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Smoke fills the room to the brim; the sun spills through the front door screen, splitting the smoke like a laser fired from the ship of Dark Vader. Music swirls through the room and caroms off the four walls. Never mind the delicate ears that itpierced.

There were some 200 assembled for the bi-weekly flight-ball doubles tournament. The second largest crowd ever, sat anxiously, waiting to see which team would take first prize, and along with it the bragging rights for the next two weeks. Half of the assembled throng expected either the team of Henry Mitchell/ Willie Jordan or DeDe Chambliss/ Art Chatt to win the championship.

The underdog syndrome said Ted Hampton, two times mixed doubles champ and Ben Rutly. Nobody, but nobody expected what eventually happened.

A stunned crowd sat in silence as the unlikely pair of Harold Adams/ Joe Simpson beat one opponent after another, and when the smoke cleared, Adams and Simpson were the winners. Simpson screamed and Adams smiled as they collected their prizes.

And believe me, this was the upset of the year. And the Cleo-Lillian crowds are still shaking their heads. OSU's Mark Radford is reportedly playing well in the Los Angeles summer league. The 6-4 guard taken in the second round by the Seattle Supersonics, has impressed coach Wilkens with his offensive skills.

Sports Talk

By Ron Sykes Sports Editor

USC's two time All-American Ronnie Lott, taken by the San Francisco 49ers in the first round, but still unsigned, will probably be the starting cornerback for his new club. Lott was All-American at free safety for the Trojans.

The 6-1, 205 pound Lott was very impressive in the 49er mini-camp, prompting coach Walsh to say, "Ronnie will contribute right away. He has the strength and speed to play well in this league."

ERIC de FREITAS INDUCTED INTO NATIONAL BOWLING ASSOCIATION HALL OF FAME

Eric de Freitas, an active bowling figure for over 40 years, was inducted recently into the National Bowling Association Hall of Fame at an awards banquet held last month. De Freitas was one of the founders and former president of the NBA. He is the first black to ever achieve this honor. A member of the AMF staff of champions for over 22 years, de Freitas is regarded as an outstanding bowling instructor, particularly in junior bowler development. A certified American

Junior Bowling Congress instructor and coach, he was the coordinator of youth activities at Madision Square Garden Bowling Center for 10 years and is currently associated in the same capacity with Mid City Lanes in New York. He was named Coach of the Year by the New York Bowling Propuetors City Association in recognition of his work with the United States Youth Games in which he coached the New York team to four championships and a second-place finish in a fiveyear span.

De Freitas has received numerous citations for his civic, charitable, and bowling involvement including the United Negro College Fund, March of Dimes, Talladega College Alumni Association and Heart Fund. In 1975, he was named to the Hall of Fame of the Harlem Professionals Organization for his work with underprivileged youngsters.

De Freitas retired from the Anaronda Company after 32 years of service and is now associated with Shearson Loeb Rhoades, Inc., in New York. He resides with his wife, Toily, in New York City. We salute Mr. de Freitas for a job well done. Football is just around the corner, and our neighbors to the North (Seattle) are preparing for the oncoming season. So what's in store for the Seahawks? If Jack Patera doesn't get any help defensively, then he'll be looking for another job. Seattle needs help at running back and wide-receiver. They won't make the play-offs this year and after showing early game promise, won't be a play-off contender for a few years yet.

More on Leonard vs. Hearns. All this talk of Hearns winning, both surprises and confuses me. Doesn't Leonard still have the fastest hands ever? Doesn't he still have the speed and reflexes of the Mongoose? Isn't he still a master boxer and puncher? Then, how possibly can Hearns win? And as always, this is only one Black man's opinion.

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Cell Talk By Asmar Abdul Seifullah Aka Joe West

(Writers Comment: At this point, we continue with the installment of last week's article. It is unfortunate that we are unable to bring you all of the testimony - consequently, we will pick up with the testimony of Dr. Gualitieri, a psychiatrist who testified as an expert in the overcrowding case. Dr. Gualitieri addresses both medical and psychological treatment at Oregon State Penitentiary.)

Q Doctor, I want to interrupt you and raise a point that Dr. Della Penna raised to the extent that you have identified a problem of increased medical complaint that may or may not be directly associated with the physical problem and to the extent that Dr. Della Penna stated that Physicians do not examine inmates initially in the Oregon State system, but unlicensed medical technicians do. Do you have an opinion as to whether or not those people who are unlicensed physicians are capable of adequately making a determination as to whether the complaint is psychosomatic, if you will, or more directly related to the physical problem? A In some cases, yes. Obviously, in some cases an untrained person can distinguish between physical symptoms that represent an underlying emotion. But in a very, very substantial proportion of cases it requires great skill and training to make a differentiation. It is very difficult, even for trained specialists to make that decision. So I think the answer to your question has to be no. I don't think the corpmen are the best people to make a differentiation. I think under that circumstance these corpmen are certainly being asked to perform a great deal and to take on a great burden and a great responsibility; a lot of which I feel they are not equipped to handle.

that this information that the corpmen have a standing order to dispense a drug called Thorazine (ph), 75 to 100 milligrams intermuscularly and they can give this presumably for psychotics or aggravated behavior as frequently as twice in 12 hour periods.

In our hospital here, when a resident prescribed Thorazine (ph) in that dose in the first place, it's discouraged very, very strongly. We are almost invaribly able to control acute aggravation with oral medication, oral or psychological counseling and sometimes just talking to a person in a quiet, isolated setting. But when a psychiatrist, resident or attendant dispenses the medicine, he doesn't give as much or as frequently. There is a very, very serious risk of what is called a hypertensive reaction. The blood pressure falls and the patient goes in shock. They can quickly simply die under these circumstances. And what happened in psychiatric facilities in the past and now psychiatrists themselves are extremely aware and weary of that practice. And save it for some of the most extreme circumstances where you have medical back-up and it is sufficient to get one of these hypertensive reactions, immediate medical care, and do something about it.



Q. Doctor, in your discussions with Dr. Della Penna, did he relate to you certain facts with regard to dispensing of certain drugs?

A. Yes. Dr. Della Penna pointed out that the medical facility appears to be physically adequate with reasonable number of staff. However, he pointed out there are no written guidelines, hardly any supervision of the medical practices of the corpmen and the people who work in the infirmary. And many of these corpmen are responsible for the dispensing of medications.

Now I have no problems with the corpmen dispensing medication such as aspirin, for example, or cough medicine. I think that corpmen are perfectly capable of dispensing more potent medication when there are written protocols. Frequent, careful supervision of what they do. But one circumstance I have a particular problem with and I can predict and I will tell you -if this practice continues for much longer, somebody is going to die in that prison.

(Writer's Comment: Obviously medical treatment in Oregon State Penitentiary has a long way to come before it reaches the level of humane and medical standards. But there is no excuse for the haphazard and irresponsible manner in which inmates are given medical treatment behind these prison walls. I'm sure that the administrators of Oregon State Penitentiary are aware of the inadequacies of the present medical system. But one has to question their ability to bring about meaningful change considering the economic state of the State of Oregon. It now becomes a question of money verses life. Life which is the most precious commodity on the face of the earth must be preserved no matter where or how it exist. I submit to you that the life of a prisoner must be given the same merit as a freeman.

If our society -- if mankind has evolved to the state where people in institutions can be warehoused, treated like animals, denied medical rights, civil rights and the right to life -- then we might as well throw in the hat. Prisons and prisoners are extensions of society can't be healed of its ills until the American Penal System is brought up to a humane level of cooperation. Take a look at yourself and might see tomorrow's prisoner peering back at you!)

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