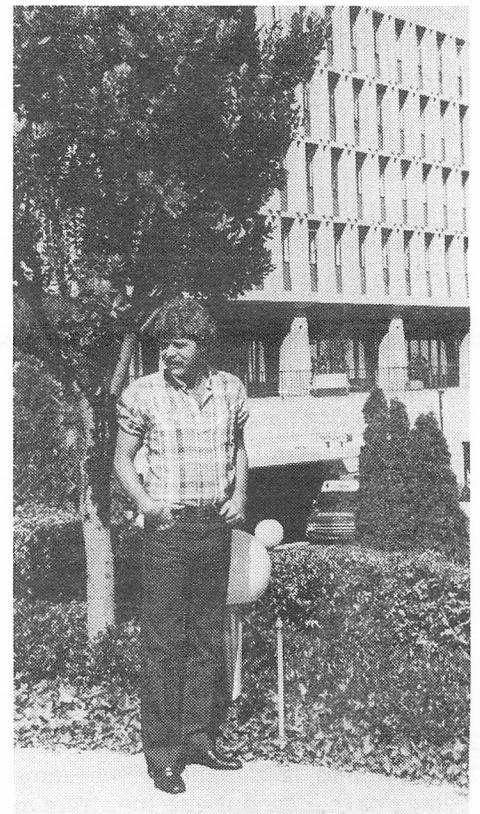
An expanded syphilis and gonorrhea screening program has recently been inaugurated by R.K. Davies Medical Center through the efforts of BAPHR members Steven Mehalko, MD, and Stuart Fleming, MD. This development is seen as significant in offering further medical services to individuals in the heavily-gay Castro and Haight districts of San Francisco in which R.K. Davies Medical Center is located.

The program, as proposed by Mehalko, is operating through Davies' Primary Care Center. Laboratory specimens obtained for the testing of gonorrhea will be handled by the San Francisco Health Department, as was the practice under a previous Health Department-Davies agreement. Additionally, serologic tests for syphilis are available at minimal or no cost, according to Mehalko. He also noted that testing for hepatitis A and B and enteric pathogens will be available.

Stuart Fleming, MD, heads both R.K. Davies' Emergency Department and Outpatient Primary Care Center.

Stuart previously lived in Grass Valley, California for 7 years where he had a private practice in Family Medicine. While in Grass Valley, he also served as Chief of Staff at Sierra Nevada Memorial Hospital, and Medical Director at Nevada County Hospital, and also was president of the Golden Sierra Regional Comprehensive Health Planning Council. He completed medical training at Emory University, Atlanta. Steven Mehalko, MD, was a key member of Boston's Gay Health Collective before coming to San Francisco in 1978. Steve completed his medical education at Boston University School of Medicine, and practiced Emergency Medicine in Massachusetts and California previous to his present work at the Primary Care Center.

More information on services offered by the R.K. Davies Medical Center—Primary Care Center can be obtained by telephoning Steve at (415) 565-6063 weekdays.



"Stuart Fleming, MD, heads Emergency and Outpatient Departments at Ralph K. Davies Medical Center."

Then and Now — Part IV

Further comparative aspects of medical practice: Venereal diseases, gonorrhea and syphilis. I dealt at some length with the latter in my previous discussion and so shall not reiterate except for this addendum: Although neo-natal care did not significantly differ during my childhood years from that of today, pre-natal follow-up and exams *did*; e.g. blood was not drawn from the proximal end of the severed umbilical cord at delivery of the foetus. This and the very inadequate exams of the enceinte mother resulted in delivery of not a few congenitally luetic babies many of whom survived to become adults exhibiting the striking stigmata thereof which I imagine very few, if any of you, because of your relative youth and modern practice, have ever seen. These characteristic signals included pallid aged facies causing, for example, a 24 year old man to appear to be in the neighborhood of 50, abnormal skeletal development such as bowing of the bones—most immediately obvious that of the long bones of the legs, and, most pathognomonic of all, Hutchinson's teeth—the teeth, especially the upper central incisors, having a markedly concave occlusal edge.

I can still clearly picture those teeth and facies in Doctor Twitchell's "pet" congenitally luetic whom he exhibited each year to his 3rd year class at "Twitchell's Follies" as we irreverently called his entertaining classes. Dr. Twitchell was Professor of Psychiatry at U.C. Medical School and Chief of Psychiatry at S.F. General Hospital; he was also the physician to Al Capone who was then serving his term at Alcatraz and had tertiary syphilis. After his release he retired to his heavily guarded estate in Florida where he died not long afterwards of that disease.

It is now 3:30 am of the 6th of August (you see how well I sleep) and both tonight and last night at the same time I have gone out into the street as well as on the roof in my pyjamas and robe to see the lunar eclipse but because of the surrounding buildings

and position of the moon, I failed to locate it even though I repeated the sorties at 4:30 when the totality had ceased. I particularly wanted to see this one since the next is not until 1982 by which time I expect to have been a cadaver in the anatomy lab at UCSF, for I have made arrangements for my remains to be delivered to the State Curator thereof, and failing an accidental death, I dread what will otherwise be death due to hepatic failure—a miserable exit. Nonetheless, it affords me some pleasure to picture all the young medical students being called over to "my table" to see the remarkably hepatomegaly—I can palpate it myself about 4 finger breadths below the Right Coastal Median! As I've frequently reminded you (boringly I'm sure), most of my old friends, lovers, and contemporaries are dead. Just in the last two weeks two of the well-known latter whom I quite often saw perform have died: Sally Rand (nee Helen Beck), the famous but initially infamous fan dancer in the East, and Vivian Vance (Ethel Mertz of *I Love Lucy*) at her home in Belvedere. Sally Rand whose performance in the early years was considered scandalously prurient eventually came to be regarded as classic ballet which indeed it was though in all those years—she was still performing it as recently as 1978—she never altered a step, a movement, or so much as a feather. She originally appeared at the Chicago World's Fair in 1933, then at the beautiful San Francisco World's Fair on man-made Treasure Island in 1939, and thereafter at the nightclub on Ellis or Eddy Street now called The Great America Music Hall which still has the same charming rococo decor.

I sincerely seek your indulgence for so much nostalgia and personal reflections herein which prevented my ever getting to gonorrhea about which I have a good deal to say, not a little of which is also personal. But I promise gonorrhea as a topic next time if still alive and functioning.

Rex Burnham, MD

Vital Signs

- Dave Kessler was interviewed on:
 - Cleveland TV Channel 5 on June 6
 - Vancouver, B.C. Radio Station CJOR June 12
 - SF TV Station KPIX June 24
 - with Myles Lippe, MD for Italian TV (Rome)
 - Atlanta Radio Station WEST July 5
 - SF TV Station KRON Sept. 24
 - by a reporter for Quebec newspaper
 - by a reporter for British Medical Journal
- Dave Kessler testified in favor of the Equal Rights Employment Bill (AB1), sponsored by Art Agnos, before the State Assembly Labor Committee in Sacramento on July 3.
- BAPHR officers met in SF for discussions with representatives of So. Cal. Physicians for Human Rights on Aug. 11.
- Dave Kessler and Bill Owen were co-authors of "What a Straight Doctor Should Know to Treat Gays" which appeared in the August 6, 1979 issue of *Medical Economics*....They have been invited to participate in a symposium on gay health issues in Chicago on Oct. 26-27, which will later be prepared for publication in *Patient Care*...They also plan on attending a national conference on gay and lesbian issues in Chicago Oct. 26-28....Before that Dave will give a talk on Oct. 23 to the staff of the U. of Pittsburgh Dept. of Psychiatry on "The Fear of Homosexuality."
- The July 12 issue of *The Advocate* highlighted the anniversary of Stonewall. In a listing of "Top Events of Ten Big Years" was a column "Major Figures Coming Out of the Closet". These included: 1973—Dr. Howard Broron; 1976—Dr. Tom Waddell; and, last but not least, 1977—*Bay Area Physicians for Human Rights!* □

National March for Lesbian and Gay Rights

The first unified demonstration for gay rights on a national level will take place in Washington, DC, on October 14, 1979. Individuals and local groups throughout the country have been actively organizing a network of support for this event, which will focus attention on issues such as 1) repeal of anti-lesbian/gay laws, 2) the passage of a comprehensive lesbian/gay rights bill in Congress, 3) the issuance of a Presidential executive order banning discrimination based on sexual orientation in the federal government, the military and federally-contracted private employment, 4) the end of discrimination in lesbian mother and gay father

custody cases, and 5) the protection of lesbian and gay youth from any laws which are used to discriminate against, oppress and/or harass in homes, schools, jobs and social environments.

The National Gay Health Coalition along with many national and gay health organizations (including BAPHR) have endorsed the March and members of several groups will carry the banners of their organization in the health workers' contingent. This contingent will assemble at 11:30 am on the Mall side (south) of the National Gallery of Art immediately west of 4th Street.

