

PREGNANCY: FACTS AND MYTHCONCEPTIONS  
by Molleen Matsumura

Many years ago, I took a course in the Indonesian language. Inevitably, the instructor tossed in various cultural highlights. One day, Ms. Nur Wattimena mentioned that, where she came from, a couple expecting a child are also expected to avoid certain foods. As she listed bananas, cucumbers, and other long, narrow, cylindrical foods, we all burst into laughter at the obvious symbolism.

Every important aspect of life, in every culture, is the focus of a huge store of myth, lore -- and even, sometimes, empirical knowledge. Not surprisingly, this is doubly true about pregnancy and childbirth, since no culture could continue without these activities. Our culture is no exception, of course. If you or anyone you know even CONSIDER having children, you can expect to be bombarded with an incredible mixture of information, misinformation, out-dated information, and out-and-out myths. I'll try to untangle a bit of the confusion, here.

BEGINNING A PREGNANCY

MYTH: Every couple that has ever had trouble conceiving has heard some variation of the following: "Joe and Mary tried ten years and nothing happened. Then, finally, they gave up and relaxed. Next thing you know, Mary is expecting twins."

This story is a variation on the "me decade" credo that if an airplane crash-lands in your living room, you must have WANTED it to happen. Attitude does not affect fertility; it's just that nobody is going to tell a hopeful couple stories about people who gave up, relaxed, and remodeled their kitchen with the money that would have remodeled the obstetrician's kitchen.

FACT: There are a few simple ways a couple can improve their chances. The man who LITERALLY not figuratively) keeps cool will have a higher sperm count. That means trading jockeys for boxers, and avoiding hot tubs, saunas, and steam baths. Timing is important. Planned Parenthood gives free classes that teach women how to tell when they are fertile -- equally applicable to conception or contraception.

Not cheap, but far more accurate, are the ovulation-detection kits

at your local pharmacy. When "the time is right", conception should be attempted on alternative days, not daily: This way, there is time for the mature sperm count to be replenished. (Some couples who conceive after giving up may be benefitting from an increased amount of mature sperm, due to less- frequent intercourse.)

If conception doesn't occur after a year of trying, see a fertility specialist.

**MYTH:** A woman who sees a fertility specialist will be treated like a guinea pig, and forced to undergo a lot of expensive, painful, unreliable procedures.

**FACT:** Many people who foster the above myth have axes to grind. At one end of the spectrum are people who simply build exaggerations of the undeniable reality that some researchers are more interested in the research than the research subject, and some physicians aren't very good at giving clear explanations. At the extreme are people who REALLY DO believe that the medical profession is some sort of male conspiracy against women, and/or that science is some sort of male aberration that no feminist should have truck with.

Deciding to get fertility counselling can be difficult. However, the initial steps in fertility counselling involve simple, painless, and relatively inexpensive tests such as blood tests. At any point, questions can be asked. How much will this cost? How likely is it to work: How many people have tried this procedure? There is always the option of stopping to think!

**MYTH:** You can choose the sex of your child.

**FACT:** The methods suggested for affecting the sex of the child alter the odds slightly, and that's all. The technique involves a combination of methods, including timing the conception at a particular point in the woman's ovulatory cycle (not easy!), and altering the vaginal pH. Be forewarned that making the vagina less acid increases the risk of minor but annoying local infection, which in itself interferes with fertility. (If you try this method, and infection occurs, don't listen to what people tell you about allergies and "yeast diets" -- more myths! Just have your doctor prescribe local medication -- it works in one to three days).

Researchers are trying to find improved methods for selecting a child's sex -- and ethicists and demographers, among others, are worrying about the possible social consequences. A gynecologist can give you an update (and you can expect any REALLY effective technique to make the front page of your newspaper).

## PREGNANCY

Some of these myths will sound painfully familiar to the seasoned skeptic. Well, what did you expect?

