

Withdrawal/Redaction Sheet

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
001a. letter	To Maggie Williams from Monica C. Gaunt re: injury (3 pages)	08/02/94	b(6)
001b. report	Medical case file re: Monica C. Gaunt (9 pages)	01/03/94	b(6)
002. letter	To Margaret Williams from David C. Gironda re: Declaration of Independence (partial) (1 page)	06/17/94	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Maggie Williams (Correspondence)
OA/Box Number: 17604

FOLDER TITLE:

[Correspondence from 1994]: G [1]

2013-0359-S

ry1321

RESTRICTION CODES

Presidential Records Act - [44 U.S.C. 2204(a)]

- P1 National Security Classified Information [(a)(1) of the PRA]
- P2 Relating to the appointment to Federal office [(a)(2) of the PRA]
- P3 Release would violate a Federal statute [(a)(3) of the PRA]
- P4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
- P5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
- P6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Personal record misfile defined in accordance with 44 U.S.C. 2201(3).

RR. Document will be reviewed upon request.

Freedom of Information Act - [5 U.S.C. 552(b)]

- b(1) National security classified information [(b)(1) of the FOIA]
- b(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
- b(3) Release would violate a Federal statute [(b)(3) of the FOIA]
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- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

THE WHITE HOUSE

WASHINGTON

October 4, 1994

Virginia M. Gambriel
2951 November Court N.
Bowie, Maryland 20716

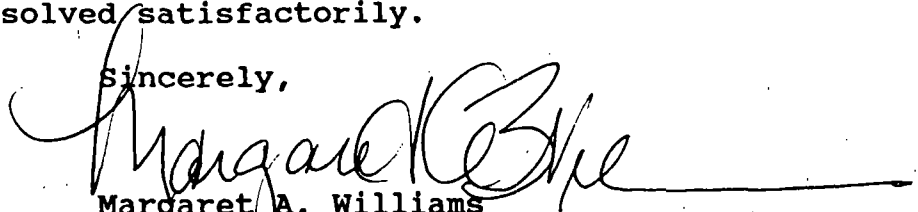
Dear Ms. Gambriel:

Thank you very much for your letter concerning the adoption of your son, Glen. The accompanying letter to Duke G. Lokka, Consular Officer of the United States Embassy in Guatemala, poignantly describes your long process to adopt Glen.

Mrs. Clinton greatly appreciates your expression of trust and confidence in her by your asking for her assistance. To expedite your request, I have forwarded your letter to the Office of Agency Liaison.

I appreciate your patience and hope that this situation is resolved satisfactorily.

Sincerely,



Margaret A. Williams
Chief of Staff to the First Lady

THE WHITE HOUSE
WASHINGTON

Date Oct 3, 1994

MEMO FROM MAGGIE WILLIAMS

TO: Office of Agency Liaison

The attached is for your:

Information ☐

Advice ☐

Action ☒

COMMENTS:

This woman has been
given the "run around"

VIRGINIA M. GAMBRIEL
2951 November Court N.
Bowie, Maryland 20716
Home(301)249-8473 Work(301)423-5688

August 22, 1994

The White House
Office of the First Lady
Margaret A. Williams, Chief of Staff
Washington, D.C. 20500

Dear Ms. Williams:

Attached you will find a copy of a letter sent to Mr. Duke Lokka, Consular Officer, U.S. Consulate in Guatemala. I am an adoptive parent of a little boy in Guatemala. My case, not isolated by any means, has been dragging on for 1 1/2 years and there appears to be no end in sight. The letter to Mr. Lokka explains the facts in my particular case. Unfortunately, space does not allow for me to elaborate more.

Please, atleast read the attached letter. I am painfully aware after many months of frustrating and fruitless communications with my elected officials this letter may be of no interest to anyone. I must remain optimistic that somewhere, someone will read about my situation in Guatemala and express an interest in assisting me and my son. **Please**, I need your help; my son needs your help. I need someone else to care enough to get involved.