As part of the Washington lobbying effort, members of the National Gay Health Coalition and other gay health organizations will be meeting with Julius Richmond, MD, the Assistant Secretary of Health for HEW, on Monday, October 15. (Dr. Richmond is the Surgeon General of the U.S. Public Health Service.) At this meeting, recommendations will be presented for incorporation into the President's National Health Program.

Any BAPHR members who plan to attend the March are asked to contact Bob Hindi at (415) 861-6810 or Bill Barnaby at (415) 552-8269 as soon as possible for further information. □

progress notes

Recently I got a letter from a third-year student at my old medical alma mater. He wrote about efforts to organize his classmates there for mutual support and to recommend the inclusion of gay-oriented materials in the curriculum.

This is being carried through despite some foot-dragging by the school administration, and the absence of any encouragement from the faculty. (A chaplain has taken up their cause, however.)

The letter brought back memories of when I entered medical school here in 1951 and of the dramatic changes that have occurred in the less than three decades since then. During the four years before I received my MD degree my gayness was hidden from everyone, even from myself. (I had had some strong intimations for some time, but didn't actually "come out" to myself or into the homosexual world until my internship year.) I had no knowledge as to whether any of my fellow students were gay, and it never crossed my mind that there could possibly be any gay faculty members.

Later, when I returned as a resident in Psychiatry, I felt considerably more self-aware and world-wise. Many of my closest friends then were other gay house-staff officers. We were all thoroughly closeted, part of the general homosexual "underground" of those times, and there wasn't much connection between our professional and personal lives.

No medical school professor or attending was known to be gay, but I did maintain well-camouflaged social contacts with some gay faculty members on the main university campus, one of whom has subsequently become very prominent nationally in the gay movement.

In the seventeen years since I left, a gay student union has been formed on the main campus, and has even sponsored dances at that very conservative university! And now the medical school has its own gay activist group.

What has happened in the intervening years is that many of the younger gay people have grown up with a healthier sense of self-acceptance

and an unwillingness to be treated as second-class defectives. They do not find it so necessary to hide their gayness and compartmentalize their lives, nor do they need to limit their options to those of homosexual caricatures. As one 20-year-old student refreshingly summarized it recently: "I know I'm gay, and that's fine with me, but it's not the most important thing in my life."

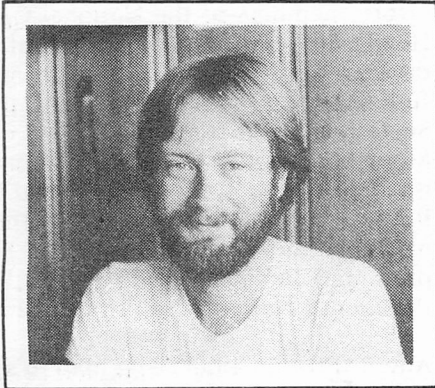
Younger gay people, having grown up in an era of greater gay openness, don't carry the same heavy burdens of guilt, fear, inhibition and eccentricity that sometimes marked some of the older of us. They are more free "to love and work", which was Freud's definition of mental health.

Other gay people are likely to constitute the only important family many of us will ever have. There are major roles for us to play as mothers and fathers, and sons and daughters, in addition to our more customary sibling relationships. As we mature, we should be available as mentors and guides, offering the perspectives derived from life experience. The younger people, with their energy and growing self-assurance, are our hope for a more positive gay existence in the future.

Dave Kessler

□

Board OKs Work-Study Secretary



Mark DeWolfe, *BAPHR*'s new work-study Secretarial Assistant.

On September 9, 1979, the *BAPHR* Executive Board approved the hiring of a half-time secretary, Mark DeWolfe, effective the final week of September. DeWolfe is a candidate for the Master of Divinity degree at the (Unitarian-Universalist) Starr King School for Religious Leadership in Berkeley. As secretary, Mark will provide services to the Executive Board, committees, Executive Consultant and the *BAPHRON*. His school will underwrite four-fifths of the salary through federal work-study funds. Mark was initially recruited and recommended to the Executive Board by Jeff Richards, *BAPHR*'s Executive Consultant, in continuing efforts to

improve the organization's internal operations.

A resident of San Francisco for more than one year, Mark comes from Boston where he earned his M.A. in Theatre History at Tufts University. Mark was also a key staff member of Boston's Gay Community News. In 1978, he was a work-study assistant at the Gay National Educational Switchboard in San Francisco.

"I'm pleased that *BAPHR* was able to hire a person such as Mark for a salary that *BAPHR* can afford," said Richards. "The organization has been very much in need of continuing secretarial help for some time, and now that *BAPHR* has tax-exempt status, this need can be met with really minimal cost."

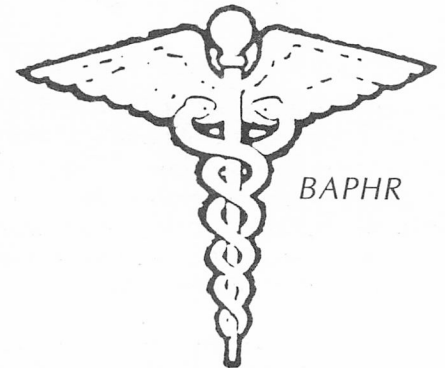
Bob Hindi, MD, *BAPHRON* Editor commented, "I find it exciting that in hiring an individual with such outstanding qualities as Mark, *BAPHR* can more definitively approach the expansion of current projects as well as its services to the community. As for my involvement, I will now have a considerable amount of time available to solicit articles on a variety of topics, obtain sponsorship and direct the future course of the *BAPHRON*." □

a variety of gay health issues to be printed in the *BAPHRON*. Any assistance that you might be able to give with this or ideas for articles will be greatly appreciated. (The editor can be contacted at (415) 861-6810 or by writing to PO Box 14546, San Francisco, CA 94114.)

The days, weeks and months that lie ahead for *BAPHR* and the gay community will be exciting ones. We encourage each of you to try to get involved in some aspect of these important activities, projects and events.

Robert Hindi, MD
BAPHRON Editor

P.S.: This column, which was begun with Volume I, Number I, has not been included in the *BAPHRON* since then but we are hoping to continue it on a monthly basis. □



BAPHR Speaks to Gays Over 40

On Sunday, August 5, 1979 Bill Owen, M.D. addressed over 100 members of the G-40 Plus Club. The meeting took place at Trinity Episcopal Church on Bush Street near Gough. The talk was one of a series of lectures to gay community organizations which are being presented by *BAPHR* members who are also active in *BAPHR*'s speakers bureau.

G-40 Plus is a social and support organization designed to meet the needs of older gays. Meetings are held every two weeks and invited speakers generally address the group as a whole.

Following the lecture the group adjourns to smaller rap groups, one of which is conducted by the featured speaker.

Owen, an internist, discussed some of the medical problems which confront older patients regardless of their sexual orientation. He also presented general information about what gay patients should expect from their physicians. Owen concluded with a brief history of *BAPHR* and a discussion about some of our community oriented projects including the Physician Referral Service.

Many questions were asked after the lecture and during the subsequent rap group session. Some of the questions, particularly those on sexually transmitted diseases and economic aspects of medical care, provoked lively discussions.

Appreciative comments following the lecture illustrated once again the goodwill which *BAPHR*'s community service activities, including our speakers bureau, telephone referral service, information booths and health fair, have generated within San Francisco's gay community. □

Notices on Current Research

September 13, 1979

BAPHRON
c/o Dr. Robert Hindi
137½ Saturn
San Francisco, CA 94114

Dear Dr. Hindi,

I would like to invite members of BAPHR to submit announcements about research that they are starting/involved in to the *Journal of Homosexuality*. The *Journal* has a section dedicated exclusively for this purpose, "Research Notices". Unfortunately, the deadlines for the issues

are so far in advance that a Research Notice may only be worthwhile for projects of a duration of a year or longer. But for such projects a notice in the *Journal* could be quite useful in connecting the researcher with others doing similar work in the U.S.

I have enclosed a copy of the guidelines for and the purposes of the Research Notices section. I would appreciate it very much if you could publish them in your newsletter, which I, by the way, enjoy reading very much.

Sincerely,

Petra Liljestrand
Research Notices Editor
Journal of Homosexuality
Center for Homosexual Education,
Evaluation and Research (C.H.E.E.R.)
Psychology Building, Room 502
San Francisco State University
San Francisco, California 94132
(415) 333-6117 or (415) 469-1138

□

Dinner Meeting A Success

BAPHR's second dinner meeting at 9's Restaurant proved again that members enjoy the format of a dinner meeting. With little more than one week's notice in the BAPHRON to announce the place and date, members and friends filled the restaurant to overflowing. The attractions were good food, pleasant atmosphere, a charming and entertaining speaker, and of course, the company who attended.