**MYTH:** You can use a pendulum suspended over the mother's abdomen to

predict the sex of the baby. Right! Probably it's a CRYSTAL PENDULUM! I really can't remember whether clockwise movement means a girl or a boy, but the really important question is whether you have a compelling reason to be polite to the pendulum wielder, or have been waiting for an excuse to kick this person out of your life. You should try pointing out that, starting around the fifth month, a mother-to-be shouldn't spend much time lying on her back. (That's a fact -- the uterus presses on major vessels and impairs its own blood supply).

Sometimes people come up with other myths, for example, "An active fetus is a boy, a quiet fetus is a girl." (No comment needed for that one!)

FACT: There is no way to predict fetal sex except by genetic testing -- amniocentesis or chorionic villus sampling. These procedures shouldn't be, and aren't, done unless there is good reason to be looking for genetic problems, or, in the case of amniocentesis, to diagnose fetal illness. If and when they ARE done, the parents can decide whether they want to know the fetus's sex as well.

MYTH: If a little bit of vitamin supplementation is good, huge amounts of vitamins have got to be better. (I told you some of this would sound familiar!)

FACT: Eating a balanced diet with plenty of fresh produce really will provide the necessary vitamins. All a pregnant woman needs to do is eat the way she knows she ought to, adding a few hundred extra calories, and skipping junk food. A prescription, prenatal vitamin can help, won't hurt, and will not be excessive. Prenatal blood tests can diagnose anemia, and then iron tablets may be prescribed.

Taking huge amounts of some vitamins and minerals can be very dangerous. Two examples: When a woman takes very large amounts of Vitamin C prenatally, the newborn can develop "rebound" scurvy. A heavy excess of Vitamin D is just as likely to cause bone deformity as deficiencies.

MYTH: Unlike "synthetic" medications, herbs and herbal extracts are "natural", safe, and wonderful.

FACT: Ho-hum. And which herbal extracts are we talking about? Cocaine? Heroin? Strychnine?

There are three herbs in particular that a pregnant woman might hear about. Raspberry leaf tea is supposed to "tone the uterus". I have never figured out what that means. But I do know that no controlled trials have been done, and that raspberry leaf tea tastes awful.

Valerian is supposed to help with insomnia. The people who laid that one on a good friend of mine speculated that it was a "natural

version" of Valium. Maybe because they sound alike? Why would anyone pregnant take any version of Valium, anyway? I was concerned enough to track down a book by a practitioner of herbal medicine who claimed that valerian will help with insomnia -- but, this writer added, after a couple of weeks, the valerian itself will cause insomnia. That was enough to convince my friend not to bother.

Possibly the most dangerous is blue cohosh tea, which is supposed to stimulate labor contractions, and might be recommended to women close to their due date who are tired of waiting for labor to begin spontaneously. I have not investigated whether this tea performs as billed. If it can, that's scary: The concentration and dosage cannot be controlled, and overly strong uterine contractions can be very painful. At worst, if extremely strong contractions were stimulated, the tea would be outright dangerous to both mother and fetus.

## AFTER THE BIRTH

**MYTH:** If the parents are prevented from immediately holding and "bonding" with their baby, their long-term relationship will be impaired.

**FACT:** The researchers who originally stressed the importance of early bonding later modified their position. They did not retract their original finding that, during the first few weeks after birth, parents who had done early bonding seemed to grow attached more easily. But they noted that, by the time infants are several months old, the degree of parent-infant closeness is the same in both early bonding groups and control groups.

Undeniably, a mother is very upset when she cannot be close to her baby right after the birth (for example, because she had surgery or the baby had respiratory distress). But the same women who, years after giving birth, still remember how sad they felt about such separations, do not express any feeling that their relationships have suffered.

**MYTH:** Breast-feeding is always difficult. It is always easy. It is absolutely vital to the baby's health. It isn't that important. Formulas are just fine, and more convenient.

**FACT:** Breast-feeding IS beneficial to the health of mother and infant. Women who breast-feed reduce their risks of developing breast cancer -- according to recent research announced by the National Academy of Science -- of developing osteoporosis. The newborn's immune system is not fully developed, and, in the first few days of life, it is protected against some infections by antibodies in the mother's colostrum (pre-milk secretion). Nothing is as easily digested by the newborn infant as breast milk, and nothing is less likely to cause allergies (infants less than one year old are more susceptible to food allergies).