Very Truly Yours,

Virginia M. Gambriel
Virginia M. Gambriel

THE WHITE HOUSE
WASHINGTON

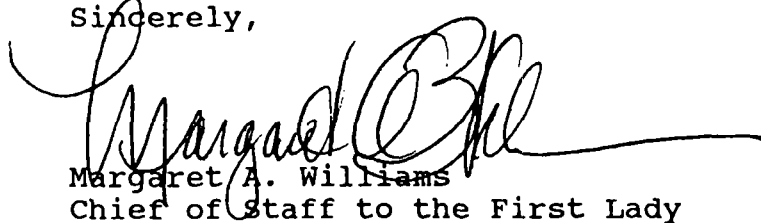
August 12, 1994

Monica C. Gaunt
945 Crestmark Boulevard, Suite 432
Lithia Springs, GA 30057

Dear Ms. Gaunt:

Thank you for your letter of concern. I have forwarded your correspondence to agency liaison. Please be assured that your concerns are very important to the President.

Sincerely,

A handwritten signature in black ink, appearing to read "Margaret Williams", with a long horizontal flourish extending to the right.

Margaret A. Williams
Chief of Staff to the First Lady

THE WHITE HOUSE

WASHINGTON

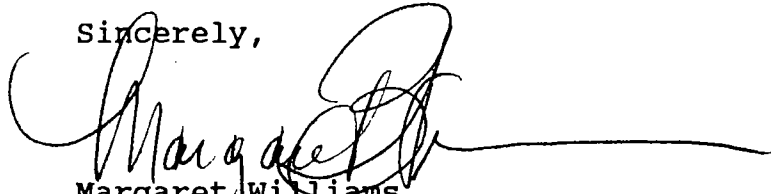
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Sincerely,



Margaret Williams
Chief of Staff to the First Lady

The Reason Why I
Made Copies is
Because I have
Difficulties Writing

- PLS. do form
Draine
Please write that I letter
am sending to agency
Wason
MA6010

PLS. date
all ltrs.
8/17

Withdrawal/Redaction Marker

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Crippled by Computers

As more U.S. workers spend their days at keyboards, hand injuries and lawsuits are multiplying

By JANE M. HOROWITZ

AS JOBS IN JOURNALISM GO, Grant McCool's was a plum assignment. Based in Hong Kong for the Reuters news service, McCool covered breaking news throughout east Asia, traveling to South Korea, China and Pakistan. But in 1989, after five hectic years, the native of Scotland was ready for a change. That's when his bosses transferred him to New York City to be an editor.

That's also when the trouble started. After typing on his computer keyboard for hours a day over several months, McCool developed excruciating pain in his hands: some mornings he would awake with his arms throbbing and burning. "The doctor told me to stop typing immediately," recalls McCool, 32. He hasn't written or edited a story on deadline since. Nor has he been able to clean house, carry heavy objects or play squash. He cannot even drive a car; controlling the steering wheel

with his injured hands is impossible.

McCool suffers from a severe case of cumulative trauma disorder, a syndrome that results from overusing the muscles and tendons of the fingers, hands, arms and shoulders. The condition brings pain, numbness, weakness and sometimes long-term disability. Such problems, more commonly known as repetitive stress injuries (RSI), now strike an estimated 185,000 U.S. office and factory workers a year. The cases account for more than half the country's occupational illnesses, compared with about 20% a decade ago.

Typical victims are meat packers who slice scores of carcasses a day, or autoworkers who drive the same screws hour after hour. But a particularly fast-growing category of victims includes white-collar professional and clerical workers who spend their days pounding away at keyboards. An increasing number are responding in a white-collar way: with lawsuits. Hundreds of injured telephone reservationists, cashiers, word processors



Many victims must don protective splints and limit time spent typing

and journalists, McCool among them, are suing computer manufacturers, blaming the machines for their disabilities. IBM, Apple Computers, AT&T and Kodak's Atex-division, which produces a word-processing system designed for journalists, have all been named in the suits, which demand damages of up to a \$1 million or more per victim. Last June, a U.S. district judge in Brooklyn lumped together more than 44 suits against 63 manufacturers in an attempt to arrive at some ground rules for dealing with such cases. More than 200 cases have been added since. Although the final outcome could take years, some liability experts predict that the ultimate payout on RSI suits could rival the \$4 billion paid on asbestos-related claims.

