

## Two Major Health Conferences to be Held in San Francisco

By Robert Bolan, MD and Jeff Richards

The Third National Lesbian/Gay Health Conference will be held in San Francisco June 19-22, 1980 at San Francisco State University. It is sponsored by the National Gay Health Coalition, local gay and lesbian groups and individuals. The 1980 conference will cover a broad range of topics with a focus on improving health care for lesbians and gay men. The second annual Symposium on Sexually Transmitted Diseases in the gay population will be held in conjunction with the Conference. The Symposium emphasis will be improvement of the definition and understanding of gay STD's for STD workers and researchers.

The call for papers for the *STD Symposium* will be mailed to *BAPHR* members and *BAPHRON* subscribers. A separate call will go out for the *Lesbian/Gay Health Conference*, however, essential Conference infor-

mation is included in the Symposium call.

In 1979 there were two conferences: the *Second National Gay Health Conference* in New York in May and the *Current Aspects of STD's* in Chicago in June. This year's joint conferences will be a significant achievement in the quest to join energies for improving gay and lesbian health care.

The first *Current Aspects of STD's* was sponsored by the University of Chicago, Department of Infectious Disease. King Holmes, MD, PhD, was the keynote speaker and many other noted workers contributed. After the high quality of the conference, the next most important accomplishment was the formation of the *National Coalition of Gay STD Services (NCGSTDS)*. It is a group currently with representation from gay STD services in New York, Boston, Pittsburgh, Chicago, Milwaukee and Tucson. The goals of the *NCGSTDS* are: 1) to establish communication networks

between gay STD services for sharing ideas about research, fundraising, public relations, patient education, procedures and protocols, and 2) to establish working liasons between representatives of the Center for Disease Control and all members of the STD Coalition. The group's chairperson, Mark Behar, (who edits a periodic newsletter), can be reached for further information about the Coalition at: 2161 North Pierce #9, Arlington, VA 22209. There will be an *NCGSTDS* meeting sometime during the Symposium-Conference days. Individuals representing either themselves or gay STD service groups are urged to attend.

Those who wish to contribute some of their time to the important tasks of organizing the Conference or the Symposium are asked to contact Ann Polivka, RN, Co-Chair of the *Lesbian/Gay Health Conference* at (415) 282-3913 or Bob Bolan, MD, *STD Symposium* Director, at (415) 921-5762 or 474-2634 (home). □

## March On Sacramento Planned

The political and social momentum shown so clearly at October's National March on Washington has led to a statewide March on Sacramento for Lesbian and Gay Rights to be held Sunday, January 13, 1980. Endorsed by a large number of gay and political organizations, the focus of the March and subsequent rally will be to gain support for Assembly Bill 1, and Senate Bills 18 and 3, currently before the California Legislature. Additionally, March organizers hope to add voices of protest to the perceived in-

creases of violence directed at lesbians and gay men throughout the state.

Chartered buses have been arranged for the same-day round trip travel from the Bay Area. Sacramento area gay physicians and medical students are also planning a post-March reception for *BAPHR* participants. The March route and rally are wheelchair accessible and interpreters for the hearing-impaired will be available.

For March information, call the San

Francisco office at (415) 864-2748. Bay Area charter bus information is available by calling (415) 885-2110. California Human Rights Advocates is providing lobbying information: call Sacramento, (916) 448-6666.

*BAPHR's* Social Concerns Committee urges all to attend the March, and with gay physician visibility, help give that vital support in the quest for human rights. □

— Jeff Richards

## Awards Dinner Proposed -- Nominations Sought

An annual awards banquet to coincide with the installation of the 1980-81 BAPHR officers was proposed by David Kessler, MD, BAPHR President, at the December Executive Board meeting. The banquet is being conceived as a gala event to honor that individual or group with an award recognising "outstanding contribution to gay health".

Nominations for the award are now being sought from the BAPHR membership. Please address nominations for the award to: Myles Lippe, MD, Awards Dinner, Bay Area Physicians for Human Rights, P O Box 14546, San Francisco, CA 94114. □

— Jeff Richards

## Director of Whitman-Radclyffe Foundation to Speak at General Meeting

Brenda Weathers, Executive Director of the Whitman-Radclyffe Foundation in San Francisco, will speak on "Alcoholism in the Lesbian/Gay Population" at the BAPHR General Meeting on January 20.

This session will address what is currently the most serious health problem facing gay people -- alcohol abuse and addiction.

Brenda Weathers was appointed Executive Director of WRF in April of 1979. Previously she spent five years as the Executive Director of the Alcoholism Center for Women, Inc., in Los Angeles. Brenda has also serv-

ed as a consultant for the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the California Commission on Alcoholism.

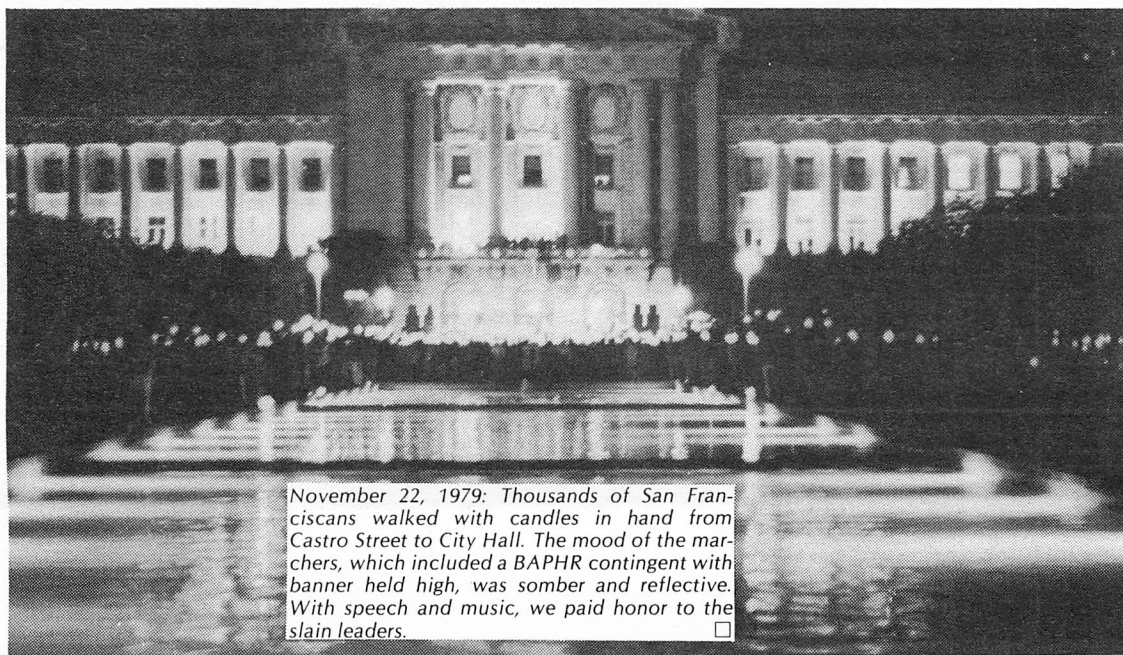
Whitman-Radclyffe is a publicly and privately funded foundation devoted to providing education and treatment services in regard to alcohol and drug abuse for the lesbian/gay community in San Francisco.

—Bob Hindi

## Errata

Richard Rees, PhD, should be credited as author of the article: "A Comparison of Children of lesbian and Heterosexual Mothers..." which was printed in the BAPHRON 1:12, Dec 79, pp. 73 - 74. The BAPHRON sincerely regrets the inadvertent deletion of his name. □

# We Remember...Milk and Moscone

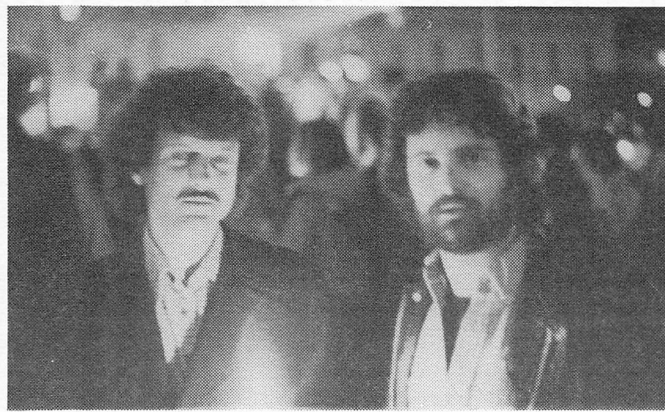


November 22, 1979: Thousands of San Franciscans walked with candles in hand from Castro Street to City Hall. The mood of the marchers, which included a BAPHR contingent with banner held high, was somber and reflective. With speech and music, we paid honor to the slain leaders. □

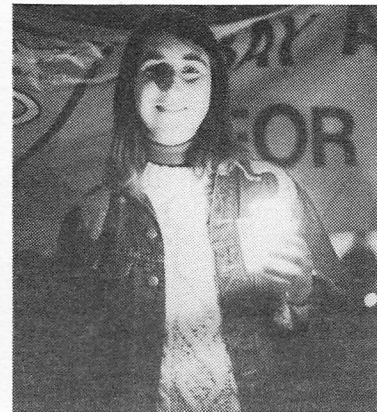
photos: Bob Hindi, Jeff Richards



Bob Hindi



(l. to r.) Bob Bolan and Jeff Richards



Lisa Capaldini

# progress notes

The start of a new decade has been the occasion for stock-taking in many areas. From foreign policy to the to the movie industry, and from professional sports to the economy - all have come in for their share of crystal ball gazing, featuring retrospective "highlights" and prospective "visions".

It would certainly seem appropriate to examine the gay liberation movement in this light. In the remainder of this piece I intend to borrow unashamedly from a most impressive talk given recently in Los Angeles. This was a keynote address at the Sixth National Conference of the Gay Academic Union, the overall theme of which was "The Challenge of the '80's: Our Changing Gay and Lesbian Culture". The speaker was Charlotte Bunch, a leading exponent of lesbian feminism.

For her, the noteworthy achievements of the last ten years were the emergence from their closets of increasing numbers of gay people, and the forging of our own theories and culture with the development of a positive gay identity.

For the 1980's, she said that we need to expand our vision so as to begin to see our closets as social institutions of confinement analogous to ghettos

for Blacks, reservations for Native Americans, kitchens for women. As we rediscover our own collective history we will be able to view it from the perspective of the ongoing American struggle for human rights, the battle between conformity versus diversity.

Most importantly, this will be the decade in which gay power can advance rapidly, moving us into a leadership position in helping to shape our national direction politically, economically, and culturally. We will accomplish this by putting our issue out there - forcing political candidates, for example, to take a stand on gay rights. We will organize our own political and economic resources more effectively, and we will be engaged in building coalitions based on gay strength as well as common interests.

For the first time we will see significant open gay leadership in non-gay areas. We will extend our concerns internationally, building bridges to gay groups in other cultures, and involving ourselves in protests overseas when necessary.

We will continue our ideological offensive, for example, to reclaim the moral language now held by our adversaries, through the use of such

slogans as "America: Love It and Change It", "We Are Your Children", and "We Are The Future".

We will go beyond saying merely that gays are the same as non-gays, and will demonstrate instead that lesbians and gay men have inevitably developed extra sensitivity to differentness derived from their experience of growing up and being gay in a non-gay world. Potentially, therefore, we have something special to contribute to society.

This is for us the challenge of the '80's: to discover that specialness, to be proud of it, and to find opportunities to make it available to others.

We can not, and will not, ever go back! □

-Dave Kessler

## letters to the editor

Dear BAPHR Members:

I wish to thank all of you for the lovely plant I received just as my soul was watching me from the ceiling.

A further debt of gratitude should be paid to your department of design and color as the flowers exactly matched the color in my sclera.

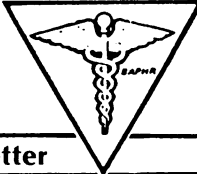
As ever,

Jerry Strong, MD

## vital signs

- Psychiatrist Douglas E. Branch was the featured speaker at the Psychiatric Grand Rounds on December 11 at Pacific Medical Center in San Francisco. His paper was entitled "Traditional Psychotherapy and the Gay Patient: A Conflict in Values".

- Dave Kessler participated in a panel on Homosexuality and the Gay Liberation Movement presented as part of the 22nd Executive Seminar in National and International Affairs sponsored by the Foreign Service Institute of the U.S. State Department. This "is the most advanced training program available to senior career officials of the U.S. Government, and included were 25 high-ranking members of the State Department, CIA, and the Armed Forces. The meeting was held on November 30 at the Haas-Lilienthal Mansion in San Francisco. □

the	BAPHRON	
Bay Area Physicians for Human Rights Official Newsletter		
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# upcoming events

- January 6, Sunday . . . . . EXECUTIVE BOARD MEETING
- January 13, Sunday . . . . . GAY LOBBY MARCH in Sacramento.
- January 20, Sunday . . . . . BAPHR GENERAL MEETING  
Speaker: Brenda Weathers, *Whitman-Radclyffe Foundation* (see related article).
- February 2-3, Sat-Sun . . . . . "CONFERENCE ON HUMAN SEXUALITY: Working with Clients in the Gay Community" at the Airport Marina Hotel in Los Angeles. Participants in the UCLA Extension program will include Betty Berzon, PhD; Marny Hall, LCSW; Stephen Morin, PhD; Martin Rochlin, PhD. The two-day event will fulfill the Human Sexuality Continuing Education relicensure requirement for mental health service providers, as well as qualifying as Category I credit for continuing education for physicians. For fee and information, call UCLA Extension at (213) 825-8421.
- February 9-10, Sat-Sun . . . . . A 2-day symposium on "THE HEALTH OF THE YOUNG AND THE DEVELOPMENT OF SEXUALITY AND GENDER" will be held at the Sheraton-Palace Hotel in San Francisco. The program will include findings which explore gender identification, sex roles, and an analysis of therapies related to sexual disorders. Eleven hours of Category I CME credit will be designated for the symposium. For further information, contact: University of California, SF - Continuing Education in Health Sciences (E90907), 1308 Third Avenue, San Francisco, CA 94143 (415) 666-2894.
- March 4, Tuesday . . . . . "PSYCHOMEDICAL PRESPECTIVES ON HOMOSEXUALITY" will be presented by Lisa Capaldini as part of the monthly seminar series sponsored by the Sutro Society. The seminar will be at 5 pm in the Chancellor's Meeting Room (1st floor, Medical Sciences Bldg., UCSF).
- April 19-26 . . . . . BAY AREA HEALTH FAIR sponsored by KRON-TV.
- May 3-9 . . . . . AMERICAN PSYCHIATRIC ASSOCIATION national meeting, San Francisco.
- June 19-22 . . . . . NATIONAL GAY HEALTH CONFERENCE and CURRENT ASPECTS OF STD's - II, San Francisco State University (see related article).

# foramina

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### HOUSE/APT. EXCHANGE

**HOUSE/APT. EXCHANGE** - 2 men living in Boston will be in San Francisco for 3 weeks in June, 1980. Come to Boston; stay at our place and we'll stay at yours. We also have 2 dogs & a car that could be part of this exchange...or not. Contact Ron Vachon, 11 Union Park, Boston, MA 02118.

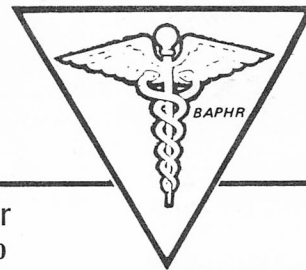
*The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 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.*

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# the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter  
Vol. 2 No. 2 February 1, 1980

## Lesbian Clinic to Open in February

San Francisco's long awaited Lesbian Clinic will officially open on Wednesday evening, February 20, at S.F. Health Center 1 (3850 - 17th Street, near Noe).

Currently under the operation of the Women's Alternative Health Services, Inc., the Lesbian Clinic was initially established at San Francisco General Hospital in September, 1978, as a four month project by BAPHR member Patty Robertson, MD. The purpose was to provide gynecologic services to the lesbian community, and to investigate the incidence of venereal diseases and cervical dysplasia in lesbians. (The findings are under review for publication by the Journal of the American Medical Association, JAMA).

Early in its operation, the clinic had a waiting list of over three weeks,

Continued on page 6

## Receives First Grant from BAPHR

Bay Area Physicians for Human Rights recently granted \$200 to the Women's Alternative Health Services, Inc., to help in covering the initial costs for opening the Lesbian Clinic in San Francisco.

The Women's Alternative Health Services, Inc., was founded in June of 1979 as a non-profit corporation. One specific goal of the corporation is to operate a clinic designed for the needs of the lesbian community.

Funding has proved to be a major obstacle. Approximately \$50,000 is needed to cover six months operating expenses. Fundraising thus far has included a letter of appeal to the public, a raffle, and grant proposals to the Vanguard Foundation, Golden

Gate Business Association, and the Calico Club. In addition, a benefit performance was held in December featuring pianist Margie Adams.

Financial and general support for the Lesbian Clinic is appreciated. Donations (tax-deductable) can be sent to: Women's Alternative Health Services, Inc., 358 Missouri, San Francisco, CA 94107. The telephone is (415) 824-6419. Any extra office supplies or equipment (e.g., speculums, typewriters, etc.) would be most helpful.

With your help, the Lesbian Clinic will be a reality, committed to improving the health care to a segment of the population currently underserved. □



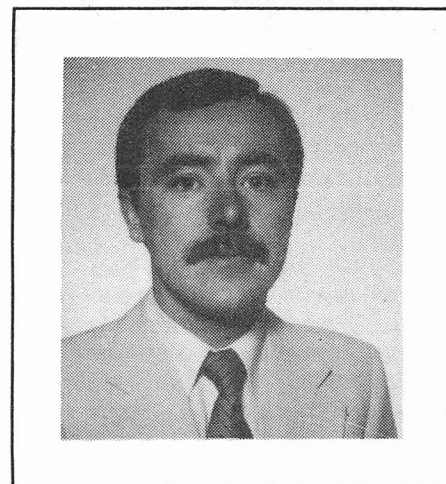
## Lovers of BAPHR Members

A new organization is being formed by and for the lovers of BAPHR members. The goal of the group will be to plan and organize social functions, as well as support our partners, the cause of human rights, and ourselves. The "kickoff" meeting is on February 17, at the same place and time as the BAPHR General Meeting. For information call: Jim at (415) 861-3247, or Artie at 928-3172. Come join the fun! □

## BAPHR Speaks Out

BAPHR's Speakers Bureau has experienced an upswing of activity this past autumn, according to its chairperson, Patrick J. McGraw, MD. "Requests for speakers are up, and the audience response to our speakers is overwhelmingly favorable," McGraw stated.

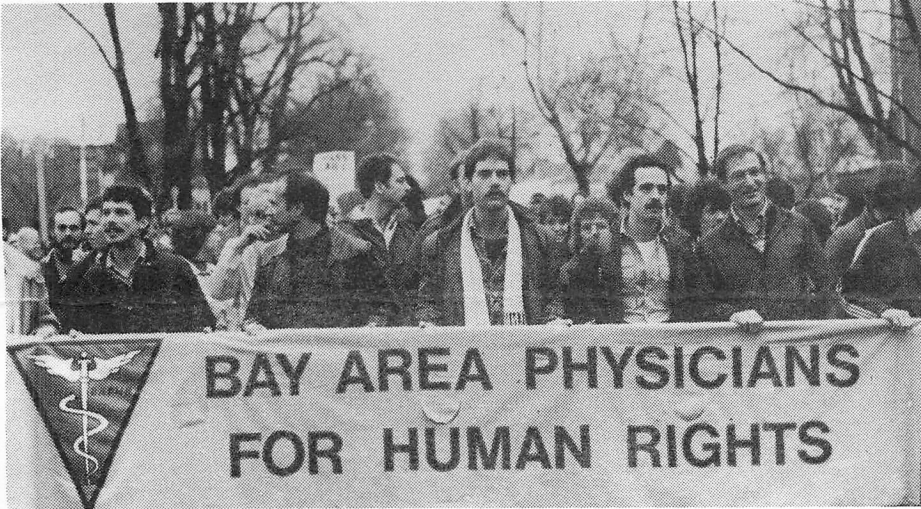
Numerous events in recent months have given the Speakers Bureau opportunities to inform both the medical and lay public about gay medical, psychiatric and social concerns, as well as about BAPHR as an organization. Among these was an all-day seminar on gay social issues sponsored by the South Bay Golden Gate



Patrick McGraw, MD — Speakers Bureau

Continued on page 7

# It Rained On Our Parade . . . . .



The BAPHR contingent



BAPHR members at the Sacramento march: (l to r.) Michael Westcott, Sam Thal and Ric Andrews

A massive downpour was no deterrent to BAPHR members and friends who joined thousands of others in the March on Sacramento for gay rights. Sunday, January 13, 1980 will long be remembered by those stalwart marchers as the wettest day in their lives as well as the day they attempted to convince state legislators to pass law (AB 1 and other bills) to include sexual orientation in the Fair Employment Practices Act.

The BAPHR express bus left San Francisco for Sacramento early Sunday morning where riders were joined by those who drove from their homes throughout California. Included in the marchers was a contingent of Sacramento BAPHR members. They heard speeches by a number of politicians, including Congressman John Burton, State Senators David Roberti and Milton Marks, Assemblymen Art Agnos and Willie Brown as well as S.F. Sheriff Mike Hennessey, and S.F. Supervisors Harry Britt and Carol Ruth Silver. Governor Brown was represented by his Chief of Staff, Gray Davis. BAPHR marchers were featured on more than one television station in reports on the march.

Even though the reception planned after the march was cancelled because the marchers were thoroughly soaked to their waterproofed skins, the experience was an uplifting and unforgettable event. □

SAM THAL, MD

Clinic - from page 5

reflecting the need in the lesbian community for such a service. The clinic served 171 women in a four month period, being open one evening a week with a volunteer staff.

Plans to continue the clinic at SFGH were thwarted by various members of the faculty and the administration. Plans were then made to open at Ralph K. Davies Medical Center/

Franklin Hospital, as part of the Primary Care Unit, along with health care services provided for gay men at this facility. However, after hours of negotiating, and verbal commitment from the administration of the Medical Center, the door was suddenly closed, just as the clinic was scheduled to open. At that time, the women committed to the clinic decided to incorporate as a separate unit, to be able to open in an environment not subject to the whims and

prejudices of faculty or administrators.

The hours of operation of the Lesbian Clinic at Health Center 1 will be Monday and Wednesday from 6 - 10 pm. Comprehensive health care will be provided both evenings with the Wednesday clinic focusing on gynecology.

The number to call for information and referrals is (415) 824-6491. □

PATTY ROBERTSON, MD

Business Association. Subsequent to this event, BAPHR has been asked to provide speakers to several other South Bay gay organizations.

San Francisco's gay *Newcomer Service* also asked BAPHR to talk on gay health issues. When Berkeley's Gay People's Union sponsored a "Gay Awareness Week", BAPHR Education Committee chairperson William J. Kapla, MD, spoke at UC Berkeley's Dwinelle Hall. The BAPHR evening program on gay health was one of a whole week of activities designed to increase public awareness of gay people in the Berkeley area.

Upcoming Speakers Bureau events include two separate in-service training events for physicians, nurses, and other health workers. The largest of these will be a four day seminar sponsored by Alameda County (CA) Department of Public Health. The seminar will deal with health concerns as well as social issues specifically involving gay people, and will involve all county health employees—physicians, nurses, administrators and others. BAPHR will be responsible for a four to eight hour presentation on medical issues. The seminar is scheduled for late February, 1980.

Also upcoming for the Speakers Bureau is a seminar for the Family Practice Residency at San Jose Hospital, where McGraw is on the faculty. McGraw noticed an alarming lack of knowledge about gay lifestyles among some of his residents, particularly as it affected sexually transmitted diseases. He was successful in scheduling time to teach "Approaching the Gay Patient."

A request from the gay students organization at Stanford University led to the third of the in-service programs. Concerned about the lack of gay awareness among the staff of Stanford's student health service, the students requested a seminar for the physicians and nurses who most often treat Stanford's gay students. Bill Kapla gave the in-service program on January 15th.

McGraw appealed to BAPHR members for two kinds of support to the Speaker's Bureau. The first is by volunteering to speak. "We get requests for speakers in all specialities, as well as on social issues," he said,

"and BAPHR members can find opportunities to speak on any area of expertise." Furthermore, McGraw pointed out that the BAPHR Education Committee has prepared educational materials to support speakers in their presentations, including bibliographies and handouts.

The second means of support for the Speakers Bureau is to inform McGraw of any potential speaking engagements. "We are prepared to take on any request, on any issues—medical, psychiatric, or social," McGraw stated.

McGraw can be contacted through his office, at 516 Sutter St., Suite 819, San Francisco, CA 94102, phone (415) 433-5269. □

## po prn Marching On...

The March on Sacramento for Gay Rights must be heralded as one of the strongest statements of dedication to human rights ever in the state of California.

Facing many of the legislators from outside their political closet, thousands of gay rights supporters representing every niche of California joined to March, to speak, and to hear our political advocates.

The rainy moments only served to hold the marchers closer together, and raise their voices louder, as the few rain-drenched antagonists pleaded for some sort of mercy.

The results of a close vote against the inclusion of *sexual orientation* in the "Fair" Employment Practices Act the following week was essentially washed down the streets of Sacramento and drowned in the flood. The spirit of that afternoon will linger on the steps of the Capitol until we march again, even larger in number and more dedicated in objective.

Because lesbians and gay men span all segments of society, all areas of profession, all races, creeds, religions, and cultures, we are truly everywhere, and committed to the acquisition of human rights for us all. □

BOB HINDI, MD



Erwin Haeberle, PhD

## The History of Ideas About Homosexuality

Erwin Haeberle, PhD, DA, will speak on "The History of Ideas about Homosexuality" at the BAPHR General Meeting to be held on Sunday, February 17 at 7 pm.

Dr. Haeberle is author of *The Sex Atlas*, acclaimed to be the best sex atlas currently in print, and recommended for the inservice training of physicians by the California Medical Association. Dr. Haeberle is on the faculty of The Institute for Advanced Study of Human Sexuality in San Francisco. □

## APA Course on Homosexuality

The American Psychiatric Association announced approval of the course, "Understanding/Treating Individuals who are Homosexual" for presentation at their annual meeting. The course will be presented on Tuesday, May 6, 1980 in San Francisco.

The program was designed and will be presented by members of the Committee on Homosexuality of the Northern California Psychiatric Society.

The six hour CME course is planned primarily for the heterosexual psychiatrist. It will cover a broad range of issues related to such areas as research, gay development, gay identity formation, and psychotherapy.

Dr. Don Brown is course director and coordinator. □

## journal club

### THEN AND NOW - VI

Further comparative aspects of medical practice: VD, Rectal Gonorrhea (the "THEN" part of which was horribly personal).

Now I must deal with rectal gonorrhea, however painful are the memories it evokes: During my senior year at U.C. Medical School, one of my defecations entailed such marked discomfort that I looked at the resultant stool prior to flushing and found it to be all but covered with yellowish purulent coating. With some distaste I scraped off some of it to take to school for microscopic exam. (I don't know about now, but then students did all the routine lab work, except blood chemistries, on patients assigned to them, so there was nothing unusual in my preparing a slide of the specimen.) To my horror, if not surprise, staring up at me through the eyepiece were far more Gram negative diplococci per field than could be counted. Needlessly "hoping against hope", I sought a second opinion, and asked a classmate to take a look. His expected response was "Boy, that one really has a dose!" Sulfonilamide, the first of the chemotherapeutic agents, had just that year become available and became the treatment of choice for most infectious diseases, especially for gonorrhea where its supplanting of the messy, uncomfortable urethral instillation of argyrol and potassium permanganate solution (to which I alluded in the November issue of *BAPHRON*), and its significantly better percentage of cures was cause for rejoicing by patients and physicians alike.

I therefore began treating myself in accordance with the regimen employed in urethral gonorrhea, and, lo, I who had never had any allergy found myself to be miserably allergic to that drug! I had to discontinue that treatment of course, but what was I then to do? There was nothing for it but to consult a good physician who had been long in practice. But who? (Remember this was in 1938.) The Student Health Physician was of course out of the question (? of dismissal

from Med School), as were the excellent physicians at Letterman General Hospital where I lived with my father who was the Chief Dental Surgeon.

I finally decided to seek the advice of an Assistant Clinical Professor at U.C. Med School, one of my instructors, whom I knew to be gay.

Accordingly I presented myself at his office in the old Fitzhugh Building, and to his pleasant greeting "What can I do for you?" I, without preliminary, blurted out "I have Neisserian proctitis!" I didn't even know the correct terminology, but, God, did I know the symptoms! Had there been lighted candles in the room, they would have been extinguished by his sharp intake of breath.

Being the fine, compassionate man and excellent physician he is, he soon recovered from the shock I had cruelly dealt him, and very kindly said "Well, we'll have to do something about that, won't we?" I felt like tearfully embracing that superb man. After ruling out concomitant lues, he prescribed the best alternate treatment then available - argyrol or silver nitrate suppositories and the later found-to-be-useless Corbus-Ferry vaccine which initially inspired so much optimism.

I suffered the tortures of the damned for about six months, but at length emerged with a minimum of residual -scarring of the ano-rectal ring -enough to ruin one-fourth of my social (not to say sexual) life.

To coin a phrase, "Every cloud...etc.", I wrote a monograph on rectal G.C. the next year and became known (and successful) in the then so *sub rosa* gay community as the physician for that disease, some patients coming up from Los Angeles.

Doctor \_\_\_\_\_ is now a very old, ill man. My admiration, gratitude, and affection for him will never end. I communicate with him from time to time. □

REX BURNHAM, MD

## Tales of the Party . . .

*I suspect that superlative-laden impressions of my first BAPHR New Year's Eve party are better suited for my diary, but since I was asked to do a little dish about it for The BAPHRON I'll try to show some restraint—newcomers' "Reflections on the City" are almost as boring as another coming out story.*

*But it was a splendid party! Ross Hendricks, MD, graciously hosted the occasion once again this year. From his lovely Sausalito home, commanding panoramas gave a sense of vibrant and electric presence in San Francisco, and in the company of 150 or so (mostly) gay professionals and friends there was a proud, supportive security.*

*The evening abounded with good food, ample libations, and the best ingredient—countless intriguing people. How wise the sage who spake: "So many men, so little time." I understand there was even a laboratory session in the back reaches of the penthouse but alas, no attendance records were kept.*

*On balance, however, most of the intimacies were of the warm, non-physical variety that comes easily to a group of gay people comfortable in one another's presence. It was unfortunate, then, that some people felt compelled to leave upon learning that a non-gay physician of prominence in the S.F. Medical Society was present. He was a welcome guest and his presence on our turf was an implicit show of support, not threat.*

*Moribund Father Time made his last rounds before being swallowed by the gathering mists. But even while the revelers were marvelling at the swiftness of his passing, the all new 1980 Beefy Babycakes trotted his bare buns through the crowd wishing all a hot, action-packed new year. □*

BOB BOLAN, MD

## Executive Consultant Rehired

Jeff Richards, *BAPHR's* Executive Consultant and *BAPHR* work-study funded Secretarial assistant Mark DeWolfe, were rehired by the organization's Executive Board at the January, 1980 meeting. Richards was hired for an additional six months and

DeWolfe for three months.

Bill Barnaby, MD, is the liaison between the Executive Board, Richards and DeWolfe. Jeff Richards can be contacted by *BAPHR* members by calling (415) 861-5884; Mark DeWolfe can be phoned at (415) 821-3563. □



# progress notes

Last month I wrote about some of the achievements of the past decade for gay people in this country, and looked ahead to the challenges of the '80's. Since then I've had the opportunity to review the specific developments in my own specialty of psychiatry during the same period, and I would like to share some of these with you.

The '70's, it must be recalled, started out only a few months after the Stonewall incident in New York. Perhaps in that same spirit, when the American Psychiatric Association held its annual meeting in San Francisco in May, 1970, "outrageous" gay activists interrupted the proceedings to protest the "sickness" label attached to homosexuality. At the next APA meeting in Washington, DC in 1971 a gay leader seized the microphone to explain the consequences for homosexuals of being called "mentally disordered".

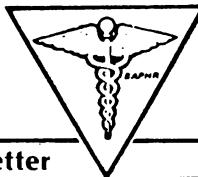
By 1972, in Dallas, a gay APA member was invited to participate in a panel discussion on homosexuality, but he preserved his anonymity by wearing a mask! Early in that same year, a resolution introduced by another gay psychiatrist, calling for the deletion of the term "homosexuality" from the disease nomenclature, was passed by the Massachusetts Psychiatric Society, and was referred to the APA for further action.

After studying the issue intensively for almost a full year, the APA Committee on Nomenclature concluded that homosexuality *per se* did not constitute a mental disorder. This decision was upheld unanimously (with two abstentions) by the APA Board of Trustees on December 15, 1973. Ordinarily this would have ended the matter. However, opponents of the decision demanded that the entire APA membership be polled. In the spring of 1974, over 10,000 ballots were returned, and the action of the Board of Trustees was sustained by a large majority, with only 37.8% opposed.

"Homosexuality" was removed from the diagnostic manual, and the APA also issued a strong position statement deploring discrimination against gay people, and urging the enactment of legislation guaranteeing full civil rights to all homosexuals. These decisions have never been reversed, and have continued to represent the official policy of the APA ever since. They have been publically reiterated by APA officers on repeated occasions, most recently in connection with the gay immigration cases, as well as in 1978, following publication of the results of a survey in the journal *Medical Aspects of Human Sexuality*, in which 2,500 AMA members identifying themselves as psychiatrists (although not necessarily APA members) responded. Of those, 69% opted for homosexuality as usually a "pathological adaptation" rather than a "normal variation", and 43% felt that gays presented a greater risk than non-gays in "positions of great responsibility" (e.g., as physicians?). (To be continued.) □

DAVE KESSLER, MD

# 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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Post Office Box 14546  
 San Francisco, California 94114  
 Phone: (415) 673-3189

### BAPHRON STAFF

Editor.....Robert Hindi, MD  
 Staff.....Sam Thal, MD  
                     Bill Owen, MD  
                     Jeff Richards  
                     and others

### CONTRIBUTORS

Bob Bolan, MD  
 Rex Burnham, MD  
 Mark DeWolfe  
 Bob Hindi, MD  
 Dave Kessler, MD  
 Pat McGraw, MD  
 Bill Owen, MD  
 Jeff Richards

Patty Robertson, MD  
 Sam Thal, MD

### PHOTOGRAPHERS

Bob Hindi, MD  
 Sam Thal, MD  
 Jeff Richards

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, Post Office Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletters should be mailed.

# letters to the editor

Dear BAPHR Members:

We would like to personally thank you for our first grant which will be used to help us open the Lesbian Clinic. The clinic is fast becoming a reality, and your grant will help us cover some of the initial operating costs. We are committed to providing the lesbian community with quality health care services, and to investigate relevant health care issues for lesbians.

Thank you again for your support. We will keep you informed of our progress.

Sincerely yours,

Sharon Mills, RN, MNP  
 President, Women's Alternative Health Services, Inc.  
 Patty Robertson, MD  
 Vice-President, Women's Alternative Health Services, Inc.  
 BAPHR Member

# upcoming events

- February 10, Sunday . . . . . EXECUTIVE BOARD MEETING, 7:00 pm
- February 9-10, Sat-Sun . . . . . A 2-day symposium on "THE HEALTH OF THE YOUNG AND THE DEVELOPMENT OF SEXUALITY AND GENDER" will be held at the Sheraton-Palace Hotel in San Francisco. The program will include findings which explore gender identification, sex roles, and an analysis of therapies related to sexual disorders. Eleven hours of Category I CME credit will be designated for the symposium. For further information, contact: University of California, SF -- Continuing Education in Health Sciences (E90907), 1308 Third Avenue, San Francisco, CA 94143 (415) 666-2894.
- February 17, Sunday . . . . . BAPHR GENERAL MEETING.  
Speaker: Erwin Haeberle, PhD. (See related story this issue.)
- February 20, Wednesday . . . . . Opening of the LESBIAN CLINIC at S.F. Health Center 1, 6 - 10 pm. (See related story this issue.)
- March 4, Tuesday . . . . . "PSYCHOMEDICAL PRESPECTIVES ON HOMOSEXUALITY" will be presented by Lisa Capaldini as part of the monthly seminar series sponsored by the Sutro Society. The seminar will be at 5 pm in the Chancellor's Meeting Room (1st floor, Medical Sciences Bldg., UCSF).
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## 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.