The professional association of pediatricians recommend breast-feeding during the first year, and they're right. But it isn't the end of the world if you don't. Most of today's 20-to-45-year-old Americans were formula fed, and they're no more or less healthy or intelligent than our parents were (well, maybe a little more!)

## THE BIGGEST MYTH OF ALL

There is one right way to bring up a child. Your in-laws/parents/neighbors/boss-and-boss's-spouse know this one right way, but you are hopelessly inadequate. But that's another story.

[Molleen Matsumura is an editorial associate of "Free Inquiry", co-author of "Mother to Be: A Guide for Pregnancy and Physical Disability", soon to be published by Demos Publications. She collaborated on "Sex in China" (forthcoming, Plenum), and edited "Japan's Economy in World Perspective" (Alin Fdn. Press).]

Letters to the Editor  
FLUORIDE AGAIN!  
by Carl Alexander

I was delighted to read in December "BASIS" two articles dealing with medical issues, the fluoride controversy and wild claims for yoga. As a recovered cancer patient, I have heard it all. Yoga, mental imagery, macrobiotic diet, etc., all with little or nothing to back up the claims to good health or to cure illness. On the other hand, what is really the cause of illness, and what are safe levels of chemicals such as fluoride?

I am delighted that "BASIS" is dealing with all kinds of medical issues and quackery. As Mark Hodes stated in the same issue, "upon entering scientific literature, it becomes fair game for critical evaluation". I hope "BASIS" will follow the issue of fluoride which MAY be a case of scientific quackery. The worst kind is that that is knowingly accepted.

As a cancer patient, I became aware of accepted medical quackery, such as giving chemotherapy to people with lung or rectal cancer, of which there is little or no medical evidence it will help in these areas. I am not talking about experimental treatments, but rather treatments in common use. If I pushed a rice diet on someone, claiming it will cure cancer, without proof, I would spend a long time behind bars, but it would seem public health officials are immune from the rigors of scientific evaluation when dealing with fluoride. In both cases, the criticism may be proven false, but this can never happen without skepticism. Please keep up the good work.

[Perhaps one of our physician-readers would like to reply. -- Ed.]

## STEINER FLAP

by Robert Clear and Barbara Judd

Fred Convers' analysis of Robert Steiner's statistics puzzle is persuasive, but wrong. Steiner's challenge was to figure out the probability that two children are girls if we know that at least one child is a girl. Convers would have us analyze this problem by assuming that we can split the problem in two cases: 1) The known child is the first child, and 2) the known child is the second child. We can illustrate this by *italicizing* the outcomes where the first child is known, and **BOLDING** the outcomes where the second child is known. The outcomes are as follows: *gb*, **GG**, and **BG**, where g = girl, and b = boy.

Since the cases overlap (gg is present in both cases), simply adding double-counts the probability for gg. The problem is that Convers' procedure assumes more knowledge than is given in the problem. If you only know that there are two children, then the probability of gg is 1/4. If you know that at least one of the pair is a girl, then the probability goes to 1/3. Knowing whether it is the first, or second child that is known, increases the probability to 1/2.

The distinctions are probably most easily seen via a numerical example. Assume that we have 40 pairs, so that there are ten pairs each of gb, gg, bg, and bb. The probability that any arbitrary chosen pair from this population contains gg is 10/40, or 1/4. Now assume that we are only interested in those pairs that have at least one girl. This eliminates the ten cases of bb, so that the resulting probability is 10/30, or 1/3.

Assume that the known child was the first child. There are ten pairs of gb, so all of these pairs must be included, since there is only one girl in the pair. If, as Convers asserts, the probability that second child is also a girl is 1/2, we have to include all ten pairs of gg. However, by the same argument, we also have to include all ten cases of gg when it is the second child that is known, which means we have to double-count them! If we include 1/2, or five pairs each, of gg with each known child, then the probability of gg with each choice is 5/15, or 1/3. These probabilities sum correctly.

## GOODE NIGHT AGAINE, LITTLE PUZZLE

by Bob Steiner

### CASE 1:

A man has two children. The chance is one in four that they are both girls.