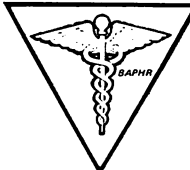
The guest speaker, Armistead Maupin, a well known author and celebrity, fulfilled all the expectations of the audience. In his talk entitled, "Doctors I Have Known", he was both witty and serious in noting his associations with the medical profession. Some of his personal anecdotes are not for publication in this newsletter, but when he spoke of the physician who cared for his dying mother, he expressed the higher virtues of the profession.

There was unanimous consent that BAPHR dinner meetings are here to stay. Suggestions for restaurants, clubs, or other suitable facilities which can accommodate our membership for such functions are welcomed and should be sent to the BAPHR address.

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BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

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The BAPHRON is published monthly by Bay Area Physicians for Human Rights.
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The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different type face or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

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upcoming events

- Sunday, October 14..... NATIONAL MARCH ON WASHINGTON FOR LESBIAN AND GAY RIGHTS (see related story in this issue for details).
- Sunday, October 14..... The Northern California Dentists for Human Rights are sponsoring a CANDIDATES NIGHT at 2249 Broadway in San Francisco. Expected to attend will be *District Attorney* candidates Carol Ruth Silver and Joseph Freitas; *District 5* candidates Kevin Wadsworth, Kay Patchner, and Terence Hallinan. *Mayorial* candidates Quentin Kopp and Diane Feinstein have also been invited to attend. Members of BAPHR and their guests are cordially invited.
- Sunday, October 21..... BAPHR GENERAL MEETING, San Francisco Medical Society.
- December 12, 13..... The Masters and Johnson Institute will sponsor a 2 day SEMINAR ON SEXUAL MEDICINE at the Hyatt Regency, Los Angeles. Included in the program will be a session by the sponsors entitled "Homosexuality in Perspective". More information may be obtained by contacting:
Seminar Program
Masters and Johnson Institute
4910 Forest Park Boulevard
St. Louis, MO 63108
(314) 361-2377

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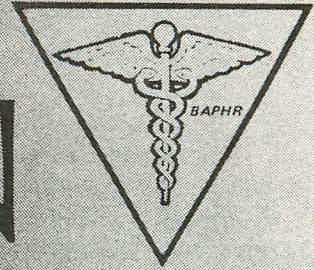
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the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 11

November 1, 1979

THE MARCH

THE NATIONAL MARCH ON WASHINGTON FOR LESBIAN AND GAY RIGHTS

by Patty Robertson, M.D.

On October 14, 1979, thousands of lesbians and gay men from all over the country—including Alaska and Hawaii—converged on Washington, D.C., to march in a demonstration asserting their civil rights as citizens of the United States. The day marked an important turning point as the first national gay rights demonstration in this country. A crowd of people estimated between 75,000 and 125,000 marched down Pennsylvania Avenue past the White House to the Washington Monument.

Our plane landed Saturday, Oct. 13, in the midst of a chilling downpour of rain. Our spirits took a dive because we thought the

weather, combined with the controversy surrounding the March, would keep the number of participants small. In addition, there was little or no information in the Washington newspapers about the March activities, although a Third World Gay Conference had been in session for the prior three days in Washington. However, via the grapevine, we found a dance for March supporters at a major Washington hotel that night. The dance was so packed that we couldn't get tickets. But the variety and number of people were exciting and we met fellow marchers from Canada, Minnesota, and Texas, who were overflowing into the lobby.

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PHOTO BY SHERRON MILLS

The day of the March dawned cold and clear. When we arrived at the March grounds, the sight was fantastic (and a relief!). Thousands and thousands of lesbians and gay men were organized by geographical regions, by colleges, and by national organizations. The atmosphere was charged with energy and pride. For some of us "veteran" San Francisco marchers, it was exciting and refreshing to see so many of our brothers and sisters from around the world coming together to show their anger at the denial of their civil rights.

The March began at 12 noon, led by disabled gay men and lesbians, Third World Lesbians, and the aged. California was near the front of the March, led by the Great American Yankee Marching Band and followed by the L.A. Gay Men's Chorus. An estimated 5,000 Californians marched, with the San Francisco contingent stretching one full block with 8 to 10 abreast. Groups from California included the Gay School Workers, Lesbians in Law, and the Harvey Milk Democratic Club.

The variety of the groups marching was remarkable: "Dartmouth 1980," "Yale Lesbians," "Gay Mormons," "Parents and Friends of Gays," "Gay Farm Workers," "Dignity," "Gay People in Medicine," "National Gay Caucus of the American Psychiatric Association." In contrast to San Francisco marches, there were few spectators, and the number of women marching equaled that of men.

The parade progressed very smoothly. As we passed the White House, chants could be heard from the marchers. Two or three counter-demonstrators stood with signs, "Repent or Perish" near the White House, but no incidents occurred.

The March ended at the grounds of the Washington Monument, where a rally was held. The many speakers included nationally known gay activists, some politicians (e.g., Congressman Phillip Burton, D-S.F.), and various representatives of different groups. The rally lasted several hours before people began to disperse.

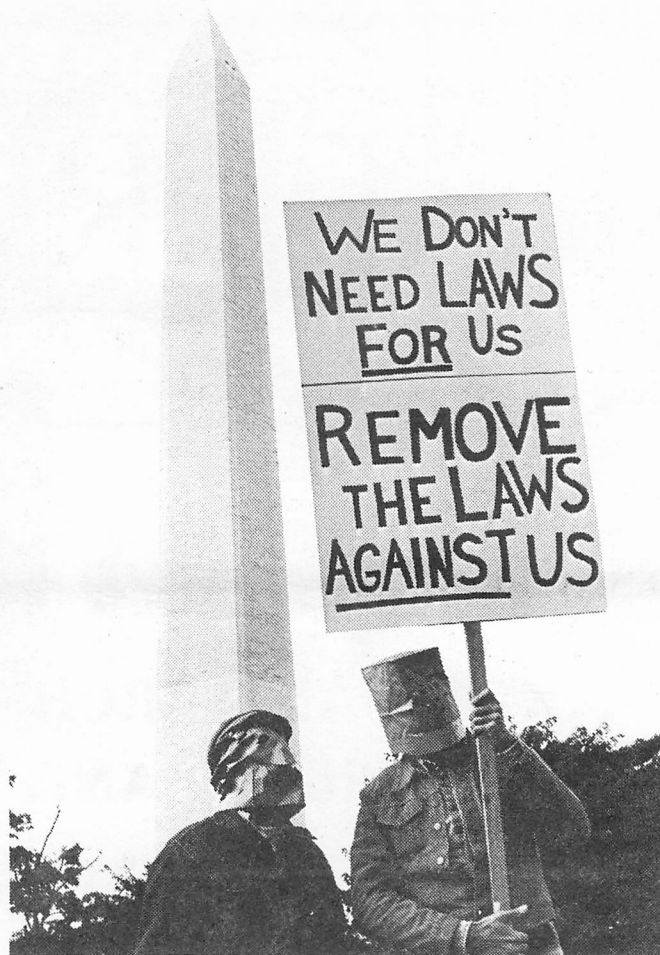


PHOTO BY SHERRON MILLS

Participants in the National March

The visual impact of the March, and the lobbying efforts of hundreds of participants the following day was politically impressive. In the words of Congressman Burton, the March represented "a significant and dramatic watershed event."

AUTHOR'S NOTE:

PRE-MARCH POLITICS

About six months ago, I heard about plans for a gay civil rights march on Washington and that there had been a successful planning session. At that time I approached the Executive Committee of BAPHR hoping to coordinate a contingency of physicians from across the country to march as a professional group. At that time the Executive Committee did not endorse the March, due to concern that it was against the wishes of the Washington gay community. (The Executive Committee did reverse its stand and endorse the March a few weeks beforehand.) However, I was deter-

mined not to miss this historic event, and even managed to talk my bleary-eyed lover (an orthopedic resident on the trauma service who is on call every third night) into spending her one free weekend of the month traveling to Washington with me.

MONDAY, OCTOBER 15

In moving toward the goal of civil rights for lesbians and gay men, Monday, Oct. 15, was a day equal in importance to that of the March. Although most people had to return to jobs, school, and family after the March, hundreds remained to lobby individual congressional representatives.

I had been planning to attend a meeting, which, according to the BAPHRON, had been arranged between the National Gay Health Coalition and other gay health organizations and Dr. Julius Richmond, Assis-

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PHOTO BY PATTY ROBERTSON

Gerry Parker (far L.) was among many Bay Area lesbians and gays who met with Senator Cranston aide, Gary Aldridge (far R.). Center is an aide to Aldridge (unidentified)

MARCH Continued from Page 66

tant Secretary of HEW, to discuss gay health care needs. However, after multiple phone calls, I discovered that Dr. Richmond was in S.F. at the American Academy of Pediatrics meeting. No one in his office was aware that such a meeting had been arranged. So I decided to find out more about lobbying and went with several California friends to a Congregational Church, where a session on how to lobby was being sponsored by the Gay Rights National Lobby.