## FOR RENT

**PSYCHIATRIST'S OFFICE SPACE** in Berkeley. Call Ken Everts, 346-7070.

## WANTED

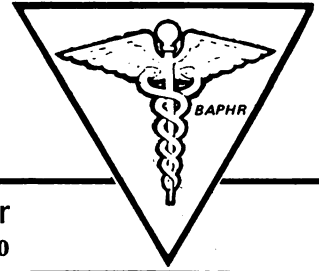
**We are seeking a small number of homes** which might welcome one or two gay or lesbian psychiatrists for approximately a week in May (2nd to 10th). They will be members of the Gay Caucus of the American Psychiatric Association and will be attending the annual spring meeting of the APA. Extensive academic and social programs have been planned by the Gay Caucus for that week. In addition to these programs, we feel it would be both hospitable and educational for people from elsewhere in the country to experience an intimate glimpse of life in the San Francisco Bay Area (elaborate hosting will not be necessary because of the number of activities planned).  
If you have room or questions please contact Robert Akeley at (415) 652-3185 or 885-4373.

*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.*

*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 15th 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.*



## Paul Wiesner to Keynote STD's Symposium

A major symposium on sexually transmitted diseases in the nation's gay population will feature a keynote address by Paul Wiesner, MD, Director of the Venereal Disease Control Division, U.S. Center for Disease Control (Atlanta). Entitled "Current Aspects of Sexually Transmitted Diseases - II", the second annual symposium will be held June 19 - 20, 1980, at San Francisco State University. The symposium is being sponsored by the National Coalition of Gay STD Services, a group of gay STD clinics, service centers and individuals nationwide.

According to Robert Bolan, MD, Symposium Director, "We expect that the most up to date knowledge about sexually transmitted diseases in the gay population will be shared by clinicians, scientists, public health officials and other health providers. I am anticipating that more than 300 will attend the symposium this year to present research and develop new approaches to these problems."

"It is recognised that sexually transmitted diseases in the gay population is a real and growing problem for a variety of complex reasons," said Jeff Richards, Executive Consultant to Bay Area Physicians for Human Rights, the country's first formal organization of gay-identified physicians. "The Center for Disease Control shares this concern with most gay health professionals, and we are excited about Dr. Wiesner's participation in the symposium." Richards is the Secretary for the STD Symposium.

Dr. Bolan stated that "Guidelines for informed, responsible sexual decisions to reduce the spread of sexually transmitted diseases will be

developed based on current knowledge and work done at this symposium. Prior to this time, there has been a lack of unanimity of sexual health recommendations from clearly authoritative sources. Not surprisingly, conflicting and contradictory guidelines have arisen and have usually resulted in confusion among both professionals and the public. Obviously this does little to effectively control the spread of diseases. The myth that antibiotics alone can control sexually transmitted diseases must be replaced with more realistic prevention methods."

Scientific papers and presentations are being sought on a variety of topics, including viral hepatitis, herpes virus, non-gonococcal urethritis, the enteric (intestinal) diseases, and innovative epidemiological methods. A specific workshop to develop guidelines for informed, responsible sexual decision-making will also be held within the symposium.

The symposium will be held concurrently with the Third National Lesbian & Gay Health Conference, also at San Francisco State University. Continuing professional education credits for physicians and nurses will be available through both the symposium and the conference.

For information about "Current Aspects of Sexually Transmitted Diseases - II", contact Robert Bolan, MD, Symposium Director, 2252 Fillmore Street, San Francisco, California 94115 (415) 921-5762 or 474-2634, or Jeff Richards, Symposium Secretary, 4528 Nineteenth Street, San Francisco, California 94114 (415) 861-5884. □

## BAPHRON Seeks Major Corporate Sponsorship

BAPHRON Editor Robert Hindi, MD, announced that Bay Area Physicians for Human Rights has undertaken a major grants drive to find a corporate sponsor for *The BAPHRON*.

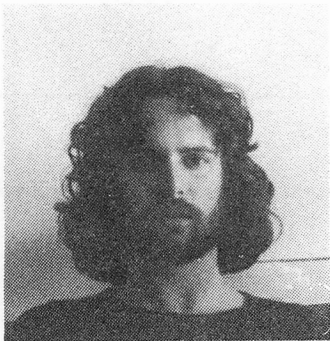
Since January, BAPHR Executive Consultant Jeff Richards and Secretarial assistant Mark DeWolfe have contacted 39 pharmaceutical companies to assess their willingness to review a proposal for a grant of up to \$35,000 to cover BAPHRON production costs. "The crucial part of our vision is our hope to expand *The BAPHRON* into the format of a medical journal," Richards explained. "We hope to increase its size, scope and circulation, but to do this funding sources from outside the organization are required."

continued on page 12

## History of Gay Literature Topic of March Speaker

"A Historical Perspective of Gay Literature" will be presented by Joseph Cady at the BAPHR General Meeting to be held on Sunday, March 16, at 7 pm.

Joseph Cady, a psychotherapist and poet from New York City, is currently engaged in compiling an anthology of gay literature. He formerly taught at Columbia and Rutgers Universities. His current interests focus on education in a non-institutional setting. □



Jeff Richards, BAPHR Executive Consultant



Mark DeWolfe, BAPHR Secretarial assistant

"Only five companies turned us down on the telephone," DeWolfe related. "Of the others, only two have responded negatively to the written proposal at this time. With 32 proposals outstanding, we feel we have a good chance of finding a company to underwrite *The BAPHRON's* production costs, and also grant funds to use for expansion purposes."

Materials sent to the companies included a formal proposal outlining BAPHR's goals, activities, and the role of *The BAPHRON* in medical issues of the gay physician and community, back issues of *The BAPHRON*, a proposed budget and justification, and letters of support from influential BAPHRON readers. These included S.F. Supervisor Harry Britt, former San Francisco Medical Society President Laurens P. White, MD, UCSF Librarian Paul Wakeford, and Barbara Gittings of the American Library Association's Task Force on Gay Liberation.

"Since BAPHR achieved tax exempt status, we are eligible for grants from both corporations and foundations," Richards commented. "This is only the beginning of efforts to make BAPHR's influence more widely felt." □

## executive consultant reports

It has been said by philosophers, psychotherapists (and organizational consultants, no doubt) that in crisis lies both danger and opportunity. Certainly events of the last few months within the world and *Bay Area Physicians for Human Rights* bears witness to this notion.

For BAPHR, the past few months have been ones that included incredible steps full with implication: Continuing Medical Education accreditation applications, funding proposals for corporate sponsorship of *The BAPHRON*, numerous important speaking engagements by members across the United States, solicitation of funds from the community, and significant media attention, to name but a few. Also important to note are some "facts of organizational life": the treasury is not overflowing with funds, several of the BAPHR's officers have announced their intent to retire from office at the end of their terms, committees are in need of new members to carry on numerous significant projects, and new directions for BAPHR are still being formed.

Therefore, BAPHR is at a necessary

crossroads—a sign that the organization is in fact well-known, ambitious, and populated with so many knowledgeable women and men of diverse interests and strong opinions.

BAPHR can anticipate some difficulties to be overcome in both meeting the personal needs of its members and in responding to its already recognized leadership role in emerging gay medicine in America.

Perhaps the most pressing need is for more members to take on challenges of personal interest; for some, that could mean direct involvement with the operation of BAPHR, and for others, utilizing the framework and impressive human and political resources of BAPHR to pursue projects to change the quality of life for gay physicians and the community as a whole.

Many members, patrons and supporters give by maintaining their membership year-to-year, thus building the foundation from which BAPHR is growing. This too is important in this time of danger and opportunity. (To be continued.) □

JEFF RICHARDS

## Gay Health Group Is First in New Zealand

A new association called the Gay Health Workers Alliance (GHWA) has been organized in New Zealand.

D. O'Connor, of the University of Auckland Medical School in New Zealand reported that the group had been founded in the June 13, 1979 issue of the *New Zealand Journal of Medicine*. The association was formed at the annual meeting of the National Gay Rights Coalition, an organization similar to the U.S. National Gay Task Force. GHWA joins a growing list of gay medical groups (including BAPHR) in the U.S., Canada and Great Britain.

The group is open to gay doctors, medical students, nurses, social workers and allied health professionals. O'Connor did not reveal the current membership statistics of the new organization but said the GHWA

would like to see formation of similar groups at medical centers throughout New Zealand.

The goals of GHWA are 1) to provide mutual support for gay health professionals in dealing with work-related problems; 2) to insure protection of the rights of gay patients; 3) to encourage education on homosexuality in medical, nursing and social work schools in New Zealand; and 4) to lobby for gay rights in New Zealand in conjunction with the National Gay Rights Coalition.

O'Connor noted that individuals who are interested in learning more about GHWA may write to Dr. I. Scott, University of Auckland Medical School, Private Bag, Auckland, New Zealand. □

BILL OWEN, MD



# Bill Garrard - A Remembrance



I met Bill Garrard in the summer of 1973, soon after arriving in the city. A friend had recommended his neighbor—a gay doctor, he said, very good, very kind, and very political. Bill was practicing then on the first floor of his home. The ambiance was of cats scampering upstairs, classical music tapes and oriental rugs, *Playgirls* under the ferns. He was tall and charming, with a high forehead and light brown hair, a mild Georgia twang, and a healthy appreciation of the lofty and playfully lewd.

And he was committed. Fresh from an upbringing through medical school in the South, followed by an internship here at Pacific Medical Center, he had opened on Noe Street not only a practice in primary care but a personal mission. He spoke out publicly and repeatedly, raising the awareness in the gay and medical community, as well as in the community at large; from a noon lecture series at the University of California on the spectrum of gay health issues to more candid seminars for gay groups such as "Taking Care of Your Bottom". For those several years, he was the sole visible gay movement in the medical community. When BAPHR's first meetings were held in Bill Owen's apartment, Bill Garrard came, bringing his energy and experience.

In the summer of 1976, after my freshman year of medical school, Bill and I maneuvered for a two month clerkship which I spent learning gay primary care in his office, now at Franklin Hospital. We saw patients together daily, and he lead me through the gram stains of infectious disease, the smoke of proctology and, above all, the humanness of psychiatry.

There were moments. Like a day a slovenly older man barged into the office on a very busy day, demanding in an alcoholic Southern drawl an immediate appointment with "Dr. Gahrhd". Before being turned out, he left a hasty note to be called at his



hotel, signed—Tennessee Williams. "Sure," Bill mused, reading the note the third time, "and I'm Queen Mary." But promptly he called. Soon the strangely agitated man returned. Having read about Bill in the *Advocate*, he wanted his pressure checked, confidentially. And then he was gone—until about five minutes later when back he was being carried, bleeding from a fresh forehead laceration sustained in the lobby's unseen separating glass doors. Later, after the frenzied acute care of that memorable afternoon, we reflected together how our new patient had indeed depended on the kindness of strangers.

More recent years were the hardest—years of chronic hepatitis, withdrawing from practice, loneliness, a limbo time as assorted pasttimes and environments. I last saw Bill at the Gay Freedom Day Parade 1979. This is a way I remember him—collegiately dressed, marching bouyantly with the BAPHR contingent (see photo). Bill had established that as physicians and as people, we could come out and be free, that we could do what it was we wanted to do. He taught, by example, the joys and costs of that freedom, that others might follow more easily.

□

JEFFREY COHEN, MD

Memorial services were held for William Farley Garrard, MD, at St. John the Evangelist Episcopal Church on Sunday afternoon, January 20, 1980. Bill passed away while visiting with friends in Willits, California the previous Saturday. After his encounter with hepatitis three years ago, which limited his ability to practice medicine, Bill had built a cabin on forest property near Willits and enjoyed spending his time working on this sylvan retreat. At his request, his ashes will be scattered among, what he called, his "redwood fairy ring" where his retreat is located.

Bill graduated from the University of Georgia Medical School in 1972. He had come to San Francisco Presbyterian Hospital in 1970 to attend a study program during his senior year in Medical School. The following year he returned to Presbyterian for his internship. From his first visit to San Francisco, Bill was committed to the establishment of an openly gay practice of medicine. He had informed his professors and colleagues during internship of his intention and had their support. He also informed the Medical Board of California and received their approval. In 1972 he opened his private practice on Noe Street but also served on the staff of Cowell Memorial Hospital at the Berkeley campus of the University of California, and as staff physician for Hospitality House in the San Francisco Tenderloin. As his practice expanded he formed a partnership and moved his offices to the Ralph K. Davies Medical Center.

Bill was born in Columbus, Georgia, April 28, 1944. He attended Darlington School for Boys and Emory University. He taught school for a year before deciding to become a physician. He is survived by his father, a professor at the University of Massachusetts, and by his friends who hold him in affectionate remembrance. □

MARTIN F. STOW

## Chronic Liver Disease in Gay Men

2,612 symptomless homosexual men attending the VD clinics in London were screened for hepatitis B surface antigen (HB<sub>s</sub>Ag, Australia Antigen, HAA). Five per cent (129) were positive for HB<sub>s</sub>Ag. 65 of these HB<sub>s</sub>Ag positive men had bilirubin, alkaline phosphatase and SGOT laboratory tests performed; 43 were found to have abnormalities in these liver function tests. In 34 of these 43, liver functions remained abnormal; 25 of these patients agreed to have a liver biopsy. Fourteen (56%) of the 25 men had either chronic active hepatitis or active cirrhosis on biopsy. Thus there exists a population of homosexual men without symptoms or signs of liver disease but in whom infection with hepatitis B is associated with severe and possibly progressive, histopathological changes in the liver.

In another noteworthy finding, 118 of the 129 HB<sub>s</sub>Ag positive men were tested for "e" antigen (HB<sub>e</sub>Ag) which has been correlated with a high incidence of transmission of the hepatitis B virus. In this study, 45 (38%) of the 118 were HB<sub>e</sub>Ag positive. Sexual contacts of these individuals may be at particular risk of infection.<sup>1</sup>

## THEN AND NOW - VII

I cannot now think of changes in medicine sufficiently dramatic to take space herein for comparison. Perhaps you might ask me or forward questions to *The BAPHRON* which I will then deal with in later issues.

Thus, I will have to concern myself with gay issues of today compared to those of yesteryear which was initially announced as a part of these reflections, though comparative medical practices are certainly far more appropriate for this publication. I am one of the several *BAPHR* Physi-

## Campylobacter Revisited

In the June 1979 issue of *The BAPHRON* (1:6, 1979), it was reported that *Campylobacter* is not homosexually transmitted.<sup>2,3</sup> Now two investigators from Liverpool, England report the case of a 36 year old gay man who complained of fecal pus but no diarrhea. Cultures for *Neisseria gonorrhoeae* were negative but cultures for *Campylobacter jejuni* on a selective medium were positive. The patient responded to a one week course of erythromycin and follow-up cultures were negative.<sup>4</sup>

## Urologic and Neurologic Complications of Anorectal Herpes

In a VD clinic in London, 236 men with anorectal or genital herpes were seen over a two year period. Eleven of these patients were homosexual men, age 25 to 30, who complained of burning rectal pain and in whom tests for anorectal gonorrhea and syphilis were negative. Four men had herpetic ulcers on the anorectal mucosa. Herpes simplex virus was cultured on human embryonic kidney cells from seven patients.

All eleven of the patients developed urinary dysfunction two to 14 days after the onset of the rectal pain. The urinary dysfunction, lasting from four to 21 days, consisted of difficulty in

starting urination, a poor stream and a sense of incomplete emptying of the bladder. Two patients actually required urinary catheterization because of retention.

Seven patients complained of aching pains in the buttocks and upper thighs, five had paresthesias in the same region, five men were unable to achieve an erection, one patient had diminished sensation in the S<sub>2</sub> and S<sub>3</sub> dermatomes and two men had an absent bulbocavernosus reflex.

The authors concluded that this constellation of urologic and neurologic signs and symptoms suggests herpetic involvement of the lumbosacral nerve roots or of the meninges covering the sacral spinal cord.<sup>5</sup>

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□

cian Referral Service telephone answering volunteers, and my wake-up call on a recent Saturday morning was from a young man (26) who said he was having rectal bleeding.

"Do you have hemorrhoids?", I asked. "Well, yes, I do, but this is entirely different and serious."

"Do you engage in rectal sex? I am a doctor."

"Oh! You're a doctor, then I better tell you the whole thing. Last night I used a vibrator in my rectum, and the end (*distal*) section became detached.

It has some sharp things sticking out, is pretty large in diameter, and I can't get it out!"

My heart went out to the poor guy, and I got in touch with Dr. Elliot Brender to whom I explained the problem. Although it was Saturday morning early, Dr. Brender was good enough to meet the unfortunate caller at Presbyterian Emergency Room where I am sure he resolved the wretched situation—I do not

upcoming events

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- June 19-22 . . . . . THIRD NATIONAL LESBIAN & GAY HEALTH CONFERENCE and CURRENT ASPECTS OF STD's - II SYMPOSIUM, San Francisco State University. (See related story this issue.)

EMPLOYMENT WANTED

**Internist/Cardiologist**, 43 y.o. white, single American born with special interest and training in Electrocardiography and Stress Testing. Interested in relocating in Bay Area. Please contact C.P. Duren, MD, RR #1 Box 387, Kendallville, IN 46755. Home telephone (219) 347-1551.

**CREATIVE** enthusiastic night owl, graduate of Silva Mind Control with experience in clinics, OB, teaching & Med-Surg., interested in sickness prevention seeks full-time career in physician's office or clinic. (415) 673-4743, Bobbie Jeanne Kennedy, RN.

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.

**WEEKEND PSYCHOTHERAPY GROUP:** An intensive group experience for gay men conducted in a Victorian house in San Francisco's Castro Village by Steve Morin, PhD & George Shardlow, PhD, clinical psychologists. Next group: March 21-23. For future group dates and additional information contact Dr. Shardlow, 2127 Channing Way, Berkeley, CA 94704, (415) 548-1590.

FOR RENT

**2 BR, fur river cabin**, Guerneville. Call George Riley, 839-4164.

WANTED

We are seeking a small number of homes which might welcome one or two gay or lesbian psychiatrists for approximately a week in May (2nd to 10th). They will be members of the Gay Caucus of the American Psychiatric Association and will be attending the annual spring meeting of the APA. Extensive academic and social programs have been planned by the Gay Caucus for that week. In addition to these programs, we feel it would be both hospitable and educational for people from elsewhere in the country to experience an intimate glimpse of life in the San Francisco Bay Area (elaborate hosting will not be necessary because of the number of activities planned). If you have room or questions please contact Robert Akeley at (415) 652-3185 or 885-4373.

Individuals  
Families

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Groups

Counseling/Therapy

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**INSTITUTE**  
For Rational Living

Lou Bordisso, MA  
member of the Association of Gay Psychologists

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2455 Ocean Avenue  
San Francisco, CA 94127

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.

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 15th 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.

know of the follow-up—but I can't think it was a very pleasant procedure.

I advised the caller hereafter to confine such activities to safely attached penises or if during onanism possibly a more sturdily built vibrating dildo which, I think, cannot come apart.

When the anal sphincter muscles are completely devoid of tone, the diameter of the fully relaxed anus has always amazed me. I well recall my first demonstration of this: when doing anesthesiology I had given a patient a low spinal anesthetic, and during the course of the operation (I don't recall the diagnosis) the surgeon, a proctologist, inserted with ease his hand and wrist well into the rectum to my wide-eyed surprise (and some initial doubt about the man's fitness to practice!). Of course his hand and arm were well lubricated, and he proceeded with gentle slowness.

These cases bring to mind a very unfortunate patient at S.F. General

Hospital when I was a 3rd year med student in which year all our clinical work was at that hospital.

There was quite a number of patients from whose hands large carrots and similar foreign objects had escaped to become inextricably (to the patient) lodged in the rectum, but medical extraction thereof was a relatively simple, safe undertaking. However, this one wretched guy was wont to employ a light bulb screwed into a cord for the heat thereby produced, and during the course of his ministrations the bulb broke, penetrating the rectal wall in several places! This was a year or two before the advent of any chemotherapeutic agents or antibiotics, and peritonitis was a touch-and-go matter with a high mortality. The poor man died.

I have previously referred to pneumonia, lues, and G.C. in the days before chemotherapeutic agents and antibiotics, but equally changed has been the treatment of, for example, diphtheria, strep throat, rheumatic fever, scarlet fever, subacute bacterial endocarditis (formerly

100% fatal), some tropical diseases, and many, many others.

As you know, the mouth is the "dirtiest" pathogenic orifice of the human body—far worse than a dog's, cat's, or other non-rabid animal, and the human bite such as occasioned by the common sock-in-the-mouth with resultant mild tooth lacerations usually resulted in septicemia. We used at first continual hot packs (was it Dobell's solution?), but usually had to amputate the arm, and even after that the patient frequently died of generalized septicemia.

You younger physicians, whose matriculation began after 1939 when penicillin and some of the sulfonamides were available simply cannot possibly imagine the dramatic, wonderful revolution in medical practice resulting from the development of these marvelous drugs.

Even I was fortunate since they appeared on the scene in my senior year and internship, so that my post-graduate practice was ineffably facilitated, but I can never forget the horrible suffering and frequent deaths of patients when I was a med student.

Well, this has been a depressing communique', so raise me from the doldrums by seducing me. I am quite a linguist, and in 29 languages can say yes. □

REX BURNHAM, MD

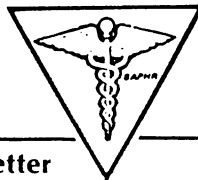
## Whistle Awareness Month

The Butterfly Brigade has declared March as "Whistle Awareness Month" during which an intensive effort will be made to educate people on the effective use of the whistle/response method to counter violence against lesbians and gay men.

The Butterfly Brigade, which has expanded its three year non-profit whistle distribution program, will join with other community service organizations to give information on the anti-violence campaign and to sell whistles in a number of San Francisco locations on weekend nights throughout March.

To volunteer to assist in this effort, call (415) 626-3131; for further information contact Martin Van Horne at (415) 626-7440. □

# 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)(13) and California law.

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Executive Consultant	Jeff Richards
Secretarial assistant	Mark DeWolfe

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Post Office Box 14546  
San Francisco, California 94114  
Phone: (415) 673-3189

### BAPHRON STAFF

Editor	Robert Hindi, MD
Staff	Sam Thal, MD
	Bill Owen, MD
	Jeff Richards
	and others

### CONTRIBUTORS

Rex Burnham, MD  
Jeff Cohen, MD  
Mark DeWolfe  
Bob Hindi, MD  
Dave Kessler, MD  
Bill Owen, MD  
Jeff Richards  
Martin Stow

### PHOTOGRAPHERS

Jeff Cohen, MD
Bob Hindi, MD
Sam Thal, MD
Jeff Richards

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.

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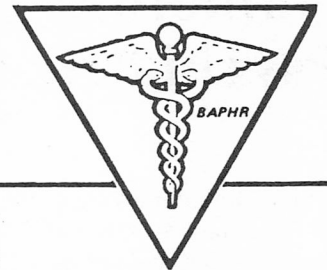
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# the BAPHRON

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Vol. 2 No. 4

April 1, 1980

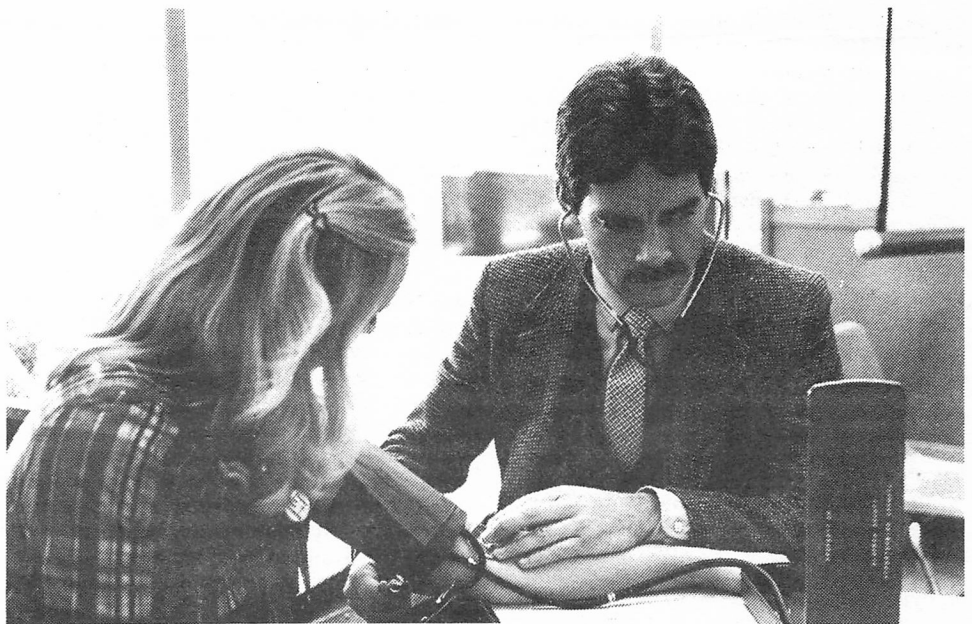
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## Health Fair '80 - We Need Your Body!

by Richard Andrews, MD, Fair Coordinator

Health Fair 1980, April 19 and 20 at San Francisco Health Center 1, is only a few weeks away. Hopefully you will have noticed one of the promotional posters at your favorite bar, restaurant or grocery store. At the time of publication, the following organizations have pledged their participation: BAPHR, California Lesbian Physician Association, Northern California Dentists for Human Rights, Lesbian and Gay Health Workers, SF Health Center 1, The Advocate Experience, SF City (VD) Clinic, SF School of Podiatry, Operation Concern, The Center for Special Problems, Whitman-Radcliffe Foundation, as well as KRON-TV, the American Red Cross, and Chevron. Plans are well underway which should make this year's Health Fair even more successful than in 1979.

For those of you not present at the March BAPHR general meeting, let me acquaint you with some of the benefits of last year's Fair. The response of the participants, some 40% of whom were non-gay, was overwhelmingly favorable. There was a palpable feeling of pride and appreciation by both gay and non-gay people. The Health Center 1 staff, headed by Hope Corey, MD, was noticeably impressed by the professional, well organized, warm and friendly group of volunteers. As a direct result of the Fair's impact, Health Center 1 now has a VD screening program, two new gay staff members, and low-cost leasing for the Lesbian Clinic. It was also an opportunity for BAPHR members to work with other physicians and health professionals in a cooperative atmosphere, and to personally make a



Ric Andrews, MD: 1979 Health Fair

contribution to the welfare of individuals in the community. Needless to say, it was quite an exciting weekend!

As was indicated in an earlier letter mailed to BAPHR members indicated, there is something that each of us can do, whether it be helping with registration, taking blood pressures, doing VD checks, or directing traffic. Please be aware that many Fair locations will have no physician participation at all. The Review/Referral Station, for example, will be staffed by RN's and LPN's, and while a familiarity with general health and medical problems is needed, one need not be an internist or family practice specialist to assist. As mentioned, recent expertise is needed for only three stations: Blood drawing; VD screening; and PAP smears.

Being on time will allow volunteers an opportunity to become thoroughly acquainted with the procedures at each station and will help everything run more smoothly. In the event that some emergency should prevent your attendance, it is essential that Richard Andrews be notified so that rescheduling can be arranged.

Let me take this opportunity to thank the many people who have already volunteered. For others there is still time, so please complete the Health Fair sign-up sheet today. *We need you!* The 1980 Health Fair will again provide BAPHR with some of its finest hours. For additional information, or to volunteer, please call the answering service for Richard Andrews: (415) 567-4341.

See you at the Fair!



# Numerous Activities Planned for May's American Psychiatric Association Meeting

The annual meeting of the American Psychiatric Association will be held the week of May 3rd in San Francisco. Bay Area Physicians for Human Rights has planned numerous activities for that week in conjunction with *The Gay Caucus of Members of the American Psychiatric Association (GCMAPA)*, and several members will be participating in the official program. The following information includes highlights of the APA meeting week:

★ Before the convention starts, there will be a 3 hour San Francisco Bay cruise on **Saturday, May 3**. A light buffet will be served. The cruise is also planned as an opportunity for Caucus members, BAPHR members and other gay physicians and professionals to meet one another.

Capacity is 250, and reservations will be processed in the order received. Friends, lovers and spouses are heartily welcome. Please make your check in the amount of \$20/person payable to: GCMAPA - Bay Cruise, and mail to Richard Andrews, MD, 179 Lower Terrace, San Francisco 94114. Because of time constraints, there will not be formal confirmation or tickets. Check-in time will begin at 2:30 pm, and the boat will leave promptly at 3:00 pm from Pier 43½, Fisherman's Wharf. The deadline for reservations is April 15. For further information, call Dr. Andrews at (415) 621-6291 or 567-4341.

★ The GCMAPA cocktail party will be held **Sunday, May 4th**, from 5 - 7pm at the St. Francis Hotel on Union Square (Colonial Room). There will be refreshments, entertainment, and a no-host bar.

★ The American Academy of Psychoanalysis will sponsor a panel entitled "The Homosexual and Society" on **Sunday, May 4th**, at the Hyatt Union Square, Plaza Ballroom East (second level). No registration is necessary for this open meeting - the public is welcome. The Chair will be Robert M. Naiman, MD; panelists and topics will be Betty Berzon, PhD: *Forging a Positive Gay Identity*; David R. Kessler, MD: *Society and Fear of Homosexuality*; and Judd Marmor, MD: *The Myth of Homosexuality as Mental Illness*.

★ The Registration Fee Schedule for the APA annual meeting **May 5 - May 8** will be \$100 for non-members, \$25 for non-member interns, residents and students. The non-member 1 day registration fee will be \$25; spouses and guests of full-time registrants will be \$15. Admission to sessions will be by badge only.

★ The GCMAPA will sponsor an exhibit **May 5 - May 8**, with the theme "Homosexuality—A Decade of Research". The location will be Booth N 25, Scientific Exhibits Section, SF Civic Auditorium/Brooks Hall.

The exhibit will demonstrate the scope of recent scientific studies of homosexuality through use of brief abstracts. New and helpful information will be presented in the evaluation and understanding of clinical issues related to homosexuality. A selected sample of current books will be displayed for reference purposes.

The broad conclusions to be derived from the exhibit include: 1. Homosexuality per se is not necessarily related to pathology; 2. Non-patient homosexuals and heterosexuals have comparable levels of psychosocial functioning; and 3. Fear of homosexuality is associated with myths and stereotypes regarding gender role and other factors.

★ "Understanding/Treating Patients Who Are Homosexual", APA Course #52, will be presented **Tuesday, May 6**. The Director will be Donald Brown, MD; faculty will be Robert Akeley, MD, Kenneth Everts, MD, Peter Greenburg, MD, James Krajeski, MD, Carol Cohen, MD, George Riley, MD, Joseph Gutstadt, MD, Elizabeth Harrison, MD, Thomas Lowrey, MD, and Audrey Mertz, MD. The course is primarily for heterosexually-oriented psychiatrists who wish to re-examine their approaches to the psychotherapy of homosexual patients.

The course objective is to explore normative models of homosexual functioning, sensitive areas in relationships with homosexual patients and skills in dealing with therapeutic issues. A variety of educational techniques, including videotaped typical therapeutic situations and small group meetings, will be utilized. Time: 10:15 am to 5:15 pm; fee - \$60. Pre-registration is required.

★ A panel entitled "Homosexuality and DSM III: Where Do We Go Now?" will be presented **Tuesday, May 6**, from 8 to 10 pm and co-chaired by David Kessler, MD and Nanette Gartrell, MD. Panelists include Richard Pillard, MD, James Krajeski, MD, Richard Green, MD, and Norman Levy, MD.

Topics to be presented will be *Ethical Issues in Psychiatric Evaluation, Certification, and Court Testimony Involving Homosexuality*; *Is There Scientific Justification for the Diagnosis of "Ego-Dystonic Homosexuality"?*; *Relationship Styles of Middle-Aged Male Homosexuals: Guidelines for Therapy*; and *What Can the Healthy Homosexual Teach Us?*

★ "Fear of Homosexuality: Origins, Effects and Cures" will be the topic of a panel offered **Wednesday, May 7**, co-chaired by Jalma Perry, MD and Emery Hetrick, MD. Panelists will include Thomas Lowry, MD, A. Damien Martin, EdD, Charles Hitchcock, MD, David Kessler, MD and Jaime Smith, MD. The time will be from 8 - 10 pm.

Presentations will include *Fear of Homosexuality: An Historical Survey of Church, State and Psychiatry*; *The Rhetoric of Homophobia*; *Current Attitudes Towards Homosexuality*; *Origins and Consequences of Homophobia in Gays and Non-Gays*; and *Treating Gay Self-Hate*.

★ On **Thursday, May 8**, "Gay Psychiatrists Come Out: Clinical and Personal Issues" as a panel co-chaired by Jean Munzer, MD and Stuart Nichols, Jr., MD. Panelists will be James Paulsen, MD, David Kessler, MD, James Krajeski, MD, and Nanette Gartrell, MD. Time: 8 - 10 pm.

★ **Additional information** during the convention may be obtained at the GCMAPA Booth (N 25 Scientific Exhibits Section, Brooks Hall), or at the GCMAPA Hospitality Suite.

★ GCMAPA has arranged a weekend at Fife's resort on the Russian River for **May 9 -11**. The gay resort is approximately 60 miles north of San Francisco in Guerneville (Sonoma County); the management has made the resort available to Gay Caucus members and friends at last season's rates for those who identify themselves as members when making reservations. Fifty cabins and 25 campsites in the wooded area adjoining the river are available; the resort has excellent dining facilities, a lodge and disco. Available are 1 room cabins with bath for 1-2 people; 2 room cabins for 2-4 people; luxury cabin with 3 bedrooms for up to 6 people; and campsites.

For reservations and information, call or write Fife's, P O Box 45, Guerneville, CA 95446 (707) 869-0656. Don't forget to identify yourself as part of the Gay Caucus of the APA for the lower rates. For additional information, contact Richard Andrews, MD: (415) 621-6291 or 567-4341. □

JEFF RICHARDS

# journal club

## Hepatitis A in Gay Men

That hepatitis B may be sexually transmitted in homosexual men has been documented in numerous reports over the past eight years. Physicians in San Francisco and in other cities with substantial gay communities have also observed a high incidence of non-B hepatitis (hepatitis B surface antigen negative). Until a test for antibody to Type A hepatitis recently became available to clinicians, however, it was not known whether this non-B hepatitis was, in fact, type A or some other type.

One hundred two homosexual men attending a VD clinic in Seattle were evaluated monthly for three to fifteen months with questionnaires concerning symptoms and signs of hepatitis and serum tests for hepatitis A antibody. Diaries were kept by the patients concerning the number of partners, type of sexual contact, and time of each contact. A comparison group of 57 heterosexual men was also similarly evaluated.

Hepatitis A antibody, indicating previous hepatitis A infection, was initially detected in 30% of the homosexual men and 7% of the heterosexual men. During the study period of 18 months, infection with hepatitis A developed in 7.8% of the homosexual men and in none of the heterosexual men. Infection with hepatitis B developed in 9.8% of the homosexual men during the study period.