### CASE 2:

Start with the four chances in Case 1. Then eliminate the chance that has no girls (i.e., both boys). That leaves us with three chances, each of which has at least one girl. There is a one in three chance that both are girls.

Thank you, Mr. Convers, for your interest in this puzzle. Alas, your little table has a logical flaw. It purports to demonstrate that it is twice as likely that a person will have a girl as child one and a girl as child two as it is that he will have a girl as child one and a boy as child two.

An there are no further objections, maihap 'tis time to saie: Goode night againe, little puzzle.

[Editor comments:  
COME ON...

If one child born to a couple is a girl (or a boy), the chances of the second child being of one or the other sex is still fifty percent. Past performance has nothing to do with future potential. It is merely a way to form the ruler to measure the probability of that potential and not the cause of it. -- Y.B.]

## DENTAL FILLINGS

by Tom Woosnam

Did you realize that the fillings in your teeth could result in arthritis, colitis, kidney damage, birth defects and multiple sclerosis? That at least was the suggestion made by Morley Safer in a "60 Minutes" segment aired on December 16, 1990, a suggestion that is not borne out by scientific evidence as reported by Accuracy in Media, Inc. (AIM), in its January 1991 newsletter.

The basis for the CBS claim is the fact that amalgam fillings, which have been in use for more than a century, are 50 percent mercury (they also contain silver, copper or tin), and mercury is known to be more poisonous than lead or arsenic. Although Safer admitted that "no specific disease has yet been directly linked to mercury from fillings" the parallels drawn between diseases and the use of amalgam as reported by "60 Minutes" left little doubt as to the conclusion that CBS wished to draw.

As an example of the kind of frantic recovery sufferers can expect to experience, Safer interviewed Nancy Yost of San Jose, California. Yost, a victim of MS, had her five amalgam fillings taken out because she'd worked in the dental industry, and had heard reports that some patients had shown improvements after their amalgam fillings had been removed. The morning after the removal of her fillings, she threw away the cane she had been relying on to walk, and subsequently her voice and ability to dance were restored -- small wonder then that after the program was aired dentists

around the country were flooded with calls from patients willing to pay \$200 to \$2,000 to have their fillings replaced.

One naturally wonders at this point what an expert on MS might say, and indeed "60 Minutes" did contact the National Multiple Sclerosis Society and was offered an interview with Dr. Stephen Reingold, vice president for research and medical programs. Because the camera crew never showed up, however, the viewing public was unable to hear what Dr. Reingold would have said, as he made clear in a protest made to "60 Minutes" executive producer Don Hewitt: "The reality is that there has never been a direct association made between amalgam and MS. Reports of remissions resulting from amalgam removal appear to be anecdotal, and cannot be separated from placebo effects or spontaneous changes in disease."

One would have hoped that in the interest of balanced reporting Safer would at least have interviewed patients who showed no improvement in their health after having had their fillings removed, but such hopes were not realized in this program. One might have hoped also that he would mention that health professionals who deal with amalgams every day show no higher MS incidence than the rest of the population, but, alas, this evidence is not forthcoming.

"60 Minutes" did not entirely ignore the defenders of amalgam fillings, however. They showed an interview with Dr. R. Heber Simmons, Jr., spokesman for the American Dental Association, but much of his time (76 lines vs. 156 lines for the "anti-amalgam" dentists) was spent defending the ADA policy of declaring it unethical for dentists to recommend the replacement of amalgam fillings except for cosmetic reasons. "60 Minutes" turned this into evidence of an infringement of the rights of dentists who want to help patients avoid mercury poisoning.

So, what are the facts as they are known but not reported on the CBS Sunday night show? According to Dr. Simmons, studies show that the daily release of mercury from amalgams is about one percent of what a worker would receive when exposed to mercury in an environment complying with OSHA standards. Dr. J. Rodway Mackert, professor of dental materials at the School of Dentistry of the Medical College of Georgia, writes in an article scheduled for publication in the "ADA Journal" that the average patient's fillings may give off 1 to 2 micrograms of mercury per day. In contrast, the mercury intake from one meal of seafood in one week would be seven times the amount given off by one's amalgam fillings each week!

