on an emergency basis. It was then announced that Louis Powell, a Black warden from Raleigh, had been asked to take over the women's prison on a permanent basis.

WOMEN REJECT 'CONCESSIONS'

The women prisoners decided to reject the official response. On June 19, inmate representatives met for several hours with prison officials, but finally Edwards declared the talks deadlocked and announced negotiations were over. Several observers present from the Justice Department offered to act as mediators, but the inmates felt they were basically on the side of the prison officials and could not be trusted to take an impartial position.

Once the officials had made the decision to break off negotiations and use force, they acted to block public knowledge of how much violence was used. Reporters were kept out of the prison and a group of about 100 prison supporters was forced away from the prison gates by police to a position across the street, from which they could not see what was going on in the prison yard.

Some official statements denied that any violence was used at all. Gene Anderson, a personal aide to North Carolina Gov. Holshouser, present at the prison, said he did not see any beatings by guards. He claimed the inmates went peacefully to their dormitories when ordered to do so by guards. Anderson also said that most of some 17 prisoners reporters saw being carried out on stretchers were just "overheated and overexhausted." Another prison official claimed that some of the inmates were injured fighting among themselves, because, he said, not all of the inmates at the prison supported the protest.

Some of the inmates carried out were described by observers as bleeding. Others suffered from smoke inhalation from a fire that started inside one dorm. At least one of the injured women was pregnant.

BLAME 'OUTSIDE AGITATORS'

Afterwards, officials blamed the violence at the prison on "outside agitators," especially Celine Chenier, a leader in Action for Forgotten Women, the Durham-based prison reform group. Chenier has been actively pushing for improvements at the women's prisonincluding abolition of the laundry-for the past year, by methods ranging from legislative lobbying to a demonstration outside the prison last November.

The attack on Chenier by Gov. Holshouser's aide could presage a broader attack on the prison movement in North Carolina. Earlier in the week, a North Carolina legislator demanded the state's general assembly investigate what he called "a subtle communistic influence" at work in North Carolina prisons.

Meanwhile, retaliation against inmates who took part in the rebellion has begun. Thirty-three women, labeled 'ringleaders' have been transferred to a medium-security men's prison near Morganton, N.C. (The Correctional Center for Women in Raleigh is the only women's prison in the state.) Sixty women have been locked into Dorm C, the segregation section of the prison. Ninety others are being considered for reclassification and loss of privileges. It is not known whether criminal charges will be filed against any of the inmates involved in the protests.

> --bob mcmahon/ guardian

INDIA continued from page 4

class of India has not faced a similar situation for years." The business pub-lication also noted that "the Bengali peace is vanishing."

In the minority states of Nagaland and Mizoram there is continuing armed struggle. And in some districts of Bihar and Andhra Pradesh there has been a renewal of armed attacks on police stations and assassinations of landlords.

In the more industrialized state of Maharastra, the government was forced by growing militancy to compromise in a strike of 450,000 government workers.

INTERNATIONAL REACTION

Internationally, the crisis has pro-

voked varying reactions. The Soviet Union, which has been attempting to extend its influence over India for years. has given all-out support to Prime Minister Gandhi, accepting her thesis that India, not the rule of the Congress Party is threatened by a combined internal and external conspiracy. The USSR, which has invested large sums in economic aid to India, appears to be basing its policy entirely on the political survival of Gandhi. The Soviet press has made no mention of the suppression of constitutional liberties.

China's Hsinhua News Agency, however, pointed out that in the face of internal opposition Gandhi had created "a bitter mockery of bourgeois democracy." Describing the steps taken by the Indian government to maintain power, and in particular the prime minister's electoral predicament, the Chinese news agency observed that the situajuly 10, 1975 - 13

tion in India exposes the "unstable and weak ruling position of Indira Gandhi."

The public reaction of the Ford administration has been evasive and ambiguous. Some officials shed crocodile tears about the suspension of civil liberties. An unnamed high-ranking U.S. official said that the U.S. did not wish to comment to avoid giving the Indian government a pretext for charging U.S. interference. The same official, sounding much like Henry Kissinger, added that the U.S. was interested in stability in South Asia and was concerned that the situation "might deteriorate to the point of mass riots or intervention by China or the Soviet Union." Taken as a whole, U.S. official comments seemed to imply that the U.S. was looking for a way to extend its influence in India.