The high incidence of hepatitis A among the gay men who were evaluated was correlated with sexual activity and oral-anal contact. On the other hand, acquisition of hepatitis B

in gay men appeared to be significantly correlated with the frequency with which subjects took the passive role during anal intercourse.<sup>1</sup>

## NEJM Editorializes On Gay STD

The *New England Journal of Medicine*, often considered to be one of the most prestigious medical publications, has been remarkably conservative in its treatment of articles related to the topic of sexually transmitted diseases in homosexuals. A forthcoming review of STD's in gay men written for another journal includes 57 references to articles published over the past decade about sexually transmitted diseases and traumatic problems in homosexuals. Six of these bibliographic references were *NEJM* citations but three of these were letters and one was a general review article on chlamydial infections. The remaining two citations were to an article on gonococcal proctitis and to a paper on the role of saliva, urine and feces in the transmission of hepatitis B. *NEJM* has never published a general review article on the subject of sexually transmitted diseases in homosexual men despite the prevalence of the problem, even in Boston.

We were therefore greatly surprised and pleased to read the February 21, 1980 issue of the *NEJM* which includes not only an original article on hepatitis A in gay men (see above) but also an editorial on "Medical Aspects of Homosexuality".<sup>2</sup> The author, who has been associated with the San Francisco Department of Public Health for a number of years, notes that the in-

cidence of amebiasis, giardiasis, shigellosis and hepatitis (types A and B types) have increased by orders of magnitude between 1974 and 1979. Most of this increase has occurred in homosexual men between 20 and 39 years of age. But the most disturbing statistics are that between five and ten percent of all patients with amebiasis, giardiasis, shigellosis and hepatitis A (and the asymptomatic contacts of these patients) are employed as food handlers in San Francisco Bay Area restaurants.

The author calls for educating both physicians and the public about the "new" STD's, more rapid laboratory techniques for diagnosis, more effective medications to treat the diseases and to eradicate asymptomatic carrier states and vaccines to interrupt transmission of the pathogens.

We earnestly hope that the *New England Journal of Medicine* and other major journals will do their part by continuing to publish articles not only on clinical aspects of sexually transmitted diseases in homosexuals but also on innovative methods of health care delivery to gay patients. A brief report about the educational programs of *Bay Area Physicians for Human Rights* and other gay health organizations, for example, would be useful and might even be eye-opening for many physicians. □

BILL OWEN, MD

1. Corey L, Holmes KK. Sexual transmission of hepatitis A in homosexual men: incidence and mechanism. *N Engl J Med* 1980; 302:435-8.
2. Dritz SK. Medical aspects of homosexuality (editorial). *N Engl J Med* 1980; 302:463-4.

### Executive Consultant Reports from page 19

Option plan; unfortunately, the donated money will be forwarded only on a divided quarterly basis over the next year.

After the membership is polled in the next month via Dr. Dale McGhee's questionnaire, future directions for the organization can be more clearly planned, and goals developed both financially and programatically for the coming academic year.

Assemblyman Art Agnos' office contacted *BAPHR* with an offer to assist us in gaining response to the still-outstanding *BAPHRON* funding proposals. We are thankful for the assistance and to know that the *BAPHRON* is read in Sacramento!

At this time, *BAPHR* no longer has a Secretarial assistant: Mark DeWolfe

has returned to full-time seminary studies. His knowledge and his skills will be missed. At the April Executive Board meeting, the entire issue of consulting support and secretarial time for the organization will be carefully considered. If you have opinions about this and other organizational business, please plan to attend this important meeting. □

JEFF RICHARDS

# executive consultant reports

**W**hat are the solutions to BAPHR's short-term financial shortfall? The Executive Board and the membership attending the March general meeting grappled with just this issue.

The approach of the Executive Board has been, of necessity, to consider the "worst case" financial possibilities assuming no additional income for budget year 1979-80. This was the reason for the letter sent in March to members asking for a voluntary assessment contribution to balance the budget.

The letter, excerpted for this report, explains the financial situation in finer detail:

*"[There is] an urgent matter that concerns all of us as members of Bay Area Physicians for Human Rights. In order to pursue important projects recommended by the Executive Board and authorized by the General Membership, BAPHR now finds itself in a temporary budget squeeze.*

*You will recall that in the current fiscal year, it was decided to attempt to utilize salaried staff to help with the administrative functions of BAPHR, including publication of the BAPHRON, and to explore fundraising avenues so that we could be on a firmer financial footing and perhaps expand our activities as well.*

*An Executive Consultant was hired on a \$600 per month, part time basis. Later in the year, BAPHR took on a part time work-study Secretarial assistant at little more than \$1.00 per hour cost to us. With this modest part time staff, the Executive Board has been able to:*

- Prepare a proposal for and aggressively seek outside funding for the BAPHRON, our nationally recognized newsletter and journal of gay medicine
- Make application for California Medical Association continuing medical education credit
- Apply for funds through the United Way Donor Option Plan
- Organize a variety of social and educational functions for BAPHR members

- Continue efforts to make the organization visible to physicians and the general public throughout the Bay Area and the nation, in order to present issues of importance to gay physicians

*At this time, despite the possibility of funding from our many proposals presently being considered, we cannot responsibly enter into a deficit budget in the remaining fiscal period.*

*The Executive Board has been carefully following the situation on a monthly basis, and has decided to try to retain our staff at least through June, if we can. By that time we should have a more realistic picture of what funds we can expect in order to plan for fiscal 1980-81.*

*...A detailed financial statement will appear in the April issue of the BAPHRON."*

David R. Kessler, M.D.     Darryl Raszl, M.D.  
President     Treasurer

At press time, it is not yet possible to estimate the response by the general membership. Several BAPHR members and patrons have sent tax-deductible contributions, some in excess of the requested amount. All contributions will be acknowledged in the near future.

Additionally, United Way notified BAPHR recently that more than \$800 will be eventually realized by the organization as a result of the Donor

continued page 20

## FINANCIAL STATEMENT: October 1, 1978 - September 30, 1979

Gross income .....	\$8,505
Gross dues and assessments from members and affiliates .....	11,394
Gross contributions .....	832
Total .....	\$ 20,731
Program related expenditures .....	-14,749
Excess of receipts over expenditures .....	\$ 5,982
Total assets:	
beginning of year .....	1,824
end of year .....	7,806
<b>Net worth:</b>	
<b>beginning of year .....</b>	<b>1,824</b>
<b>end of year .....</b>	<b>7,806</b>
Other receipts	
Fundraising events .....	7,965
Classified advertising (BAPHRON) .....	155
Subscriptions (BAPHRON) .....	132
Refunds .....	108
.....	8,361
Program and budget expenditures	
Entertainment and promotion .....	4,922
Meetings and conventions .....	3,205
Printing (BAPHRON) .....	2,738
Office supplies and expense .....	2,200
Outside services .....	750
Telephone .....	472
Legal and accounting .....	400
Flowers .....	37
.....	14,724

(Note: This financial statement was prepared from the most recent return filed with the Internal Revenue Service.)

JEFF RICHARDS

# Medicine and the Law

Craig McIntosh, a lawyer in private practice in San Francisco, will speak to BAPHR members of the "Legal Aspects of Medicine" at the general meeting on Sunday, April 13, at 7 pm.

Craig received his Doctorate of Jurisprudence from the University of California, Berkeley, and subsequently served as the Deputy Attorney General for the State of California from 1965 - 1974.

Afterwards, he was with the San Francisco firm of Glynn, Harvey & McIntosh.

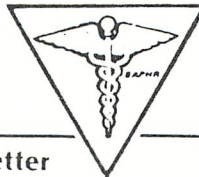
Craig currently specializes in the defense of medical malpractice cases for insured and uninsured physicians, clinics, and hospitals, as well as the defense of physicians before the California Board of Medical Quality Assurance. □

## vital signs

• BAPHR members Lisa Capaldini and David Kessler, and Executive Consultant Jeff Richards, were joined by Marny Hall, LCSW, to present a panel on homosexuality to medical students at UCSF on February 15th.

• BAPHRON Editor Robert Hindi and Jeff Richards met with staff members of Assemblyman Art Agnos' office on March 24th. Agnos offered support in the approach to pharmaceutical companies for the BAPHRON funding proposal. □

# the BAPHRON



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 Secretary..... Bill Owen, MD  
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### STAFF

Executive Consultant..... Jeff Richards  
 (415) 861-5884

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### BAPHRON STAFF

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## letters to the editor

To the Editor:

As my tenure as BAPHR's Secretarial Assistant comes to a close, I would like to share with you and the membership some final thoughts. In the last several months, BAPHR has taken some new directions: outside funding, continuing medical education, the expansion of BAPHRON are just a few that come to mind. It has been a pleasure for me to have been part of a vital and important organization at this time of change.

Finding someone to fill my position will not be easy: there are not many people who fill the qualifications of College Work-Study Plan employability, familiarity with BAPHR and San Francisco's gay community, easily guaranteed confidentiality, and 60 wpm typing speed. While the Executive Board will need some time to find such a character, it is important that the work of the organization continue. I would like to encourage the membership to volunteer as much time as possible to the work of the organization: many hand equals light and cheap work. I have found my time with BAPHR to be an opportunity to deepen my friendships within the organization; I hope the BAPHR membership (its ultimate source of strength) will take advantage of the opportunity to build a better sense of community by chipping in on the many projects currently underway.

As I explained in my letter of resignation and at the (March) General Meeting last night, my reasons for leaving BAPHR have to do with my professional growth. Henceforth I will be devoting my full time energies to my training both in the classroom and the field. I hope that my connection with BAPHR will last, and that I may continue to be of service to the organization in my new role.

Fondly—

Mark DeWolfe  
 Former BAPHR Secretarial Assistant  
 Student Intern Minister,  
 First Unitarian Church of SF

# upcoming events

April 13, Sunday.....	EXECUTIVE BOARD MEETING, 7:00 pm
April 20, Sunday.....	BAPHR GENERAL MEETING, 7:00 pm Speaker: Craig McIntosh, Esq. (See related story this issue.)
April 19-20, Sat. and Sun...	BAY AREA HEALTH FAIR sponsored by KRON-TV. (See related story this issue.)
May 3-9.....	AMERICAN PSYCHIATRIC ASSOCIATION national meeting, San Francisco. (See related story this issue.)
May 3, Saturday.....	GAY CAUCUS OF MEMBERS OF THE AMERICAN PSYCHIATRIC ASSOCIATION sponsored SF Bay Cruise. (See related story this issue.)
May 9-11, Fri.-Sun.....	GCMAPA sponsored weekend at Fife's on the Russian River. (See related story this issue.)
June 19-20.....	CURRENT ASPECTS OF SEXUALLY TRANSMITTED DISEASES — II SYMPOSIUM, San Francisco State University.
June 19-22.....	THIRD NATIONAL LESBIAN & GAY HEALTH CONFERENCE, San Francisco State University.

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#### 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 for 12 issues. Send check to *The BAPHRON*, Post Office Box 14546, San Francisco, CA 94114.

#### FOR RENT

**2 BR, furn river cabin**, Guerneville. Call George Riley, 839-4164.

#### WANTED

**We are seeking a small number of homes** which might welcome one or two gay or lesbian psychiatrists for approximately a week in May (2nd to 10th). They will be members of the Gay Caucus of the American Psychiatric Association and will be attending the annual spring meeting of the APA. Extensive academic and social programs have been planned by the Gay Caucus for that week. In addition to these programs, we feel it would be both hospitable and educational for people from elsewhere in the country to experience an intimate glimpse of life in the San Francisco Bay Area (elaborate hosting will *not* be necessary because of the number of activities planned). If you have room or questions please contact Robert Akeley at (415) 652-3185 or 885-4373.

**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 Seabright Ave., Santa Cruz, CA 95062 (408) 425-8785.

**The BAPHRON is seeking** one or more individuals interested in developing an expanded advertisement section including graphic ads for monthly publication. Time involvement would be a few hours per month with a pleasant group of people. No experience necessary. Contact Bob Hindi, *BAPHRON* Editor, P.O. Box 14546, San Francisco 94114, phone 861-6810; or Jeff Richards, Executive Consultant, 861-5884.

#### ANNOUNCEMENTS

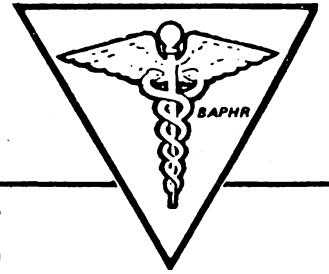
**A GAY OLD FOLKS HOME?** There is a rest home, licensed for 6 patients, for sale in the Castro area. Anyone with knowledge about operating a rest home or anyone interested as an investment with good terms, contact real estate broker Tom McGee at (415) 621-8450 or 922-8377. Tom has agreed to donate to *BAPHR* a portion of the real estate commission from this transaction or from any other buying or selling transaction resulting from a *BAPHR* referral.

*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. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

*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 15th 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.*



# BAPHR Accredited for Continuing Medical Education

## Hundreds Participate in 1980 Health Fair Events

Despite wind and rain on Sunday, 315 people took advantage of the services offered at SF Health Center # 1 on April 19 and 20. BAPHR coordinated the Health Fair at the Health Center site, which involved nearly 900 hours of volunteer time from more than 15 organizations in the community, with 55 BAPHR members contributing more than 400 hours of physician time. BAPHR extends sincere appreciation to members assisting with the Health Fair, and would like to thank the following organizations for time and assistance rendered: *Lesbian and Gay Health Workers, California Lesbian Physicians Association, Northern California Dentists for Human Rights, The Advocate Experience, SF Health Center # 1, SF City Clinic and volunteer group, SF College of Podiatric Medicine, KRON-TV, the American Red Cross* and individuals in the community.

Also, thanks go to: *Chevron, SF Council or Emperors, Northern California Dentists for Human Rights, Bay Area Reporter, Golden Gate Business Association and Lightning Press* for financial contributions and services rendered.

The Participant Evaluation Forms revealed that the response to the Fair was overwhelmingly positive. Many people took the time to express their appreciation and the following are samples of but a few: "People were very friendly and explained each step clearly. I think the Health Fair is an excellent community service."... "Well organized — patient and helpful people — nice for us oldsters — will bring friends"..."I'm impressed with the quality and concern and treatment given. This is certainly in contrast with some medical facilities I've been in!"..."Good organization — friendly — easy going atmosphere — thorough exams — nice folks"..."Bravo! Need any volunteers?". And for all of those that contributed in making the 1980 Fair a success, one final comment from a participant: "The Fair, and above all, the techs, doctors, nurses, and volunteers are all out of this world. You could find no nicer people anywhere." □

**RICHARD ANDREWS, MD**

*Editor's note: BAPHR's thanks go also to Ric Andrews, who spent a great deal of time as Coordinator in planning the Health Fair over the past many months.*

The California Medical Association recently granted a two year accreditation to *Bay Area Physicians for Human Rights* effective March 1980 through March 1982. The accreditation will enable BAPHR to offer Category I approved CME courses to members and non-members, according to Bill Kapla, MD, Chairperson of the BAPHR Education Committee.

BAPHR's first CME course will be the "Current Aspects of Sexually Transmitted Diseases — II" to be held at San Francisco State University June 19 and 20, 1980. Robert Bolan, MD, Symposium Director, has indicated that eight hours of Category I credit will be allowed for the Symposium. The Symposium program includes both nationally and locally recognized experts in the field of sexually transmitted diseases. Some 300 are expected to attend the Symposium.

For several months, Dr. Kapla and Jeff Richards, Executive Consultant, prepared the application with assistance from Mark DeWolfe. "The documentation for the application, which included the BAPHRON and other evidence of BAPHR's commitment to physician education, was so strong that it was difficult to doubt this outcome", said Richards. "BAPHR is to be congratulated for both this achievement and the foresight to have been deeply committed to education since its foundation."

Presently, the Education Committee and the Executive Board have been considering concepts for future courses, which will involve both

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# Homosexuality a Major Topic During May APA Meeting in SF

The annual meeting of the American Psychiatric Association is being held the week of May 3rd in San Francisco. Bay Area Physicians for Human Rights is involved with numerous activities of the meeting week in conjunction with *The Gay Caucus of Members of the American Psychiatric Association (GCMAPA)*, and several members will be participating in the official program. (See *BAPHRON* 2:4.)

With the meeting underway, the following are among the highlighted activities:

- The GCMAPA is sponsoring an exhibit **May 5 - May 8**, with the theme "Homosexuality — A Decade of Research". The location is Booth N 25, Scientific Exhibits Section, SF Civic Auditorium/Brooks Hall.

The exhibit demonstrates the scope of recent scientific studies of homosexuality through use of brief abstracts. New and helpful information is presented in the evaluation and understanding of clinical issues related to homosexuality. A selected sample of current books is on display for reference purposes.

The broad conclusions to be derived from the exhibit include: 1. Homosexuality per se is not necessarily related to pathology; 2. Non-patient homosexuals and heterosexuals have comparable levels of psycho-social functioning; and 3. Fear of homosexuality is associated with myths and stereotypes regarding gender role and other factors.

- Additional information during the convention may be obtained at the GCMAPA Booth (N 25 Scientific Exhibits Section, Brooks Hall), or at the GCMAPA Hospitality Suite.

- GCMAPA has arranged a weekend at Fife's resort on the Russian River for May 9 -11. The gay resort is approximately 60 miles north of San Francisco in Guerneville (Sonoma County); the management has made the resort available to Gay Caucus members and friends at last season's rates for those who identify themselves as members when making reservations. Fifty cabins and 25 campsites in the wooded area adjoining the river are available; the

resort has excellent dining facilities, a lodge and disco. Available are 1 room cabins with bath for 1-2 people; 2 room cabins for 2-4 people; luxury cabin with 3 bedrooms for up to 6 people; and campsites.

For reservations and information, call Fife's, (707) 869-0656. Don't forget to

identify yourself as part of the Gay Caucus of the APA for the lower rates. For additional information, contact Richard Andrews, MD: (415) 621-6291 or 567-4341. □

JEFF RICHARDS

*The decade of the seventies has seen a tremendous expansion in research on homosexuality. This increase in the quantity of research has been accompanied by a significant improvement in the quality of research.*

*Early research in this area was often characterized by major design deficiencies. Some of the more notable problems have included imprecise definitions of homosexuality, use of prison and patient samples, failure to use appropriate controls, investigator bias, assumptions that homosexuals represent a homogenous group, and failure to consult with the population being studied. The investigation of the positive aspects of gay adaptations was largely ignored.*

*Researchers today are much more aware of the difficulties in conducting adequate research on homosexuality. However, inherent problems remain in studying such a diverse, hidden, unidentifiable group. A representative sample of homosexual men and women does not exist and the results of any given study can seldom be reliably applied to all gay people. In spite of this, many stereotypes and myths concerning gay people have been disproven by empirical research. Nevertheless, many of these outmoded concepts continue to be perpetuated among mental health professionals. It is essential that all individuals who are interested in human nature and that all therapists who work with gay people have a thorough understanding of homosexuality and gay culture.* □

Gay Caucus of Members of the American Psychiatric Association

## Party To Be Held In Conjunction With May General Meeting

"The Return of the Prodigal Sun" will be the theme of a masquerade party, sponsored by the *BAPHR Associates*. The benefit party, to take the place of the May general meeting, will be held at the former Gallenkamp Mansion in Forest Hills, San Francisco, at 255 Magellan Avenue. The festivities will begin at 9 pm, Saturday evening, May 17th.

John Ludwig of the *Associates* is in charge of the hors d'oeuvres table and the bar, and any volunteer who would like to spend part of the evening assisting with either effort is invited to call him at 821-0162 in advance.

A brief business meeting will be held during the party. (*BAPHR* is constitu-

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## Penicillin or Spectinomycin Best in Anorectal GC

The Director of the San Francisco City Clinic reviewed the charts of 606 men treated for anorectal gonorrhea between January 1, 1978, and May 1, 1979<sup>1</sup>. Only those patients were included in whom a follow-up rectal culture was performed three to fourteen days after completion of therapy and who denied the possibility of reinfection.

Four hundred fifty-one men (75%) were treated with the currently recommended regimen of 4.8 million units of aqueous procaine penicillin G (APPG) intramuscularly and 1.0g of probenecid orally. Ninety-seven men (16%) were treated with 500mg of tetracycline orally four times daily for five days. Twenty-seven men (4%) were treated with ampicillin 3.5g with 1.0g of probenecid in one oral dose. Twenty-five men (4%) were treated with spectinomycin 2.0g intramuscularly. Six men (1%) were treated with erythromycin 1.5g in one oral dose followed by 500mg of erythromycin orally four times daily for 4½ days.

The failure rate in the spectinomycin-treated men was zero, in the APPG/probenecid group 3.3%, in the tetracycline-treated patients 14.4%, in the ampicillin/probenecid group 14.8%, and in the erythromycin group 33.3%.

The author concluded that APPG/probenecid or spectinomycin are the regimens of choice in treatment of anorectal gonorrhea. These drugs may also be used to treat urethral gonorrhea in gay men who also have anorectal symptoms. He would reserve use of spectinomycin, however, for patients allergic to penicillin and for those considered to be penicillin treatment failures.

*Reviewer's comment:* The author mentions that the interval between completion of treatment and follow-up

rectal cultures ranged from three to fourteen days for the group as a whole. It would have been helpful to have determined the mean follow-up intervals for each of the treatment regimens. If the interval was significantly longer, say, for the various oral regimens, we might wonder whether these individuals were actually reinfected during the interval than "treatment failures."

It would also be useful to know the number of men in each of the treatment groups who did *not* return to City Clinic for follow-up cultures. Correlation with symptoms would also be helpful. Perhaps a substantial number of men receiving the oral regimens did not return for repeat anal cultures because they had become asymptomatic. Negative anorectal cultures in such a group might significantly decrease the percentage of treatment failures among those men who had received ampicillin or tetracycline.

1. Sands M, Treatment of anorectal gonorrhea infections in men. *JAMA*,243:1143, 1980.

## L.A. Study Supports Procaine Penicillin for Anorectal GC

A study of 1262 gay men was conducted at the Men's Clinic of the Gay Community Services Center in Los Angeles from April, 1977 through June, 1978<sup>2</sup>. Patients were entered into the study on the basis of 1) otherwise unexplained anorectal symptoms and/or 2) a recent untreated positive culture for *Neisseria gonorrhoeae* and/or 3) anorectal contact with a person who had assumed or proven gonorrhea.

A history was obtained concerning the following symptoms: rectal itch, discomfort, bleeding, discharge, diarrhea and stool mucus. An anosopic

examination was performed by a volunteer physician looking specifically for mucus, pus, erythema, mucosal friability and ulcerations. A blind anorectal culture was also obtained.

Patients who met the study criteria were started on therapy immediately after the cultures were taken (without waiting for the actual results of the cultures). Four treatment regimens were given in rotating order: 1) aqueous procaine penicillin G 4.8 million units intramuscularly with 1.0g probenecid orally; 2) ampicillin 3.5g orally with 1.0g of probenecid orally; 3) ampicillin 4.5g orally with 1.0g probenecid orally and 4) tetracycline 1.5g followed by 0.5g four times daily for four days. Patients were asked to return one week after concluding therapy for follow-up cultures.

Of the 1262 patients entered into the study, 554 (43.9%) had positive cultures for *Neisseria gonorrhoeae*. Of these patients, 407 returned for a test of cure, yielding a return rate of 73%, which is comparable to that found in other studies. The return rate was similar for each of the four treatment groups in this study as well. There were 30 treatment failures (7.4%) with the failure rate 4.0% in the APPG/probenecid group, 5% in the two ampicillin/probenecid groups and 15.3% in the tetracycline group.

Because of the high incidence of positive cultures (41%) in those who reported only a history of gonorrhea contact and because of the 27% of individuals who do not return for follow-up, the authors recommend treatment at the first visit with the APPG/probenecid regimen. In patients who are allergic to penicillin they recommend first visit treatment with tetracycline despite the high failure rate with this drug. The authors justify the tetracycline recommendation because of the high cost of spectinomycin.

*Reviewer's comments:* This is an excellent prospective study of treatment of anorectal gonorrhea in gay men.

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The study was done at a facility serving the sexually transmitted disease (STD) needs of the gay male population of Los Angeles. It sets standards for the kind of quality research that can and must be published by other gay STD facilities in the future.

It also exemplifies the fact that the major national medical journals in the U.S., including the *Annals of Internal Medicine*, the *New England Journal of Medicine* and the *Journal of the American Medical Association* are beginning to recognize the importance of research in the area of STD's in gay men. In fact, the Los Angeles study is the lead article in the April, 1980 issue of the *Annals*.

My major concern about this article has to do with the recommendation that all patients with an assumed gonorrhea contact be treated at the first visit, rather than awaiting the culture results. Although 41% of these patients do develop positive anorectal cultures, we would also be treating the 59% who are culture negative. Somewhere along the line this practice will inevitably result in morbidity or even mortality from anaphylactic reactions to penicillin administered to culture negative patients with a previously unknown allergy to the drug. Is it really worth that risk when we consider that the alternative is to wait 48 hours for culture growth to begin treatment for what is otherwise a relatively benign disease process?

Additionally, the practice of treating anorectal symptoms before the culture result is known may ultimately lead some practitioners to use antibiotics empirically without obtaining the requisite cultures (or Gram stain in those patients who present with mucus or pus). Such indiscriminate use of antibiotics might result in the emergence of resistant gonococcal strains.

Finally, I would find it very difficult to justify empiric use of tetracycline in penicillin allergic patients in view of the high treatment failure rate with tetracycline reported in this paper. My choice would be to wait until the culture report is back and, if this is positive, to treat with spectinomycin. Alternatively, one could begin spectinomycin treatment immediately in

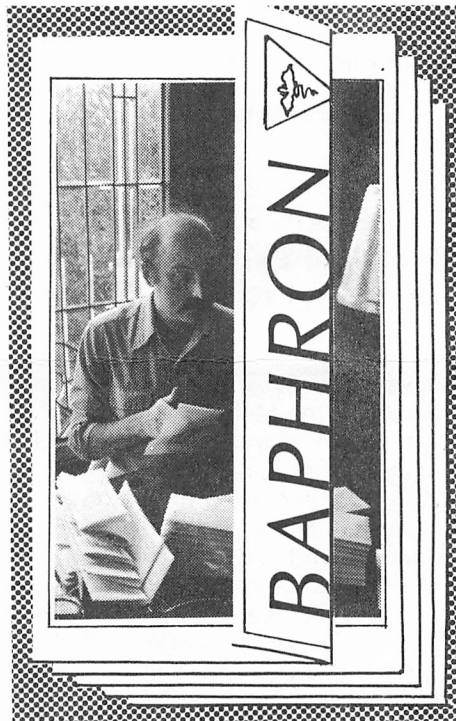
the penicillin allergic patient if a Gram stain of anorectal pus or mucus revealed Gram negative intracellular diplococci (although the yield of the Gram stain in anorectal gonorrhea is reportedly low). Tetracycline may ultimately be found to have a role in the treatment of chlamydial proctitis and the chlamydial carrier state in gay men. However, the incidence of these conditions is not known at present but is under investigation.

2. Lebedeff DA, Hochman EB, Rectal gonorrhea in gay men: diagnosis and treatment. *Annals Intern Med*, 92:463, 1980.

**BILL OWEN, MD**

*Editor's note: Dr. Hochman will present this study at the Current Aspects of Sexually Transmitted Diseases - II Symposium on Thursday, June 19, 1980, at San Francisco State University.*

*Additionally, it might be noted that the study was conducted in a community-based "free clinic" context, rather than in a private office. Culture results, for example, were often not available from the County Health Department for 7 to 14 days; funds were not generally available for spectinomycin nor were many patients able to afford the drug on a pay basis. These may be factors which differ in comparing private practice with community-based health care.* □



Sam Thal, MD, assists at recent BAPHRON "folding party". The BAPHRON needs your help for this end-of-the-month event. Next meeting: Thursday, May 29, in conjunction with Publications Committee meeting.

## progress notes

In my most recent column I began tracing some of the important events of the 1970's related to organizational psychiatry and homosexuality. With the American Psychiatric Association convening here this month, this seems a fitting occasion to bring the story up to date.

One of the most significant developments has been the emergence of the *Gay Caucus of Members of the APA*. Many old BAPHR'ites will find that this account has a familiar ring.

At previous APA meetings in the early 70's, gay psychiatrists arranged furtive social gatherings in local bars. By 1976, about 25 courageous but frightened souls met in a convention hotel. At the Atlanta meeting in 1978, the Gay Caucus went public, and held daily business sessions and rap groups.

Now, in 1980, the GCMAPA will be more visible than ever before. Several hundred members are expected to participate in various social and business meetings, and the Caucus will be represented in more than 6 scientific presentations dealing with homosexuality (see related story BAPHRON 2:4).

Two years ago the APA agreed to the formation of a temporary Task Force on Gay, Lesbian and Bisexual Issues, headed by Jim Paulsen, MD. It is anticipated that this year the group will be converted into a permanent committee. Also at this year's meeting the Gay Caucus will be petitioning for official minority status, which would provide a gay seat in the APA Assembly.

Locally, the *Northern California Psychiatric Society* established a Committee on Homosexuality, chaired by Jim Krajieski, MD, which has been very active on a number of fronts. A similar group has recently been created by the *N.Y. Psychiatric Society*.

Some of this may seem bureaucratic and administrative in nature, and lacking in drama. However, these collections of energized, committed people should permit us to move forward even more effectively in the 80's in ensuring that psychiatry works for gay people, and not against them. □

**DAVE KESSLER, PRESIDENT**

# upcoming events

- May 11, Sunday . . . . . EXECUTIVE BOARD MEETING, 7:00 pm
- May 17, Saturday . . . . . BAPHR GENERAL MEETING, 9 pm  
(BAPHR party in lieu of General Meeting - see related story and April Executive Board minutes this issue.)
- May 3-9 . . . . . AMERICAN PSYCHIATRIC ASSOCIATION national meeting, San Francisco. (See related story this issue.)
- May 3, Saturday . . . . . GAY CAUCUS OF MEMBERS OF THE AMERICAN PSYCHIATRIC ASSOCIATION sponsored SF Bay Cruise. (See related story this issue.)
- May 9-11, Fri.-Sun. . . . . GCMAPA sponsored weekend at Fife's on the Russian River. (See related story this issue.)
- May 22, Thursday . . . . . HARVEY MILK'S BIRTHDAY. An evening celebration will be held on Castro Street.
- June 19-20 . . . . . CURRENT ASPECTS OF SEXUALLY TRANSMITTED DISEASES — II SYMPOSIUM, San Francisco State University. (See related story this issue.)
- June 19-22 . . . . . THIRD NATIONAL LESBIAN & GAY HEALTH CONFERENCE, San Francisco State University.
- June 29, Sunday . . . . . GAY FREEDOM DAY AND PARADE (See Executive Board minutes this issue.)



**ACCREDITATION from page 23**

physical and mental health. Members interested in CME planning and presentation are urged to contact Bill Kapla, and to attend future meetings of the Education Committee.

For information on registration for the now accredited "Current Aspects Symposium", contact Jeff Richards, Symposium Secretary, 4528 Nineteenth Street, San Francisco 94114, (415) 661-5884.

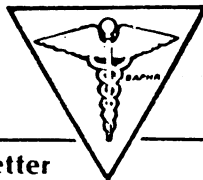
**PARTY from page 24**

tionally required to conduct the business of additional nominations for elective office at the May general meeting.)

There are two ways to purchase benefit party tickets (tax-deductable). Before May 10, tickets for physicians are \$15 single (\$25 a couple); for house officers, residents and interns \$10 single (\$15 a couple); and for medical students they are \$5 single (\$10 couple). After May 10, tickets will be at the door only and will be \$20 each.

Checks may be made to BAPHR and mailed to P.O. Box 14546, San Francisco 94114. Please telephone 821-0162 for information or to volunteer assistance with the benefit party.

# the BAPHRON



## Bay Area Physicians for Human Rights Official Newsletter

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(415) 861-5884

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Post Office Box 14546  
San Francisco, California 94114  
Phone: (415) 673-3189

**BAPHRON STAFF**

- Editor . . . . . Robert Hindi, MD
- Staff . . . . . Sam Thal, MD  
Bill Owen, MD  
Jeff Richards  
and others

**CONTRIBUTORS**

- Bob Hindi, MD
- Dave Kessler, MD
- Bill Owen, MD
- Dale McGhee, MD
- Jeff Richards

**PHOTOGRAPHERS**

- Robert Hindi, MD
- Jeff Richards

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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 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. Foreign rates are available upon request. Make checks payable to BAPHR, and send to: The BAPHRON, Post Office Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletters should be mailed.

# executive consultant reports

JEFF RICHARDS

Thanks to the many *BAPHR* members and patrons who contributed money in April and May, *BAPHR* will now be able to finish the fiscal year in the black. All contributors will shortly receive a letter of thanks — without secretarial assistance, the acknowledgments have been somewhat delayed.

Work continues on the *BAPHRON* funding solution. In addition to other proposals now being prepared, Robert Hindi, MD, *BAPHRON* Editor, has been reviewing two proposals already received for a commission-basis Advertising Editor. It is planned that display and classified advertisements might be able to support a more significant share of *BAPHRON* pro-

duction costs than is presently possible.

Shortly, members, patrons and others will receive a questionnaire designed by Dale McGhee, MD, looking for more information about the lesbian and gay physician. One can hope that with ever more solid information to go by, *BAPHR* will be better able to meet the needs of its members and to make statements about the makeup and background of the membership. It seems ironic that in the recent CBS News "Gay Power, Gay Politics" special, the words "gay doctors" were spoken more than once, and yet in the stereotypical and frighteningly inaccurate presentation, this was no more than a token (and perhaps totem)

recognition. *BAPHRON* readers will be interested to know that the *BAPHRON* has been sent to a member of the CBS production staff since August 1979; and so all of the positive and valuable work of gay physicians and the gay community was not unknown to them.

May and June will be busy months for *BAPHR*: the APA annual meeting, the May party and general meeting, the Current Aspects of Sexually Transmitted Diseases — II Symposium and the 1980 Gay Freedom Day and Parade all involve the organization and its members. *BAPHR*, like much of the rest of the lesbian and gay community, is ever more deeply involved in reaching out to not only other gay people, but our entire society. □

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**STUDENT IN THE HEALTH PROFESSIONS** seeking summer employment in the S.F. area. Especially interested in laboratory-related work. Have significant experience in the following type labs at Carnegie-Mellon University: Molecular Biology and Genetics, Biochemistry, Physiological Psychology, Organic and Inorganic Chemistry. Also have pursued active research with a behavioral Pharmacologist for 2 yrs., and a protein biochemist for 1 yr. Contact Allan (412) 521-0365. References: Robert Akeley, MD, (415) 652-3185, Jeff Richards (415) 861-5884.

**MATURE, RESPONSIBLE MAN** seeks career position in medical office management. Bryman/UC Berkeley graduate. (415) 826-7711 days - 665-8343 evenings.

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### WANTED

**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 Seabright Ave., Santa Cruz, CA 95062 (408) 425-8785.

**SEEKING EXPERIENCED LAB TECHNICIAN** for 7/1/80 position in openly gay Family Practice in SF. Must be thoroughly familiar with bacteriology, parasitology, simple hematology & chemistries. Salary negotiable. CA licensure not required. Please send resume to Wm. J. Kapla, MD, 1145 Bush, SF 94109.

### ANNOUNCEMENTS

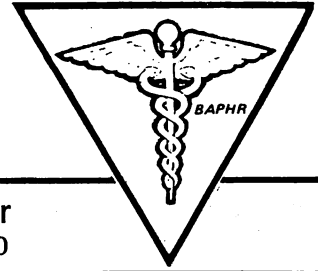
**A GAY OLD FOLKS HOME?** There is a rest home, licensed for 6 patients, for sale in the Castro area. Anyone with knowledge about operating a rest home or anyone interested as an investment with good terms, contact real estate broker Tom McGee at (415) 621-8450 or 922-8377. Tom has agreed to donate to *BAPHR* a portion of the real estate commission from this transaction or from any other buying or selling transaction resulting from a *BAPHR* referral.