Even "Consumer Reports", which took the scare-mongers' side during the Alar scandal, has noted "... dentists who purport to treat health problems by ripping out fillings are putting their own economic interests ahead of their patients' welfare. Amalgams have been used for more than 150 years. Except for a few people with a genuine allergy to mercury, [Consumer Union] knows of no one who's been harmed by them." The "San Francisco Examiner" quoted one

anti-amalgam dentist as saying he had "at least 30 new patients awaiting appointments" following the "60 Minutes" piece. "The television show was wonderful." he said, "I was thrilled."

He may have been thrilled, but what of the MS sufferers whose hopes were cruelly raised, then dashed when they were told the facts? As AIM states perhaps they were "... lucky compared to those who contacted not their doctors, but dentists willing to replace their fillings. They will be not only sadder but poorer ... they should send the bill to CBS."

[Tom Woosnam holds the Science Department Chair at the Crystal Springs Uplands School in Hillsborough.]

THE EDITOR ADDS ...

I contacted Wallace I. Sampson, M.D., one of the founders of Bay Area Skeptics and currently an advisor, after that particular show, and asked him if I should run right over to my dentist and have my fillings replaced. He said, "No!" No scientific findings would suggest that there is any merit to the claims of that show. I know Dr. Sampson well, and respect his scientific opinions, so I saved myself a pile of dough.

Nevertheless, the show was remarkable for some of the questions it raised. Obviously, you can't make a public health policy out of anecdotal events such as the remarkable recovery (if it happened) of Nancy Yost. Still, anecdotal claims (especially if there are a number of them) should be considered for serious investigation. No one seems to have suggested that Yost's recovery might be investigated. I can't help wondering why.

That something has been in use for 150 years does not mean it's safe nor does it mean it should be immune from investigation. It does mean, however, that there is considerable vested interest in its use.

There are clear economic interests at stake here. The ADA, like many of its sister professional organizations, does three basic things.

- => It looks out for the economic interests of its members.
- => It issues (and enforces) ethical guidelines.
- => It keeps its members scientific, by enforcing academic training standards and making sure its members use only accepted procedures.

There's little question that these functions occasionally become blurred and don't always serve the public interest. In the name of science, ethical guidelines might be enforced to serve economic interests. If amalgam were proved dangerous, many dentists would have to put up a lot of time and money for retraining and retooling. Many of ADA's voting members would be out of business.

In addition, I've always been suspicious about the ADA since it

endorses commercial products (but that's an aside).

"60 Minutes" is generally an excellent show, but it does occasionally demonstrate bias. It's difficult to pick it out if you're not familiar with the subject matter (as I am not on most medical matters). I have seen it in areas where I have some background (labor, for instance). Still, I think that bias, conscious or unconscious, is more closely related to sensationalism than actual malice. What a shocker it is to discover that a professional organization has thrown one of its members out of work because he gave honest advice to a patient. But suppose it was a sincere physician treating a patient with peach pits for cancer -- which of us wouldn't want him defrocked!

As skeptics, we should naturally be suspicious when conclusions are made about a complex medical issue on a fifteen-minute news segment, however reputable the news organization is. But we should also be suspicious of spokesmen from professional organizations (with mixed motives) who make pronouncements from on high. -- Y.B.

#### VOLUNTEERS FOR 1991 CSICOP CONFERENCE IN BERKELEY (So far)

The following have kindly volunteered their services to help make the conference a success. In alphabetical order, they are ...

- => Yves Barbero
- => Lucinda Ben-David
- => Ralph Carmichael
- => Judy Daar
- => Keith Dabney
- => Don Henvick
- => Dan Dugan - Sound and Audio
- => Rick Moen - Chair, Conference Steering Committee and  
Volunteer Committee
- => Kathy Pinna - Usher Supervisor
- => Francis Rigney
- => Wilma Russell
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- => Gil Shapiro - Vice-Chair, Steering Committee
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- => Ray Westergard - VIP Limousine Services
- => Tom Woosnam

There's still time to volunteer. The hours are flexible, the wages nonexistent, but the company is great. Call Kathy Pinna at 843-8364.