-guardian

ones relate to increased clotting in the blood vessels. Deaths due to blood clots in the head, lungs, and heart amount to about 30 per million pill users per year slightly less for young women, a little more for those over 30 years old. Rarely a complication of oral contraceptives will require hospitalization, but since birth control pills seem to improve things like benign cysts of the breast and ovary, the net effect on hospitalization is about zero.

The IUD has a very different safety record. Its mortality risk is very lowabout 5 deaths per million wearers per year. But IUD wearers have non-fatal complications that result in hospitalization for approximately 5 per 1000 wearers per year (i.e., 1/2% of wearers per year). These are most often infections or hemorrhages, but they also include infected pregnancies and perforations of the uterus that might lead to major surgery

The mortality rates quoted above are upsetting, of course, but it's important to remember that for neither method are they as bad as the risk of death that goes along with being pregnant.

Putting all this together, then: birth control pills can be the most effective way to prevent pregnancy if they are used correctly, but they carry a higher risk of a fatal complication than does the IUD. IUD's may be more effective than the oral contraceptives for the woman who has difficulty taking her pills on time. The IUD's mortality rate seems to be lower than that of the pill, but its risk of causing a non-fatal hospitalization is something to be concerned about.

If you don't need pregnancy protection very often, if you're having intercourse only once a month or less, you might be better off relying on a diaphragm or a "non-medical" contraceptive such as foam. They're more of a hassle, but they don't have any bad side effects. The man in your life might well be willing to use rubbers (condoms), a reasonably effective and very safe method that's been around since before BC (Blue Cross). Foam and rubbers together are even more effective and are still very safe.

Someday perhaps there will be a hormonal contraceptive for men, but our male-dominated technology doesn't seem to be in a hurry on this one. In the meantime, maybe someone will write in and ask me about vasectomies.

-- dr. sawyer legoff

Send health questions to: Great Spockled Doc, Box 7847, Atlanta, Ga. 30309.

DOC

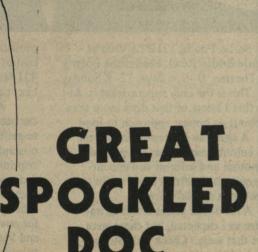
protection, the most effective, in fact, of all methods except total abstinence or surgical sterilization.

However, once the human factors enter the picture, such as forgetting to take pills or simply refusing to continue because of the occasional nausea or bloated feeling, then the odds don't look so good. Over extended time periods in the real world of human beings there may be as many as 24 pregnancies per 100 woman-years among women who are trying to use standard birth control pills. Using some of the variations such as "mini-pills" or "sequentials" it can be even worse.

The effectiveness of the IUD (intrauterine device, "loop," or "coil") is a different story. Regardless of which brand the doctor or nurse inserts, the pregnancy rate is 2 to 4 per 100 womanyears for the woman whose IUD is correctly in place and checked monthly (feel the string with your own finger). But once again the real world isn't that simple. Actual users of the IUD have from 6 to 16 pregnancies per 100 woman-years-many of them because of unnoticed expulsions of the device or failure to check it properly. These pregnancy rates with the IUD can be improved quite a bit by using second methods (e.g., foam or rubbers) during the middle of the menstrual cycle.

When you're thinking about these unpleasant facts of contraceptive effectiveness, it's helpful to remember that early abortions are not readily availablestill too expensive (about \$160) but much cheaper than bearing an unwanted child.

Contraceptive safety is certainly something to think about, too. The pills have been linked to a variety of unpleasant effects, but the most serious





What's the latest in the birth control controversy?

Which is safer and more effectivepills or IUD's?

--- free & fumbling

Medical contraception for women still leaves a lot to be desired. Like all else in medicine and life, you have to make some tough compromises between what you want and what you can get. But it's best to make your choice based on the clearest possible understanding of the facts. Here are a few to think about

Let's look first at contraceptive effectiveness. This is easiest to measure as the number of pregnancies per 100 women using the method for a year (i.e., pregnancies per 100 woman-years of use). Non-contraceptors with typical sex lives (whatever they are) can expect about 80 pregnancies per 100 womanyears. Women using standard birth control pills, correctly and regularly, will have a pregnancy rate of less than 0.1 per 100 woman-years. That's excellent