*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. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

*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 15th 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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## Workshop on Behavior Guidelines a Part of Current Aspects of Sexually Transmitted Diseases Symposium

The "Current Aspects of Sexually Transmitted Diseases—II Symposium" to be held at San Francisco State University June 19-20, 1980, will feature a special workshop on the feasibility of creating guidelines for sexual behavior to curb the spread of disease in the nation's gay population. "In an attempt to further explore the behavioral aspects of sexually transmitted diseases, interested gay business people have been invited to join with psychologists and educators, clinicians and researchers in the workshop," said Robert Bolan, MD, Symposium Director. "A goal will be to discover whether we have sufficient knowledge of the diseases and their transmission to formulate pragmatic and non-

judgemental guidelines for individuals and certain gay businesses."

The two day symposium will be held in the Barbary Coast Room of San Francisco State's Student Union. Eight credit hours of continuing medical education through BAPHR will be offered to physicians.

Said Jeff Richards, Symposium Secretary, "The registrations for the symposium are coming in daily from throughout the United States, indicating wide interest. However, the symposium does have a limited number of spaces, and those interested should make their registrations soon." Richards noted that the fees are \$50 for physicians wishing CME hours, \$35 for others attending, and \$20 for house staff and medical

students with a letter of verification from their institution.

"The thing that excites me about the symposium is that it will not only represent a forum for presentation of current research, but will serve as a seminar for clinicians who may only occasionally see the range of sexually transmitted diseases in their practice."

"As an example, considering the advent of the soon to be released hepatitis B vaccine (MSD), Dr. Donald Francis from the Phoenix Center for Disease hepatitis laboratory will be reviewing the clinical and laboratory aspects of hepatitis and will discuss the appropriate indications for use of the vaccine."

The "Current Aspects of Sexually Transmitted Diseases—II Symposium" is being sponsored by the National Coalition of Gay STD Services and Bay Area Physicians for Human Rights. Paul Wiesner, MD, Director of the Center for Disease Control Venereal Disease Control Division, will be the keynote speaker on Thursday, June 19th. An open organizational meeting of the NCGSTDs will be held during the course of the symposium.

For registration or program information, contact Jeff Richards, Symposium Secretary, 4528 Nineteenth Street, San Francisco, CA 94114 (415) 861-5884, or Robert Bolan, MD, Symposium Director, (415) 921-5762. Registration fees should be made payable to "Current Aspects Symposium/BAPHR"; physicians wishing CME credit should include a Social Security number. □

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### Inside the BAPHRON ...

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- ★ **Male Rape: The Assault That Dare Not Speak Its Name**
- ★ **Do We Have Our Own Special GC?**
- ★ **Plans Announced for BAPHR Annual Awards Banquet**
- ★ **Shrinks Sponsor Gay Rights Advocates Benefit**
- ★ **Gay Caucus Activities "Well Received" by APA**

# Gay Caucus Activities "Well Received" by APA

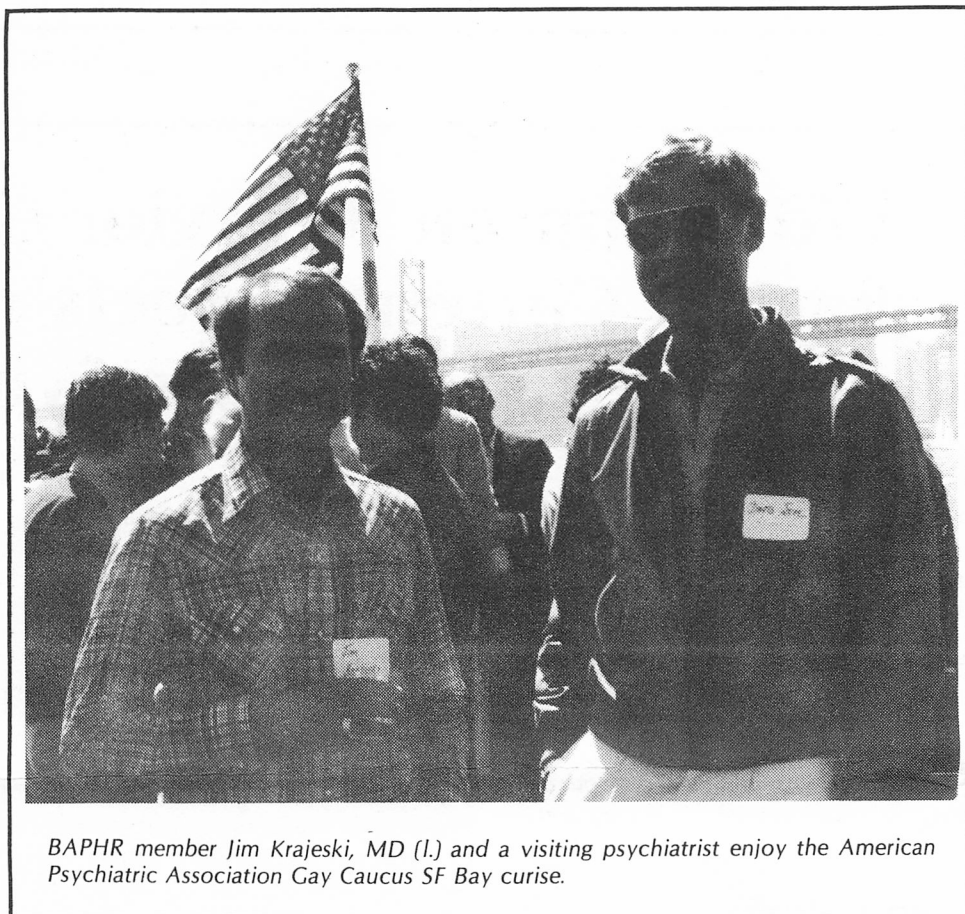
Gay caucus panels, social activities and educational efforts were "very well received", according to Jim Krajeski, MD, President-Elect of the recently retitled Gay, Lesbian and Bisexual Caucus of Members of the American Psychiatric Association. "What was amazing about the whole week was how well our efforts were received by the membership of the APA," said Dr. Krajeski. "For example, some 300 to 400 attended the Caucus-sponsored cocktail party—it was good to see gay and non-gay psychiatrists mingling. And about 100 participated in the San Francisco Bay boat cruise which as a very pleasant event."

Dr. Krajeski noted that there was a strong gay presence during the convention: the Gay Caucus sponsored three evening panels, and a well-attended all day course on homosexuality was sponsored by the Northern California Psychiatric Association's Committee on Homosexuality. The American Academy of Psychoanalysis hosted a panel presentation by Dave Kessler, MD, Judd Marmor, MD, and Betty Berzon, PhD on homophobia and positive gay lifestyles which was attended by many from the gay community as well as psychoanalysts. A Caucus informational booth in the Scientific Exhibits section promoted the theme "Homosexuality: A Decade of Research" for the thousands of psychiatrists attending the convention.

Dr. Stone, President of the APA, gave what was seen as a significant address during the San Francisco convention on value systems in psychiatry which included mention of gay people, women and racism. The APA Board of Trustees also voted to move the 1981 convention from New Orleans in support of the Equal Rights Amendment. Said Dr. Krajeski, "I felt that the small group discussions within the Gay Caucus went very well, and there were many positive comments made regarding feeling better about being gay. I expect that we will continue to see more people coming out within the APA in the future."

David Kessler took office as the 1980-81 President of the Caucus during the APA convention. □

JEFF RICHARDS



*BAPHR member Jim Krajeski, MD (l.) and a visiting psychiatrist enjoy the American Psychiatric Association Gay Caucus SF Bay cruise.*

## 1980-81 BAPHR Officers Nominated

BAPHR Secretary Bill Owen, MD, has announced the nominees for office during the 1980-81 academic year. They are: R. Dale McGhee, MD (urologist, multispecialty group practice) for President; James P. Krajeski, MD (psychiatrist, solo practice) for Vice-President; Robert K. Bolan, MD (family practitioner, group practice) for Secretary; and Richard Andrews, MD (psychiatrist, solo practice) for Treasurer. The balloting will be held by mail during June 1980, and an installation ceremony for the new officers will occur at the July BAPHR Annual Awards Banquet.

Drs. McGhee, Krajeski and Andrews have been active in BAPHR since the

organization's early days and have been involved with committees and projects over the past months. Dr. Bolan is director of the BAPHR co-sponsored "Current Aspects of Sexually Transmitted Diseases—II" Symposium.

The current BAPHR officers, David Kessler, MD, President, Bill Barnaby, MD, Vice President, Bill Owen, MD, Secretary and Darryl Raszl, MD, Treasurer, will be leaving office at the end of June, having overseen a period of significant growth and development of BAPHR's professional and community programs. □

JEFF RICHARDS

# Shrinks Sponsor Gay Rights Advocates Benefit



The third annual "Mental Health Community" benefit party and champagne reception for San Francisco-based *Gay Rights Advocates* will be held June 28, 1980 at the San Francisco Art Institute, according to spokesperson John Mihaly. The 1980 benefit will be held during Gay Freedom Day weekend. All *BAPHR* members, friends and guests are invited to attend the party.

*Gay Rights Advocates* is the West's only non-profit public interest law firm acting on behalf of lesbians and gay men. Among other functions, *Gay Rights Advocates* brings precedent setting suits, acts as *amicus-curiae* in appellate cases and assists legislative and administrative bodies working to end discrimination on the basis of sexual orientation.

A recent well-known case successfully challenged the right of the Public Health Service to conduct psychiatric examinations of visiting gay persons as "psychopathic personalities" and

therefore excludable from the United States. As a direct result of this litigation, the Surgeon General issued a directive to all Public Health officers forbidding such certification on the ground that current medical opinion no longer holds homosexuality as a mental disorder. Subsequently, *Gay Rights Advocates* attorneys were invited to meet with representatives of the White House, the State Department, the Immigration and Naturalization Service and the Public Health Service.

Demand for *GRA* services has continued to grow. However, *GRA* does not accept fees, and thus must rely on contributions from supporters. (The 1979 budget was \$106,000.)

The sponsors of the benefit are suggesting a donation of \$100 from full time employed professionals, or a minimum of \$25.00 from those attending. The sponsors note that if the requested minimum is prohibitive, any contribution is welcome and volunteers for the party are needed.

Should *BAPHRON* readers wish to receive an invitation, please call (415) 863-3624 for information. Or send \$25 or more and names and addresses of benefit guests to: *Gay Rights Advocates* or *Legal Foundation for Personal Liberties*, 540 Castro Street, San Francisco, CA 94114. Donations are tax deductible. All guests making reservations prior to June 21 will receive tickets by return mail; other tickets will be held at the door.

The June 28 benefit party will be held 2:00 pm to 6:00 pm at the Art Institute, 800 Chestnut Street. Free champagne, food, door prizes and an auction will be included. Entertainment will feature Amanda Hughs, Weslia Whitfield, Pure Trash and Armistead Maupin. □

JEFF RICHARDS

## Referral Service to Be Expanded

The Gay Medical and Dental Referral Service will soon be upgraded to handle the increasing number of callers, according to Bill Kapla, MD, chair of *BAPHR*'s Education Committee. "The Referral Service, created and operated by *BAPHR* since 1977, is currently making over 100 referrals a week to all specialties and locations," said Dr. Kapla. "The service has been received well by the community and has received significant public praise."

Pointing to the need for change, Dr. Kapla noted that the referrals have been made by a core group of four to six physicians volunteering their time. The present number of calls has taxed the capacity of this volunteer system.

"The Education Committee and the Executive Board have been considering this for some 6 months," said Kapla. "It has been decided that as of mid-June calls coming to *BAPHR* will be answered by a professional answering service. The protocols and standards for handling the numerous calls and referrals have been formulated by the Education Committee."

To advise the Education Committee of new listings, deletions and corrections of present listing, please contact Bill Kapla, MD at (415) 775-8872. □

JEFF RICHARDS

## Joint Committee with SF Medical Society Named

On March 19, 1980, *BAPHR* president Dave Kessler made a presentation before the Executive Board of the *San Francisco Medical Society* describing the history, organization, and goals of *BAPHR*.

At the conclusion of these remarks, *SFMS* president David Sachs authorized the establishment of a 6-person joint *SFMS-BAPHR* Committee to meet regularly to deal with issues of mutual interest.

Bill Kapla, Jim Krajewski, and Dale McGhee have agreed to serve as the *BAPHR* representatives, with the first meeting scheduled for May 1980. □

DAVE KESSLER

## MALE RAPE: THE ASSAULT THAT DARE NOT SPEAK ITS NAME

One evening during the summer of 1976, a 24 year old man was walking along the edge of Golden Gate Park where it meets the Pacific Ocean. This stretch of the Great Highway in San Francisco had been a popular gay cruising area at that time. Without warning, a sports car came screeching to a halt very close to where the man was walking.

Five individuals, four men and a woman in their late teens or early twenties, jumped out of the car and began screaming "faggot" and other insults at the man. Obviously overpowered and with no one around to help him, he was dragged into the thickly wooded windswept grove of trees. The victim was sodomized multiple times by each of the male attackers and forced to commit fellatio and cunnilingus.

The attackers left in their auto, leaving the man lying in the bushes. Fortunately the victim remained conscious. He remembered the appearance of the attackers and he had an idea of the car's description. He also noted that he was bleeding from his anus and he had severe pain in the same area.

The man was able to make it back to his car and drive to the emergency department of a San Francisco hospital. The case was assigned to a resident who had just started a training program in San Francisco that summer.

The victim told his story to the young M.D. who advised the distraught man in disgusted tones that "males can't be raped so why don't you just take your story elsewhere." Never did the resident inform the victim about the need for an examination for traumatic complications, for detection of and prophylaxis against sexually transmitted diseases or for preservation of evidence in case the victim wanted to prosecute the case.

Psychologically bruised and angry since he was now unable to prosecute and convinced that he might develop a venereal disease or some complication of his anal trauma, the victim decided to heed the resident's advice about "taking his story elsewhere." He told his tale to the local gay papers where it made headlines for several weeks and forced many emergency departments to reconsider their approach to male victims of sexual assault.

We have received a few inquiries about male rape at the BAPHR sponsored Gay Medical and Dental Referral Service in the two years since its inception. Most of these have been referred to the Sexual Trauma Center at Central Emergency Hospital which is located at 50 Ivy Street, diagonally across from San Francisco's City Hall. Central has developed specific protocols for the physical examination and treatment of the rape victim. Physicians and nurses who are experienced in this examination and counselors who can help the victim through the psychological trauma of the rape are also available. The counselors are, for the most part, volunteers. A few of them are gay men. I called the Sexual Trauma Center a few weeks ago and discovered that 10-20% of the rape victims seen there are men.

Fortunately, despite archaic statutes that define rape as "penetration of the female by the male sexual organ," the subject of male rape is coming out of the closet and into the medical literature. An article in the *Journal of the American College of Emergency Physicians* last year pointed out that "the physician is responsible for the overall evaluation and treatment of the (male rape) patient and should include attention to psychological well-being." The paper noted that performance and documentation of a thorough history and physical examination is mandatory. In addition, the physical should include documentation of trauma and preservation of the chain of evidence.<sup>1</sup>

This year an article from the University of New Mexico School of Medicine in Albuquerque discovered that 10% of all rape cases reported at that center were assaults against males.<sup>2</sup> The study compared male rape victims against female rape victims and found that the men as a group sustained more physical trauma and were more likely to have been a victim of multiple assaults from multiple assailants. Several of the male victims did not report the sexual component of the assault during their initial contact with emergency department staff, thereby denying themselves support for their intense psychological trauma. The authors speculated that the preponderance of "controlled" emotional reactions in males "may reflect a gender role expectation that it is unmanly for males to express emotion, even in the face of enormous physical and emotional trauma."

Perhaps we, as gay physicians, have been reluctant to discuss the issue of male rape in the past, fearing that the subject came too close to defining our own vulnerability as gay people in a homophobic society. Perhaps we have acquiesced to the views of our medical colleagues when they said, "Well, it serves them right for cruising in Golden Gate Park!" And yet we, as physicians in many specialties—emergency medicine, family practice, internal medicine, surgery and psychiatry the most obvious ones—have a lot to contribute to our community in this matter.

BAPHR members and other concerned physicians might consider reviewing the policies of the emergency departments at hospitals where we have staff privileges to determine whether the issue of sexual assault against men has been addressed. Those of us who are on teaching hospital staffs can also help by ensuring that the topic of male rape is included in the medical emergency orientation lecture series for new house staff and other medical and paramedical trainees. And BAPHR



members who are on the Speakers Bureau lecture circuit speaking to primary care physicians, emergency department nurses, etc. can raise the level of consciousness of individuals in our audience by discussing this oft neglected but crucial issue.

1. Josephson GW. The male rape victim: evaluation and treatment. *J Amer Coll Emerg Physicians* 8:13-5, 1979.
2. Kaufman A, Divasto P, Jackson R, Voorhees D, Christy J. Male rape victims: noninstitutionalized assault. *Am J Psychiatry* 137:221-3, 1980.

□

BILL OWEN, MD

## DO WE EVEN HAVE OUR OWN SPECIAL GC?

A group of Seattle investigators<sup>1</sup> studied the nutritional requirements (auxotype) of *N. gonorrhoeae* isolated from 424 consecutive, previously untreated patients with uncomplicated gonorrhea attending the Seattle-King County Department of Public Health Sexually Transmitted Diseases Clinic from November 1974 through March 1976.

Strains of *N. gonorrhoeae* that require arginine, hypoxanthine, and uracil (*Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* auxotype) are known to be highly susceptible to the penicillins, tetracyclines, and erythromycin; they have been associated with disseminated gonococcal infection (DGI) and with asymptomatic urethral infection in men, and have been recovered more frequently from white than black patients with gonorrhea. In Seattle *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains comprise between 38-53% of isolates in the past several years. In the current study the authors correlated auxotype and susceptibility to penicillin with sexual preference, sex, race, socioeconomic status (SES) and site of infection. In a separate population of consecutive men with urethral gonorrhea, they correlated urethral discharge and symptoms. Auxotyping

was not done in this group. We are told that sexual preference was determined by self-description, occasionally altered by knowledge of the identities of sexual contacts; bisexual men were considered homosexual for the purposes of the study. Classification of race was also done according to self-description.

The researchers found that *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains of *N. gonorrhoeae* were infrequently isolated from homosexual men, and that homosexual men in Seattle have a low risk of asymptomatic urethral gonococcal infection and a low risk of DGI. Strains recovered from homosexual men were more resistant to penicillin than were strains recovered from heterosexual men and women. This latter finding seemed only partially due to auxotypic differences between the groups. *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains represented 59% (42 of 71) of the *N. gonorrhoeae* isolates in white heterosexual men and 8% (5 of 63) of those recovered from homosexual men (P 0.0001).

There were noticeable differences in the penicillin sensitivities of the isolates. The minimal inhibitory concentration (MIC) of penicillin G for all strains isolated from homosexual men was higher than in either the heterosexual men or women. Part of this difference was explained by the low proportions of *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains in homosexuals, but even the non-*Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains isolated from homosexual men were significantly more resistant to penicillin than were non-*Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains isolated from heterosexual men. Unfortunately, the specific identification of the other, non-*Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* auxotypes and their distribution according to sexual preference was not described. Further analysis showed higher MIC's for strains from women with rectal infections than for isolates from women without rectal infection.

In another population the authors retrospectively reviewed the clinical records of 96 consecutive homosexual men and 261 consecutive heterosexual

men with gonococcal urethritis (all male patients seen during the study period had routine urethral cultures). All 96 homosexual men had signs of urethral discharge, whereas 18 (7%) of heterosexual men were asymptomatic and lacked discharge.

Citing other statistics, the authors indicate that from 1970 to 1973, among 41 consecutive men with DGI, all denied homosexual contact and none of the 31 had positive rectal gonorrhea isolates.

According to the authors, the major findings of this study are the low proportions of *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains of *N. gonorrhoeae* recovered from homosexual men, the low risks of asymptomatic urethral infection and of DGI in homosexual men, and the high MIC of penicillin G against *N. gonorrhoeae* infecting homosexual men. They conclude that this latter may help to account for the therapeutic failure rate of ampicillin of 19% for rectal gonorrhea and the 29% failure rate of tetracycline (this is an assumption since the MIC's for tetracycline were not measured). The authors were unable to explain the higher penicillin resistance of *N. gonorrhoeae* isolated from women with rectal infections as compared to isolates from women without rectal infections. They freely admit that this finding seems contrary to the clinical experience that, except when tetracycline is used, cervical and rectal infections in women appear to be equally responsive to treatment.

No clear reason emerged for the low rate of infection with *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains in homosexual men. Possibilities raised include acquired immunity to *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains in homosexual men, possibly greater use of antibiotics in this population leading to selective suppression of *Arg<sup>-</sup>Hyx<sup>-</sup>Ura<sup>-</sup>* strains, or lower attendance at public clinics by asymptomatic homosexual men. The authors concede, however, that there is no data to support any of these conjectures.

# Plans Announced for BAPHR Annual Awards Banquet

Festive plans have been announced for the Bay Area Physicians for Human Rights Annual Awards banquet to be held Saturday, July 26, 1980.

This gala evening will occur at Heritage Place, one of the finest antique showrooms in San Francisco, providing a sumptuously elegant setting for what promises to be the premiere event of the BAPHR social calendar.

BAPHR members and patrons, and their personal guests, will join together with invited representatives of other major gay organizations, community leaders and dignitaries in honoring the accomplishments of BAPHR during the past year, and celebrating plans for the future.

Highlight of the evening will be the presentation of the first annual BAPHR Humanitarian Award to internationally renowned psychiatrist Judd Marmor, MD, whose extensive scientific research and publications have contributed substantially to the continuing growth of freedom and dignity for gay people throughout this country.

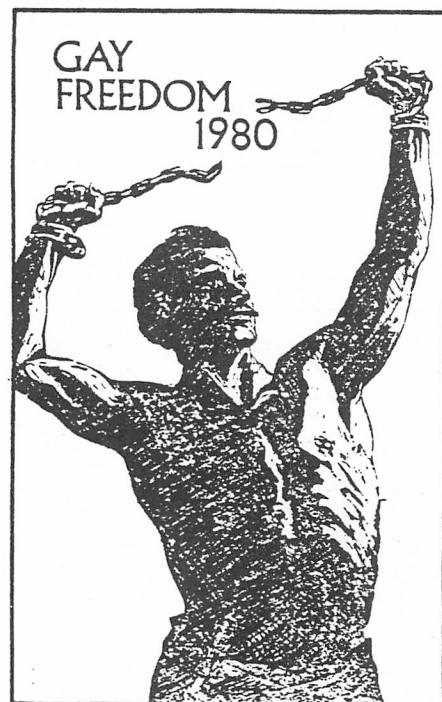
Complimentary hors d'oeuvres and no host cocktails will be served at 6:30 pm, followed at 8 pm by an extravagant buffet dinner prepared by the noted catering firm Bon Appetite. Entertainment will be provided by the sensational men's choral group, Chanticleer, which has received local acclaim for its versatile command of music ranging from classical to camp.

Arrangements for the banquet have been made by the BAPHR Associates (lovers and friends of BAPHR members).

Suggested formal attire is optional. BAPHR members and patrons will soon be receiving invitations by mail, and are encouraged to make their reservations promptly.

Further details may be obtained by contacting BAPHR Associates member Artie Pollack at (415) 928-3172. □

ARTIE POLLACK



## BAPHR

Journal Club from page 33

The authors conclude that since asymptomatic infection is much less common in homosexual men than heterosexual men, screening cultures of urethral specimens is unlikely to be productive; they stress that this recommendation should be first assessed in other geographic areas.

*Reviewer's comment:* This most interesting paper presents considerable data which was gleaned from different Seattle populations over a considerable time span and is crafted in a complex way that makes summary difficult. However, the finding of a much lower incidence of asymptomatic gonococcal urethritis in gay men as compared to non-gay men has been noted in the San Francisco City Clinic (M Sands MD, personal communication) and so appears not to be a local Seattle phenomenon.

Hopefully the authors will reveal in another publication the specific auxotypes of the non-Arg-Hyx-Ura<sup>-</sup> isolates along with their penicillin sen-

sitivities and distribution by sexual preference. It would be quite interesting to know if any particular non-Arg-Hyx-Ura<sup>-</sup> auxotypes are responsible for the greater penicillin resistance they describe.

The authors conclude in part that the higher MIC's of penicillin G required for strains isolated from gay men's rectums may help to account for the high failure rates of ampicillin (19%) and tetracycline (29%) in rectal gonorrhea. Their citation is a recent review of anorectal GC by Washington<sup>2</sup> in which the paucity of clinical studies on treatment of anorectal GC is described. Since that review, I am aware of two other more recent reports both of which, incidentally, were reviewed in these pages last month. (See BAPHRON 2:25-26, 1980.) Sands<sup>3</sup> found a 14.8% failure rate in the ampicillin-probenecid group, but he has since changed the regimen to ampicillin 3.5gm and probenecid 1gm administered twice, 10-12 hours apart, and has found only a 4% failure rate (Sands, personal communication, in press); the tetracycline failure rate in

Sands' group was 14.4%. Lebedeff and Hochman<sup>4</sup> found only a 5% in their ampicillin group but similarly a 15.3% failure rate for tetracycline. This seems to indicate that further studies are indicated to assess the clinical implications of the Handsfield group's paper.

1. Handsfield HH, Knapp JS, Diehr PK, Holmes KK: Correlation of auxotype and penicillin susceptibility of *Neisseria gonorrhoeae* with sexual preference and clinical manifestations of gonorrhea. *Sex Trans Dis* 7:1-5, 1980.
2. Washington AE: Experience with various antibiotics for treatment of anorectal gonorrhea. *Sex Trans Dis* 6 (suppl):148-151, 1979.
3. Sands M: Treatment of anorectal gonorrhea infections in men. *JAMA* 243:1143, 1980.
4. Lebedeff DA, Hochman EB: Rectal gonorrhea in men: diagnosis and treatment. *Ann Intern Med* 92:463-466, 1980. □

BOB BOLAN, MD

# letters to the editor

Dear Friends,  
The United, an organization of lesbians, gay men and their supporters, is involved in setting up a health care project to determine gay and lesbian health care needs and to change practices, policies and procedures that inhibit the delivery of quality health care to our community. The project received funding from the City of Madison and will run through December 1980. At that point the future of the project will depend on the availability of funds. The United Health Care Project is the first in this city to concern itself with the traditional health care delivery system, although there are several community health centers which provide alternatives to that system.

The project is comprised of four component parts: needs assessment, policy change, training and advocacy. We are in the needs assessment stage at present and are trying to link up with other projects around the country which are or have been involved in similar projects. We would greatly appreciate any information you could share concerning where your program is at present and how you got there. The policy component of the project will focus on those health care policies that assume a conventional definition of the family thus restricting the rights of the gay and lesbian patients and their significant others. This is particularly a problem with regard to emergency room procedures and the

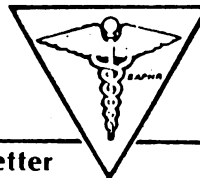
visitation policies on intensive care units. The training component of the project will be directed towards hospital staff as well as medical and nursing students, educating them as to the specific needs of gays and lesbians and encouraging them to clarify their own value system around the question of sexual orientation. And the final component, advocacy, will assist lesbians and gay men in getting through the health care system.

The project is gaining momentum as people in the community begin to hear about the project and our goals. We look forward to hearing from you and exchanging knowledge and experiences as the year continues.

In Good Health,  
Shelley Cohen  
Project Coordinator

THE UNITED  
306 N. Brooks  
Madison, Wisconsin 53715  
(608) 255-8582

## the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

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President.....David Kessler, MD  
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Secretary.....Bill Owen, MD  
Treasurer.....Darryl Raszl, MD

### STAFF

Executive Consultant.....Jeff Richards  
(415) 861-5884

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Post Office Box 14546  
San Francisco, California 94114  
Phone: (415) 673-3189

### BAPHRON STAFF

Editor.....Robert Hindi, MD  
Staff.....Sam Thal, MD  
Bill Owen, MD  
Jeff Richards  
and others

### CONTRIBUTORS

Bob Bolan, MD  
Dave Kessler, MD  
Bill Owen, MD  
Artie Pollack  
Jeff Richards

### PHOTOGRAPHERS

Robert Hindi, MD  
Jeff Richards  
Sam Thal, MD

### DESIGN/LAYOUT

Sam Allen—DESIGN OPPORTUNITIES

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.

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## vital signs

On February 7, 1980, Dave Kessler spoke to the staff of the San Mateo County Mental Health Center in Redwood City on "The Fear of Homosexuality".

Lisa Capaldini presented a historical review of medical attitudes towards homosexuality, subtitled "The Misinformed Misleading the Ignorant", at the Sutro Society meeting in the UCSF Chancellor's Conference Room on March 4, 1980.

Bill Owen and Dave Kessler were interviewed about the history and activities of BAPHR by Randy Alfred of KSAN-FM on March 18, 1980.

# upcoming events

- June 8, Sun. . . . . EXECUTIVE BOARD MEETING, 7:00 pm
- June 15, Sun. . . . . BAPHR GENERAL MEETING, 7 pm  
(Election of 1980-81 officers — no guest speakers.)
- June 19-20, Thurs. and Fri.. . . . . CURRENT ASPECTS OF SEXUALLY TRANSMITTED DISEASES — II SYMPOSIUM, San Francisco State University. [8 hours CME credit.]
- June 19-22, Thurs.-Sun. . . . . THIRD NATIONAL LESBIAN & GAY HEALTH CONFERENCE, San Francisco State University.
- June 28, Sat. . . . . Benefit for GAY RIGHTS ADVOCATES, San Francisco Art Institute.
- June 29, Sun. . . . . GAY FREEDOM DAY AND PARADE, San Francisco.
- July 26, Sat. . . . . BAPHR Annual Awards Banquet honoring Judd Marmor, MD.

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ANNOUNCEMENTS

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**STUDENT IN THE HEALTH PROFESSIONS** seeking summer employment in the S.F. area. Especially interested in laboratory-related work. Have significant experience in the following type labs at Carnegie-Mellon University: Molecular Biology and Genetics, Biochemistry, Physiological Psychology, Organic and Inorganic Chemistry. Also have pursued active research with a behavioral Pharmacologist for 2 yrs., and a protein biochemist for 1 yr. Contact Allan (415) 652-3185. References: Robert Akeley, MD, (415) 652-3185, Jeff Richards (415) 861-5884.

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### ANNOUNCEMENTS

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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. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

*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 15th of each month for inclusion in the following month's issue.*

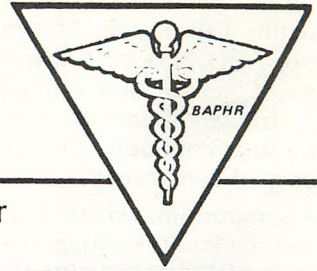
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# the BAPHRON

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Bay Area Physicians for Human Rights Official Newsletter

Vol. 2 No. 7

July 1, 1980

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## 1980 BAPHR AWARDS BANQUET

Judd Marmor, MD, will be honored for his significant contributions to the health and freedom of lesbian and gay people at the first annual *BAPHR* Awards Banquet on Saturday evening, July 26th. The gala event will be held at Heritage Place, an elegant antique showroom in San Francisco.

Included in the celebration will be the installation of *BAPHR*'s recently elected officers for 1980-81. Entertainment will be provided by Ruth Hastings & Company and Chanticleer.

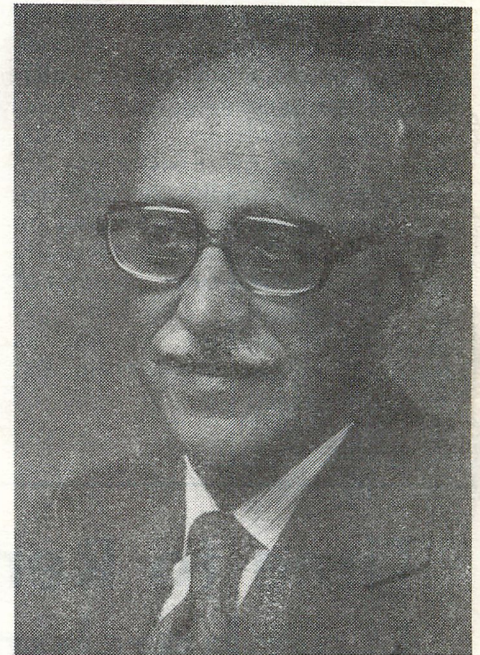
Dr. Marmor, recipient of the 1980 *BAPHR* Health Award, has been a long-time publicly active and outspoken friend of lesbians and gays. He is editor of the recently published book: *Homosexual Behavior: A Modern Reappraisal*. He is also credited for his energetic efforts which led to the deletion of the traditional classification of "homosexuality" from the American Psychiatric Association's list of mental disorders

(DSM II and III) and for his numerous public endorsements of gay civil rights.

Judd Marmor was born in London, England, and received his Doctor of Medicine degree from Columbia University. He was an intern at St. Elizabeth's Hospital in Washington, DC, and he completed his psychiatric residency in New York. Dr. Marmor attended the New York Psychiatric Institute for his psychoanalytic training.

Dr. Marmor is currently the Franz Alexander Professor of Psychiatry at the University of Southern California in Los Angeles and is serving as Training Analyst of the Southern California Psychoanalytic Institute. He was Clinical Professor of Psychiatry at the University of California, Los Angeles, from 1952-1977, and served as the President of the American Psychiatric Association from 1975-76.

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Judd Marmor, MD, recipient of *BAPHR* Health Award.

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## STD Symposium A Milestone

Over two hundred health professionals and individuals from other health-related fields convened at San Francisco State University on June 19 and 20 for the second *Current Aspects of Sexually Transmitted Diseases Symposium*. The conference, focusing on sexually transmissible and acquired infections in the gay population, was co-sponsored by the *National Coalition of Gay STD Services* and *Bay Area Physicians for Human Rights* and provided eight hours of Continuing Medical education credit for qualifying physicians.

Paul Wiesner, MD, Director of the Venereal Disease Control Division, US Center for Disease Control, was the keynote speaker and also participated in various discussions and panels. Other speakers included Dan William, MD, Gay Men's Health Project, New York; Robert Goldsmith, MD, Director Tropical Diseases Laboratory, UCSF; Selma Dritz, MD, Department of Public Health, City and County of San Francisco; Donald Francis, MD, Direc-

continued on page 38

## New BAPHR Officers Elected

The newly elected officers of *Bay Area Physicians for Human Rights* are Dale McGhee, MD, President; Jim Krajeski, MD, Vice President; Bob Bolan, MD; Secretary; and Ric Andrews, MD, Treasurer. The formal installation of officers will take place at the *BAPHR* Awards Banquet on Saturday, July 26.

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tor, US Center for Disease Control Hepatitis Laboratory, Phoenix; David Ostrow, MD, Howard Brown Memorial Clinic, Chicago; and Michael Sands, MD, former Chief of VD Control, Department of Public Health, City and County of San Francisco.

The symposium, which featured addresses by Stuart Kellogg, editor of the *Journal of Homosexuality*, and David Goodstein, President of Liberation Publications (publisher of the *Advocate*), was also noteworthy due to the participation and sharing of clinical experiences, ideas, and comments from the audience during the many discussion sessions.

Topics presented at the symposium included information on the pathophysiology, epidemiology, clinical manifestations, diagnostic methods and therapeutic modalities for such diseases as anorectal gonorrhea, amebiasis, giardiasis, shigellosis, hepatitis A and B, condylomata acuminata, and syphilis. In addition, panel discussions were presented on examining the problem of sexually transmitted diseases from the point of view of consumers, clinicians, and public health workers, as well as behavioral factors involved in the spread of disease.