We were briefed about two pending gay civil rights bills. The first is H. R. 2074, introduced in the House of Representatives by Congressman Ted Weiss (D.-N.Y.) and Henry Waxman (D.-CA), which would protect the civil rights of gay men and lesbians. This bill currently has about 50 co-sponsors in the House, including John and Phil Burton of S.F. The second bill is House Concurrent Resolution 166 introduced by Congressman Larry McDonald (D.-Ga.) intending that "homosexual acts and the class of individuals who advocate such conduct shall never receive special consideration of a protected status under law."

In addition, we were told that gay rights legislation was about to be introduced into the Senate by Senator Paul Tsongas (D.-Mass.). We then learned that Senator Alan Cranston (D.-CA.) was considering co-sponsorship.

Twelve of us then set off to Senator Cranston's office, hoping to influence him to co-sponsor the civil rights legislation in the Senate. Because Senator Cranston was "unavailable," we met with his aide, Gary Aldridge. Aldridge stated that the Senator was interested; however, he said that Cranston had some "questions" about the discrimination in employment clause, i.e., how employers could defend themselves against a gay employee's charge of discrimination without forcing other possible gays she or he may have hired out of the closet by pointing them out. Aldridge stated that the Senator was unaware of any precedents. A member of the group pointed out the Pacific Telephone case recently successfully litigated by a gay employee, that did not have this effect. Aldridge requested that "details" be provided

to Cranston's office about the specific case.

San Francisco activist Gerry Parker asked for an explanation about the recent confirmation of Ruben Askew, appointed U.S. Chief Trade Negotiator. (Gov. Askew, in the Senate Hearings, was questioned by Sen. Bob Packwood (R.-Ore.) about any prejudices he might have had in employing gays. Askew reportedly stated that he would never hire a homosexual, because homosexuals did not deal well with the public. Despite this remark, his confirmation by the Senate was unanimous, with no opposition from Cranston, who represents hundreds of thousands of gay men and lesbians.) Parker charged that many calls had been made to Cranston's L.A. and S.F. offices to protest the confirmation, but no acknowledgement was made by Cranston.

After two hours of discussion, it was obvious that several things could be done by Cranston, besides becoming a co-sponsor of the gay civil rights

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bill. The group requested that in Cranston's next newsletter, he explain what happened with the Askew confirmation, and that his communication with the gay community be improved.

We had planned to go to the meeting that Phil and John Burton were holding jointly at 1 PM, but we were able to attend only a few minutes before we had to leave to catch our planes. However, it was immediately clear that, despite co-sponsorship of the gay civil rights legislation, their knowledge about other gay related issues was lacking (e.g., status of immigration laws for gays; status of benefits for gays who have received dishonorable discharges from the military because of sexual preference).

AFTER THE MARCH

We left Washington determined to march again, to educate our representatives about relevant gay issues and to expect them to respond to our needs as a minority group. However, this cannot be done alone. The Washington March was a personally politicizing experience, impressing

upon me what I can contribute to attain the goal of civil rights for gay men and lesbians. Each of us, whether in or out of the closet, needs to mobilize politically, either through financial contributions or direct political energy, or both. There are several ways in which you can help:

1. Write Senator Cranston today, urging him to co-sponsor the gay civil rights legislation (229 Russell Senate Office Building, Washington, D.C., 20510). Write to any other Senator you might know also urging co-sponsorship.
2. Contribute financially or donate time to the multiple gay groups involved with the passage of this legislation such as:
Gay Rights National Lobby (GRNL)
1606 17th Street NW
Washington, D.C. 20009
3. Work with the National Convention Project in the GRNL, to secure a lesbian and gay rights plank in each of the major party platforms for the upcoming elections.
4. Plan to march in Washington next year as a group of physicians—possibly as a national

group—lending professional support to gay men and lesbians working for civil rights, and urge friends and family to march with you.

Whether you are in or out of the closet, whether you are working 40 or 120 hours per week, whether you are a medical student, housestaff officer, or practicing physician, we need your help. *Your civil rights are at stake!* □



PHOTO BY PATTY ROBERTSON

"San Francisco Parents & Friends of Gays" was one of the several local groups participating in the March.

po prn

A year ago I had only fantasized the production of *BAPHR*'s monthly publication, with typeset columns, screened photographs, and offset print onto 70-lb paper. Much less had I realized that it would be circulated to over 300 physicians (including the President of the San Francisco Medical Society), chairpersons of various national organizations, several city supervisors, the mayor, and be included in the current periodicals section at the University medical library.

It probably all began when, as a young man of 15 years, I assisted in my school newspaper at a rural school in New Mexico, of less than 350 students in grades 1-12. It was

quite a task to distract those involved with sports, cheerleading, ditching classes, working at the ranch, or whatever into volunteering to procure articles or even juicy gossip columns for quarterly publication. There were production problems then as well—making typing corrections on ditto sheets using razor blades as well as the poor quality of the faded blue pages that were printed with the hand-operated machine.

The greatest satisfaction must have been in seeing the finished product in the hands of schoolmates eagerly scanning the pages for evidence of their name in association with some scandal.

The time and experience seemed to have its rewards. As a senior in high school, I moved to Albuquerque. In planning my classes for the year, my counselor thought it a marvelous idea to continue my "talents" as well as make new acquaintances by becoming a member of the newspaper staff.

However, this was to the contrary of the journalism instructor who, on the first day of school, promptly marched me toward the administrative offices when she discovered the obvious mistake in my being assigned to the staff when I hadn't ever taken a journalism class, much less under her scrutiny.

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As I was muttering under my breath "Oh-my-God-what-have-I-gotten-myself-into-now?" and feeling like a child who was being tugged unwillingly by a twisted ear as a degrading prelude, fate stepped across my path—in the form of the high school principal who had known my family for years and I'm sure had seen many of my uncles, aunts, and cousins in worse situations than I was in. He proceeded to give me his warmest greetings, and, to the progressive vasodilatation of my instructor, took the opportunity to recall many of his experiences with members of my clan (some of which were even quite shocking to me) and to emphasize how elated he was to have me under his roof, so to speak.

When she was finally able to break away during one of his spasms of laughter, we again marched directly back to the classroom without a word being spared between us, other than her thick mutterings and head-tossing gestures (which I'm sure helped to lower the hypertension which she had acutely developed).

A bad start. The first "C" I had ever received on my report card ensued as a reminder of the ultimate holder of power in the educational system. Well, repeating to myself daily that famous quote: "When the world gives you lemons, make lemonade," I began working diligently to snatch up interesting interviews and articles as well as to write some clever editorials. By the end of the year not only had I been chosen to attend the state high school journalists' conference but was also elected as a member to *Quill and Scroll*, the national honorary for high school journalists. It was fortunate for me that I had a teacher who liked lemonade. □

(The history of my "career" will be continued in the next issue.)

—Bob Hindi, Editor

executive consultant reports

Accreditation by the California Medical Association for Continuing Medical Education (CME) appears to be a realistic possibility, as reported to the October BAPHR General Meeting. In close cooperation with BAPHR's Education Committee, the several-step application process is being undertaken while at the same time curriculum proposals are being studied. Though the application procedure is not swift, should accreditation be approved, BAPHR may then offer CME credit to members and other health care providers. Category I credit could likely apply to those General Meetings devoted to informational sessions.

Indications are that already some employees of certain San Fran-

cisco corporations and institutions are pledging United Way (Donor Option) gifts to BAPHR. This is very encouraging, and publicity will continue to be generated on BAPHR's behalf during the United Way drive. Word of mouth is important, too; this is an excellent time to remind friends and associates of their BAPHR option.

Progress is being made in finding financial underwriting for the BAPHRON. Letters of support are being received that will document the BAPHRON's unique niche in medical publishing. Additionally, application to copyright the BAPHRON has been made to the Library of Congress. □

—Jeff Richards

progress notes

Another important "first" was California Governor Jerry Brown's declaration that if elected President, he would sign an Executive Order banning discrimination against Gay people in all branches of the Federal government. This would probably include the military services, the FBI, and other "sensitive" agencies.

"Gays On The March" ran the headline in the S.F. Examiner the day after the march on Washington. That phrase summarizes the feeling that many of us have had during these past ten momentous years.

The demonstration in Washington was another historic "first." Gay people from all walks of life and from all parts of the country came together to signify their resolution to work for full civil rights for homosexuals. The event was peaceful, and was a successful initial effort, despite earlier forebodings of dissention and disorganization.

The newspapers reported that Gov. Brown's campaign for the Presidency

seemed to be in trouble, and suggested that perhaps he was angling for gay support. The account mentioned the increasing visibility of large numbers of gay voters, and the clout they are beginning to have because of their political fund raising drives.

Whatever Gov. Brown's motives, this was the first time any major American Presidential candidate has issued such a statement. It led to the hope that a strong gay civil rights plank might appear in the Democratic Party platform next year.

Understandably, there are still many gay people whose fear of a right-wing backlash keeps them from active involvement in gay causes. There are various ways of responding to such concerns. Opposition to change is always to be expected, but the stronger and clearer we are, the greater our impact will continue to be.