Employers are quickly learning that they too must face up to the problem. Already, RSI costs about \$7 billion a year in lost productivity and medical costs. Moreover, under the provisions of the Americans with Disabilities Act, which went into effect this summer, employers are now required to accommodate "reasonably" workers with physical impairments. Companies may have to transfer employees with RSI to less stressful jobs or give them special help. Increasingly, unions and oth-

HEAD Directly over shoulders, without straining forward or backward, about an arm's length from screen.

NECK Elongated and relaxed.

SHOULDERS Kept down with the chest open and wide.

BACK Upright or inclined slightly forward from the hips. Maintain the slight natural curve of the lower back.

ELBOWS Relaxed, at about a right angle.

WRISTS Relaxed and in a neutral position, without flexing up or down.

KNEES Slightly lower than the hips.

CHAIR Sloped slightly forward to facilitate proper knee position.



SCREEN

At eye level or slightly lower.

FINGERS

Gently curved

KEYBOARD

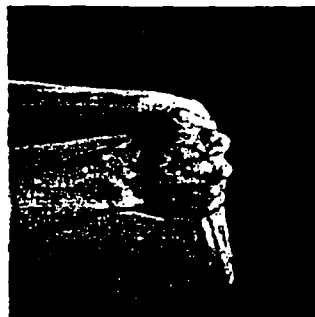
Best when kept flat (for proper wrist positioning) and at or just below elbow level. Computer keys that are far away should be reached by moving the entire arm, starting from the shoulders, rather than by twisting the wrists or straining the fingers. Take frequent rest breaks.

FEET Firmly planted on the floor. Shorter people may need a footrest.

Source: Miller Institute, St. Luke's-Roosevelt Hospital



PHOTOGRAPHS FOR TIME BY JAMES KEYSER



Warm-up exercises can prevent injuries: gently massage hands; press palm down to stretch underside of forearm; press fist down to stretch topside of forearm. Hold positions for at least 10 seconds.

puters would seem to be an improvement over clunky typewriters. But word processors pose special problems. They allow workers to sit with their fingers flying across the keyboard at 240 strokes a minute for hours without a break. A typewriter, by contrast, forces workers to pause every so often to move the carriage or change the paper. The amount of time spent at the keyboard is critical: a study in Australia found that people who typed for more than five hours a day at a computer had 12 times as great a risk of developing *RSI* as those who spent less time.

Workers at computer stations may position their hands over the keyboard with the sensitive wrist cocked upward or downward, compressing the tendons, ligaments and nerves that run through its narrow confines. People working with typewriters are more likely to hold their hands suspended straight forward, the wrists flat. Old-style typewriter keys also generally have a certain amount of spring, while computer keys often strike against a hard, unforgiving base. "These simple things sound trivial, but they are not when you're locked into one position, working all day long," says Marvin Dainoff, director of the Center for Ergonomic Research at Miami University, in Ohio.

The modern office has left many employees with little variation in their daily tasks. "Instead of running to the file cabinet to pull out information or going to the library, workers can do everything they need to by just sitting at the keyboard," says Silverstein. "They don't even have to get up to talk to each other. Now they have electronic messaging." Even today's phones with push buttons instead of dials strain the same tired tendons.

Computer makers defend their machines vigorously. They stress that the problem lies not with their keyboards but with how they are used. They also point out that other office equipment, such as chairs and desks, must be designed ergonomically, which means that they fit the individual's body and specific job needs. Says IBM spokesperson Brian Doyle: "IBM's position is that aches and pains in the workplace can come from a number of sources, including posture, adjustment of equipment and the amount of time spent performing a given task. Applying good work habits and good ergonomic principles is a shared responsibility of both employers and employees."

But U.S. employers have so far done a poor job of shouldering this responsibility. Chairs, desks, lighting are chosen more on the basis of price or decorating schemes than ergonomics. "We're just not doing as much as we could," says

er worker groups are demanding that companies provide better keyboards and office furniture and give employees more frequent breaks to reduce the risk of injury. The Occupational Safety and Health Administration has announced plans to create national workplace standards for the prevention of *RSI*.

