

Monologue



Chocolate syndrome more good, than bad

By Joel Miller
Photo Editor

Having to admit to one's self that you are a chocoholic is a step in the wrong direction. The subtleties of trying to conceal the fact are more numerous than the number of chocolate chips in a bag of Hershey's Mini Morsels. Such as frantically searching for the last double fudge brownie hiding in the back of the bottom right hand drawer of my desk and scouring through all the empty Snickers and Milky Way wrappers to find my last fix of the day. Or so I think.

On the drive home I slam on the brakes at every other 7-11 as I dive into the store putting the clerk into shock at the sight of foam frothing from

my mouth. Just one quick Chunky for the road.

Even my loved one becomes leery when she kisses me. She knows something's wrong, as she notices brown smudges on my shirt collar.

Sleep is no escape from the affliction either. After a hard day's work of chocolate mousses or cheesecake. I go to sleep only to wake up in a cold sweat dreaming of a triple layer chocolate ice cream cake.

Yes, I know when I have a monkey on my back. It's when I mix a hair of the dog of malted chocolate milk in the morning. Fortunately for me, there's no cure. Only a dark side of my Dr. Jeckle/Mr. Hyde personality. Speaking of dark, I think I have a Hershey's Special Dark stashed in my bag.

'Right to life' philosophy marked with selfishness

By Steve Lundgren
Rhapsody Editor

An infant was found recently in a trash bin at a university, barely alive. Apparently the product of an unwanted pregnancy, the child had probably been disposed of by its mother with the hopes that some samaritan would find it and take it in. But possibly, the child had been left to die.

She was alive. That is to say, her heart beat faintly and she breathed, but she appeared to be comatose. And despite much medical attention at a nearby hospital, her condition worsened until she needed life-support systems.

An examination there revealed two things: she was about a week old, and she had been born missing 80 percent of her brain. But her heart continues to beat. Should it continue to do so with the life-support systems, a feat on which attending doctors placed fifty-fifty odds, she will be a complete vegetable, unable to respond to all but the most basic stimuli.

At this writing she is still "alive." Her case is an uncommon one but definitely not unheard of. However, it has lent ammunition to both factions in a current minor warfare. One faction claims the right for all humans to live at any cost. The other advocates the right to "death with dignity."

The essence of this struggle lies in the definition of life; where it begins and where it ends. Although each side believes its point of view to be right and moral, I think this struggle is not one of morals. Rather is it one of misguided

or even false altruism versus a natural truth, that is, natural selection. It also includes a question of social responsibility to the living dead, those tragic souls whose privilege to think, to act, to exist as a human should, has been denied by accident or folly of nature.

Should a body incapable of functioning on its own be kept "alive" electronically? Is a pulse so sacred that it should be artificially maintained through a crisis that by nature would stop it, only to preserve a warm body and nothing more? I think not. A life sustained mechanically or a body confined indefinitely to a bed and dining through a tube is not life at all.

In a number of cases with brain-dead adult patients decisions have been reached. The plug was pulled on Karen Ann Quinlan after many long and emotional debates, but by no means did that set a precedence. The controversy becomes even hotter when an infant is involved.

At this point, I believe it is appropriate to broaden my discussion to include those children born so disfigured that without immediate and major surgery they would die soon after birth. Every year many babies are born thus and many are patched together with little consideration for the possible meaning of their deformities. The proponents of this may argue that such children should be given every chance to mature and live "fulfilled" lives. Idealistically they are right, and those children that are saved often do lead full lives. But by design of nature there is bound to be a number of offspring not suited at birth for survival,

either by way of genetic flaw or induced deformities. To fight this law after a child is born cannot be beneficial overall to society or our species. The battle should be fought prior to conception or not be fought at all.

I am very skeptical about this philosophy that calls for preserving a life regardless of the strikes against it. I believe in the sanctity of life, but I also believe that certain laws of nature should be obeyed.

The sometimes spurned but logically inescapable theory of natural selection must be applied to my argument. Although our inherent human ego often forbids the thought, we are subject to natural selection, or at least are meant to be, as is a shrew or an antelope.

Until the last 100 or so years those children born weak or disfigured did not survive to reproduce, let alone to suffer for the greater glory of science and those who overextend the "right to life" philosophy.

I believe there is a great amount of selfishness behind that philosophy. Some people who believe in it may have strictly altruistic motives, but I think many advocate it because they feel pious in doing so. In either case, those who would not let a human die when it is born with a fatal defect are in reality not doing a favor for either the individual or the human race. Their efforts may result in a functional person, but who is to say the next or third generation of his or her family will not inherit the same or similar defect? The suffering may extend over generations. Or in the case of the child I discussed at first, there may be no suffering, only a pulse.

Clackamas Community College

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