In Harvey Milk's sensible view, the best route for gay people was for them "to organize and to come out." □
—Dave Kessler

letters to the editor

To the Editor:

The San Francisco City Clinic welcomes BAPHR's interest and support of our clinic function. However, there were a number of reporting inaccuracies in your October 1 lead article, *BAPHR Task Force Calls on San Francisco City Clinic*."

1) Due to budgetary restrictions, routine GC screening of asymptomatic gay men is limited to culturing the most likely infected site. This may be the rectum or pharynx depending on the patient's sexual practices.

2) Dark field microscopy for syphilis is routinely done on any anogenital lesion.

3) The City Clinic is offering hepatitis B antigen and antibody testing as an initial screening to define those patients that might benefit from a Center for Disease Control hepatitis B vaccine; the study use of which will probably begin in early 1980.

4) For treatment of rectal gonorrhea in patients not allergic to penicillin, the clinic uses either 2 regimens i.e., intramuscular APPC with probenidol or a 2 dose ampicillin regimen with 3.5 g ampicillin + 1gr probenidol taken in the clinic and repeated at home in 10-14 hours.

Once again we welcome BAPHR interest in the San Francisco City Clinic.

Sincerely,

*Michael Sands, M.D., MPH & TM
Chief, Division of
Venereal Disease Control
San Francisco City Clinic*

To the Editor:

I've read your newsletter from cover to cover and am very pleased to discover what it has to offer. It's about time gay physicians were brought out too. I'm sure this newsletter and organization provides physicians with the much needed moral and peer support they have long been searching for. I know from my own experience with law school and the legal profession that it is very hard to be an openly gay professional. Or should I say, it is hard to get started being open about it. Once the momentum is begun, it grows and makes it much easier for all concerned. In a profession people should be hired for doing their jobs well, not because of their personal life. A support/information group like yours can make professionals realize that. Once they do, there's no stopping them. I'm hoping you'll find that true. My congratulations and encouragement...

*Doug Beckwith
Los Angeles*

journal club

THE GRAY PATIENT

Medical attention has recently been focused on some untoward effects of butyl nitrite, a drug related to amyl nitrite ("poppers"), the former being the active compound in many proprietary compounds widely available as "room odorizers." While the physiological effects of amyl nitrite are well documented — headaches, orthostatic hypotension, drug rash, and most dangerously methemoglobinemia — there is scant literature on the butyl congener. In a recent report (Horne, MK et al, *Annals Int Med* 91:417, 1979), a patient was presented with significant methemoglobinemia after inhalation of butyl nitrite. While this patient, in particular, had a congenital partial deficiency of NADH-methemoglobin reductase

activity, it was shown that normal people could develop significant methemoglobinemia if the nitrite exposure "was intense or if inadequate time were allowed between nitrite inhalation for methemoglobin reduction."

Given that butyl nitrite is readily accessible and frequently used in the gay male subculture, it behooves physicians to counsel their patients about this untoward effect. □

—Sandy Pomerantz, MD

THEN AND NOW V

Further comparative aspects of medical practice: Venereal diseases, GONORRHEA (as herein advertised in previous issues): During my junior year at UCSF in 1937 it was my great pleasure to have periodic, surreptitious rolls in the

hay with a great strapping, sexy Texas cowboy-type of classmate whom I'll call David. Like all of us, particularly at that age, who have not some endocrinopathy, he was a slave of excessive libidinous stimuli, and, although he is straight, this, plus a fortunate freedom from guilt and sexual hang-ups with which the cultural mores continually bombarded us, made him a willing and delightful partner.

One night when we were driving back to the city from Marin I suggested that it would be fun to have a repeat performance of our sexual intimacies. To my surprise, chagrin, and, yes, horror he said "O.K., if you'll go with me to a warehouse first."! The prospect appalled me, but, knowing that the reward would compensate for the ordeal, I agreed.

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upcoming events

Sunday — Thursday, Nov. 4-8..... American Public Health Association Convention in New York City

Tuesday, November 6..... ELECTION DAY.

Sunday, November 18..... BAPHR GENERAL MEETING, San Francisco Medical Society.

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CLASSIFIEDS

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ANNOUNCEMENTS

EMPLOYMENT WANTED

MED STUDENT NEEDS \$! Will bartend/add spark to your party. Bill, 864-3486.

STUDENT with one year deferment from med school seeks empl in med setting as asst/trainee in lab or soc work. Paul, 848-3321.

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PSYCHIATRIST'S OFFICE SPACE for rent in Berkeley. Call Ken Everts, 346-7070.

OAKLAND OFFICE SPACE available for psychotherapists in a large spacious flat overlooking Lake Merritt. Two large rooms for group therapy available. For information, call Joe Nieberding, PhD, 567-3161.

WANTED

MED STUDENT from East Coast involved in clinical research in Bay Area seeks low cost/no cost room or apt from Dec. 18-Jan. 31. Contact Bob Hindi, 137½ Saturn, 94114 (861-6810) or Steve Mehalko 533 Diamond, 94114 (821-3563).

PUBLICATIONS

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FORMER ENGLISH TEACHER with nine years experience in teaching, writing, editing and publishing will assist you in report and technical writing. Also has public relations and media presentations as background. Fees to fit the nature of your project. Call me at (415) 861-5884 or write: Christopher J. Smith, 4528 - 19th St., San Francisco, CA 94114.

errata

In the previous issue of the BAPHRON (Vol. 1, No. 10) the following errors were inadvertently printed:

On page 57, column 2, paragraph 2, line 10, should read "ampicillin (3.5

grams p.o.) in one dose with pro-benecid; the ampicillin dose is repeat in 12 hours."

On page 58, bottom, paragraph 1, line 10, the name of the organization should read, "Lesbian and Gay Health Workers."

On page 60, column 2, line 20, should read, "the Right Costal Margin!"

On page 60, column 3, paragraph 5, line 7, should read "Dr. Howard Brown."

The BAPHRON sincerely regrets the errors. □

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1979 International Year of the Child

Herb Caen Brings Dentists Out of the Closet

by **Ralph Singer, DDS,**

*President, Northern California Dentists for
Human Rights*

In his October 17, 1979 column, Herb Caen blessed gay dentists with a perfect "foot in your mouth" story, to wit: "...During a "Candidates Night" meeting of the Northern California Dentists for Human Rights, Mrs. Arlo Smith, wife of the candidate for District Attorney, looked around and said, eyes a gleam, 'My, what a good-looking group of young men—where are their wives, in the kitchen???' Whoops of laughter! No wives in the kitchen, no dentists in the closet. These drilling young men are gay...."

On October 14, 1979, the NCDHR sponsored a Candidates Night which emerged as the most successful

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A Comparison of Children of Lesbian and Heterosexual Mothers on Three Measures of Socialization

In cases of contested custody in which the mother is a lesbian, the trend has been for judges to decide against awarding custody to the lesbian mother. Judicial reasoning has cited the likelihood that a child raised by a lesbian would turn out (in the case of a boy) to be a homosexual or (in the case of a girl) a lesbian, or that the child would become socialized in some fashion deviant from children raised by heterosexual single mothers.

The present study tested some aspects of that judicial assumption by comparing a group of lesbian-raised children with a matched group of heterosexual-raised children. Participants were 24 mother-child pairs (12 in each sexual orientation group) who lived in the San Francisco and Dallas areas. The children 10-20 years old, had been in the custody of their mothers at least half-time for at least a year prior to the study. The mothers were unmarried, with no adult males living in the home for at least one year, and the lesbians had disclosed their lesbianism to their child at least one year prior to the study. None of the participants were involved with the criminal justice system and they evidenced no frank psychopathology. Several participants who had com-

pleted protocols turned out not to fulfill the eligibility criteria and consequently were dropped from the data analysis, although some of their material was used anecdotally.

It was hypothesized that: (a) children of lesbians would show a higher level of moral maturity than children of heterosexuals because of the former's exposure to more diverse role behaviors and world views; (b) lesbians, if they were really that different from other mothers, would show a style of parenting significantly different from heterosexual mothers and therefore the lesbian-raised children would show different patterns of socialization; (c) the three measures of socialization administered to the children would prove to have a common structural basis as suggested by cognitive-developmental theory; (d) children, regardless of mothers' sexual orientation, would be more influenced by peer-group values favoring heterosexuality and children would therefore prefer a heterosexual orientation; and (e) peer-group values would supersede parental values in determining patterns of socialization in the children.

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The independent measures on the mothers consisted of the mother's declared sexual orientation, the *Parental Attitude Research Instrument* (to acquire an indication of parenting style), and the Good Impression scale from the *California Personality Inventory* (as a validity check). The dependent measures on the children were Kohlberg's *Moral Dilemmas Test* (to give an indication of cognitive and moral maturity), Rotter's *Locus of Control* (to give a measure of the child's self-perceived competence in controlling his/her world), and the Bem *Sex Role Inventory* (to give a measure of sex role identification and androgyny). Anecdotal material was gathered during a non-scheduled (unstructured yet agendized) interview.