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## Notes on the STD Program:

### *Addendum to the Program:*

The name of Michael Sands, MD, former chief of VD Control, City and County of San Francisco, was inadvertently omitted from the list of speakers of the official symposium program.

*Symposium participants* who are non-BAPHR members and non-subscribers to the *BAPHRON* will be receiving this complimentary issue. Volume 2, No. 8 (August 1980) will have additional symposium information and news.

Non-members and non-subscribers may find information about subscription and membership information in the *BAPHRON* masthead. □

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The immediate significance of the STD symposium may be difficult to assess from a lack of specific behavioral guidelines and didactic recommenda-

tions stemming from the conference. A national task force was charged, however, with incorporating latest research presented at the symposium into such recommendations in the near future. The greatest impact of the symposium may have been the merging of clinicians, researchers, and other interested individuals in an open forum where information was presented and important personal contacts were made. It may have been the sharing of unpublished clinical information, social camaraderie, and personal ideas which the symposium engendered. Tremendous energy was generated which will be directed toward further clinical and laboratory research of sexually transmitted diseases. It is now obvious that sexually transmitted diseases in the gay population have arisen to become a primary public health concern in this country.

The dedication of dynamic individuals such as Bob Bolan, MD, Symposium Director, and Jeff Richards, Symposium Secretary, and others throughout the United States will without doubt have significant impact on improving the quality of life for millions of gay people throughout the world. □

**ROBERT HINDI, MD**

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# Time to Renew BAPHR Membership In July

It's time to renew your *BAPHR* membership again!

Members and patrons who joined or renewed prior to April 1, 1980 will be receiving a letter this month along with a membership information brochure and application and a return envelope.

*BAPHR* operates on an academic and fiscal year from July 1 through June 30. Memberships constitute the greatest source of *BAPHR* funds. It is vital that you send in your renewal by July 31 so that the Executive Board can develop a realistic operating budget early in the fiscal year.

Dues have not been raised this year. With inflation in the 20% per annum range in recent months it is important

for us to increase our membership above last year's total so that the organization can at least hold its own financially.

From past experience the best way to obtain new members is by word of mouth. Each of us should strive to let other gay physicians and medical students know about the organization and about *BAPHR's* many accomplishments, projects and plans. Nor should we neglect the fact that *BAPHR* provides a significant and unique vehicle for mutual support that we as gay physicians would not be able to find in many other locales. *BAPHR's* membership is now international in scope; many members outside the Bay Area enjoy the *BAPHRON* and other ac-

tivities such as the June "Current Aspects of Sexually Transmitted Diseases—II" continuing medical education Symposium.

Remember to return your membership renewal form and dues by July 31 to ensure that you will continue to receive the *BAPHRON* and our other organizational mailings without interruption. □

**BILL OWEN, MD**

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## Coming Up in *BAPHRON*:

- ★ A look at *BAPHR's* new leadership
  - ★ The National Lesbian & Gay Health Conference
  - ★ 1980 Gay Freedom Day
  - ★ An Update on *BAPHR's* Standing Committees
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# Owen Welcomes Symposium Registrants

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(Following is the text of an opening address by Bill Owen, MD, outgoing BAPHR Secretary, in which he welcomed registrants to the "Current Aspects of Sexually Transmitted Diseases—II" Symposium. BAPHR co-sponsored the symposium which was held at San Francisco State University on June 19 and 20, 1980.)

On behalf of *Bay Area Physicians for Human Rights* I would like to take this opportunity to welcome all of you to San Francisco and to the Current Aspects of Sexually Transmitted Diseases Second Symposium.

As many of you know, *BAPHR*, which now has over 300 physician and medical student members, will be celebrating its third birthday next month. During those years our organization's major thrust has been in the area of education.

*BAPHR's* initial educational task was among our own members. *Before* we could reach out to our non-gay medical colleagues, *before* we could teach gay community groups about gay health problems, *before* we could bring our message to the public-at-large, we ourselves had to be comfortable with the fact that we can be competent health professionals of the highest caliber and at the same time, be openly gay.

*BAPHR's* next educational endeavor was in the public area. In November, 1978, Proposition 6—the Briggs' Initiative—was placed before California voters. This measure, if it had passed, would have permitted school districts to fire teachers simply for being openly gay. The specious arguments used by the proponents of this initiative were easily countered by the medical and psychiatric facts put forward by many of our members who went before the public to speak out against it and to raise funds to defeat it. Many *BAPHR* members felt a high degree of personal involvement in this campaign since quite a few were teachers in medical schools and in other settings. They were convinced that the Briggs campaign, if successful, would ultimately be extended to involve *all* teachers, even those in health care settings. I am happy to report, though, that through the efforts of those *BAPHR* members and with the help of many concerned Californians, both gay and non-gay, Proposition 6 was soundly defeated.

Over the past two years *BAPHR's* educational efforts have moved in several directions.

- We have developed a Speakers Bureau. Speakers have been invited, primarily in California, but also in other locales, to speak at symposia and conferences for a variety of health professionals: physicians, nurses, medical students, clerical personnel, county health workers, national VD hotline volunteers, just to name a few. Patient education has also been an important focus. We have been invited to speak to numerous gay community groups throughout Northern California about sexually transmitted diseases and traumatic problems.
- Liaisons have been made with local professional associations, such as the San Francisco Medical Society and the Northern California Psychiatric Society.
- For two years, a medical information and referral telephone service staffed entirely by MD volunteers has been in continuous operation, 24 hours a day, 7 days a week.
- Members have been actively involved in research in the areas of sexually transmitted disease and physical and mental health concerns of lesbians and gay men. I should note that the first clinical review of sexually transmitted diseases and traumatic problems in gay men in a major national medical journal will appear this month in the *Annals of Internal Medicine* published under the auspices of *BAPHR*. A continuing series of articles on health problems in the gay community has been published biweekly in a Bay Area gay newspaper.
- Under the able editorship of Bob Hindi, MD, the *BAPHRON*, a journal with national circulation has been published monthly for over 1½ years. The *BAPHRON* contains articles on medicine, social issues and other topics of interest to professionals and the gay community.
- Our most recent achievement has been the granting of Continuing Medical Education provider status to *BAPHR* by the California Medical Association. This conference today represents *BAPHR's* first opportunity to grant CME credit as a result of that provider status. I would like to thank Bill Kapla, MD, Chairperson of *BAPHR's* Education Committee and Jeff Richards, *BAPHR's* Executive Consultant, for their personal efforts in seeing our CME application through to its final approval three months ago.

For the future we will continue to be involved in educational programs on the local, regional and national level. We are pleased that other organizations with goals and programs similar to *BAPHR's* have developed and grown in Southern California, Philadelphia and other communities in recent years. Many physicians from those associations are here today and we hope to work with them on joint educational ventures in the future.

And just as in this conference, we the members of *Bay Area Physicians for Human Rights*, look forward to new opportunities to work closely with both gay and non-gay health professionals in the continuing effort to improve the quality of health care for gay people everywhere.

Finally, I would like to give a personal word of thanks from the members of *BAPHR* to Bob Bolan, MD, the Symposium Director—elected just last Sunday as *BAPHR's* Secretary for 1980-81—and to Jeff Richards, the Symposium Secretary and *BAPHR's* Executive Consultant—for their tireless work in putting together what promises to be a medically significant, educationally valuable and, I am certain you will agree, thoroughly enjoyable two day experience for all of us. □

The Awards Banquet will begin at 6:30 pm with no-host cocktails and complimentary hors d'oeuvres, to be followed with a gourmet buffet dinner, catered by Bon Appetit.

Entertainment during the cocktail hour will be by Ruth Hastings & Company, one of the most popular cabaret singing groups in the Bay Area. Following the dinner hour ceremonies, featured entertainers will be Chanticleer, a musically stunning group of men singers.

Invitations have been extended to several other gay organizations, medical groups, and community leaders. A limited number of tickets are available, and BAPHR members and patrons who have not yet made reservations are urged to do so promptly.

Advance reservations are \$25 for BAPHR members and patrons, \$20 for houseofficer members, \$15 for medical student members, and \$25 for any guests.



Chanticleer (above) will be featured performers during the after-dinner hour at the BAPHR Awards Banquet on July 26.



Ruth Hastings will entertain during cocktail hour at the BAPHR Awards Banquet on July 26.

If you have not already done so, call for reservations **today**, and join BAPHR for a festive evening.

**For reservations, telephone (415) 928-3172.**

Note: Suggested formal attire is optional. □

## BAPHR-San Francisco Medical Society Liaison Formalized

BAPHR members Dale McGhee, MD, Bill Kapla, MD, and Jim Krajeski, MD, met with leaders of the San Francisco Medical Society (SFMS) on June 9 to discuss mutual areas of interest and concern. David Sachs, MD, President of SFMS, and David Allen, MD, President-elect of the SFMS, were present at the meeting.

BAPHR spokespersons expressed the concerns of many gay physicians toward professional organizations in regard to the disclosure of sexual orientation and lack of acceptance because of sexual orientation. They also expressed the need of gay physicians to feel that the Medical Society would be of benefit to them and that they would be welcome as members.

Dr. Sachs indicated his interest in obtaining a wider representation of the medical society and specifically invited BAPHR to encourage its members to join. He emphasized the

need for physicians to participate in professional organizations if they are to bring about significant change. He also indicated his willingness to appoint BAPHR members to SFMS committees, and noted that several BAPHR members have already been active and well received in the Medical Society. Dr. Allen stated that one of the most effective means to bring about change in attitude and policy is through personal contact.

Also agreed upon at the meeting were ideas regarding the use of the Medical Society bulletin, *San Francisco Medicine*, to disseminate information on gay medical issues.

The liaison meeting, a continuation of previous informal interactions between BAPHR and the SFMS, made it evident that the ongoing relationship is certain to be of benefit to both organizations. □

BOB HINDI, MD



# progress notes

by David Kessler, MD, out-going BAPHR President

by Dale McGhee, MD, in-coming BAPHR President

As I leave office after having been your President for the past two years I am flooded with a mixture of thoughts and feelings. In a reflective mood, I look back and try to recapture the high points of this period.

I recall that so many specific exciting events were occurring from one day to the next that about a year ago I started to keep a diary. I hoped by this means to keep track of what was happening, but I soon found myself too busy to write daily notes, and had to abandon the idea.

It has been a very active time, and we can all feel proud of what has been accomplished. I felt thrilled in attending the excellent *BAPHR*-cosponsored Symposium on Sexually Transmitted Diseases this past month (held in conjunction with the Third National Lesbian and Gay Health Conference) for which we were able to offer CME credit. People there were reading our fine newsletter, the *BAPHRON*, and new members were signing up.

At our last general meeting, two visiting physicians from other parts of the country told us how important it has been for them to know of our group's existence and of our work. Gay patients are grateful for our Referral Service, which, since its inception has been staffed by *BAPHR* volunteers. Our articles in the gay press on health issues, and our Speakers Bureau, have been very well received.

This will be our third year of participation in the Gay Freedom Day Parade, and our presence has literally had an international impact. We have had a lot of fun and made many friends at the Health Fairs, and also at the Castro Street Fairs.

We have found considerable support in our local medical and psychiatric societies, in both of which we are now represented on working committees. Our members and our organization have been in the forefront of many local and national gay health concerns, and we have close ties, for example, with gay groups in the American Psychiatric Association and the American Medical Student Association.

The formation of similar groups around the country, and the recent formation of the *BAPHR* Associates augur well for the future.

This list could be greatly extended, but at least as important have been more personal matters. We have grown more comfortable with ourselves and have profited from the camaraderie with each other. We have gained a new sense of meaning and purpose as human beings who happen to be physicians who happen to be gay. We have emerged from our isolation, and in so doing have helped others to do the same.

It would be difficult for me to thank by name each of you who contributed significantly to making the last 24 months so memorable. Certainly all of the Officers, Chairpersons and Staff deserve recognition for their labors, as do

*BAPHR* is three years old this month.

Having been a part of its birth and active in parenting it since then, I have found *BAPHR*'s survival and growth no less than astonishing. Several other promising and impressive gay organizations which formed near the same time period as *BAPHR*, have since disappeared altogether or faded into obscurity and insignificance. Yet *BAPHR* not only has survived, it has prospered and established its reputation as a capable, credible, and thoroughly professional body of physicians.

The reasons for our good fortune are no doubt multiple. Certainly one such reason is the skillful leadership of my presidential predecessors. At a time when apprehensions precluded most of us from even considering the office, Jerry Strong had the mettle to step forth as *BAPHR*'s first president, and he carefully guided us as we molded the structure, tone, and direction of the neophyte organization. During that process, I formed firm bonds of affection and regard for Jerry, bonds that remain indelible today. Dave Kessler, *BAPHR*'s president for the past two years, emerged as an inspiring leader whose perceptive vision, style, and judgement promoted the multiple programs that have drawn public attention and approbation to *BAPHR*.

Those programs collectively constitute another major reason for *BAPHR*'s success. Unique physical, psychological, social, and cultural health programs have long existed within the gay community. As a group of physicians who have cared enough to give these programs priority, we have received the admiration and gratitude of the gay community. Such programs as our *Physician Referral Service*, our widespread public speaking engagements, our volunteer efforts in health screening, our biweekly column in the *Sentinel* newspaper, our participation in the recent Sexually Transmitted Diseases Symposium, and our dialogues with public health officials and the San Francisco Medical Society are but a sampling of the accomplishments that not only have generated community respect and goodwill, but have served very real and previously neglected needs.

Antepentultimately, the image we project as gay men and women who are competent practitioners of the most highly honored and respected of all professions has furnished us with effective credibility in breaking down social stereotypes and advancing the cause of equitable and just opportunity for all who are members of sexual minorities.

Penultimately, by some mysterious grace we largely have avoided the political and personal rancors that often run as internequine currents between and within gay organizations.

continued on page 42

all of you who participated in the various BAPHR happenings, or offered your moral or financial support.

I would like to single out for special mention Bill Owen, BAPHR's founder and Secretary for the past three years. Without his vision, hard work, and good sense none of this would have been possible. Also a hearty pat on the back to Dale McGhee, my successor, for his help so many times in the past. My best wishes to him and the other incoming officers, each of whom has a fine track record.

As a continuing member of BAPHR and as President of the *Caucus of Gay, Lesbian and Bisexual Members of the American Psychiatric Association*, I will not exactly be fading away. BAPHR is in a very strong position from which to expand in a number of exciting directions, and I do not intend merely to stand idly by on the sidelines.

Because BAPHR grew so rapidly, and because of the pressure of various projects, I regret that I did not get to know as many of you as well as I would have liked. I hope to correct that situation in the future.

For now, thank you all whole-heartedly for giving me the opportunity to experience the most personally and professionally fulfilling episode of my entire life. □

DAVE KESSLER, MD

But, ultimately, for whatever success we have had in our leadership; our programs of public service, our efforts in defense of gay rights, and our elusion of acrimony, I firmly believe that the touchstones of BAPHR's prosperity lies in our relationships to one another within the organization. As we continue to expand our fine outreach programs for the gay community and for the general public, we must not loose sight of the fact that we have come together primarily to take care of each other, to know, enjoy, nurture, support, and protect each other. Before the birth of BAPHR, most of us felt some sense of isolation in our professional lives. And for most of us, the framework of BAPHR has provided us with our first and only opportunity to integrate the professional and personal compartments of our lives in a meaningful, productive manner.

I must admit that, as the organization has grown large, it has become increasingly difficult to maintain the sort of intimacy that characterized it in its neonatal days. But, without curtailing our outreach programs, I intend to give additional priority to finding mechanisms by which the closeted, the shy, the uncertain, and the nonpolitical, as well as the activist, can find a safe and welcome setting and a sense of community within BAPHR. We also need to find means by which more women physicians can find a sense of comfort and contribution within the organization. All this may require a bit of trial and error experimentation, and I beg your indulgence and your advice. I have some fanciful dreams for BAPHR, and I believe the prognosis is bright.

Happy Birthday, BAPHR. Many happy returns of the day. □

DALE MCGHEE, MD

## Gay Rights Advocates Elects New Board

Gay Rights Advocates, a public interest law firm, recently elected six new Board Members and an Acting Executive Director. Donald Knutson resigned as Executive Director to devote his full time to the responsibilities of Legal Director. The Board elected Don Cummings, a member of the Finance Committee, as Acting Executive Director. Charles W. Roth, CPA, was elected Treasurer.

Newly elected Board Members include: Lucia Valeska, Co-Executive Director of the National Gay Task Force, Gwen Craig, Vice President of the Harvey Milk Democratic Club, Richard Rouillard, co-founder of Gay Rights Advocates, Harold Snedcoff,

chair of Finance, Betty Berzon, psychologist and co-author of *Positively Gay*, and Randy Miller. Re-elected were Alvin Baum, Jr., San Francisco businessperson, Don Clark, psychologist and author of *Loving Someone Gay*, Ray Herth, realtor, and Fred Ponder, San Francisco businessperson. □

## George Neumann to be BAPHR Secretarial Assistant

George Neumann, a seminary intern at San Francisco's Trinity Episcopal Church, will be joining BAPHR as the new Secretarial Assistant, succeeding Mark DeWolfe.

George, who has completed two years of seminary training at the church Divinity School of the Pacific, spent much of his previous time with human rights work. He has been involved with efforts leading to the adoption of "gay civil rights" in Tucson, Arizona, and a revision of Arizona's criminal code regarding homosexuality. George was also involved in a number of groups in Tucson including the Tucson Gay Coalition, the Tucson Men's Center, and the American Civil Liberties Union. Born in Philadelphia, George completed a pre-medical curriculum at Earlham College. He has taken a year of graduate work in theology, and has experience working in the library field.

George will be working under the direct guidance of Bob Bolan, MD, BAPHR Secretary, in working with various committees, projects, BAPHR offices and the Executive Consultant in the coming months. □

# Gay Run '80 Set For July 27

## vital signs

Gay Run '80, the first gay-organized competitive running event in the United States, will be held in San Francisco on Sunday morning, July 27. The starting location is the south end of the Polo Field in Golden Gate Park. Registrants must assemble between 8 and 9:30 am and the race will begin promptly at 10 am.

The race is sponsored by the *Advocate* and Frontrunners, a running club whose goal is to promote fitness among lesbians and gay men. *BAPHR* will also assist in the organization of the race by providing medical aid stations.

The entry fee is \$5. A T-shirt promoting the event is \$3 additional. Registration is by mail only and will not be accepted after Tuesday, July 15. Proceeds will go to the Golden Gate Park restoration fund.

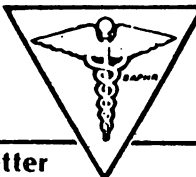
Runners wishing to participate in Gay Run '80 may obtain an entry form by calling the *Advocate* at (415) 573-7100. *BAPHR* members and other health professionals who would like to volunteer to staff the medical aid stations (instead of running) should contact Darryl Raszl, MD, at (415) 863-3627 evenings or 673-7600 days.

- Four *BAPHR* members were interviewed on the national closed-circuit 24 hour radio broadcast for M.D.'s, Physicians Radio Network (*PRN*). The discussants were Dale McGhee, MD, President-elect; Bill Owen, MD, Secretary; Bill Kapla, MD, Chairperson of the Education committee; and Bob Hindi, MD, Editor of the *BAPHRON*. The 15 minute program, called "Physicians and Gay Rights", was broadcast hourly on July 18 and every other hour on June 21. Discussing the program, the *PRN* Radio Guide noted, "Homosexual doctors, declaring their orientation, expect tolerance but often encounter hostility. Yet most say that the gain in self-esteem is worth the price".

- The Department of Family Medicine at San Francisco General Hospital organized a two part grand rounds on "Medical Aspects of Homosexuality". The first session on May 22 dealt with epidemiology and diagnosis and was presented by *BAPHR* member Bill Kapla, MD, and by Selma Dritz, MD, of the San Francisco Department of Public Health. The second session was presented on June 12 by *BAPHR* member Bill Owen, MD who discussed treatment and prevention.

- As part of a training program for Alameda County employees entitled "Working with Sexual Minorities", Pat McGraw, MD organized *BAPHR*'s participation on June 11 and 18 in the clinical phase of the training. *BAPHR* speakers included Bill Owen, MD ("Clinical Approach to the Gay Patient" and "Gonorrhea and Syphilis Updated") and Bob Bolan, MD ("Hepatitis and Herpes as STD's").

- Bill Owen, MD discussed "Gay Medicine" on June 10 with the staff and volunteers of the National VD Hotline in Palo Alto. The VD Hotline is operated as an 800 toll free WATS line by the American Social Health Association and is funded by the USPHS Center for Disease Control in Atlanta.

the **BAPHRON** 

**Bay Area Physicians for Human Rights Official Newsletter**

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# upcoming events

July 13, Sun..... EXECUTIVE BOARD MEETING, 7:00 pm.  
July 24, Sat..... Third Anniversary of the Founding of BAPHR.  
July 26, Sat..... BAPHR First Annual AWARDS BANQUET honoring Judd Marmor, MD, and installation of officers. (See story this issue.)



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### CLASSIFIEDS ADVERTISEMENTS ANNOUNCEMENTS

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#### WANTED

**PRIMARY CARE INTERNIST OR FAMILY PRACTITIONER**; FT or PT; August 1: busy community health center, serving gay, lesbian and other communities; excellent salary and fringe benefits; send C.V. to Micheal Lambert, MD, Fenway Community Health Center, 16 Haviland St., Boston, MA 02115.

#### PUBLICATIONS

**GAY COMMUNITY NEWS** is the national news-weekly which brings you thought-provoking coverage of the gay experience in America. Now in its seventh year, GCN is "...the primary news source for anyone concerned with what is being done to and by lesbians and gay men everywhere in this country." — NCTF.

\$10/25 weeks, \$17.50/the year. *Gay Community News*, Suite 600, 22 Bromfield Street, Boston, MA 02108.

**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 for 12 issues. Send check to *The BAPHRON*, Post Office Box 14546, San Francisco, CA 94114.

#### ANNOUNCEMENTS

**DEAR BAPHR MEMBER:** I've just opened an office for counseling gay couples and individuals, in addition to my teaching counseling part-time at SF State University. If you are interested in making a referral to me, I would be happy to collaborate with you. I'm available evenings, covered by most insurance carriers, and charge \$30 to \$40 per session.

David A. Witt, LCSW  
5709 Geary Blvd.  
Phone: 342-7882

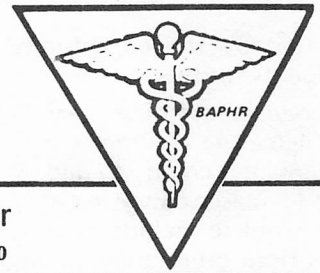
*The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our membership. The cost of advertising in this section for medium typeface, 40 letter lines will be \$ 1.50 per line space per month. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

*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 15th 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: Foramina, The BAPHRON, Post Office Box 14546, San Francisco, CA 94114.*

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# the BAPHRON



Bay Area Physicians for Human Rights Official Newsletter

Vol. 2 No. 8

August 1, 1980

## BAPHR Officers: A Working Team for 1980 - 1981

### Dale McGhee, President

BAPHR President Dale McGhee, MD, is 43 years old, and was born and raised in Detroit. Taking both his BA and MD at the University of Michigan, Dale was an intern and a general surgical resident at San Francisco's St. Luke's Hospital. After a two year stint in the Air Force, Dale practiced urology at Barnes Hospital in St. Louis. He is currently a partner in the Permanente Medical Group in Santa Clara and lives with his lover and oldest daughter (of three) in San Francisco.

In addition, Dale is an instructor at the Stanford University Medical School and a lecturer at the University of California, San Francisco Medical Center. He has lectured widely on organic causes of sexual dysfunctions. Commenting on his background, Dale said "There's nothing more insufferable than a converted Catholic,

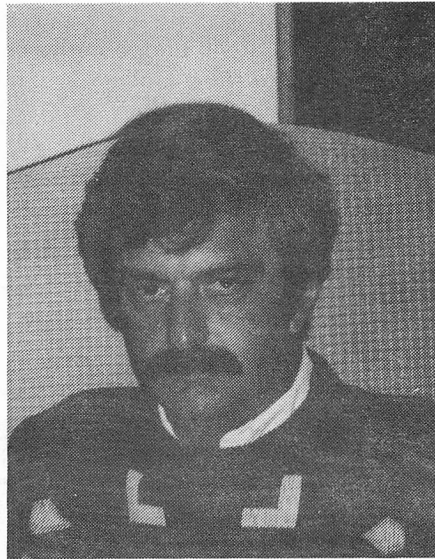


photo: Robert Hindi, MD

BAPHR President Dale McGhee, MD

which is to say that people who discover religious revelation relatively late in life have a habit of going overboard about it. The same may often be

true of 'born again' gay people, such as myself, who discover and come to understand themselves after the age of 30. We tend to become evangelistic about the experience of becoming integrated, happy people. Nevertheless, like the title of the Off-Broadway show, I feel 'I've Got My Act Together and I'm Taking It On the Road', and by doing so I hope that others coming along behind me in life may be able to avoid some of the stumbling, bumbling, and pain that I once went through.

Dale commented at length about his role in the organization, saying "I never sought the presidency of BAPHR, and I sometimes think I was deranged for taking the task on in addition to a full time practice, teaching responsibilities, nurturing my relationship with a fine lover, actively parenting my children, keeping up with my other organizations, and trying to squeeze in a little personal life as well. But I'm really proud of BAPHR and am

continued on page 46

## National STD Guidelines Task Force in Formation

The formation of a task force to explore the feasibility and formulation of educational and behavioral guidelines was one of the key results of the annual meeting of the National Coalition of Gay STD Services, held June 21, 1980 at San Francisco State University. The Coalition meeting, chaired by Mark Behar, was attended by clinicians, administrators, educators and health workers representing nearly every gay STD clinic in America.

Incorporating presentations from the preceding two day "Current Aspects of Sexually Transmitted Diseases—II" Symposium, Coalition members and others attending the meeting discussed the philosophy and methodology of

preparing a significant and accurate set of guidelines designed to reduce the spread of sexually transmitted diseases in the nation's gay population. Consideration was initially given to reformulating and making public such information as risk factor identification in regards to particular sexual practices; re-emphasis of sexual hygiene and basic "do's" and "don'ts" was also considered important.

Realizing the impact of new and carefully considered information, combined with the possibility of innovative ways of presenting such guidelines, consensus developed that a task force should be formed to coordinate such efforts as an alternative to

a revision of educational materials already in distribution.

Issues that the task force will consider, in conjunction with the NCGSTDS, will include sexual behavior recommendations, incorporation of new research with existing educational information, and forms that such outreach would take.

For information about the task force, contact Mark Behar, Chairperson, National Coalition of Gay STD Services, 1637 N. 21st Road #9, Arlington, VA 22209; or Robert Bolan, MD, Secretary, Bay Area Physicians for Human Rights, P O Box 14546, San Francisco, CA 94114. □

JEFF RICHARDS

pleased by the opportunity to help shape its future.

"I hope we can direct renewed energy to increasing our membership, which potentially could double within the San Francisco Bay Area alone, and to reach out to include more new members from other areas throughout the country. We already have a sizable number of members living in other states and countries...members whose only contact with other gay physicians is through the *BAPHRON*.

I hope we can play around a bit with the style and content of our meetings and other members activities, to insure that they are enriching experiences and foster a sense of community within the membership.

"The potential for the educational and social impact of *BAPHR* upon the gay community and the general public is limited only by our economic resources. I hope we can begin some long range and major fundraising activities that ultimately will permit us to undertake increasingly sophisticated and effective programs, without nickle-diming our own membership for additional donations every few months, as it has sometimes seemed in the past." □

### Jim Krajewski, Vice-President

*BAPHR* Vice President James Krajewski, MD, has been involved with the organization for much of its history, and in addition, is President-elect of the *Gay, Lesbian and Bisexual Caucus of Members* of the American Psychiatric Association, as well as acting as the current Chairperson of the Northern California Psychiatric Association. Jim, 38, received his undergraduate and medical degree from Creighton University in Omaha, and came to San Francisco for his internship and psychiatric residency at St. Mary's Hospital. Jim is in private practice in San Francisco, and also consults for quality control services for the regional division of the Social Security Administration.

"My primary interest within *BAPHR* is working in the area of education," said Jim. "There are many forms which education can take and roles which we can all follow in this endeavor. I feel

there needs to be an emphasis on educating fellow professionals, but we must also focus on education for the entire community.

"Gay people often suffer from a lack of knowledge regarding homosexuality and it is vitally important to see that they are to see that they are not limited by their own stereotypes in addition to being limited by society in general."

Speaking about his personal role, Jim said, "My involvement in *BAPHR* and the Gay Caucus of the APA has been a remarkably rewarding experience. I feel much better about myself and very positive about the changes which have resulted from my efforts and those of others. I will undoubtedly be encouraging *BAPHR* members to participate in whatever way they are comfortable in enhancing the life of all gay persons." □

### Bob Bolan, Secretary

Robert Bolan, MD, is the 1980-81 *BAPHR* Secretary. Bob is a relative newcomer to San Francisco, and was born in Detroit 33 years ago. Bob's undergraduate work was done at the University of Detroit, and he received his MD from the University of Michigan in 1972. After internship in Madison, work in emergency and family medicine, and a family practice residency in Milwaukee, Bob came to his current group practice, Pacific Family Practice Medical Group, in 1978.

Bob's current involvement in *BAPHR* came in conjunction with his efforts as Director of the June "Current Aspects of Sexually Transmitted Diseases—II" Symposium, which was co-sponsored by *BAPHR* and the *National Coalition of Gay STD Services*. Previously, he was deeply involved with the Milwaukee Gay People's Union clinic and national STD politics.

Commenting on his position as Secretary, Bob said, "Aside from insecurity about following in Bill Owen's footsteps, I would like to help see that *BAPHR* pays close attention to the needs of its members. I would also like to see *BAPHR* stress two seemingly different divergent goals — emphasis on the critical support and nurturing functions of the organization, and branching out into even more projects of broad social importance."

Bob currently lives in San Francisco with his lover, and is active in city health politics and the *National Coalition of Gay STD Services*. □

### Ric Andrews, Treasurer

Newly-elected *BAPHR* Treasurer Richard Andrews, MD, was born in Union, Mississippi, and grew up in Oklahoma City. He received a BA degree in Biology from Trinity University in San Antonio, and attended medical school at the University of Oklahoma. Regarding medical school, Ric relates, "I really didn't find my interests compatible with basic sciences. During breaks between lectures, I would often leave the building and take walks around the block." He found his third and fourth year of clinical sciences much more interesting and "most of all enjoyed talking to patients and staff regarding social issues, not medicine". He subsequently completed a four year psychiatry residency at McCauley Neuro-Psychiatric Institute in San Francisco, and is board eligible in child, adolescent, and adult psychiatry. Ric currently has an outpatient private practice in San Francisco, as well as attending at the Children's Psychiatric Unit at St. Mary's Hospital. He is also working in quality control services for the regional division of the Social Security Administration.

Ric is an optimistic, energetic individual who feels the importance of "letting gay people know that it's OK to be gay and to love yourself...in fact, not only is it OK, it's fantastic!"

He is also determined to let non-gay people know that "gays are all sorts of people, that we are OK, that we do enjoy life and have fun, but that we also have problems that we need to work out. We all need to be more considerate of everyone, and instead of just demanding and insisting for acceptance and change, we should use positive, cooperative efforts rather than positive anger."

In regard to his involvement in *BAPHR*, Ric states that he was "initially intimidated", but he soon realized that members were sensitive and personal, and now wants to continue as an active, contributing individual within the organization. □

# August General Meeting Located Near the Fair

The August 17, 1980, General Meeting of *BAPHR* will be held at a member's Castro Street home in San Francisco at 7 pm following the nearby Castro Street Fair, and *not* at the San Francisco Medical Society headquarters, which has hosted *BAPHR* meetings for much of the past two years. (Note: the address of the General Meeting will be found in the *BAPHR* Membership Section of the *BAPHRON*.)

"Holding the meeting in a private home marks the first of a planned series of innovations designed to bring new spark, informality, and member interest and participation into the General Meetings", according to Dennis McShane, MD, chairperson of the Support Committee, which has recent-

ly assumed responsibility for consolidated planning of the meetings.

This meeting will have a short business agenda, followed by several short group discussions, during which members will be encouraged to share their feelings about *BAPHR*, what they would like to see the organization doing, and what kinds of meetings are liked and not liked. This will be followed by a brief wrap-up discussion and a social hour. Refreshments will be served.

*BAPHR* President Dale McGhee, MD, has emphasized the enormous symbolic value of past *BAPHR* meetings at the Medical Society offices, at the invitation of that organization, and he has indicated that *BAPHR* may hold

some meetings there again in the future, but that "the austerity of the physical setting there has sometimes seemed to hinder the kind of close member interaction we hope to achieve."

Dr. McShane has announced that tentative projections call for special events, principally social, about once every three months, with varied meeting formats in the intervening months.

*BAPHR* members who would like to join the Support Committee, or who have comments or suggestions on meetings are encouraged to contact Dennis McShane in care of *BAPHR*, PO Box 14546, San Francisco 94114. □

## Los Angeles to Hold Viral Hepatitis CME Course

A one day medical symposium on viral hepatitis will be offered September 10, 1980 in Los Angeles. The continuing medical education course, entitled "*Hepatitis: A Sexually Transmissible Disease*", is being sponsored by the Los Angeles Venereal Disease Information Council, the Gay and Lesbian Community Services Center, and the Drew Postgraduate Medical School.

Explaining the reasons for such a course, spokesperson Loren Senseman, MPH, said, "The medical community has expressed a need for more accurate information for providing care to patients with hepatitis. This course is offered to assist health professionals in improving services to patients through a new understanding of hepatitis." Senseman is Senior Health Educator for the Central Region Preventive/Public Health Division, Los Angeles Department of Health Services.

"As Paul Wiesner said in his keynote address at the June STD Symposium in San Francisco, hepatitis B is now a first priority for Center for Disease Control efforts in the gay community, and a very high priority in regard to the general population," said Senseman.

The Los Angeles symposium will focus on increasing both the competency and confidence of physicians and other health care providers in dealing with sexually transmitted hepatitis, patients, and the community. The program will be held in the Pacific Design Center, 8687 Melrose Avenue, West Hollywood.

A nationally prominent faculty will be discussing a number of aspects of hepatitis. Donald Francis, MD, Chief, Epidemiology Section, Center for Disease Control hepatitis laboratories in Phoenix, will present etiology and research. Allan G. Redeker, MD, Professor of Medicine at Los Angeles County's Rancho Los Amigos Liver Unit, will speak on diagnosis, laboratory testing, and histories. Treatment and prognosis issues will be addressed by Myron Tong, MD, Chief, Liver Diagnosis Center, Huntington Memorial Hospital, Pasadena. Donald Goodwin, DPH, Assistant Professor of Community Medicine, Drew Postgraduate Medical School, will present epidemiology.

Counseling, analysis and case studies will be presented by other faculty which includes Elliott Hochman, MD,

Medical Director, Men's Clinic, Gay and Lesbian Community Services Center; Florence Hanson, RN, Nursing Consultant, VD Control Division, Los Angeles Department of Health Services; and Anne Moacanin, PhN, MPH, Public Health Nursing Supervisor, Los Angeles County Department of Health Services.

Six hours of Category I AMA/CMA continuing medical education hours will be offered to physicians, and six hours of continuing education will be available to registered nurses.

Fees are \$25 for physicians, \$15 for nurses and house staff, and \$10 for students. The registration deadline is August 25; an additional \$5 fee will be charged for late registrations. Checks should be made payable to *LAV-DIC/Hepatitis Symposium*, and sent to Los Angeles Venereal Disease Information Council, P O Box 30607, Los Angeles, CA 90030.