How ironic that computers, the very technology celebrated for making office work easier, would cause such harm. By now, nearly half the U.S. work force—some 45 million workers—use computers (though not all spend hour after hour punching keys). "We thought technology was going to help us, which it does. But we did not consider that we would also have to adjust the workplace at the same time," says Barbara Silverstein, research director of Washington State's department of labor and industries.

RSI involves not just one but an array of ailments resulting from tugging, pounding and straining crucial tissues in the upper body. It usually begins innocuously. "People think they've had a particularly hard day or that they're getting old," says Frank Fernandez, an Oakland, California, attorney who has filed suit against several computer manufacturers on behalf of *RSI* sufferers.

But as the hands continue to be overworked, symptoms worsen. Tendons,

which are like long pulleys directing the movement of the fingers from many places in the hands and arms, can swell up, producing painful tendinitis. Soreness can also result from the inflammation of sheaths surrounding the tendons. Muscles in the forearm that control the movement of fingers may become irritated, a condition called myositis. As tissues become inflamed and swollen, they can press on nearby nerves, causing tingling and weakness in the fingers. Sometimes scar tissue develops in the area. All together these injuries, if not treated, can result in diminished coordination and strength: patients may literally lose their grip and have trouble managing simple manual tasks.

AMONG THE MORE EXTREME—and less common—cumulative traumas is carpal tunnel syndrome. It develops when tissues in the palmar side of the wrist swell, squeezing a vital nerve that runs through the area. Carpal tunnel syndrome can cause crippling pain for months or years, though surgery can sometimes help.

It is hard to conceive how the gentle patter of fingers over a computer keyboard could do such damage. People have, after all, been typing for decades, and com-

Burn Patients Confront Pain, Fear, Loss of Control

A TOUCH, a brush against a sheet, even an air current, can cause burn patients pain. The searing kind of pain, caused when partial-thickness burns leave nerves exposed, punctuates the constant, underlying pain experienced by the patient.

But physical pain is only one of many personal challenges that burn patients must confront. Psychological factors are so critical for burn patients that a handful of burn centers, including the US Army Institute of Surgical Research (USAISR), Fort Sam Houston, San Antonio, Tex, employ a psychiatric clinical nurse specialist on their staff.

"Fires happen so fast," says Thomas M. Summers, RN, MEd, MSN, a US Army lieutenant colonel and the specialist at USAISR. "In just a short period of time this person moves from being an independent person to somebody who is 100% dependent on other people. The frustration, helplessness, powerlessness that comes out of that is just awesome sometimes. It's more than a person can adjust to in a very short time."

Most of the burn patients at USAISR are men, and their "macho" self-image is often shattered when they are forced to rely on analgesics, relaxation techniques, and other people to help them cope with pain. "Sometimes they begin to see themselves as 'less than' the tough, stoic person they thought they were. There is that sense of not being in control," Summers says.

Empowering Through Choices

The medical staff attempt to impart a sense of power to the patients by offering them choices, however small they might be: Carrots, or mashed potatoes? Iced tea, or milk? Would you like us to dress the right leg first, or the left leg?

Many times, patients will behave inappropriately, at odds with their medical needs. They'll try to get out of bed, or act combatively with the staff members who are trying to help them. Sometimes, notes Summers, a metabolic or physiologic imbalance could be causing the behavior, but other times it's a grasp for control.

Some patients usurp power by simply refusing to eat. If the patient is severely burned and nutrition is critical, a feeding tube is inserted, Summers says. "But once they begin to heal a bit more, and it appears that this is a control issue for the patient, we just say, 'Okay, if you don't want to eat right now, that's fine.'"

Caring for Families

Nursing care at the USAISR includes attending to the psychological and social needs of families of burn patients, and every department of the burn care team is involved in classes and discussion groups for family members.