Data analysis revealed that the sample was fairly homogeneous. There were no significant differences between children on the basis of mothers' sexual orientation or parent-

ing style. Neither were the mothers found to differ in parenting style across sexual orientation. Mixed results in the correlational analysis failed to lend support to the theoretical notion of the underlying nature of socialization traits in children. The major socialization influence in this small sample was the amount of television watched each week. That single variable, though it may be more complex than it appears, accounted for more variance in the children's socialization than did parent's sexual orientation or parenting style. The results may be interpreted to contradict the assumption of lesbian unfitness to parent.

COMMENT AND SPECULATION

Regardless of the mothers' qualities, the children were influenced mainly by their own friends, siblings and social referents. This is not to say that the mothers did not matter in the child's life — that is absurd. However, in this age group, the for-

mative influence upon a child's personality and social adjustment may be the nature of the child's whole world, rather than any single event or person in that world. Therefore, patterns, trends and matrices of events, both inside and outside the child — kind of an ecology of personality — seem the proper objects of study in personality development.

It was impressive that most mothers in both groups seemed equally concerned with providing their child(ren) with a suitably broad world of experience. Perhaps consenting to participate in the study was an example of that openness. This outlook, when combined with a certain discipline (a constructive parenting style called "inductive," in that one induces growth and cannot force it), seems, philosophically if not empirically, the most likely to generate a well developed child. □

po prn

(Continued from the November BAPHRON)

During my pre-medical education at the University of New Mexico, while amidst the academic and sexual curiosities of my 19th year of age, I joined a social fraternity.

Considering my motivations for entering such an association, it was fortunate that many of the men in the organization were not totally preoccupied with the traditional fraternity functions of massive alcohol consumption, competing for women, and in general being obnoxiously boisterous. Thus I found a fertile environment for working with other men pursuing such endeavors as printing a quarterly newsletter.

Due to limited funds and resources, the finished product (which was a display of rather poorly Xeroxed sheets folded in half) resembled a rough draft of the idea that I had originally envisioned it to be. Nonetheless, it was heralded by members as an example that we represented more than the stereotyped image of a "jock"

carrying a beer in one hand and a woman in the other...at least we might be seen as also having a newsletter tucked under one arm.

My medical school years in New Mexico were vastly less exciting in this regard. However, one day early in my first year, a classmate discovered that I possessed an unusually hyper-excitable neuron extending from my auditory receptors to my fingers that allowed me to print lecture notes as rapidly as they were being spoken. Of course, within weeks I had been "chosen" to become the class notetaker. The aspect of my job that was much more rewarding than the minimal financial income was my ability to send the entire class into a panic by showing up for a lecture 10 or 15 minutes late. It is amusing to think of their efforts to try to stall for time — doors were locked from the inside, the chalk and electric pointer were often "misplaced", microphone cords were severed, and an astounding variety of irrelevant questions were posed to the unfortunate professor who was at-

tempting to start the lecture.

Time went by, and over the next few years the only writing I did was physicians' orders and progress notes, and an occasional note to a friend.

In August of 1978 I attended the annual Castro Street Fair in San Francisco for my first time. After frolicking in the frivolities of the occasion I had the opportunity (and the courage) to attend my first general meeting of *Bay Area Physicians for Human Rights* which was held that evening in a home at the periphery of the Castro area.

The gathering was an extension of an exciting afternoon — nearly 100 gay physicians and medical students crowded together to meet or remeet one another; to hear the likes of Supervisor Harvey Milk and *Advocate* publisher David Goodstein offer their encouragement and support to the organization; and to participate in what had to be one of the most uni-

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meeting since the organization was formed in June 1978. Highlighting the evening were presentations with a question and answer period by mayoral candidates, Dianne Feinstein and Quentin Kopp. David Scott, not originally scheduled because of his participation in the March on Washington, arrived at the close of the presentations and gave a personal account of the deep sense of commitment that prevailed throughout the March. District Attorney candidates, Carol Ruth Silver, Arlo Smith, and Don Dissler (representing Joe Freitas) made spirited, controversial presentations. District Five candidates Terence Hallinan, Bill Kraus (representing Harry Britt, also in Washington), Leonard Matlovich, Kay Pachtner, and a representative of Howard Wallace campaigned vigorously and presented their views and anti-views. The evening provided an opportunity for the many members and guests to exchange views and see the candidates in a more personal environment.

Why an organization of *gay dentists*? So many people ask why we started, what purpose do we serve, what's the connection... Gay physicians, gay lawyers, gay psychologists, gay businessmen, all have very obvious reasons for uniting and do clearly serve the community well. Our objectives are somewhat less obvious, but, nonetheless important. There are no oral diseases that afflict the gay population peculiarly; however, there are many gays in our community who prefer to be treated by a gay dentist



NCDHR Candidates Night: (l. to r.) Ralph Singer, DDS, Jim Beeker, DDS, and Dianne Feinstein, Mayor of San Francisco.

and, for those, we have an active referral service. As a sociological process, the gay movement needs the respectability, the talent, the prominence that the dental profession conveys to the public. We, gay men and lesbians, are committed to the "coming out": the support, the validation, and the awareness of our sexuality. Together, we can more earnestly unburden ourselves of the oppression that has been so pervasive.

As members of NCDHR, we are sharing in the experience of social, educational, political, and community

events. We've come out of the darkness of the closet to participate in the Health Fair; to march in the Gay parade; to support the March on Washington; to meet the Mayor. We've been fortunate to hear such speakers as Dale McGhee, Steve Morin, Jerry Berg, Leonard Matlovich, Harry Britt, Don Clark, David Goodstein, Dave Kopay, Armistead Maupin.

We have regular monthly meetings, officers, committees, and a P.O. Box (14575, S.F. 94114). Together with other gay professionals we look to a future in which homosexual experience emerges into full daylight. □

progress notes

One of *BAPHR's* main functions is that of education. We have distributed copies of informational pamphlets on VD at street fairs, and our Speakers Bureau has taken part in programs designed for lay audiences. A health column, written under *BAPHR* auspices, is currently appearing in a local gay newspaper.

For fellow health professionals several *BAPHR* members have written articles, or given talks at scientific meetings. All-day conferences and workshops have been designed

on issues related to gay health. Presentations at *BAPHR* meetings and articles in the *BAPHRON* have helped with our education.

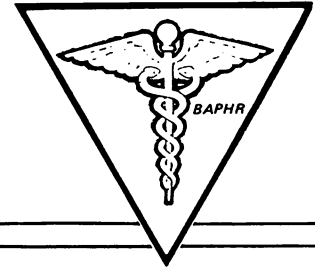
We are now moving towards being an authorized sponsor of programs which will qualify for Continuing Medical Education credit. This should open new horizons for us in providing important information to our medical colleagues, and others, who received little or no valid instruction on gay health matters during their training. It will also provide increased, and

perhaps novel, opportunity for them to meet some gay doctors.

Physicians, as a whole, are probably correctly thought of as generally conservative, and have been subjected to the same cultural homophobia as everyone else. Nevertheless, there is reason to believe that by virtue of their intelligence and training they may be amenable to objective, reasoned presentations of appropriately selected clinical and research data. Their experience has brought

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THE NEW PHYSICIAN



The sterile walls of my on-call room were a welcomed relief as I collapsed fully dressed on the bed and immediately lapsed into a dreamy sleep state...

My visions wandered back and forth creating a collage of the day's events...I should have known when I was dressing that morning not to have worn the flowered shirt with the narrow tie, snug cordoroy and clogs....my God, even the Director must have thought I was gay after seeing me dressed so outrageously...That must have been how the swishing young patient in my continuity clinic recognised me as being 'one', and started asking me more questions about my personal social life than I was asking about his erythematous rash...I know my face must have been as red as my shirt as I jotted the prescription for some hydrocortisone cream and went stumbling out of the room...into the path of nurse Barkley's presumptuous smile and quick wink...My stomach knotted like a roper's noose as I flattened against the wall while he strolled by...I recalled how I had unfortunately bumped into him the weekend before at the 'Midnight Moon' and had managed to slip out the door during his exclamations at seeing me in the local gay bar...I envisioned my own bed at home and how luxurious it would feel to be there right now, with a glass of wine and a warm friend to hold me tight...I had always enjoyed working in the Intensive Care Unit – constant involvement with one acute crisis or another – keeps my mind off my life and onto others' lives...Until today when the ICU respiratory therapist (Karen, I think) with the long silky hair and slim hips met me in the stairwell and amidst our casual greetings invited me over to dinner the following week...I seemed to have choked "Well, thank you, but I don't eat"...I had never relished the intervening tone of my too-loud beeper so much in my short career...It seems like just *once* someone would remember to put a warm blanket on this damn bed...Being out of the hospital for a couple of hours that afternoon had given me an incredible feeling of freedom, even though it was very transient...The sun was marvelously bright and warm for it being November in San Francisco...As I drove to my interview, I fantasized on the possibility of entering a Dermatology fellowship the next year...The familiar scent of Halston cologne greeted me as I entered the Department Chief's office and he smiled in a warm but reserved manner...we spent what seemed an eternity recalling my past and expounding on my future...As the afternoon passed I sensed a rush of confidence that I *could* become a dermatologist...until the question posed near the end of my interview as he was reviewing my application form: "By the way, do you happen to be - ahem - gay?...and my body turned to jello as I thought "Why in the hell do you ask?"...“I noticed that your address is only a couple of blocks from *that* area, and I wouldn't want to risk our reputation in any way, you understand..."...Oh, who cares about *skin* anyway...as I lay in the dark I felt a numbness progress up my body, I sighed, and even my dreaming slipped into momentary unconsciousness...