For additional information, contact Loren Senseman, (213) 974-7275 or Thom Nylund, Gay and Lesbian Community Services Center Men's Clinic Administrator, (213) 474-7400, ext. 267. □

JEFF RICHARDS

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## journal club

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### BAPHR Publishes Article in New England Journal

As part of its continuing educational program on the subjects of homosexuality and health aspects of the homosexual patient, *Bay Area Physicians for Human Rights* has published its first research survey in the *New England Journal of Medicine* in the format of a letter to the editor. The article, entitled "Medical Aspects of Homosexuality", was written by Dale McGhee, MD, President of BAPHR and Bill Owen, MD, former Secretary and one of the founders of the organization.<sup>1</sup>

The letter, which appeared in the July 3, 1980 issue of the *Journal*, detailed results of a survey that was conducted at two gay street fairs in 1978—the Gay Freedom Day Fair and the Castro Street Fair. 586 randomly selected participants answered the BAPHR questionnaire. 486 participants (83%) identified themselves as homosexual and 53 (9%) as bisexual. 428 respondents (73%) were men and 157 (27%) were women. The results of the BAPHR survey showed that 73% of homosexual or bisexual respondents had disclosed their sexual orientation at some time to a physician and 27% had not. Of those who had disclosed their sexual orientation, 20% perceived that their physicians had reacted negatively. This was particularly true in the case of lesbian patients. Of the homosexual or bisexual respondents who had never disclosed their sexual orientation to a physician, 33% said that they feared disapproval. Of the 47% of homosexual or bisexual respondents who indicated that at some time they had received care from a physician who was homosexual, 83% thought it was advantageous for them to know the sexual orientation of their physician.

McGhee and Owen concluded that homosexual patients require physician-patient relations that are

marked by trust, acceptance and understanding regardless of the sexual orientation of their physician. They also concluded that both physicians and homosexual patients need to be educated about the medical problems of particular concern to the gay community and about the importance of the sexual history as part of a complete diagnostic evaluation.

Selma Dritz, MD, of the San Francisco Department of Public Health, who had published an editorial in the February 21, 1980 issue of the *Journal*, also entitled "Medical Aspects of Homosexuality"<sup>2</sup>, noted in her response to the McGhee-Owen letter that the BAPHR survey supplies "valuable documentation of the existence of a psychologic barrier between some homosexual patients and their physicians". She concurred with the McGhee-Owen recommendation that such patients and their physicians need to be made aware of a possibly unrecognized emotional barrier, so that patients "may be afforded better access to skilled medical care by understanding physicians who are knowledgeable about the special medical problems of these patients".

1. McGhee RD, Owen WF. Medical aspects of homosexuality. *N Eng J Med* 303:50-1, 1980.
2. Dritz SK. Medical aspects of homosexuality. *N Eng J Med* 302:463-4, 1980.

### BAPHR-Funded Research Paper Published in Annals

A study of factors contributing toward openness between gay persons and health professionals has been published in the *Annals of Internal Medicine*. The paper, entitled "Openness Between Gay Persons and Health Professionals" appeared in the July, 1980 issue of the *Annals*.<sup>1</sup> The article was written by Larry Dardick, a medical student at the University of Connecticut Health Center in Farmington, Connecticut and by Kathleen E. Grady, PhD, also of the University of Connecticut.

The paper was funded in part by *Bay Area Physicians for Human Rights* through a grant from Dale McGhee, MD, President of BAPHR. Additional grant support was provided by the Department of Family Medicine of the University of Connecticut School of Medicine and by the American Medical Student Association.

Questionnaires were sent in June, 1979 to all 2800 subscribers to *Gay Community News* of Boston, Massachusetts. 622 men and women responded to the questionnaire. 49 percent had shared with their primary health professional that they were homosexual. Another 11 percent assumed their provider knew that they were gay and only 7 percent would not share this information under any circumstances.

Those who had shared the information that they were gay were more satisfied with their primary health professionals and, if male, were more likely to have been checked for sexually transmitted diseases. 27 percent of respondents felt that a previous health professional had been prejudiced toward homosexual persons.

*Reviewer's comment.* The Dardick-Grady study in the *Annals* along with the Owen-McGhee letter just published in the *New England Journal of Medicine* are very timely. Although surveys published as long as ten years ago indicate that many physicians feel some degree of discomfort when treating homosexual patients,<sup>2</sup> no study to date has explored the attitudes of homosexuals toward health care providers. Recent papers have indicated that knowledge of a patient's sexual history may aid the physician in considering diagnoses that otherwise might not have entertained.<sup>3,4</sup> Additionally, physicians may be called upon to provide counselling to sexual minority patient.<sup>5</sup> The Dardick-Grady study suggests several factors that are likely to influence homosexual patients to share their sexual orientation with their primary health providers. The paper also explores several ways in which the openness of the doctor-patient relationship regarding sexual orientation affects the quality of medical care provided.

1. Dardick L, Grady KE. Openness between gay persons and health professionals. *Ann Intern Med* 93:115-9, 1980.
2. Pauly IB, Goldstein SC. Physicians' attitudes in treating male homosexuals. *Med Aspects of Hum Sex* 4:27-45, 1970.
3. Kessler DR, Owen WF. What a straight doctor should know to treat gays. *Med Econ* 6:123-34, 1979.
4. Owen WF. Sexually transmitted diseases and traumatic problems in homosexual men. *Ann Intern Med* 92:805-8, 1980.
5. Owen WF. The clinical approach to the homosexual patient. *Ann Intern Med* 93:90-2, 1980.



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## progress notes

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By progressing at a faster rate than it can be assimilated by our society, scientific discovery has an unstabilizing impact upon society. On the other hand, traditional religions change at a slower rate than society, but thereby tend to foster social stability. I've wondered whether this sort of inexact system of sociological checks and balances may have something to do with the increased influence of fundamentalist religious sects during the past decade and the recent fascination of many persons with nonorthodox, quasi religious approaches.

Probably most physicians think of their profession primarily as a branch of the sciences, but organized medicine, if that is at all representative of the profession, often seems to display a resistance to social change more akin to religion than science.

I think it's safe to venture that gay physicians are not generally opposed to social stability, but given persistent social opprobrium toward homosexuality, neither are gay physicians opposed to social change. Thus the prevalent social conservatism of organized medicine might seem to offer little of particular value to gay physicians, and it's not especially surprising that only 35% of *BAPHR* members belong to county and state medical societies, and only 23% belong to the *AMA*. I believe, however, that there are good reasons why *BAPHR* members should also join these other organizations and participate in their activities.

While organized medicine sometimes appears preoccupied with protecting its own economic and political interests, nevertheless professional self protection is not invariably a *priori* reactionary, particularly in light of expanding governmental influence in health care. In California, at least, state and county medical associations closely monitor governmental activities that bear upon the practice of medicine, and they have efficient lobbying mechanisms for effective such activities. There are, in fact, a monumental number of such activities that need professional monitoring and lobbying.

The MediCal bureaucracy grows ever more frustrating, and in the years since its inception it seems principally to have transformed a system of limited but efficient health care for the poor into a system of limited but inefficient health care for the poor.

Physician operated *PSRO*'s have become puppet organizations manipulated by federal regulations designed to produce cost reduction at the expense of their purported goal of quality health care, and there are now forebodings that they will extend their control to non-titled patients as well.

The California Board of Medical Quality Assurance continues to brandish the breastplate of righteousness, interprets the Medical Practice Act to suit its own questionable priorities, and weaves an increasingly complex web of pontifical regulations that threaten to compromise reasonable patient care and meddle in the personal lives of competent physicians.

Such troublesome issues as these, and others, directly affect the way *BAPHR* physicians practice medicine no less than other physicians, and *CMA* and county societies deserve your applause and support for their aggressive efforts on your behalf in these areas.

On the other hand, organized medicine, while busily promoting its own rights in the name of social good, has been remarkably reluctant to promote the rights of those in the society it purports to serve. While some of the more extreme mumbo-jumbo of so-called holistic medicine leaves me cringing, nevertheless it is appropriate that physicians should be concerned not only with the conditions of people's bodies, but also the quality and dignity of their lives. Yet how often has organized medicine publically advocated or even supported

the special needs and rights of this nation's minority subgroups...blacks, women, native Americans, ethnics, the physically limited, gay men and lesbians? In fact, three years ago both the *CMA* and the *CHA* actively opposed state efforts to include gay patients in proposed nondiscrimination regulations for hospitals.

Yet organized medicine's sins of commission or omission provide in themselves another reason for *BAPHR* members to join at least their county and state associations, and to work within those organizations for more enlightened and progressive action. Such a move need not force any *BAPHR* member out of the closet, if he or she feels risk of doing so. To speak or act in the interest of homosexuals does not mark one as being homosexual. There are, after all, also heterosexual physicians in this world who believe in equality, and gay physicians don't have a corner on the market of fair play.

The San Francisco Medical Society, in particular, has been fortunate to have just such a progressive leadership, and the oracles seem to indicate that similar leadership will continue for several years. The *SFMS* has been gratifyingly supportive of *BAPHR*, and we could profit by returning that support.

By joining the *SFMS* and coordinating their activities through *BAPHR*, gay physicians could quietly exert effective influence on the priorities and directions of the *SFMS*, the *CMA*, and even the *AMA*. The same holds true for any other county society. In San Francisco, however, we have the open encouragement of the *SFMS* leadership, and once a member, you need only to speak to me and I can arrange to have you quietly appointed to almost any influential committee of your choosing.

If you have not renewed your *BAPHR* membership, please do so quickly and first, for only by acting in concern can gay physicians even begin to have an impact upon traditional organized medicine, as in fact we have already done. Then, having renewed your *BAPHR* membership, give serious consideration to additional involvement in your county medical society, whether in San Francisco or elsewhere. By doing so, we can ultimately make our influence felt both from within as well as from without. □

DALE MCGHEE

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## letters to the editor

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To the Editor:

The Reverend Robert Falls has referred to me a letter from Dr. Bill Owen regarding publicity in your newsletter about a Lesbian and Gay Cuban Refugee Project. We are a community-wide group using MCC [Metropolitan Community Church] as an organizational base but drawing from several different sectors of the Bay Area gay community, committed to facilitating

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## Annals Publishes Review of Gay Health Problems

The first comprehensive review of sexually transmitted diseases and traumatic problems in gay men to appear in a major national medical journal has just been published under the auspices of *Bay Area Physicians for Human Rights* and the University of California, San Francisco.

The article, "Sexually Transmitted Diseases and Traumatic Problems in Homosexual Men" appeared in the *Annals of Internal Medicine*, one of the country's most prestigious medical publications.

The paper was written by Bill Owen, MD, a San Francisco internist and one of BAPHR's founding members. The article was the first in a series of two papers on gay health concerns published in the *Annals*. The second article, "The Clinical Approach to the Homosexual Patient" appeared in the July, 1980 issue.

"Up until this time BAPHR's major educational thrust has been aimed at physicians in the San Francisco Bay Area and at gay health professionals from throughout the U.S.", Owen noted. "Now, through the review on sexually transmitted diseases and traumatic problems and through forthcoming articles by BAPHR members in other journals read by primary care physicians, we can make doctors who practice elsewhere in this country and abroad more aware of the prevalence of diseases they may not have thought about before."

Owen continued, "Through lack of training and knowledge or because of negative attitudes and stereotypes within our society, many non-gay

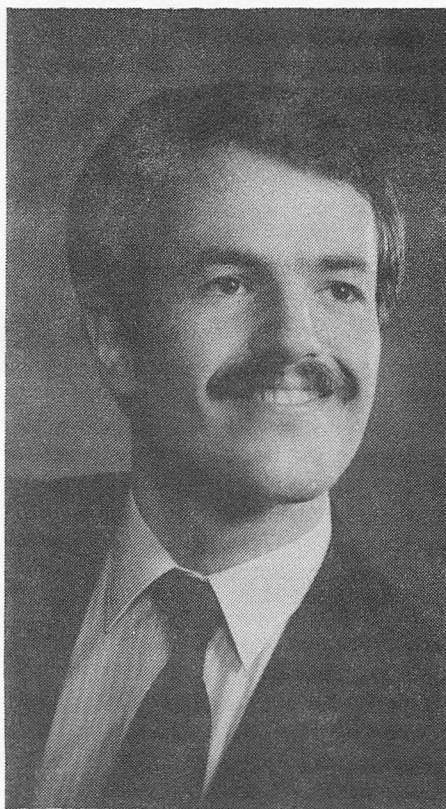


photo: Elson-Alexandre, Los Angeles

Bill Owen, MD

physicians have not been prepared to deal properly with lesbian and gay patients. We in BAPHR are trying to change that situation through articles such as the 'Clinical Approach' paper in the *Annals* and through various other educational programs sponsored by our organization." □

Editor's note: Reprints of the papers mentioned may be obtained from Dr. Owen, 1580 Valencia Street, Suite 202, San Francisco, CA 94110.

the resettlement of lesbian and gay Cubans in Northern California. Initial response from our media appeals for volunteers and sponsors has been encouraging, but we still need help in both of these areas. Should any among your membership wish to learn more about sponsorship or volunteer work to further the smooth assimilation of these newcomers, our telephone lines (415) 863-4434, are being staffed from 12 AM—9 PM on a seven day/week basis. We will be holding weekly orientation meetings for those interested in all phases of our work every Wednesday at 8:30 PM in the MCC sanctuary, 150 Eureka St., San Francisco 94114.

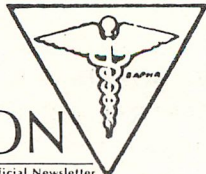
I want to emphasize strongly that our work is just beginning. Refugees will be placed within the next few weeks with sponsors, but the need for clothing (we are setting up a drop-off center) and non-perishable foodstuffs will continue for the next several months, as will the need for cash donations. We do have tax-deductible status, and checks can be made out to *Metropolitan Community Church*, with a notation "For Cuban Refugee Relief". I should also call your membership's attention to some of our committees for which many among your group would be especially well-equipped: we are setting up an ongoing screening and counseling task force, both to match refugees with sponsors, and to monitor adjustment on both sides after placement; we are in need of bi-lingual persons to help with language problems on both sides, and to address the inevitable culture shock facing refugees from a Latin socialist society in the Bay Area; we need help in job placement. Eventually we may well need donations of medical services, although the refugees will have *limited* medical coverage upon arrival. All of us connected with this project sense that we have one of the first challenges to the maturity and responsibility of the newly-organized American homosexual community. If we don't come to the aid of our refugee brothers and sisters, who will?

For the Refugee Project,  
Robert F. Havens  
4215 Norton Avenue  
Oakland, CA 94602

Editor's Note: This letter is being presented to the membership for informational purposes. The issue of BAPHR's organizational response will be considered at the August meeting of the Executive Board. □

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. Membership in BAPHR is open to physicians and medical students. BAPHR is an accredited provider of Continuing Medical Education by the California Medical Association.

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President..... Dale McGhee, MD  
 Vice-President..... James Krajeski, MD  
 Secretary..... Robert Bolan, MD  
 Treasurer..... Richard Andrews, MD

**STAFF**

Executive Consultant..... Jeff Richards  
 (415) 861-5884  
 Secretarial Assistant..... George Neumann  
 (415) 776-0905

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Post Office Box 14546  
 San Francisco, California 94114  
 Phone: (415) 673-3189

**BAPHRON STAFF**

Editor-in-Chief..... Robert Hindi, MD  
 Managing Editor..... Jeff Richards

**CONTRIBUTORS**

Bob Bolan, MD  
 Bob Hindi, MD  
 Bill Kapla, MD  
 Dale McGhee, MD  
 Bill Owen, MD  
 Artie Pollack  
 Jeff Richards

**PHOTOGRAPHERS**

Bob Hindi, MD  
 Scott Moore  
 Jeff Richards  
 Sam Thal, MD

**DESIGN/LAYOUT**

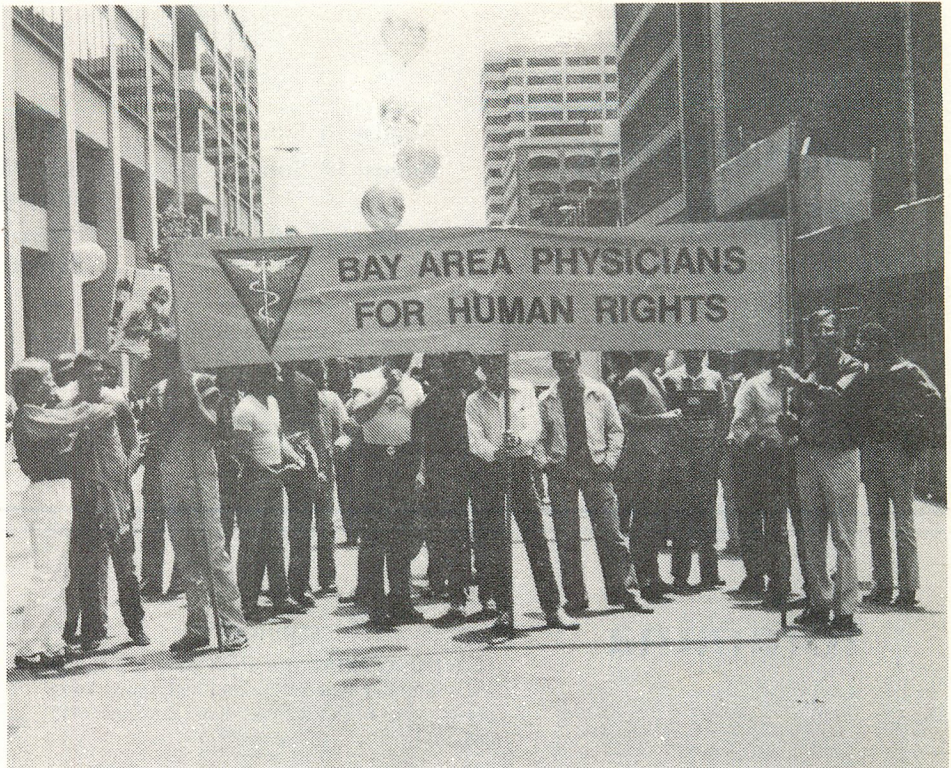
Sam Allen—DESIGN OPPORTUNITIES

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 Editors.

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. Foreign rates are available upon request. Make checks payable to BAPHR, and send to: The BAPHRON, Post Office Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletters should be mailed. □



Gay Freedom Day Parade, 1980

photo: Scott Moore

JOURNAL CLUB from page 48

**Can You Spot Them A Mile Away?**

Another article by a BAPHR member appeared in the July, 1980 issue of *Medical Aspects of Human Sexuality*. In a brief commentary entitled "Identifying Homosexuals by Mannerisms", Jim Krajeski, MD, Vice President of Bay Area Physicians for Human Rights, wrote a reply to the question, "What percentage of homosexual men are able to be identified by characteristic mannerisms?"

Krajeski quoted studies by Kinsey and Pomeroy to indicate that between 14 and 29 percent of homosexual men could be so identified. He then proceeded to caution that these percentages were questionable because any study sample is likely to exclude the most closeted homosexuals who presumably would be the most likely to make themselves inconspicuous in terms of any "gay" characteristics.

The author also quoted an informal poll of several gay psychiatrists that indicated that they felt the percentage of gays who could be identified by mannerisms was low but also that they themselves could identify a majority of gay men utilizing certain characteristics of dress and eye contact.

Krajeski concluded that the use of mannerisms to identify individuals as

gay or straight is a poor criterion. It would succeed in identifying an unknown percentage of heterosexuals as gay and would fail to identify a majority of homosexuals.

1. Krajeski J. Identifying homosexuals by mannerisms. *Med Aspects of Hum Sex* 14:11, July 1980. □

**BAPHRON Adopts New Structure**

The BAPHR Executive Board has announced a change in the editorial staff of the organization's internationally circulated newsletter and journal, the BAPHRON.

Robert Hindi, MD, BAPHRON Editor since its inception in January, 1979, is now Editor-in-Chief. Robert's role will allow him to concentrate on the continued expansion and long-term development of the BAPHRON. Assisting him as Managing Editor is Jeff Richards, BAPHR's Executive Consultant and staff writer, who will oversee production. Planned for the immediate future is the recruitment of Associate and Corresponding Editors to allow for the continuing development of research, clinical, sociological and political contributions to the BAPHRON. □

# upcoming events

- August 10, Sun. . . . . EXECUTIVE BOARD MEETING, 5:00 pm.  
August 17, Sun. . . . . BAPHR GENERAL MEETING, 7:00 pm. (See story this issue.)  
September 10. . . . . "Hepatitis: A Sexually Transmissible Disease" Symposium, Los Angeles. (See story this issue.)



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### SERVICES

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**MEET THAT SPECIAL GUY!** Gay male introduction service. Discreet. Ages 21-65. Relationship-oriented. Sixth successful year. Visa/MC accepted. DAVID THE MATCHMATER ... (415) 775-9169.

### 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 for 12 issues. Send check to *The BAPHRON*, Post Office Box 14546, San Francisco, CA 94114.

### FOR RENT

**2 BR, FURN RIVER CABIN**, Guerneville. \$90 weekend, \$240 week. Call George Riley, (415) 839-4164.

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### WANTED

**THE BAPHRON IS SEEKING** donation of a black and white film Polaroid camera in working condition for use in production. If you have such a camera and would like to make a valuable (and deductible) contribution, please contact Jeff Richards, BAPHRON Managing Editor, at (415) 861-5884, or 885-5451; or BAPHRON Editor-in-Chief Robert Hindi, MD, at 861-6810.

### CLASSIFIEDS

### ADVERTISEMENTS

### ANNOUNCEMENTS

*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 members and non-member readers. The cost of advertising in this section for medium typeface, 40 letter lines will be \$ 1.50 per line space per month. Display advertising rates available on request; please contact the Managing Editor. Proceeds are non-profit, and will be used to offset the cost of this publication.*

*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 15th 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: Foramina, The BAPHRON, Post Office Box 14546, San Francisco, CA 94114.*

*For further information, telephone Jeff Richards, BAPHRON Managing Editor: (415) 861-5884 or 885-5451.*

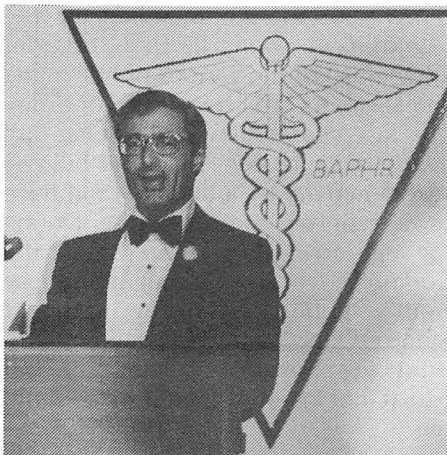
*The acceptance of advertising does not in any way constitute endorsement or approval by BAPHR or the BAPHRON of any advertised service or product.*



## BAPHR Awards Banquet Highlights Summer Activities



Outgoing BAPHR Secretary Bill Owen, MD (l.) and Greg DeBourgh



Past President David R. Kessler, MD

The first annual BAPHR Awards Banquet, held in San Francisco on July 26th, was a festive celebration attended by over 200 BAPHR members and guests, including San Francisco Supervisors Harry Britt and Carol Ruth Silver, and San Francisco Medical Society President David Sachs, MD.

Judd Marmor, MD, Los Angeles psychiatrist, was honored with the presentation of the 1980 BAPHR Health Award for his long-time dedication to the health of lesbian and gay people (see BAPHRON 2:7 p. 37).

Following the very social cocktail hour featuring entertainment by Ruth Hastings and Company, an elegantly catered banquet was held in the banquet room of Heritage Place. Subsequently, out-going BAPHR President David Kessler, MD, spoke on the experience of his 2 years as BAPHR President before introducing the newly elected BAPHR officers.

An award recognising outstanding educational achievement was presented to UCSF medical student and BAPHR member Lisa Capaldini by Dale McGhee, MD. Ms. Capaldini is also national co-chair of Gay and Lesbian People in Medicine, a committee of the American Medical Student Association.

Special recognition was also given to Artie Pollack and the BAPHR Associates for coordinating the very successful and enjoyable event.

Following a presidential inaugural speech by Dale McGhee on the current status and future direction of BAPHR, entertainment by Chanticleer completed the scheduled array of activities. □

## Gay Health Conference: Controversy and Success

More than five hundred lesbian and gay health workers and professionals gathered at San Francisco State University June 19 and 20, 1980, to participate in the *Third National Lesbian and Gay Health Conference (NLGHC)*, the first held on the West Coast.

Conference participants represented an array of geographic and professional interests and backgrounds. From Toronto to Seattle, from Houston to Minneapolis, physicians, therapists, nurses, health workers, counselors and students came to San Francisco to take part in an ever-growing concern for lesbian and gay health care issues. "The Conference

was a tremendous success", stated Ann Polivka, RN, Co-coordinator of the NLGHC, and San Francisco nurse practitioner. "Speakers and workshops dealt with a variety of issues that are currently very pressing in the lesbian and gay communities."

In a joint press conference with the *Current Aspects of Sexually Transmitted Diseases* second annual Symposium, the NLGHC opened the four day event by outlining its threefold objectives: information sharing, the building of communication and support networks for lesbian and gay

continued on page 56

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# committee reports

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## Chairperson's Report: Social Concerns Committee, 1978-1980

The Social Concerns Committee acts as one of BAPHR's primary liaisons with the community. The Committee screens all requests for support, endorsement and information. Causes which merit action are referred to the Executive Committee.

During the past two years the Committee has received approximately 50 requests for aid; 15 - 20 fell within the scope of BAPHR's purpose. Following are some examples of the aid rendered by the Committee.

During the *No on 6* Campaign, Social Concerns organized BAPHR's participation in a gala fundraising dinner and assembled 35 members to canvass neighborhoods before the election. Working behind the scenes we brought all the Bay Area health care organizations together to denounce Prop. 6. This was especially noteworthy because of the cooperation from straight organizations in supporting gay rights.

We often meet with representatives of other gay groups such as the gay lobbyist in Sacramento. As a result of a meeting with Steve Endean, the director of the National Gay Rights Lobby, BAPHR agreed to mail their literature to our members.

Last January Social Concerns organized BAPHR's participation in the March on Sacramento. Recently, we completed the BAPHR Phone Tree.

Because the Committee receives information from many gay and public interest sources, the members of the Committee soon had a broader knowledge of the various political and social events affecting gays. For example, last year a new child abuse bill nearly became law. Under this bill any sexual activity by a minor would have to be reported as child abuse. During the legislative hearings on the bill the Committee received frequent briefings from a public service law group at Stanford University. We were ready to offer testimony concerning the bill had it not been defeated in committee.

Venereal disease services in the city [of San Francisco] have seen a special interest to our Committee. We've made on-site inspections of the San Francisco City Clinic [see *BAPHRON* 1:10, p. 57] and held several meetings with the director. A short term survey of untreated diseases revealed that approximately 20% of the clinic's clients had symptoms of diseases the clinic does not treat.

Budget limits have thwarted any attempt to increase clinic services. The Social Concerns Committee continues to work on this problem. We hope to have some voice in the new location of the clinic when it is forced to move in the next couple of years.

The Social Concerns Committee has an active membership of five, all of whom have served over 2 years. A new chairman and increased membership is needed to fill impending vacancies. □

ROBBY MORRIS, MD

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## Chairperson's Report: Education Committee, 1979-1980

During the past year the Education Committee has experienced a broadening of responsibility in many areas. There have been accomplishments, but there are many things we wish yet to accomplish.

*Responsibilities:* Some of the 'workload' of the Committee, particularly expansion areas, have exploded to the point that in order to assure and achieve greater effectiveness it may be necessary to develop new sub-committees or spin off some of the assignments to entirely new committees of BAPHR.

The Education Committee during this past year has consisted of between 15 and 20 members of BAPHR. Realistically, though, only about six members have consistently been able to attend meetings and provide time

and energy in their schedules for the needs of the Committee. While other members have been unable to devote regular time to attending meetings, their telephone input has often been valuable.

The primary areas of responsibility for the Education Committee:

1. *Physician Referral Service.* This has continued to provide a valuable service to many people, as well as a positive image for BAPHR. It has continued to grow at a fast pace, and the volume of calls has made the continuation of volunteer handling of the calls by BAPHR members unwieldy. As of June 1980, the Physician Referral Service has been answered by a professional telephone answering service. They are provided with stringent guidelines on how to handle the calls. The Education Committee will maintain close contact with the answering service, maintain criteria for the handling the calls, and provide very strict

updating of the information listings. Because of the cost of maintaining the professional telephone answering service, those BAPHR members listed will be asked to make a cash donation to maintain the service.

2. *Continuing Articles.* For the past several months, the Education Committee has provided articles for regular publication in a local gay-oriented newspaper, *The SENTINEL*. This has been a major undertaking due to the need to seek out potential authors, and to generate the material and meet the publishing deadline.

3. *Program Arrangement.* The Education Committee has regularly worked to develop programs for the BAPHR General Meeting. There has often been misunderstanding over who should have responsibility for program development. There probably needs to be a better definition of responsibility regarding arrangement of these pro-

*continued on page 59*

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# the BAPHRON

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Bay Area Physicians for Human Rights Official Newsletter

Vol. 1 No. 1

January 1, 1979

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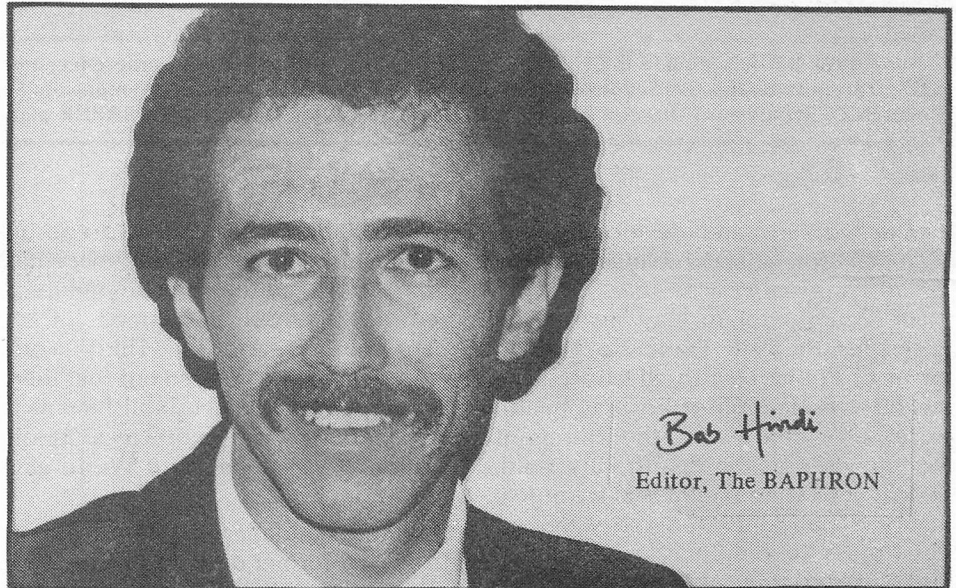
## Hindi Resigns As Editor... Editorial Committee Formed

Robert Hindi, MD, Editor of the *BAPHRON* since its inception in January 1979, has announced his intention to leave his position as Publications Committee Chairman and *BAPHRON* Editor-in-Chief effective September 1.

At the August Executive Board meeting where the announcement was officially made Bob stated, "I feel it is currently a period for me to focus my time and energy toward my medical career and other personal interests and endeavors. However, I do plan on continuing an active involvement in *BAPHR* in other areas."

Along with Jeff Richards' resignation as *BAPHR*'s Executive Consultant and the *BAPHRON* Managing Editor [see *Executive Consultant Reports* this issue], the Executive Board voted to form an Editorial Committee which will be temporarily charged with continuing the monthly publication of the *BAPHRON* until a more permanent resolution is found. The Editorial Committee will consist of Dale McGhee, Denny McShane, Mark Moskowitz, Sam Thal, and Bob Bolan.

The *BAPHRON*, which has been published for 21 consecutive months, has been one of the primary means by which *BAPHR* members have been kept updated on organizational activities, community events, and medical information. During this time the *BAPHRON* has also served to substantiate the concept and administration of gay health care among gay and non-gay health care providers throughout the country.

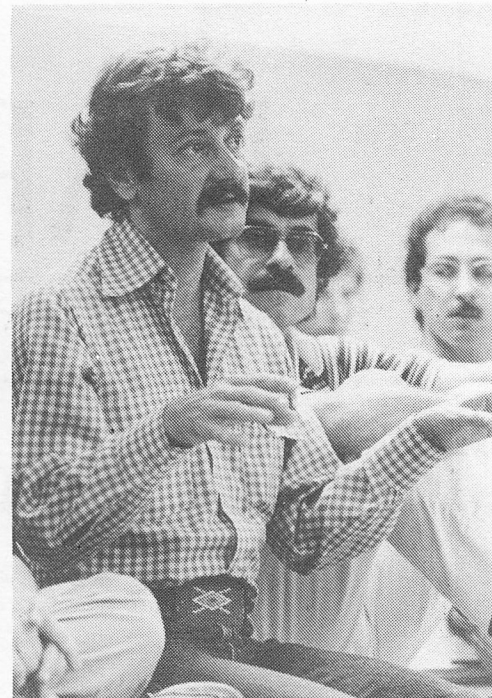
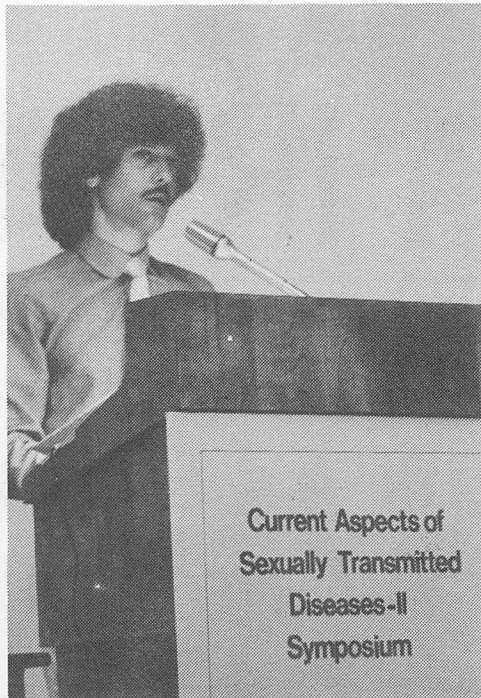
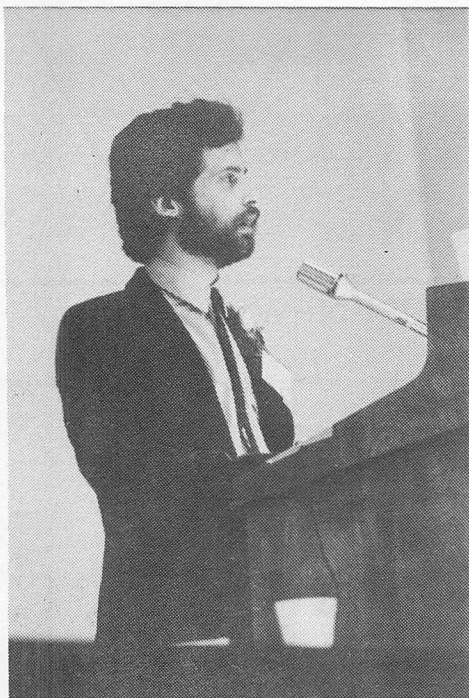


"It has been an exciting two years since I attended my first *BAPHR* General Meeting and my ideas regarding the creating of a newsletter for the organization began to germinate," said Hindi. He added, "The support for the *BAPHRON* from many *BAPHR* members as well as non-members has been tremendous. I owe a great deal of gratitude to the many individuals who have directly contributed to the development and continuity of the *BAPHRON* through their writing, their time and ideas."

In discussing the future of the *BAPHRON*, Bob commented, "This is certainly an opportunity for one or more *BAPHR* members to become involved in an important and rewarding

*BAPHR* project." He continued, "I am confident that with the continued support from the Executive Board and Editorial Committee, the *BAPHRON* will not only continue to serve the needs of its members but will also maintain its development along the lines of an important and reputable medical journal."