## SPIN DOCTORS AND DERVISHES

by Yves Barbero

It was a British general who pointed out, just before the ground war got under way, that Saddam Hussein was willing to use "the currency of human life" to advance his policies and therefore "there would be a ground war".

The statement was remarkable for its candor. Finally, a military officer told the absolute truth. Washington, however, wasn't sure how the American people would take the news, and, for a couple of days, its public relations troops (spin doctors) were explaining that a ground war was not necessarily in the works (a lie). Events proved the might of modern war technology, and the forces of righteousness took almost no casualties, while the Iraqi forces (with a less-advanced technology) may have suffered, according to one estimate, as many as 150,000 killed.

Under the guise of protecting troops, the press was stage-managed. Even the establishment press complained loudly and publicly. One commentator couldn't help wondering what possible security purpose was served by not allowing the photographing of bodies being brought home. I can answer that question. The administration wasn't sure the ground war wouldn't be bloody and was afraid that the sight of so many coffins would make it suffer at the polls. Censorship, in this country, has been more often used to manage public opinion than to protect state secrets. I doubt seriously that journalists would object to not publishing shipping schedules in time of war. The administration was nervous for public relation reasons.

Whatever side one takes on the issue of the Gulf War, there was plenty to be nervous about. The resurgence of jingoistic patriotism is certainly one issue. Led by President George Bush, we have now overcome the "Vietnam Syndrome". If that means we've lost the reluctance to enter into armed conflict, it is a sad loss. The Gulf War may have been justified (and I personally believe it was, although I think the timing had more to do with the American electoral schedule than any other reason), but I'd prefer it if our leaders spent more time examining issues than possible public reaction. Would Bush have NOT started the war if he thought it would be unpopular? Could, for instance, have sanctions worked if given more time?

Why do we think that an almost flawless technical execution of the war is synonymous with virtue? We won because we had better technology, more money, great generalship, better diplomatic skills, and numbers. In addition, Iraq could not re-supply or build its own weapons, and had almost no internal self-sufficiency. Oil needs to be exported, and that was cut off. A one-resource economy is doomed to eventual extinction. "Goodness had nothing to do with it!", as May West might have pointed out.

Our greatest ally was Saddam Hussein, himself. He showed great

ineptness in his public-relations campaign. Even the most twisted intellectual apologist in the Western World would have difficulty justifying the policies of a man who gassed thousands of his own people. However diplomatically skilled nations in that part of the world are reputed to be, nothing can make up for the public-relations stupidity of the Scuds and the terrorizing of the Kuwaiti population. And, most important, HE ACTUALLY INVADED KUWAIT. That made all the rulers in the area extremely nervous and malleable to our designs.

Just as we infer virtue from technical skill, we seem to assume a hundred-percent moral certitude when the balance sheet is barely in the black for us. It IS a fact that Kuwait stole oil from Iraq. As are most of our Arab allies, Kuwait is a reactionary dictatorship. They all exploit their people. In the case of Kuwait, only a privileged few citizens do well. Imported workers, who make up the majority of the population, have absolutely no rights. The prospect, in the region, of democracy sprouting roots is almost nil.

It's also a fact that the U.S. sees an opportunity to re-establish itself as a world power, with all its attendant commercial advantages, and was looking for an opportunity to show its prowess. Philip Agee, the former CIA agent (barred from re-entering this country), thinks the war was engineered by the Bush Administration just for that purpose. It was not diplomatic stupidity on our part, he claims, but cynical design when a State Department official told the Iraqis we had no interest in protecting Kuwait. (1) I'm not sure I'd go that far, but Grenada and Panama were too local and too small to send out the proper message. The Iraq War is just the right size and, to boot, in the right location.

There may be justifiable wars, and I suspect, reluctantly, that this was one. But war should be a last resort and not the first. The "Vietnam Syndrome" served us well and I hope it isn't dead. Patriotism is fine and dandy as long as it implies good feelings for the land and its people, and not an lockstep following of any administration's line. Flags should identify public buildings and ships at sea, and not be the subject of idolatry.