As BAPHR members, we have all encountered the experience of medical school. Most of us are also involved in or have completed a residency training program. Even with this common thread, there are obviously a variety of ways we have experienced such endeavors. The above story relates one houseofficer's account.

For many of us who are medical students, houseofficers, fellows, or who have recently completed medical training programs, such tales are not only an amusing glimpse of the past. They are realities which we may face daily.

In October, 18 such BAPHR members met in a group following the business portion of the general meeting. Many of us met one another for the first time. Most present related personal stories of being a student who happened to be gay in the traditionally conservative profession of medicine.

At the end of the session, we realized the potential of an on-going mutual support group, of approaching a resolution to the dilemmas we may face in our lives, of addressing such issues as medical education regarding homosexuality and discrimination of gay people in medicine.

In this regard, the Executive Board of BAPHR has been supportive in the formation of a committee of BAPHR members consisting of medical students, housestaff, fellows, or recent graduates to provide a forum by which we can continue to pursue such issues.

A social gathering is being planned in January; details will be expounded in the January, 1980, issue of the BAPHRON.

- Any members who may be interested in such a group may contact Robert Hindi, 137½ Saturn Street, San Francisco, California 94114 (415) 861-6810.

journal club

STIGMA AND REVERSE STIGMA

Given the prevailing sociocultural climate of anti-homosexual values in our society, all children—including those of us who evolve into homosexual adults—learn and internalize these negative attitudes as part of the process of development. Unless these attitudes are unlearned in adolescence or adulthood, one consequence may be an impaired sense of self-esteem leading to a reluctance to disclose one's sexual orientation to significant other individuals. Gay people remain "in the closet" to avoid the stigma associated with homosexual orientation, and this is as true of gay psychiatrists as of gay women and men in other occupations and professions. This was certainly true of myself early in my training, but two events combined to alter my invisible status as a gay physician in a non-gay world.

The first development was the 1974 depathologization of homosexuality by the American Psychiatric Association and the accompanying ringing declaration by the Board of Trustees deploring the persecution and oppression of gay people. This moved me to become active in volunteer medical work in our community as a senior medical student, and subsequently I started a V.D. screening clinic for gay men in Vancouver.

The second event was the organization of the Gay Caucus of Members of the A.P.A. in Atlanta in May, 1978. This inspired me to become more open and visible within the local psychiatric community, giving lectures and seminars, educating fellow residents, staffpersons, and paraprofessionals, and founding a sexual minorities counselling service in the city of Vancouver.

Of course the problem of stigmatization remained a potential source of concern, but with the support of my gay colleagues in the A.P.A. possible local disapproval seemed less important. Nevertheless, I continued to anticipate a certain amount of rejection as inevitable, and thought of the

quote from Gide: "Better to be hated for what one is than to be loved for what one is not."

My actual experience has been otherwise. It has been rewarding to discover that not only has the expected rejection failed to materialize, but on the contrary, my expertise is sought for teaching and in problems of case management. Moreover, my clinic now receives many referrals for assessment and counselling of individuals, couples, and families with problems related to sexual minority status.

Interestingly however, a different and unanticipated type of stigmatization has appeared, which I characterize as "reverse stigma." By this I refer to the mistrust and disapproval of the psychiatric profession exhibited by many gay individuals. It is easy to see how this has come to be, given that minority sexual orientation was considered officially to be psychopathological for so many years.

Though no longer a "closet gay" among professional colleagues, I confess that on occasion I have been tempted to be a "closet shrink" among gatherings of gay people, to avoid the almost inevitable discussion about how psychiatry has oppressed this minority. I have tried to avoid that temptation, and am gradually becoming more adept at the non-defensive defense of our profession within the gay community.

Certainly the open and visible presence of gay psychiatrists will do much to dispel the suspicions and reluctance of many gay women and men to utilize mental health facilities. One of our prime functions thus is to serve as a bridge between the two communities, demonstrating by our thinking and our conduct that on the one hand, not all gay people are psychologically impaired, and on the other, not all psychiatrists are homophobic. □

—Jaime Smith, MD
Resident IV, Psychiatry
University of British Columbia
Vancouver, B.C., Canada

Abstracts of Studies presented at APHA meeting, New York City November 1979.

HEPATITIS B IN MALE HOMOSEXUALS

In order to provide prerequisite data for the design of a hepatitis B vaccine efficacy trial, we undertook an investigation of the prevalence and incidence of hepatitis B (HBV) infection among male homosexuals in 5 US cities. All patients enrolled were tested for hepatitis B surface antigen (HBsAg), antibody to HBsAg (anti-HBs), and if negative for these, antibody to hepatitis B core antigen (anti-HBc). Patients negative for these serologic markers were followed at 4 month intervals. These serologic results were related to a detailed history of sexual practices. 62% of 3,143 patients enrolled in the investigation had evidence of current or past HBV infection as follows: 6.5% HBsAg positive, 52.1% anti-HBs positive for anti-HBc only. The incidence of newly acquired HBV infection at 4 month follow-up of 804 patients was 12.4%, with 4.1% having detectable HBs antigenemia, and 8.6% anti-HBs responses. Serologic evidence of current or past HBV infection was most strongly related to numbers of sexual partners and the practices of anal-genital and oral-anal intercourse. □

—MT Schreeder, MD; SC Hadler, MD; KR Berquist, PhD; IL Doto, MA; JE Maynard, MD, PhD; Center for Disease Control, Phoenix, AZ; SE Thompson, MD; GH Reynolds, PhD, Center for Disease Control, Atlanta, GA; D Hawkins; EH Braff, MD, San Francisco Department of Public Health, San Francisco, CA; T Nylund, Gay Community Services Center, Los Angeles, CA; F Judson, MD, Denver Disease Control, Denver, CO; D Ostrow, MD, Howard Brown Memorial Clinic, Chicago, IL; and J Moore, St. Louis Division of Health, St. Louis, MO.

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HEPATITIS B VACCINE ON THE HORIZON

Hepatitis B virus infection is a common infection in the US, estimated to cause between 45,000 and 160,000 cases of acute hepatitis annually with 15,000 hospital admissions. The financial burden of this disease is considerable, amounting to approximately \$500,000 per day. Methods have been developed to produce purified hepatitis B surface antigen (HBsAg) material from plasma of chronic carriers. These methods primarily rely on ultracentrifugation and column chromatography to purify the antigen and then the material is inactivated

with formalin and adjuvanted with alum.

Safety tests in chimpanzees and humans have been encouraging. To date, the Merck and Co. vaccine has been given to over 500 humans with no detectable side effects other than slight pain at the injection site. Antibody responses, especially with recent batches of vaccine, have also been encouraging. Between 80% and 95% of recipients have developed anti-HBs.

The vaccine has been shown to pro-

tect chimpanzees from wild virus challenge, and human studies are underway. There are 2 large studies planned in the US to determine vaccine efficacy. Both are double-blind trials in highly infected populations of gay males in several cities across the nation. The results of these trials should be available in 2 years and if efficacious, the vaccine should be commercially available soon thereafter. □

—Donald Francis, MD, Center for Disease Control, Phoenix, AZ.