Inquiries from individuals interested in the *BAPHRON* should be directed to Dale McGhee, MD, President of *BAPHR*, (phone 928-3172). Advertisements, letters, and articles for publication in the *BAPHRON* should be mailed to: *BAPHRON*, Bay Area Physicians for Human Rights, Post Office Box 14546, San Francisco CA 94114. □



Among those participating in the Third National Gay and Lesbian Health Conference, and the BAPHR co-sponsored Current Aspects of Sexually Transmitted Diseases Second Symposium, were (l. to r.): Jeff Richards, Symposium Secretary and BAPHR Executive Consultant; Robert Bolan, MD, Symposium Director and BAPHR Secretary; Chris DiMaio, MD, BAPHR member (pictured in a Conference workshop); Daniel

CONFERENCE from page 53

health workers, and developing suggestions for social change in the health care delivery system. Pat Norman, Coordinator of Gay Health Services for the San Francisco Department of Public Health, illustrated the need for education of non-gay health care providers and the rampant homophobia in the health care field. "Most of us were taught that homosexuality is pathological," she stated at the press conference, "and most health practitioners still treat gay people that way."

In a moving opening ceremonies speech, Morris Kight, long-time gay activist and co-founder of the Los Angeles Gay and Lesbian Community Services Center, addressed the history and oppression of gays in his speech, entitled "How It Was". Kight attacked the desperate lack of recognition and ignorance by the society at large. He condemned the "faggot and dyke"-baiting of the McCarthy era and urged the development of more health services specifically designed for the gay community. (Kight was instrumental in obtaining federal funding for the L.A. Center's innovative Venereal Disease Control Project.)

Pat Norman, in her address to an audience of hundreds of Conference participants, urged the gay community to sensitize themselves to needs of lesbian mothers and the Third World community. She pointed out that there are still gay bars and establishments in San Francisco which utilize a "quota system" to exclude Third World gays at the door.

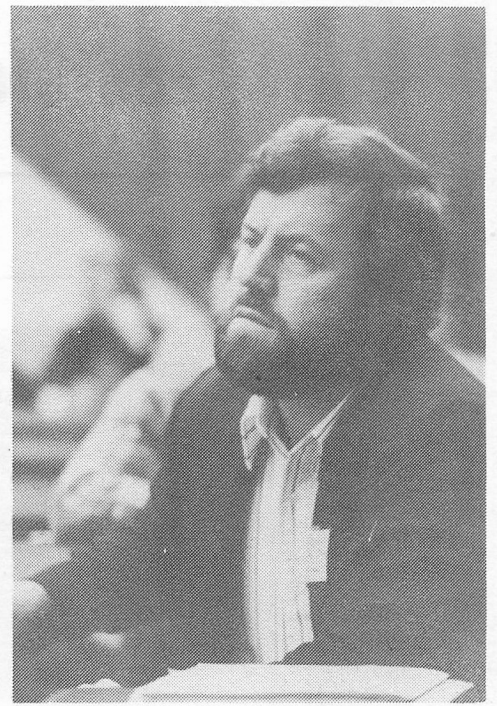
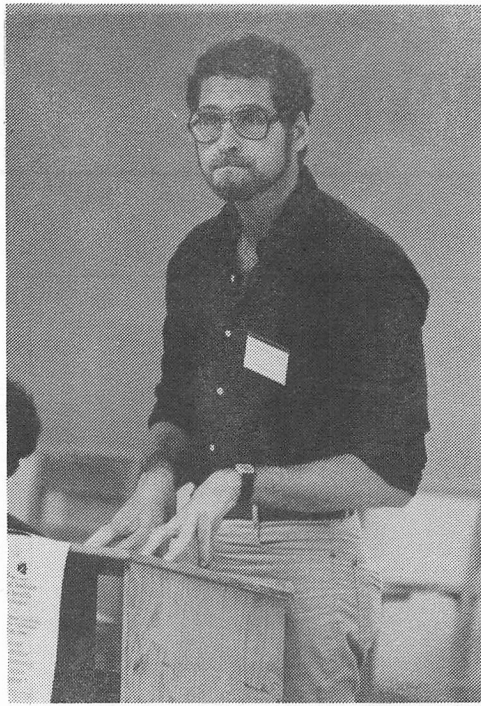
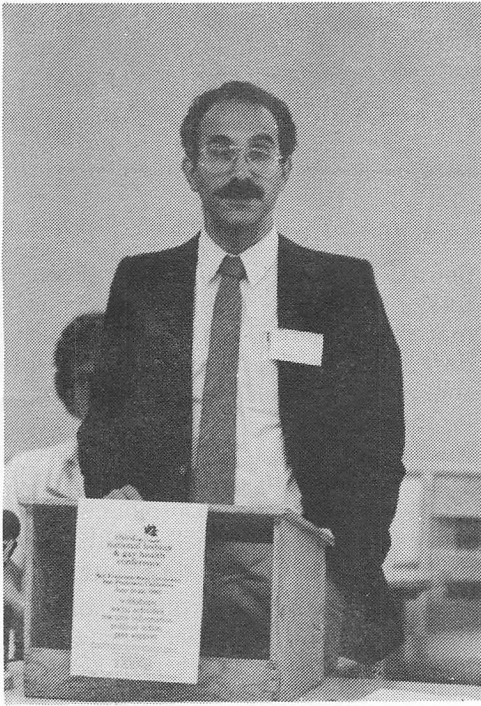
Josette Mondanaro, MD, the controversial former director of substance abuse programs for the State of California, provided the audience with one of the most polemic speeches of the evening. In her address, "Strategies for the Eighties", Dr. Mondanaro criticized the gay press for its continued exploitation and sensationalizing of the "gay stereotype". She expressed the need for the gay community to grow out of its adolescent stage into adulthood. Dr. Mondanaro censored elements of the "women's movement" for its attachment to and advocacy of so-called "left brain" thinking (rational, aggressive, linear), while failing to recognize the importance of "right brain" thinking (intuitive, sensitive, compassionate). She urged an androgynous mind, a blend of both

styles, in personal and political activities.

Some 90 NLGHC workshops were offered; in addition, the compilation and publication of the second *National Gay Health Directory* was a significant effort. Workshop topics included such issues as substance abuse, sexuality, counseling, sexually transmitted diseases, cancer in women and holistic health approaches. Remarked Ann Polivka, "The overall quality of the workshops was extremely high. Many thought provoking issues were raised in the workshops—they began to make people think—and many [workshops] even changed people's lives."

Polivka noted that one of the most important aspects of the four day national conference was the sharing of information between lesbians and gay men. "The Conference was able to deepen and broaden communication across gender lines," she commented. Christopher Mead, PhD, presented his recently completed study on gay male coupling within his workshop "Men Loving Men", and noted many of the rewards, problems and qualities of gay male relationships. Dr. Mead address-





**William, MD, Gay Men's Health Project, NYC; David Ostrow, MD, PhD, Howard Brown Memorial Clinic, Chicago; and Symposium keynote speaker Paul Wiesner, MD, Director, VD Control Division, U.S. Center for Disease Control.** photos: Robert Hindi, MD

ed key factors such as commitment, fears of intimacy and abandonment, growth, monogamy and metaphors in such relationships. Observed Mead, "A sense of homophobia within gay [male] relationships are often the reason for their failure." He reported that metaphors were a common thread in the relationships that he studied. "In generalizing about relationships, many times we leave out the images we carry within us," he remarked.

One of the best attended and most controversial workshops was that presented by SAMIOS, a lesbian/feminist S/M [sado-masochism] support group. In a panel discussion, issues were presented such as: sado-masochists as a sexual minority, what S/M is and is not, medical and mental health needs of S/M clients, and feminism and S/M. Audience reaction was described as "curious to sometimes hostile", and "supportive to outraged" (especially from women who objected to associations of S/M with feminism). One participant described the workshop as "fascinating and extremely well presented".

The four day meeting represented well over a year of dedicated organizing and planning by a small conference steering committee and scores of volunteers. [BAPHR Secretary Robert Bolan, MD, member David Dassey, MD, and Executive Consultant Jeff Richards were among those involved with the planning and production.] The 1980 Conference was regarded by its organizers and participants as extremely well organized in comparison with other such efforts. The ability to create a much broader appeal was in itself a significant achievement. In contrast to previous conferences, there was substantial participation by women, which well reflected the diversity of the gay community and the considerable and deliberate effort to make the NLGHC accessible to the community at large.

However, the Conference was not without its problems. Political differences and autonomy issues with previous East Coast conference organizers surfaced and necessitated constant meetings. The seemingly meager coverage and interest from both the gay and non-gay press was a source of considerable frustration to

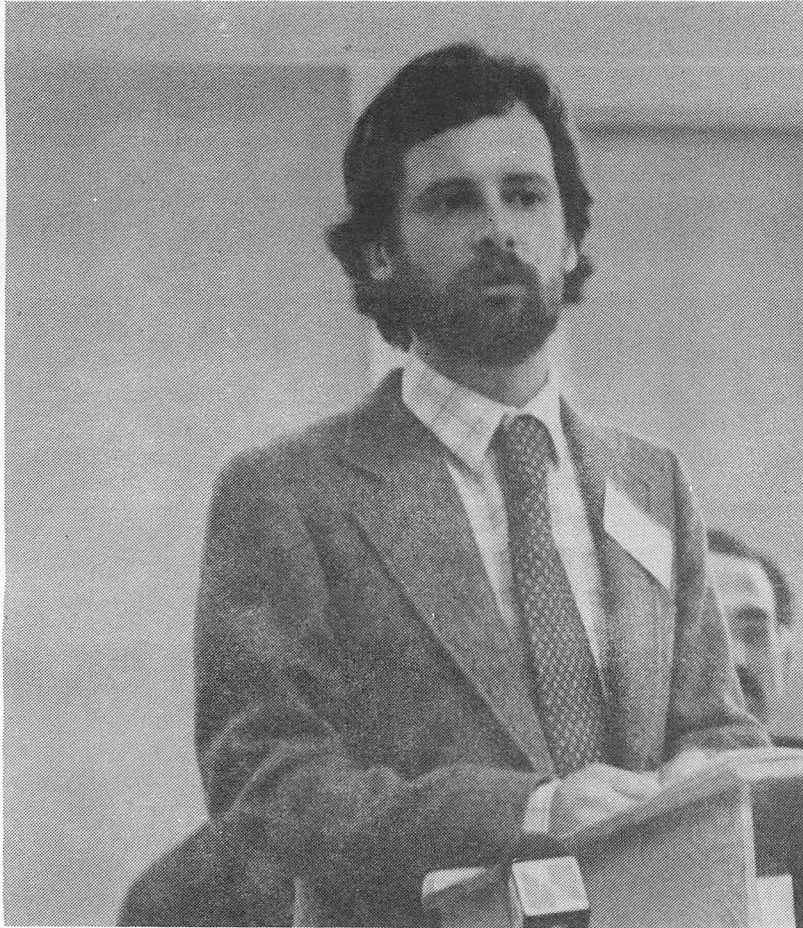
Conference organizers, and the difficulties implicit in coordinating input from organizers and other volunteers across the U.S. hampered efforts.

On the final day of the Conference, Summary Workshops were presented and meetings of the National Gay Health Coalition were held. A wealth of information, suggestions for change, building of stronger communications network were all results of the final activities and were brought to Conference participants. Research, education outreach and specific political action proposals directed to both gay and non-gay health care providers most aptly summarized and characterized the assessed immediate needs of gay and lesbian health care. □

**GARLAND KYLE**

*Editor's Note: Garland was Administrative Consultant for the Conference. For information about the availability of the National Gay Health Directory, second edition, please contact him—190 Parnassus Avenue, Apt. 3, San Francisco, CA 94114 (415) 566-3897.*

## executive consultant reports



Jeff Richards, BAPHR Executive Consultant

As announced elsewhere in *BAPHRON*, I am resigning as BAPHR Executive Consultant and *BAPHRON* Managing Editor effective September 14th. After some fourteen months of consulting work with the organization, I will be taking on other projects in the private and public sectors.

Certainly BAPHR today is a different organization than when I first came to know it intimately last year. Evolution from the days of Dade County has lead BAPHR to attempt ambitious projects for its members, other physicians and health care providers, and the community. BAPHR is now known throughout the United States, albeit to

a select audience, through the *BAPHRON*, journal articles, and other publicity. The organization is in an enviable position; unlike many gay organizations which are withering away due to apathy and changes in the political and economic climates, BAPHR has a still solid foundation and can choose from many possible directions. Truly, this is no small achievement — and is due to ongoing support of members, hard work by a core of BAPHR organizers, and the help and expertise of numerous volunteers for special projects.

I perceived some time ago that the basic structure of BAPHR is probably both its strength and weakness. It is an

unusually "open" organization of professionals, and as such, members can match their interests with BAPHR at different levels. For some, membership alone is a meaningful investment in the social, medical and political future. For others, personal interests may blossom into joining the BAPHR Speaker's Bureau, coordinating a street fair educational booth, or designing an educational program.

However, this very flexibility means that there is no simple answer to the question, "What does BAPHR do for me?" An organization of volunteers of necessity looks to the membership for signs of direction and philosophy, and must proceed even in the face of conflicting viewpoints. Perhaps the only way that a "project orientation" and a "social/personal orientation" can meet is through the "leap of faith" in recognizing that BAPHR's existence will make a significant difference in the quality of individual and community life. Certainly gay physicians have as much or more at stake in seeing through the processes of education and change now underway in America.

BAPHR is not a single-issue group. While problems such as sexually transmitted diseases, homophobia in psychiatry, and medical school curricula are significant and immediate, the long term success of the organization will likely depend upon its members to further define emerging "gay medicine" and the implications of being a gay physician — healers on the forefront of social health.

The twin tasks of maintaining a viable Bay Area group serving members and developing a national profile are not simple, easy or even inexpensive. Nonetheless, it is BAPHR more than any other organization that has the vision, membership, and potential to grow. Such is the challenge at hand.

It has been my real pleasure to work with BAPHR, to meet and know so many fine people, and to realize what the future may yet hold. I personally look forward to seeing the fruits of BAPHR's work in years ahead. □

JEFF RICHARDS



# the BAPHRON

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Treasurer..... Richard Andrews, MD

### STAFF

Executive Consultant..... Jeff Richards  
(415) 861-5884  
Secretarial Assistant..... George Neumann  
(415) 776-0905

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Post Office Box 14546  
San Francisco, California 94114  
Phone: (415) 673-3189

### BAPHRON STAFF

Editor-in-Chief..... Robert Hindi, MD  
Managing Editor..... Jeff Richards

### CONTRIBUTORS

Bob Bolan, MD  
Bob Hindi, MD  
Bill Kapla, MD  
David Kessler, MD  
Garland Kyle  
Dale McGhee, MD  
Robby Morris, MD  
Bill Owen, MD  
Jeff Richards

### PHOTOGRAPHERS

Bob Hindi, MD  
Scott Moore  
Jeff Richards

### DESIGN/LAYOUT

Sam Allen—DESIGN OPPORTUNITIES

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 Editors.

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CHAIRPERSONS from page 54

grams. It may be appropriate to have a separate Program Committee to handle this area.

4. *Continuing Medical Education.* The application to the California Medical Association by BAPHR for certification of CME programs was a significant and difficult undertaking. And it will be a major and continuing work effort to comply with the stringent overseeing needs of CME programs for credit. This will be even more difficult if BAPHR intends to actually proceed with development of programs tailored for the BAPHR membership. The amount of time to conceive, preliminarily arrange and finally execute a course is a major undertaking and this should probably be handled by a new separate CME Committee. This is an extremely important area because of the official status that is provided for BAPHR in the eyes of traditional medical organizations. Every effort should be made to make this CME program a success.

5. *Speakers Bureau.* We are increasingly receiving requests to provide speakers to groups on the subject of gay medicine, or regarding the BAPHR organization. Such requests often require a great deal of negotiations to set up date, time, location, topic, etc. Some months, we have handled as many as five speaking requests.

6. *Literature Review.* This topic has been spoken of very little. There has been a hope of responding to the authors and/or publications that refer to the subject of homosexuality or medical issues related to the gay patient. In addition to responding pro or con to these publications, Committee members have always been asked to make note when they hear of items regarding these topics in hopes of responding. Responses have always been sent over the signature of the Education Committee rather than on an individual basis.

### SUMMARY:

The Education Committee has a vast range of responsibility and areas of interest. We have attempted several efforts in the past year not only to educate our own members, but the public in general through various means such as written publication, public speaking, incentives for CME, and the important Physician Referral Service that has helped make our ex-

istance known to a larger portion of the public as well as serve the medical needs of many people in the gay community.

Budget for the Committee has been minimal. Extensive volunteer effort has kept actual costs to a minimum. Should the treasury be able to provide up to 10 hours per month of secretarial time, it would be of great aid in accomplishing more projects.

Meetings of the Education Committee are held monthly, and last about two hours. □

WILLIAM KAPLA, MD

## vital signs

• DAVE KESSLER, BAPHR Psychiatric Issues Committee chair, addressed the staff of the Department of Medicine of the Kaiser-Permanente Medical Group on August 1 concerning the topic "Clinical Issues with Gay Patients". On August 14 he gave a talk on "Sexual Dysfunction in the Homosexual; Sexually Varient Life Styles" as part of a 4 day program on "The Urologist and Sexuality" at the Disneyland Hotel, Anaheim, sponsored by the Orange County (California) Urological Society.

The second edition of Dave's book "Marital and Family Therapy", co-authored by Ira Glick and published by Grune and Stratton, has just appeared.

• JIM KRAJESKI, BAPHR Vice-President, received in response to his inquiry a statement from the American Psychiatric Association Ethics Committee dated August 1; the Committee has recommended an addition to the *APA Principles of Medical Ethics with Annotations Especially Applicable to Psychiatry*. The addition to Annotation 1, Section 5, if adopted within the general revision now underway, will include "... or sexual orientation ..." after socioeconomic status, and would read as follows: "A psychiatrist should not be a party to any type of policy that excludes, segregates, or demeans the dignity of any patient because of ethnic origin, race, sex, creed, age, socioeconomic status, or sexual orientation." □

# upcoming events

September 14, Sun. . . . . EXECUTIVE BOARD MEETING, 7:00 pm.  
September 21, Sun. . . . . BAPHR GENERAL MEETING, 7:00 pm.  
September 10. . . . . "Hepatitis: A Sexually Transmissible Disease"  
Symposium, Los Angeles. (See story BAPHRON  
2:8)



# foramina

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## ADVERTISEMENTS

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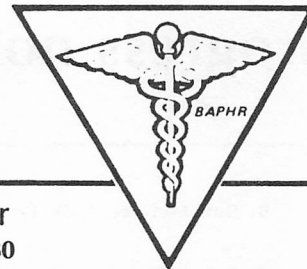
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## BAPHR At Davies Hall



photo: Allen Nomura

*Jon Sims, conductor, with members of the San Francisco Gay Freedom Day Marching Band and Twirling Corps, The Tap Troupe, and The Guard. In concert at the new Louise M. Davies Symphony Hall, Sunday, November 9 at 8 p.m.*

The San Francisco Gay Freedom Day Marching Band and Twirling Corps will perform on Sunday, November 9, 1980 in the spectacular new Louise M. Davies Symphony Hall in San Francisco.

This landmark event will be a fund raising benefit for the band and for the non-profit law firm, Gay Rights Advocates, and represents the first performance by a gay musical group in a major symphony hall in the United States.

BAPHR has reserved 50 tickets from a block of 350 premium orchestra seats that have been offered to various gay organizations, and will be named as a sponsor of the event in the evening's program. The cost of these tickets will be \$25 each, out of which \$20 will be tax-deductible. The purchasers of these special tickets will also be invited to a post concert reception at Dreamland, San Francisco's newest disco.

The San Francisco Gay Freedom Day Marching Band and Twirling Corps first appeared in the 1978 Gay Freedom Day Parade in San Francisco, and was born from a classified ad placed by its musical director, Jon Sims, who felt a parade was not a parade without a band. The group has since gained enormous popularity and has won a number of honors in competitions with other bands, both gay and straight. Its repertoire ranges from rousing parade marches to major classical works.

Gay Rights Advocates, the other beneficiary of the concern, is a public service legal organization based in San Francisco, and specializes in precedent-setting test cases for gay

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## progress notes

By Dale McGhee, M.D., President

*"Strangers in the night,  
exchanging glances,  
Wondering in the night,  
what were the chances,  
We'd be making love before  
the night was through."*

When I first began to "deal" with my homosexuality, during the late sixties in St. Louis, I rarely communicated anything with the sexual partners I met, beyond the exchange of glances. If any significant level of conversation was required, I used the pseudonym Tom Miley and claimed to be a dental floss salesman. Such exaggerated caution may seem strange to many of you who are younger, but I suspect that those who are older will recall their own use of pseudonyms at some past time. It certainly was commonplace then in St. Louis. The gay bars there were dreary, dirty places in the sleaziest parts of town. There was nothing about the visible trappings of the gay demi-monde that would encourage gay people to trust one another, and most did not.

Eventually, through humorously awkward circumstances, I learned that two of my anonymous "encounters" were also physicians at the medical center where I was in residency, and we ultimately became friends. They were, in fact, my first gay friends, and at that time I admired and envied them for their seeming sophistication and ease about homosexuality, as compared to my own.

Well time has passed and times have changed, and a good deal of life's water, both turbulent and refreshing, has flowed under my bridge and that of other gay people. One does not often encounter the use of pseudonyms now (although as recently as 1976 I had a relationship with a man for three months before he told me his real name and that he was a private school headmaster and not an engineer). San Francisco gay bars are beautifully furnished and in the nicest parts of town, with a certain chic about them for even the liberal segments of straight society. And now

I feel a certain regret for my two physician friends in St. Louis for the stifling, closeted nature of their lives, as compared to my own. For while coming out of the closet was not an easy process for me, as I have mentioned before in this column, it nevertheless greatly expanded my life.

Homosexuality is not the only thing that tends to exist in closets, and in one form or another, closets are features of the lives of most of the people I know, both heterosexual and homosexual and various stations in between. We hide from view those aspects of our lives about which we fear disapproval. Much of the humanist movement of the seventies had to do with divesting ourselves from the fear of negative value judgements. And pervading the current fundamentalist movement is an effort to re-establish that fear.

It is just such negative value judgement that leads gay people into closets, and that judgement has been labeled by the term homophobia. But, as one of our members has pointed out eloquently in a recent *BAPHR* "On Call" column in the San Francisco gay newspaper *The Sentinel*, homophobia has two forms. One is the cultural opprobrium that has been exhibited toward homosexuality in western societies, fostered by religious teachings since the 13th century and reinforced by the medical profession since the 19th century. Supported by the voices of moral and scientific authority, societies and their governments have felt, until recent years, fully justified in directing particularly despicable forms of discrimination, bigotry, and abuse at gay people. Despite the great progress we have made during the past decade toward equal social and civil franchise, public discovery still holds tangible and substantive risk for many gay people.

If you conduct your life like someone who is unworthy, you will ultimately feel unworthy, no matter how clever, sophisticated, and affluent you may appear on the surface. You limit your own life. You become self-protective,

## Recruits?

With this issue, the *BAPHRON* returns to a format of volunteer production, and additional *BAPHR* members are needed to assist with its production.

A variety of problems during the past six months has contributed to delays in production and mailing of the *BAPHRON*.

The Executive Committee has affirmed its commitment to improve both the efficiency of publication and mailing of the *BAPHRON*, and maintain the quality, accuracy, and timeliness of its content.

However, because of increasing production costs, we can maintain and improve the *BAPHRON* only with the volunteer help of our members.

Those willing to contribute some time per month to either editing, writing, photography, layout, proofreading, or mailing are asked to contact either *BAPHR* Secretary Bob Bolan, M.D. at (415) 221-6045 or Support Committee chairperson Dennis McShane, M.D. at (415) 327-6642. □

## Attention: All Photographers

All doctors have a camera, just as all doctors have a stethoscope. Some use them better than others. Some take pretty good pictures.

If you have any pictures which might be suitable for the *BAPHRON*, send them over. We are especially interested in *BAPHR* people and events, but any pictures might be used as long as they are in good taste. No recognizable photographs of people will be used without their written consent.

There are no rules and no prizes. Black and white pictures are preferred because they generally print better. No slides please. Sorry, we cannot return prints so send a duplicate. State whether you want the name of the photographer to appear in the *BAPHRON*. Identify the subject of the photograph, and if you wish, the camera used and the photographic details. Send your photographs to Sam Thal, photography editor, *The BAPHRON*. □

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## REVIEW FOR PRACTICING PHYSICIANS

REVIEW: SEXUALLY TRANSMITTED DISEASES AND TRAUMATIC PROBLEMS IN HOMOSEXUAL MEN. William F. Owen Jr., M.D., *Ann Intern Med* 92:805-808, 1980.

THE CLINICAL APPROACH TO THE HOMOSEXUAL PATIENT. William F. Owen Jr., M.D., *Ann Intern Med* 93:90-92, 1980.

In the first paper of this two part series, Dr. Owen gives a concise but thorough review of sexually associated infections and traumatic problems in the gay patient. At the outset we are reminded that "maleness", "homosexuality" and "multiple sex partners" are really separate risk factors and must be evaluated on an individual basis. He further states that the risk of multiple sex partners is related more to the anonymity, when that is present, than to the absolute number of partners.

Center for Disease Control statistics are quoted which report that nearly half of the male patients with syphilis claimed homosexual or bisexual contacts. Presumably, unnoticed primary anorectal lesions in addition to anonymous contacts are the important factors in this high prevalence. Further, the large asymptomatic pool of anorectal gonorrhea (66% of positive anal *N. gonorrhoea* cultures according to a Los Angeles Gay Community Services Center study) explain the prevalence of that infection in gay men. That same center's data for pharyngeal gonorrhea indicate that 89% of positive oral cultures are asymptomatic. In order to make an impact on these asymptomatic oral and anal reservoirs, physicians are advised to take the initiative in obtaining careful sexual histories, performing diligent contact tracing, and educating sexually active patients about the need for periodic screening cultures and serologic test for syphilis. The author admits, however, that the ideal interval for screening has not been determined but selects the commonly cited three month interval as his recommendation.

In San Francisco, Seattle and New York shigellosis has been identified

with increasing frequency in the gay community and amebiasis and giardiasis are becoming recognized as clearly important enterically transmitted diseases as well. It is important to note that transmission of enteric infections can occur not only as a result of direct oral-anal contact but also, for example, when fellatio follows anal intercourse thus resulting in ingestion of infectious material from the penis. Since certain enteric infections can be carried asymptotically, interruption of transmission is difficult as long as there is fecal-oral contamination.

For hepatitis B, although saliva, urine, and semen contain the virus, anal receptive intercourse seems to be most highly correlated with infection.

The recently described entity of herpetic proctitis with its often-associated lumbosacral radiculomyelopathy is reviewed.

We are reminded of the studies showing that *Neisseria meningitidis* has been isolated from the anal canal and, less commonly, from the urethra in gay men. The clinical and therapeutic implications of these meningococcal infections is not clear. The role of chlamydia in gay men is likewise uncertain. There are reports that suggest a much lower prevalence of chlamydial urethritis in gay men than in straight men. Chlamydia has been isolated from the throats and rectums of gay men, however. It is noted that possible allergic proctitis associated with coloring agents and scents used in lubricants needs to be studied.

Moving on to consider non-infectious anogenital problems, Dr. Owen mentions that the true incidence of anorectal complications in those who use the rectum in their sexual repertoire remains to be determined. One paper describing a "gay bowel syndrome" lists the prevalence of fissures, fistulae, abscesses, tears and foreign bodies in a New York proctologic practice. Although Dr. Owen is very careful to point out where data is lacking, he does not suggest further study before strongly discouraging the practice of fist fornication which has been associated with severe and life-threatening complications. The penis may also share in the problem of injury, for example from the use of "cock rings".

The subject of male rape is addressed and the physician is requested to treat these victims with "concern and compassion and with due regard for the victim's right to seek prosecution of

the alleged assailant(s)..."

Finally, the physician is counselled to accept gay patients and their relationships nonjudgementally and to understand their special health needs. If this is not possible, referral to another physician is indicated.

In the second paper Dr. Owen turns to the stereotypes of homosexuals that have been at least partly responsible for incomplete medical care. Those physicians who rely on the stereotype for identifying their gay patients are missing most of them.

Citing the Kinsey Institute for Sex Research study in San Francisco, Dr. Owen reports that at least five clusters of homosexual people can be identified from the organization of their sexual lives as well as from social and psychological factors. There are the "close-coupled"; happier, more exuberant and with fewer sexual problems than their heterosexual married counterparts; "open-coupled," a group about twice as large as the former and which allow for sexual contacts outside the home; "functionals," the single individuals with multiple sexual partners have a high level of exuberance and are more socially involved with friends and the gay subculture; "asexuals" are generally single, have a low level of sexual activity, but tend to be content with their social circumstances. About a third of both the men and the women in this study could not be classified, however. Dr. Owen stresses that the usefulness of this classification is that it serves to remind the physician that simply knowing that a patient is homosexual is not enough. "A complete family, social, and sexual history is necessary in any patient, regardless of sexual orientation, to determine factors that may be placing the patient at an increased risk for disease."

Part of an effective therapeutic relationship with the gay or lesbian patient is respect for the patient's extended family and including them as desired by the patient. Assumptions of heterosexuality can erect barriers to communication and place the burden for divulging one's homosexuality on the patient. The sexual history should include information about sexual practices employed, functional problems with sexual performance, drugs or sexual toys, and usual locations of sexual activity. Is there a significant individual in the patient's life and what

is the relationship like? Dr. Owen concludes that the physician can help the homosexual practice preventive medicine by assessing the totality of his/her lifestyle and more importantly, the process of assessment indicates to the patient a sense of acceptance and nonjudgemental concern.

*Reviewer's comment:* I cannot imagine a more concise, readable, and complete review of special health needs of the homosexual patient than Dr. Owen has written. He reviews a growing literature that in most cases has appeared in journals that never reach the attention of physicians not actively interested in the special health needs of gay men and lesbians. The significance of his contribution appearing in such a widely read journal is hard to over-emphasize.

While not an in-depth review of the entities covered, the article on sexually transmitted diseases and traumatic problems in homosexual men gives the practicing physician enough of an overview so that the likelihood of a gay man receiving more appropriate medical care is increased.

Dr. Owen refers to the difficulty in determining an ideal screening interval to recommend to patients. Perhaps a more fundamental question for the practitioner is: "Which infections should be screened?" That would seem to depend from what perspective you are recommending the screening, i.e., public health or individual patient protection, and who is going to be paying for the screening, i.e., the public sector or the patient (either individually or through third-party reimbursement). For example, because gonococcal pharyngitis is an unimportant source for transmission of *N. gonorrhoea* to an uninfected partner, it is not cost effective to do pharyngeal GC cultures in a public screening program<sup>1</sup> and large facilities such as the San Francisco City Clinic do not perform them routinely. On the other hand, gonococcal septicemia originating in patients with the pharynx as the only site of infection has been reported<sup>1</sup>. There are currently no recommended guidelines to help the practitioner decide whether the high risk patient (those who practice fellatio) should have routine pharyngeal cultures. On the other side is the case of the enteric infections, notably amebiasis and giardiasis. As Dr. Owen noted, there is an asymptomatic cyst-passing rate (an

estimated 30% for amoeba and probably higher for giardia [Dritz, SK, personal communication]). With currently available laboratory diagnosis reliant on microscopic stool examination and running anywhere from \$20-30 per examination in a good lab, the cost is prohibitive to consider a mass screening program. But maybe it is a good idea to periodically screen asymptomatic, private, high risk (i.e., engages in anilingus) patient with purged stool for ova and parasites.

However, simply finding the asymptomatic carrier is not enough. Attempts to reduce transmission must also be made. Patient education must be done by physicians. Too many gay, sexual neophytes without the benefit of any formal gay sex education are completely ignorant of the diseases for which they are at risk and the sexual activities which place them at risk. Patients must be told of the risks of fecal-oral contamination and that once there has been any rectal manipulation, shigella and cysts of amoeba and giardia can easily be passed to the mouth whether or not there has been direct oral-anal contact. The use of condoms for rectal intercourse in non-monogamous relationships will protect against rectal gonorrhoea, rectal primary syphilis, rectal herpes, chlamydial proctitis and possibly hepatitis B.

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DAVIES HALL from page 61

rights. GRA was instrumental in the recent series of cases and negotiations that brought about an easing of discriminatory immigration practices against foreign gay people entering the United States.

Ticket sales are expected to be brisk, so prompt action is advised. Tickets outside the BAPHR block are available at \$6, 10, 15, 25 and 50 through Gay Rights Advocates. For reservations and further information, contact BAPHR Treasurer Ric Andrews, M.D. at 567-4341 (answering service).

The November concert will be a rare opportunity to assist one of the country's foremost legal organizations and one of California's finest musical groups, in addition to enjoying an outstanding concert in the magnificent new Davies Hall.

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Tickets for the Davies Hall concert will be distributed in the last week of October. □

untrusting, unable to form and sustain close relationships, underachieving. That this is true for gay physicians no less than others was borne out by a 1978 BAPHR study which revealed that a majority of its members feel they have failed to reach their full professional potential, avoided close professional relationships, and failed to assert themselves in situations of professional controversy. Thus, while we often insist that our sexuality is only one facet of our lives, that facet, or the fear of it, comes to dominate the other facets in our milieu.

You may not be able, or ready, to come out of the closet publically, and that's understandable if such a step would be of great risk to you, although the same study also clearly indicated that, while risk exists, it is not as great for most as they fear. And I have never met an openly gay person who regretted having come out of the closet, even when doing so forced them to change job, friends, or residence.

On the other hand, even if it is too risky for you to come out to the world at large, you engender no risk by coming out of the closet within the closet, and ridding yourself of your own internalized homophobia. You need only remain alert to the insidious ways with which it manifests itself in your life, recognize it, and determine to dispose of it.

The fight against societal homophobia is one that can and will be won educationally, politically, and legislatively, and it can be conducted by those who are out of the closet publically, with the support in money and behind-the-scene volunteer effort of those who are not out of the closet.

But the fight against internalized homophobia must be handled by each of us alone. We can help one another to examine, recognize, and analyze these forms of self destructive, self de-meaning behaviour and attitude, but you alone must make the decision to rid yourself of these patterns, and then do so. The wages of victory will be greater self respect and self confidence, and from those the power to determine the direction and quality of your own life.

That is why it is said that "coming out" is a political act.

Warmly, Dale □



I think that emphasizing the above in detail was beyond the scope that Dr. Owen set for his paper. It was carefully written in a way that would give the practitioner largely unfamiliar with gay patients a way to open the door to them, set judgements asid, and allow an open therapeutic relationship to develop.

- 1. Wiesner PJ. Gonococcal pharyngeal infection. *Clinical Obstetrics and Gynecology*. 18:121-129, 1975.

□  
ROBERT BOLAN, M.D.

# vital signs

## WELCOME TO A NEW GROUP — TORONTO GAY DOCTORS AND PARAMEDICS.

A small group of gay doctors and paramedics has begun to meet in Toronto with a view to establishing an active and functioning group with similar goals to those of BAPHR, though they feel a broader base among gay health care workers will be beneficial in their particular community.

According to Stephen Atkinson, M.D., Toronto BAPHR member: "Two of our members have been associated with BAPHR during the past two years and we suspect there are others in the area who receive the BAPHRON and might appreciate knowing of the formation of a group here. We would appreciate the mutual support that we and other gay doctors in southern Ontario could share, and indeed, would be interested in hearing from any Canadian BAPHR member."

As did BAPHR, the group expects to continue on a mostly social level until the support base permits expansion of activities to include the important work of improving the health in and the understanding of the gay community.