My greatest fear is that we'll start selling our military forces to the highest bidder, and our young people's lives will become our chief export. The best way to avoid war is to promote popular government. Economic ideologies, totalitarian states, and religious fervor have been responsible for all this century's wars, but I can't think of a single instance when one democracy has declared war on another. Ever! Not any time in history!

As to the "New World Order," I'm not ready, just yet, to put on an arm band.

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(1) Agee, Philip -- "Producing the Proper Crisis," "Z Magazine", Oct '90. (An electronic form of this article may be downloaded from

the Skeptic's BBS as "GULF-WAR" -- 415-648-8944.)

## WMMR, THE ENFORCER OF AUTHORITY

by Brian Siano

Secretary/Editor, Delaware Valley Skeptics

[Censorship is a continuing problem, used most often to enforce a political agenda under the guise of protecting public morality. Increasingly, as Brian Siano observes, it is used to cynically promote commercial interests without regard to common decency or respect for individual political views. ...And this happened in the cradle of democracy, Philadelphia. -- Yves Barbero]

Singer Sinead O'Connor has a policy of not allowing any national anthems to be played before her shows. Since, nine times out of ten, rock concerts aren't preceded by the "Star Spangled Banner," nobody really took much notice of this, and no feathers were ruffled.

However, when Ms. O'Connor threatened to refuse to perform at a recent concert in New Jersey, radio stations in the area found a dandy way to boost sagging ratings: organize Anti-Sinead activities fit for the whole family. WMMR's John DiBella, once the highest rated DJ in the Philadelphia area, decided that it'd be healthy and humane to hand out American flags at Ms. O'Connor's show at the Mann Music Center, and let the crowd give her what-for.

If the people at WMMR have ever actually paid attention to what happens at a rock concert, the results were predictable: A good chunk of the audience waved their souvenir flags and chanted what they thought was the National Anthem during O'Connor's show. Quite a few of those flags wound up being thrown at the stage. The audience who went to hear O'Connor sing was cheated, in having to put up with this.

Let's put things in perspective, so we can understand what WMMR has become. In 1966, John Lennon, in an offhand comment about the Beatles' popularity, remarked that they were bigger than Jesus. True or not, this sparked a massive wave of record-burnings and public protests. Lennon was forced to apologize, saying that he didn't have anything against Jesus, but that a lot of His followers were "a bit thick. They're the ones who ruin it for me." True enough.

If we were to ask the people at WMMR "If you were running a radio station then, would you have organized some protest over John Lennon?" Sure they'd say "No," but it's easy for them to say that; the Lennon flap happened twenty years ago, and Lennon is something of a secular saint. This week, when Sinead O'Connor ticked a few "patriots" off, WMMR was staunchly on the side of the thimblebrains who burn records. I wonder how they would've dealt with the Lennon of 1973 who was far more critical of the U.S. than Sinead O'Connor



equipment available to us for final drafts from our dedicated subscribers, but it'd be really nice to have even a basic machine available at the editor's office to view working drafts without travelling across town.

Contact Yves Barbero at 415-285-4358.

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(See this issue's insert or the Winter 1991 issue of the "Skeptical  
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Robert Sheaffer, Technical Writer, UFO expert  
Robert A. Steiner, CPA, Magician, Lecturer, Writer  
Ray Spangenburg, Science writer  
Jill C. Tarter, Ph.D., U. C. Berkeley

## CALENDAR

April Meeting

NATURE OF EVIL -- CULT VICIOUSNESS

by John Hubner

Tuesday, April 16, 1991, 7:30pm, Gallery Theatre, Skyline College,  
3300 College Drive, San Bruno.

Watch for coming events in the BAS Calendar, or call 415-LA-TRUTH  
for up-to-the-minute details on events. If you have ideas about  
topics or speakers, leave a message on the hotline.

**WARNING:** We **STRONGLY URGE** that you call the hotline shortly before  
attending any Calendar activity, to see if there have been any  
changes.

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