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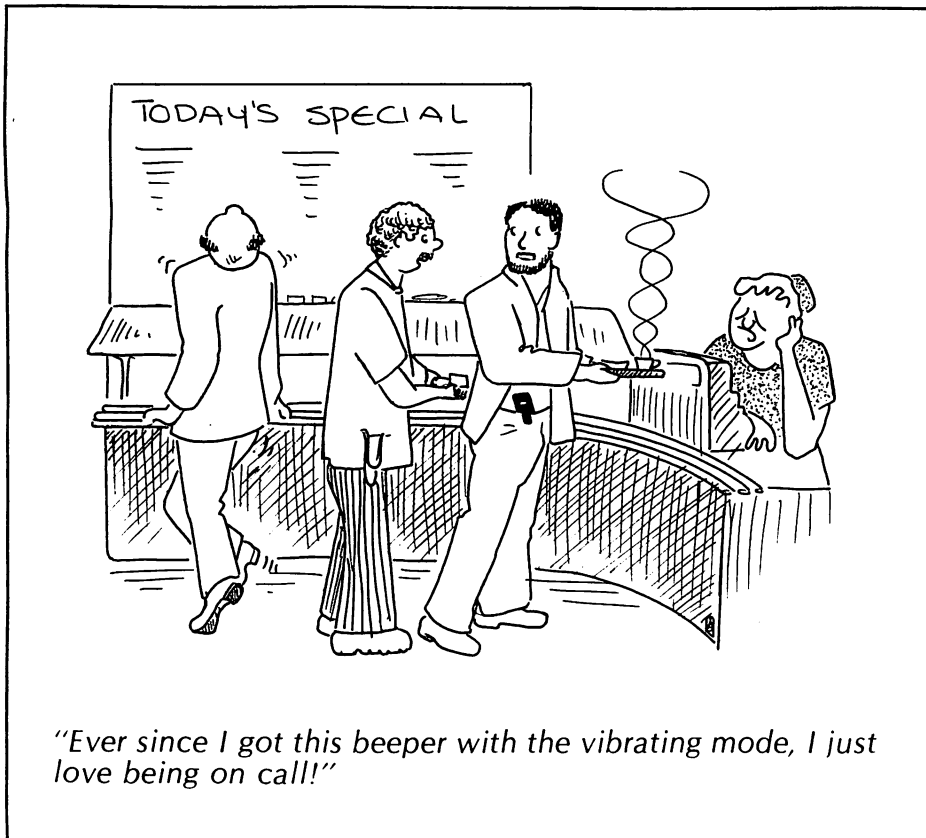
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que experiences of our medical careers.

The general business and guest speakers occupied nearly 3 hours, yet afterwards many individuals remained for another hour or two to discuss new feelings, new ideas, new relationships, new involvement.

It must have been days later (when I was attempting to start an IV in a 3 week old with dehydration) that I recalled my volunteering to investigate the publication of a newsletter for the organization. And days after that when I began to consider the scope of such an undertaking.

Over a year has passed since we pasted together the first issue of the BAPHRON. Within the 80 pages of the first volume of this publication is an incredible investment of thought, planning, and mechanical organization, most of

which has been through the voluntary efforts of staff members, advisors, contributors and publishers.

The variety of articles, photographs, and information produced on these pages is only a glimpse of the many events which they represent. Through the BAPHRON these stories and information are something which we have all been able to share.

In looking toward the future, we are actively soliciting for articles, research manuscripts, photography and art as well as volunteers who may be interested in assisting with such projects.

Through its evolution, the BAPHRON will continue to serve as a national media for disseminating articles and information relating to gay people and gay health care. □

- Bob Hindi, Editor

them into close contact with human distress, and they are concerned with improving the health care of their patients.

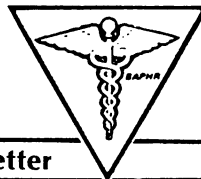
Let us not forget the considerable support we received from our local medical and psychiatric societies in battling the Briggs initiative and in the recent immigration cases. (Incidentally, David Allen, who as editor of San Francisco Medicine wrote a very strong editorial on the Briggs issue, has just been voted President-Elect of the San Francisco Medical Society.)

As I write this close to the first anniversary of Harvey Milk's assassination on November 27, 1978, I am reminded of the significance he attached to the building of coalitions to help achieve our goals. Certainly working with our fellow physicians and within our professional societies is in keeping with that idea.

While we should not necessarily expect to be loved or have all our colleagues feel wholly comfortable with us, there are growing indications that they are prepared to be fair with respect to patient care and in the granting of equal civil rights. □

- Dave Kessler, President

the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

BAY AREA PHYSICIANS for HUMAN RIGHTS is a non-profit educational and research organization having tax exempt status under IRS section 501 (c) (3) and California law.

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The opinions of the Editors and staff are expressed only in editorials and represent only those of the writers. Letters and articles submitted for publication are the opinions of the writers and do not necessarily represent those of the officers or the editorial staff of the BAPHRON. The inclusion of an individual's name or picture in the BAPHRON does not imply one's sexuality.

All ARTICLES and LETTERS for publication should be typed. Letters for publication must contain a statement requesting or allowing publication, must be signed, and an address and phone number are required for confirmation of publication. The writer's name will be omitted upon request. Letters will be published at the discretion of the editor.

The DEADLINE for submitting material to be printed in the BAPHRON will be the 15th of each month for publication in the following month's issue.

SUBSCRIPTIONS to the BAPHRON may be obtained by non-BAPHR members for \$12 per year. Make checks payable to BAPHR, and send to: The BAPHRON, P.O. Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletters should be mailed.

vital signs

- Lisa Capaldini has been voted President-Elect of the Student Division of the American Association of Medical Colleges at its annual meeting during November in Washington, D.C. (She is also serving currently as national co-chairperson of Gay People in Medicine, a branch of the American Medical Students Association.)...
- Jane Patterson, MD, Co-Chairperson of Southern California Physicians for Human Rights, and Dave Kessler, MD, participated in a panel on "Building Bay Political Muscle in the Mainstream Business and Professional Worlds" on November 23rd at the Sixth Annual Conference of the Gay Academic Union in Los Angeles... □

executive consultant reports

Fundraising for organizations takes on a particular urgency in December. For many of us, it is both a time of giving gifts, and of looking at the "end of the tax year" financial picture. The experience of many non-profit agencies and groups is that the last month of the year is the month for seeking contributions.

For some time, the Executive Board particularly has been considering the best ways of engaging community financial support, especially for BAPHR programs such as the Physician Referral Service. In this regard, I recommend that a trial, one-time solicitation advertisement be placed as soon

as possible in the *Advocate*, a nationally distributed gay periodical. The Executive Board authorized the expenditure for a quarter-page size advertisement, and it has been prepared with the assistance of BAPHRON Editor Robert Hindi. The ad will make readers aware of BAPHR, the BAPHRON, and BAPHR's projects, and thus will also be valuable as a national publicity statement. The BAPHR advertisement will appear in *Advocate* issue 283.

Additionally, the Executive Board authorized the opening of a Visa/MasterCharge "merchant" account so that respondents will be able to charge their contributions

and/or non-member BAPHRON subscriptions. Implicit in the advertisement is the first appearance of another trial concept: a "Friends of BAPHR" group. Initially, this will consist of those sending \$25 or larger contribution, and will include a year subscription to the BAPHRON. It is planned that "Friends of BAPHR" will develop into a group of supporters to help BAPHR with fundraising, community projects and other matters. This initial step will to some extent test the attractiveness of a "Friends of BAPHR" concept in the community. □

—Jeff Richards

foramina

CLASSIFIEDS

ADVERTISEMENTS

ANNOUNCEMENTS

EMPLOYMENT WANTED

Board eligible General and Vascular Surgeon with extensive burn experience is leaving the military and seeks practice opportunity. Telephone (913) 537-1526.

EMPLOYMENT OPPORTUNITY

Gay Board eligible or certified Internist, Family Practitioner, Psychiatrist or Clinical Psychologist to share office space part time or full time. Contact Chris Di Maio, MD, 1722 N. Seabright Ave., Santa Cruz, CA 95062 (408) 425-8785.

PUBLICATIONS

FOR ONLY \$1.00 PER ISSUE, you as a non-BAPHR member can have a copy of the BAPHRON mailed to your address each month. Your subscription will keep you up to date on timely medical information and news of social and community events. Subscribe now -- \$12 per year (12 issues). Send check to the BAPHRON, PO Box 14546, San Francisco, CA 94114.

SERVICES

Castle Keep -- Protection & care of home while you're away by MD. Experienced, reliable & reasonable. (415) 566-1374. Brochure: 85 Piedmont, SF 94117. Ins & bond

MESSAGE FOR BEAUTIFUL PEOPLE

Jack McConnell, MA, M Spec Ed -- for years the doyen of S F masseurs -- has returned to private practice here after spending the last four years on the teaching staff of Sonoma State Hospital. Jack is also extension instructor in Spec Ed at SFSU. Clients with medical and/or handicap involvement invited, as well as other beautiful people. Sliding scale. Demos to BAPHR associates. (415) 751-1468.

The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$1.50 per line space per month. Proceeds are non-profit, and will be used to offset the cost of this publication. For different typeface or graphics, please contact the Advertising Editor, c/o the BAPHRON, for details.

All material for publication must be clearly typed, and include an address or phone number for respondents. Material submitted will be printed at the discretion of the Editor. The deadline for receiving material for publication will be the 18th of each month for inclusion in the following month's issue.

Payment should be made by check payable to: Bay Area Physicians for Human Rights, and mailed with the advertisement to the following address: Classifieds, c/o the BAPHRON, P.O. Box 14546, San Francisco, Ca. 94114.

The acceptance of advertising does not in any way constitute endorsement or approval by BAPHR or the BAPHRON of any advertised service or product.

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