The group can be contacted by mail in care of Stephen Atkinson, M.D., #4—262A Sherbourne St., Toronto, Ontario, M5A 2S1; Steve can be reached by telephone most evenings at (416) 920-1882.

## S. F. City Clinic — Gay Architect Comes to the Rescue

It is apparently certain that the City VD Clinic will be moving from its current Fourth Street location. City Public Health officials are not acknowledging that a new location has been found, however, the August Golden Gate Business Association (GGBA) Newsletter has a different story. Arthur Lazere, GGBA President, reports that a new location has been found, but the City Real Estate Department couldn't approve the new lease without architect's specifications for the new layout. "Evidently, there wasn't any money for an architect," Lazere wrote. "When informed of this situation, I called GGBA member

Patrick McGrew, who immediately made his services available, gratis, to the Department of Health."

"Once again," Lazere stated, "a member of our organization has been instrumental in saving an important community facility, without remuneration, without promise of recognition."

## GGBA PHILANTHROPY

In response to the many requests for funding assistance that the Golden Gate Business Association has received from organizations serving the lesbian and gay community, the GGBA has established a non-profit foundation. The first fundraiser was held on September 22 (the announcement was included in a separate BAPHR mailing).

Applications for funding will be accepted by the board of the foundation later in the year. The board will be comprised of the executive members of the GGBA, two community members and the Chair of the Philanthropic Committee. Any non-profit, tax-exempt organization is eligible for application, and details will be available later in the year.

Danielle Donovan, representative of GGBA, remarked that the foundation is an important step in community self-sufficiency.

## HEALTH FAIR 1981

The Southern California Physicians for Human Rights is coordinating a Gay and Lesbian Health Fair for the second half of 1981. Coordination is being sought with members of allied health professions, traditional and non-traditional.

The Fair should include formal presentations, seminars, workshops, exhibits, and booths for practical health delivery.

The Fair should be open to practitioners and the public, gay and non-gay.

A coordinating committee is being formed. Proposals and inquiries are being invited by SCPHR at 7985 Santa Monica Boulevard, Suite 109, Los Angeles, California 90046. □

the **BAPHRON**  
 Bay Area Physicians for Human Rights Official Newsletter

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 President..... Dale McGhee, MD  
 Vice-President..... James Krajewski, MD  
 Secretary..... Robert Bolan, MD  
 Treasurer..... Richard Andrews, MD

**STAFF**  
 Secretarial Assistant..... George Neumann  
 (415) 776-0905

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Post Office Box 14546  
 San Francisco, California 94114  
 Phone: (415) 673-3189

**BAPHRON STAFF**  
 Interim Editorial Board..... Dale McGhee, MD  
 Denny McShane, MD  
 Sam Thal, MD  
 Bob Bolan, MD

**DESIGN/LAYOUT**  
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**ESTABLISHED** 1st class Internal Medicine Practice and office available. M.D. retiring due to illness. Excellent teaching hospitals and medical school affiliation. Solo practice with 7 other solo internists sharing coverage. Balanced primary care and consulting including 15% alcoholism and 15% gay. Located in central Orange County, minutes from Disneyland, the Beaches, Rams/Angels, the life style of your choice. I am more interested in conserving and serving the practice than gouging the new owner. Reply to P.O. Box 10672, Santa Ana, CA 92711.

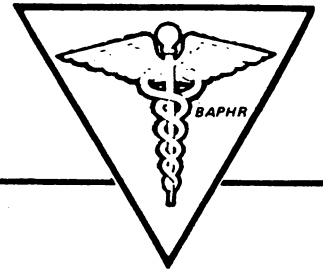
*The purpose of this section is to provide contacts between physicians seeking educational or employment situations, as well as a variety of other advertisements, announcements, and solicitations applicable to the interests of our members and non-member readers. The cost of advertising in this section for medium typeface, 40 letter lines will be \$ 1.50 per line space per month. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

*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 Editors. The deadline for receiving material for publication will be the 15th 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: Foramina, The BAPHRON, Post Office Box 14546, San Francisco, CA 94114.*

*For further information, telephone BAPHR: (415) 673-3189.*

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



# Membership Questionnaire Results

## Coming Up in December

1. Report on the formation of the new National Association of Physicians for Human Rights.
2. New Seattle Gay Physicians group forms.
3. Progress report: Southern California Physicians for Human Rights—a vigorous force.
4. Roundtable article in the *Journal Patient Care*.
5. BAPHR Holiday Party. and more...

Don't miss this important BAPHRON. Join or renew now if you have not already done so.

## Last Call

For those members and patrons who have not renewed for the year 1980-81, this will positively be the last issue of the BAPHRON you will receive. Dues were due July 1st to continue membership in good standing. Your renewal will insure that you are informed of BAPHR events, meetings and progress, and continue to support an important and worthwhile organization.

Remember that your dues are tax deductible from both your federal and state income taxes. To alert your accountant, you may wish to write "501(c)(3)" on your check indicating the check is a contribution to a tax exempt organization.

During the month of September, the membership was polled by the Support Committee about three aspects of BAPHR activities: General Meetings, Social Events and Support. Of 300 questionnaires mailed, 75 were returned. Results summarized here are based on the 25% response rate.

Questions pertaining to General Meetings were structured according to location, style, refreshments, time and global rankings of factors encouraging and discouraging meeting attendance. Breakdown of response is as follows:

1. Where should General Meetings be held?
 

a. private homes in San Francisco	44%
b. private homes around Bay Area	23%
c. San Francisco Medical Society Bldg.	20%
d. Other (usually a & c alternating)	13%
2. Rank of Potential Meeting Styles:
 

	RANK
a. Guest Speaker	1
b. Small Group Discussions	3
c. Review & guidance of BAPHR committees	5
d. Purely social meetings	4
e. All of the above in rotation	2
3. Refreshments at meetings:
 

a. continue light snacks	64%
b. add hard liquor to above	4%
c. potluck	25%
d. combinations of above	7%
4. Meeting Time (7 pm, 3rd Sunday of Month):
 

a. yes	83%
b. no	17%
5. Ranking factors influencing meeting attendance:
 

(E = Encourage, D = Discourage)		RANK
		E    D
a. speaker		2    5
b. business & announcements		3    4
c. committee reports		6    3
d. social interchange		1    6
e. drinks & food		7    7
f. meeting location		4    1
g. meeting time and day		5    2

Inquiry with regard to Social Events is detailed in the following:

1. How many social events/year?
 

mean = 4.2	mode = 4	range = 1-12
------------	----------	--------------
2. Should parties be in lieu of General Meetings?
 

a. no	42%
b. yes	58%

- |  |             |                |
|--|-------------|----------------|
| 3. Should parties be out of San Francisco?                       |             |                |
| a. no  |             | 10%            |
| b. yes   |             | 90%            |
| 4. Should there be one or two <i>BAPHR</i> weekends at a resort? |             |                |
| a. no  |             | 17%            |
| b. yes   |             | 83%            |
| 5. Should <i>BAPHR</i> parties be combined with other groups?    |             |                |
| a. no  |             | 6%             |
| b. yes   |             | 94%            |
| 6. How much should the party admission charge be?                |             |                |
| mean = \$18.55   | mode = \$20 | range = \$2-50 |

The Support Committee was originally established to provide a touchstone for psychological and emotional support to members "coming out" during the Anita Bryant brouhaha. In recent times this "support group" function had become rather non-existent. The third section of the questionnaire focused on whether to re-establish such a group and probed for what concerns such a group should deal.

- |   |  |     |
|---|--|-----|
| 1. Should a Support Group be established? |  |     |
| a. no                                     |  | 33% |
| b. yes                                    |  | 67% |

In summary, the *BAPHR* members favor meeting in private homes; having the formal part of the meeting varied although speakers are the most popular. Review and guidance of committees is not all that important and purely social meetings are "out". Refreshments should be kept light. Meeting time is still best on the third Sunday of the month at 7:00 pm for most members. The prime reason for attending meetings is social interchange with speakers second and business and announcements third. Meeting locale ((SF Medical Society Building), meeting time, and committee reports tended to be the factors that most discouraged meeting attendance. Four parties a year are favored and the parties should be a maximum of \$20.00 if admission charge is required. Members are willing to travel in the Bay Area for parties and a *BAPHR* weekend away is favored. There is an overwhelming desire to have social events with other gay groups (with dentists, lawyers, teachers, and Golden Gate Business Association being the most frequently mentioned). Finally, most members responding feel that a support group function should be resurrected for "coming out" and being more open to friends and colleagues, dealing with relationships, and forming a separate house officer "rap group". □

Denny McShane, MD  
Chairman, Support Committee

## November General Meeting

The November General Meeting to be held on Sunday, November 16th, will highlight Drs. Dale McGhee and Richard Long discussing "Dealing with Impotence in Gay Men."

Dr. McGhee, well known Bay Area urologist, will review the normal physiology of erectile response and the medical treatment of organic impotence. Dale has recently returned from the International Conference on Vascular Impotence in Monte Carlo and promises to "deal" with the current state of the art with a slide presentation.

Dr. Richard Long, formerly the Director of Training for the University of California at San Francisco Human Sexuality Unit, is a clinical psychologist and sex therapist in private practice in San Francisco. Rich will discuss the special approaches to psychotherapeutic intervention for gay men with psychogenic impotence.

The meeting will start at 7:00 PM with a social hour, followed by Drs. McGhee and Long's discussion at 8:00 with adjournment to social hour at 9:00 PM. The meeting will be held in the home of a *BAPHR* member.

## Medical Needs of Gay Cuban Refugees Discussed

At the September *BAPHR* general meeting, Reverend Bob Falls, Cuban Refugee Program Coordinator, discussed the progress of the 72 gay Cuban refugees who have come to San Francisco. He noted that 30% are now employed and interviews are being arranged for others. The major obstacle has been that many speak little or no English but this is being overcome by English language classes which the students aggressively attend.

Reverend Falls discussed the medical needs of the gay refugees and the ways in which *BAPHR* physicians might contribute to their health care. Considerable interest was expressed by the membership in fulfilling these needs. There was little doubt that the refugees would prefer medical care by understanding and sympathetic physicians and appreciated the interest shown by *BAPHR* in the discussion. San Francisco is considered as the model assimilation center and more refugees are arriving each week. The Metropolitan Community Churches has been the sponsoring agency for gay Cubans across the country.



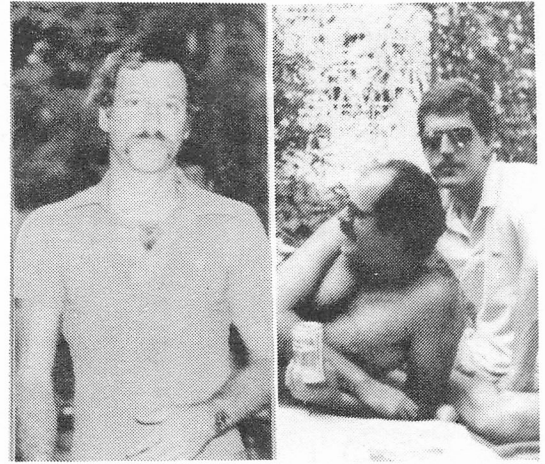
Robert Falls, coordinator of the Gay and Lesbian Cuban Refugee Program and Chaplain of the CMF parish prison ministry.

# Picnic At The Shadows

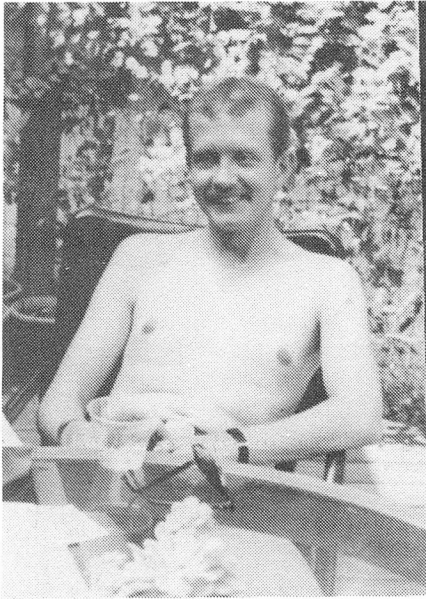
Sixty BAPHR members and friends gathered for the now traditional picnic at the Shadows private resort in Marin County. This year the picnic was potluck style instead of a catered affair and the quality, variety, and quality of food far exceeded previous events. The culinary talents of our members was shown to be equal to their professional and other qualifications.

The event was free to members and their guests. Some visiting physicians and medical students attended, adding new interest and diversity to the party. Swimming, sunning, games, and hot tubbing (this was Marin County) were evident.

The Shadows picnic promises to be a continuing annual BAPHR event and larger turnouts can be expected in the future.



Len Simpson, M.D. Harvey Rosenthal, M.D. Jim Edwards, M.D.



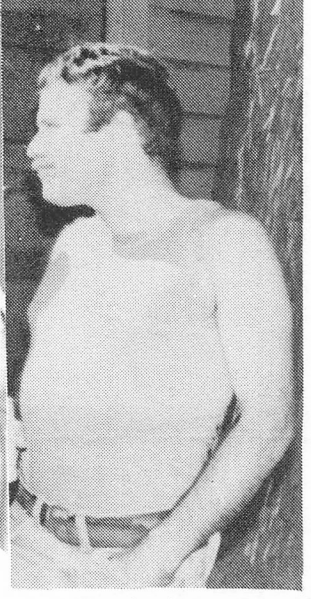
Dennis McShane, M.D.



Robert Bolan, M.D.



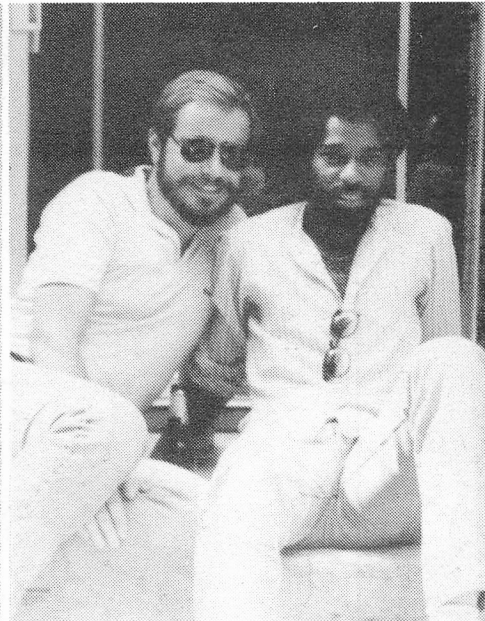
Steve Ellis, M.D.



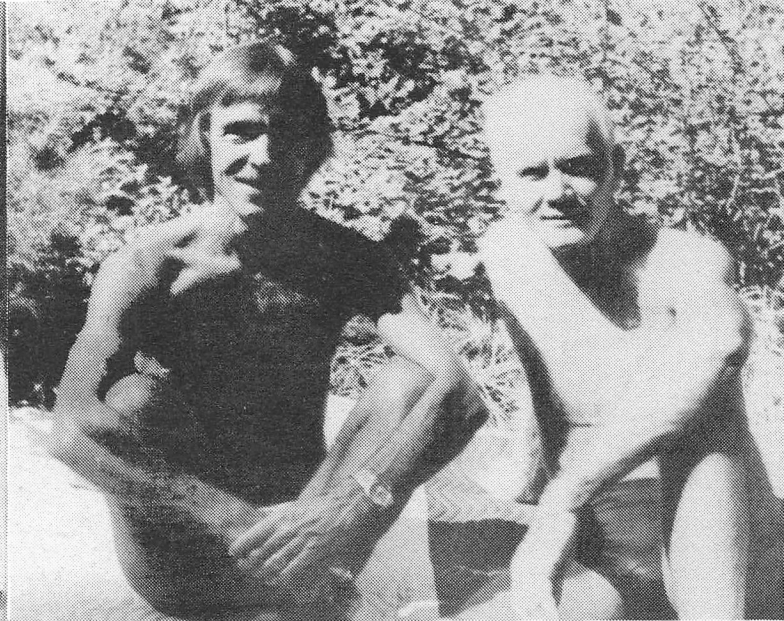
Richard Morgese, M.D.



Seth Charnev, M.D.



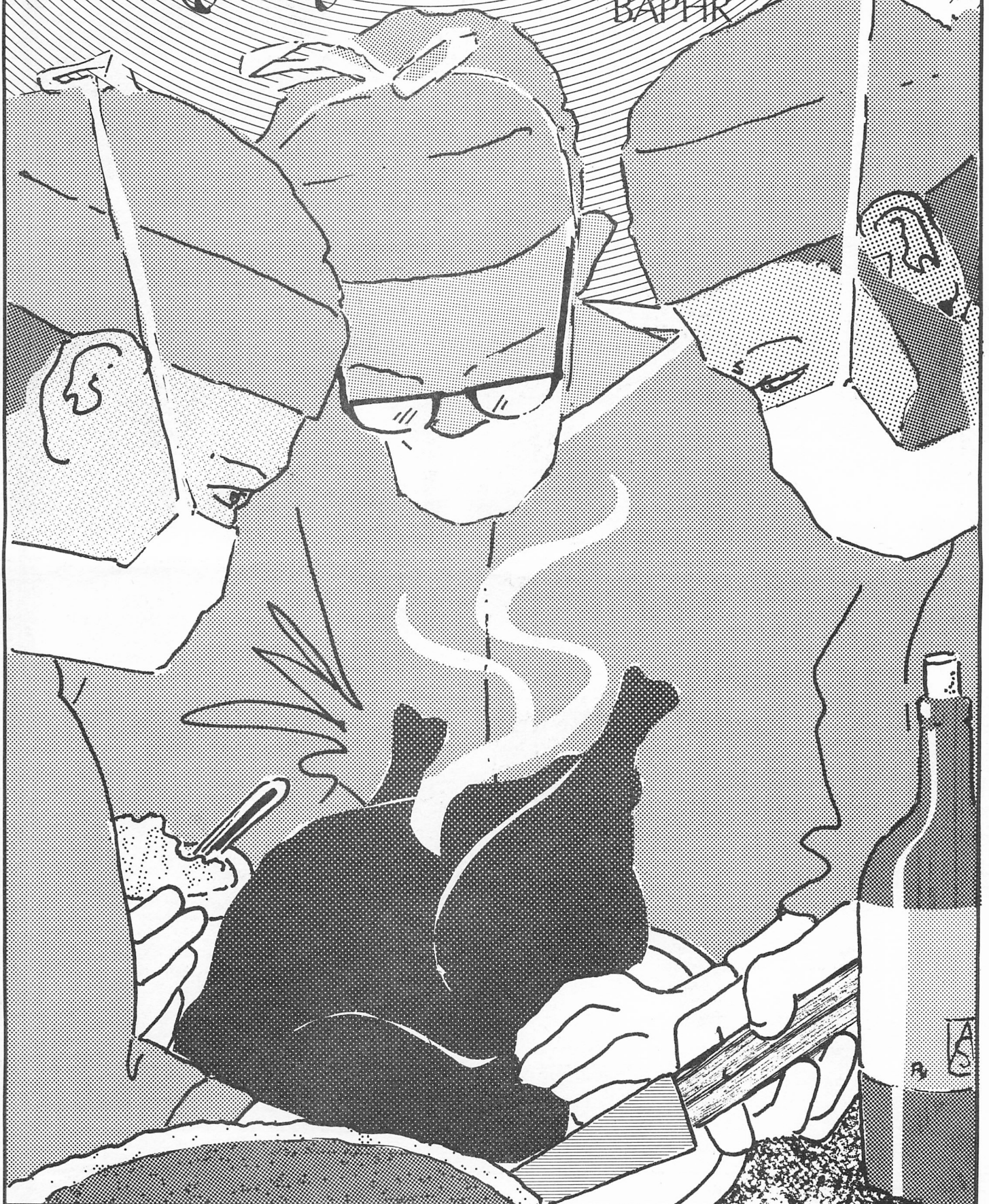
David Coulter, M.D. — Ardell Slack



Charles Morrison, M.D. — Howard Crutcher, M.D.

# Thanksgiving Best Wishes...

BAPHIR



# Can You Draw?

Last month a call went out for photographers to send in copies of their work for the *BAPHRON*. We recently learned that we also have some artists and we certainly don't want to slight them. We invite painters, sketchers, cartoonists, or any other kind of artists to send in copies of your work.

Again, the rules are the same: None. Prizes: None except to share your talents with others.



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. Membership in *BAPHR* is open to physicians and medical students. *BAPHR* is an accredited provider of Continuing Medical Education by the California Medical Association.

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Vice-President..... James Krajeski, MD  
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Treasurer..... Richard Andrews, MD

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Secretarial Assistant..... George Neumann  
(415) 776-0905

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Post Office Box 14546  
San Francisco, California 94114  
Phone: (415) 673-3189

#### BAPHRON STAFF

Interim Editorial Board..... Dale McChee, MD  
Denny McShane, MD  
Sam Thal, MD  
Bob Bolan, MD

#### DESIGN/LAYOUT

Sam Allen Designs 285-2272

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 Editors.

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. Foreign rates are available upon request. Make checks payable to BAPHR, and send to: The *BAPHRON*, Post Office Box 14546, San Francisco, California 94114. It is important to indicate the name and address to which the newsletters should be mailed. □

# Did You Give At The Office?

Once again, members and friends of *BAPHR* may specify that their United Way contributions are to be earmarked for Bay Area Physicians for Human Rights. The donor should request a Donor Option Pledge Card from United Way and specify *BAPHR* as the recipient. Federal employees who contribute to the Combined Federal Campaign may also request the Donor Option Plan.

*BAPHR* meets the necessary criteria for the donor option plan in that it holds tax-exempt status under IRS Section 501 (c)(3) and meets the other requirements.

Last year *BAPHR* received contributions through this plan and we are pleased that we are again eligible. United Way retains a small portion of each pledge for administrative expenses. The donor option plan is intended for those individuals who feel strongly about a specific organization (such as *BAPHR*) and wish to support it through their United Way contributions.

It should be noted that *BAPHR* is not a "member agency" of United Way and thus will not receive financial support through United Way unless the Donor Option card is completed.

# vital signs

## It's the Annals, Not the Anals

The *Annals of Internal Medicine*, the official organ of the American College of Physicians, and one of the most prestigious medical journals, has published, once again, an article concerned with gay health care. The September issue reports and discusses a case of *Campylobacter* (sic) Proctitis in a gay man. A quick survey of the last six issues of the *Annals* reveals seven articles on gay health issues. These include an article and an editorial on poppers in May 1980, and Owens' two part series reviewed in the October *BAPHRON*.

Perhaps more remarkable than this sudden glut is that previously gay health problems were rarely mentioned in the medical literature, and that this recognition is long overdue. *BAPHR* has helped in this educational process by helping to sponsor three of these articles.

## Health Care Conference

The San Francisco Department of Public Health has invited *BAPHR* to participate in a community health conference to aid in the development of departmental health plans for the coming year. This advisory input will be used to improve the balance in services offered by the department within limitations of available funds.

*BAPHR* will address the special needs of gay men and lesbians, not only as it relates to all sexually transmitted diseases, but also other communicable diseases, trauma, and the accessibility, acceptability and availability of health care. There will also be input on education and public information regarding programs available.

The conference will not deal with mental health problems, alcohol problems, or drug abuse which are considered separately.

# Help Wanted

With this second issue of the *BAPHRON* under the interim editorial board, we wish to report some good news and some bad news. The good news is that we got it out. The bad news, for those of us who did it, is that we didn't get the help we had hoped for from volunteers.

It's not too late to give a few hours of your time each month to help with the *BAPHRON*. Any talents or time you have for writing, reviewing, proof-reading, folding, stuffing, and licking would be appreciated. We know you want to help and thought we would never ask. Phone or write a note to the *BAPHRON* today.

# upcoming events

- Nov. 2, Sun..... EXECUTIVE BOARD MEETING, 6:00 pm.
- Nov. 9, Sun..... DAVIES HALL CONCERT, 8:00 pm
- Nov. 16, Sun..... GENERAL BAPHR MEETING, 7:00 pm

## foramina

### CLASSIFIEDS

### ADVERTISEMENTS

### ANNOUNCEMENTS

#### FOR RENT

**2 BR, FURN RIVER CABIN**, Guerneville. \$90 weekend, \$240 week. Call George Riley, (415) 839-4164.

**PSYCHIATRIC OFFICE SPACE** available for rent. Berkeley. (415) 346-7070.

**SPACE-SHARING**, either full or part-time, AVAILABLE in large San Francisco medical office 1 block from Presbyterian/Pacific Medical Center. Includes nursing staff and receptionist. Office has well-equipped minor surgery. Very reasonable. Please call (415) 921-5762 for further information.

#### SERVICES

**MEET HIM THRU MATCHMATE**, The Gay Male Intro Service. Est. 1974. Relationships. Discreet. (21-60). Visa/MC. Call David the MatchMaker at MATCHMATE— (415) 775-9169.

**BAPHR MEMBER SEEKING OTHER MEMBER(s)** interested in investing in San Francisco real estate (e.g., duplex, triplex). Bob Bolan 221-6045.

#### CATERING: By Tres Sher

Private parties for the Holidays or Special Occasions. 661-8142.



#### FOR SALE

**GAY PRACTICE** for Sale—gay practice in center city Philadelphia. Conv to three teaching hospitals. In most exclusive area of downtown. Well established patient population. Write c/o of BAPHR or directly to Rittenhouse Medical Associates, 2031 Locust St., Philadelphia, Pa. 19103

#### ANNOUNCEMENTS

**CONGREGATION SHA'AR ZAHAV**. Serving the Gay and Lesbian Jewish Community. Services every Friday at 8 PM at 3200 California Street, S.F. Phone: 621-2871.

*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 members and non-member readers. The cost of advertising in this section for medium typeface, 40 letter lines will be \$ 1.50 per line space per month. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

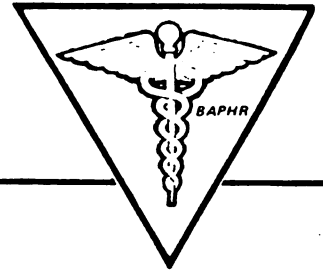
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## A Time To Learn— And A Time To Organize

Gay Pride Week, which started as a Sunday parade and speeches in the park, has become a full week of concerts, seminars, religious services, and political events. It is an important time not only for those of us who live in the Bay Area, but also for our friends and colleagues across the country, many of whom schedule vacations so that they can share the festivities with us.

Some of us in *BAPHR* believe it would be a good idea to sponsor, during the week, a symposium on health care for gays and lesbians, available to all interested physicians. And if we are going to be together for the symposium, why not take the opportunity to discuss the formation of a national association of physicians for human rights?

Three years ago, 17 physicians joined together to form *BAPHR*, the first organization of gay and lesbian medical doctors. Since then we have become a thriving, effective organization some 300 strong. Through peer support, education, and social action, we have had more of an impact on the lesbian and gay community in the Bay Area, and on our straight and gay medical colleagues, than any of us could have anticipated in the early days when we were seeking our focus and reason for being.

The word has spread. *SCAPHR* in Los Angeles is a potent force. Similar groups have come into existence in Washington, New York, Miami, Seattle, and Philadelphia, not to mention Toronto, Vancouver, Paris and London.

So far our contacts with each other have been informal, but would it not be in our interest to develop a national organization to further the goals we all share?

There are a number of possible advantages. First, the important peer support we could offer each other. Those members of *BAPHR* who have lived or do live in small towns and cities where gay physicians are still very closeted have found membership in *BAPHR* enormously helpful. It is a reminder that someone else "out there" has the same concerns and is feeling the same pressures. It's for this reason that we've not had any geographic restrictions on *BAPHR* membership and have in fact encouraged small town colleagues to join. But *BAPHR* can't really be a national organization, not if we are to effectively deal with the important issues here in the Bay Area. We have enough to do to try to support our friends in San Jose without getting involved with peer support of the physicians in Little Rock. A national organization could help by fostering contacts among physicians in several adjacent states.

And it could serve as a lobby for better health care for gay men and lesbians, and for an end to discrimination in admission to medical schools, internships, residencies, and to hospital staffs. There is strength in numbers. Ask the moral majority. Local groups such as *BAPHR* and *SCAPHR* can have considerable impact in their own areas

and communities. Organized across the country, our influence should be much greater.

If one of our goals is to educate ourselves and others in ways of improving health care for lesbians and gays, we will have to develop materials and techniques, schedule conferences and seminars, have a speaker's bureau, etc. *BAPHR* co-sponsored a symposium on sexually transmitted diseases last year. It was well attended and very well received, but planning it was almost a full time job for several of our members for weeks, and it is unlikely that a local group could organize large scale educational activities such as this on a regular basis. Hopefully, a national group, adequately staffed, could do so. It could prepare and distribute video tapes, brochures, articles, and other educational materials. The proper use of these materials would enrich our educational activities.

We obviously can not create an organization overnight. A lot of people have to be involved and consulted. But we have to start somewhere.

It'll be on the agenda at our next general meeting. This is probably the most important decision *BAPHR* will have to consider in the next few years. So pro or con, please come and let us know what you think. □

Mike Rankin  
Denny McShane



Michael Evans, medical student member, and Rado Gregorich, associate member, helping to mail the *BAPHRON*

## A. Lincoln

It might come as a surprise to some readers that nothing gets published in the *BAPHRON* until it is first written. The *BAPHRON* is not only the newsletter of *BAPHR*, it is also *for and by* the members of *BAPHR*. If this sounds like it is paraphrased from another famous source, you are right.

Our goal is to tap the writing talents of our versatile, knowledgeable, and

brilliant membership. This means that we need your input—articles, news items, reviews, announcements, letters, or any other copy suitable for these pages. You need not be a professional or great writer, and your copy may be signed or left unsigned. Publication is, of course, at the discretion of the editorial board. And as we previously indicated, we welcome photographs, drawings, cartoons, or other art work. You need not be a *BAPHR* member to write.

Let's make the *BAPHRON* our journal.

## Army Talk

In October, Dale McGhee, MD, *BAPHR* president, spoke at Letterman Army Medical Center, together with Tom McGee, chairperson of Gay Fathers, at the invitations of the army social services department.

Members of the social services staff indicated an interest in learning about professional and support group resources in the gay community which they might be able to utilize within the constraints of the army's official policies on homosexuality.

Dr. McGhee indicated that despite such repressive official policies, the meeting suggested that, unofficially, some army leaders may be ready to take a more open look at the issue of homosexuality.

## Intestinal Diseases To Be Treated in N.Y.C.

Intestinal amebiasis and giardiasis are now being treated by the New York City Health Department. It is the first city clinic in the country to regularly diagnose and treat these intestinal infections. Testing will be done by appointment at the Lower West Side Health Center in New York.

These intestinal diseases are commonly found in the gay male population and are not ordinarily included in public Sexually Transmitted Disease clinics. The reasons given are the cost of diagnosing and treating these diseases. The New York program is thus an important breakthrough in the management of these problems.

## BAPHR New Year's Eve Party

The annual *BAPHR* New Year's Eve Party will be held in the historic and magnificent Flood Mansion, 2120 Broadway, San Francisco on December 31st between 9 PM and 2 AM.

Members of the Support Committee, Jack Duval, Artie Pollack, David Coulter, and Denny McShane have planned the evening which will include drinks, dancing, entertainment and a light supper catered by Bon Apetit Caterers.

The party is open to all members, friends, and guests. Admission is \$25 in advance, (\$15 for medical students) and \$30 at the door. Advanced reservations will help us plan refreshments. Dress is optional.

*BAPHR* members have already received an invitation and reservation form under separate mailing but space is still available and we urge you and your friends to attend this gala event.

Checks made payable to *BAPHR* should be returned to Jack Duval, 453 Roosevelt Way, San Francisco, Ca 94114. Further information may be obtained from any member of the Support Committee.

Join us on the thirty first.

## CME Credit For BAPHR Meeting

In the first *BAPHR* general meeting to qualify for CME (Continuing Medical Education) credit, 24 members who signed the attendance sheet will be granted 2 hours of Category I credit. The lectures by Dr. Dale McGhee and Dr. Richard Long on the subject of Impotence and the panel discussion qualify towards fulfilling the requirements for California Medical Licensure.

Future educational activities for Category I credit are planned for general *BAPHR* meetings as well as educational courses. The first course given under *BAPHR* sponsorship was in June 1980 on Current Aspects of Sexually Transmitted Diseases.

Category I approved CME courses apply to both members and non-members. Suggestions for future courses and lectures are welcomed as well as planning times and places for these activities.

# Update on the BAPHR Referral Service

The responsibility for answering and handling referral inquiries on the BAPHR Hotline (415/673-3189) was turned over to a professional telephone answering service (Pacific Answering Service) on July 1. This change eliminated the difficult task that had faced volunteer members of BAPHR since the start of the Referral Service.

This report is to keep you current on how the service has been responding to community needs since the change to the answering service.

The line is answered Monday through Saturday from 8 AM to 8 PM. From the days of our volunteer work we learned these are the periods when most callers seek help.

All reports we have had, including spot checks by me as an anonymous caller, indicate that callers are being handled courteously and efficiently by Pacific Answering Service.

How many calls are they receiving? In July, 237; August, 238; September, 251.

Clearly a lot of people are needing and using the service of the BAPHR Referral Hotline!

At present 53 subscribers have placed their name on the Referral List. They include most specialities, including dentistry.

The BAPHR Referral Hotline continues to offer an excellent service to a large number of people. It creates a good deal of positive exposure and good will for BAPHR.

The answering service seems to be doing an outstanding job, and we anticipate continuing with them.

The BAPHR Education Committee is working on a major project to increase visibility for this public service to increase use by those who do not know it exists, and to persuade some people and organizations outside of BAPHR that there is merit in making financial contributions to BAPHR to allow us to expand into other service activities.

The answering service has been given

a list of critical criteria for use in responding to the caller seeking help from the BAPHR Referral Line. Among the important information they obtain before beginning to offer a referral are: a) type of service needed (general care, psychiatrist, dentist, etc.); b) geographic location; c) on MediCal or not; d) any special needs from the physician.

Once the information is obtained, the answering service offers the caller three names, addresses, and phone numbers. Referrals are made on a sequential/rotational basis.

The Referral Service is the only current BAPHR project that generates income as each person on the Referral List pays \$50 to help offset the costs of the answering service which is running at about \$120 each month. ●

## McGhee on the Prostate

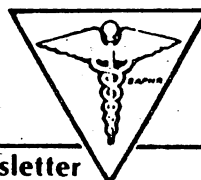
Dr. Dale McGhee, urologist, and BAPHR president addressed the membership of G40<sup>s</sup> Club in San Francisco at their regular meeting and drew one of the largest attendance of the year. The Club, consisting of gay men over 40 years of age is one of the most popular support organizations for men over 40. Dr. McGhee's talk on diseases and problems of the prostate gland had a personal significance for many of the members. A lively question period followed his formal presentation which was liberally illustrated with his private slide collection. ●

## letters to the editor

A doctor friend in Los Angeles sent me a back issue of the BAPHRON and I was amazed and gratified to get it. I xeroxed it and sent it off to another friend I knew during my internship. Enclosed is my membership and I look forward to my own copies next year.

North Carolina MD  
Name withheld

# the BAPHRON



## Bay Area Physicians for Human Rights Official Newsletter

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Post Office Box 14546  
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Phone: (415) 673-3189

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Interim Editorial Board..... Dale McGhee, MD  
Bob Bolan, MD  
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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 Editors.

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.

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*Come to BAPHR's New Year's Eve Party*

## foramina

### CLASSIFIEDS

### ADVERTISEMENTS

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**GASTROENTEROLOGIST**, 33, completing fellowship in June, seeks private practice opportunity. Contact Mark Y. Johnson MD, 6235 Marina Pacifica Drive, Long Beach, California 90822

*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 members and non-member readers. The cost of advertising in this section for medium typeface, 40 letter lines will be \$ 1.50 per line space per month. Display advertising rates available on request. Proceeds are non-profit, and will be used to offset the cost of this publication.*

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