"What affects the patient is going to affect the family. And what affects the family is going to affect how that patient responds," says Nancy C. Molter, RN, MSN, CCRN, a US Army colonel and

chief, Nursing Service Branch, at USAISR.

For example, family members often fear that their loved one will die when they initially see the burn injury, regardless of the patient's prognosis. Patients can detect this fear, as well as the family's reluctance to be honest with them. (Interestingly, says Summers, the thought of death does not occur to many patients with life-threatening burns until after they have stabilized and the danger is remote.)

As seen with other trauma injuries, Molter says, families of burn patients become anxious and demanding when their needs are left unattended, which actually increases the nurses' work load.

The burn unit at USAISR is spearheading a 10-center study to assess the family's needs over the course of the patient's hospitalization. Similar studies have been conducted on families of patients in intensive care units, but this will be the first study devoted to burns. The goal, says Molter, is to develop interventions to meet the family's needs, rather than developing interventions based on what the nurses *perceive* the needs of the families to be.

Previous studies conducted at intensive care units have shown that the health care team's perceptions of needs and the real needs of families may not coincide (*Heart Lung*. 1990; 19:655-661). —by Teri Randall

Symptoms May Return After Carpal Tunnel Surgery

THE INITIAL relief of carpal tunnel surgery may be shadowed by significant scar pain and weakness in almost a third of subjects after 2 years.

The surgery, in which the carpal tunnel is decompressed by release of the transverse ligament and debridement, is the most common surgery in the worker's compensation population. Painful scars were most common in patients receiving such compensation, compared to patients covered by private insurance or other forms of payment, according to a retrospective review of 60 cases at the State University of New York, Buffalo, School of Medicine.

"This high incidence of symptom recurrence has not been previously re-

ported," says Michael P. Nancollas, MD, a fellow in hand surgery at the western New York school who presented the findings at the American Academy of Orthopaedic Surgeons meeting in Anaheim, Calif.

Five-Year Follow-up

The study found at an average of 5.5 years' follow-up that 30% of all patients rate the results as poor to fair. And 57% report return of some preoperative symptoms, most commonly pain, beginning an average of 2 years after surgery, although only one patient required further surgery. Intermittent pain was reported by 42%, digital numbness by 32%, and tingling by 35%.

No correlation between postopera-

tive results and preoperative symptoms, extent of surgical dissection, physical findings, or electrodiagnostic test results could be identified. Nancollas said.

The 42% of patients covered by worker's compensation had slower initial improvement, and were off work longer — 8.4 vs 1.7 months for non-compensation patients.

Differences between worker's compensation and other patients before and after surgery were also noted in a review of 105 carpal tunnel surgeries in 82 patients at Rose Medical Center and University (of Colorado) Hospital in Denver. The 43 workers' compensation patients were younger and predomi-

(Continued on p 1925.)

(Continued from p 1922.)

nantly male in contrast to non-compensation patient populations, says Bert F. Jones, MD, who also presented results at the orthopedic academy's meeting.

Jones says the study was conducted because while compensation has been documented to be a significant outcome variable in other conditions like low back pain, a literature review turned up no references on compensation as a factor in carpal tunnel surgery outcome.

As in the New York study, compensation patients lost more time from work than non-compensation patients. They were also less likely to return to original jobs or to resume working at all.

"Occupational carpal tunnel syndrome is a different disease," says Nancollas. Since scar tenderness is the most significant postoperative complaint, attention should focus on retraining or on workplace modifications to prevent recurring pain after surgery, and on techniques such as endoscopic surgery that minimize the size of incisions, he concludes.

Endoscopic Limitations

The endoscopic approach to the carpal tunnel may still have important limitations, though, according to another

report at the meeting. In trials on 13 fresh-frozen cadavers by surgeons who had "extensive" clinical endoscopic carpal tunnel surgery experience at three Boston, Mass, teaching hospitals, complete release of the transverse carpal ligament was achieved in only five.

In four others, fine transverse fibers remained that may have been remnants of the ligament, and in the remaining four there clearly was incomplete release, says J. Theodore Schwartz, Jr, MD, previously a Harvard Medical School hand surgery fellow and now practicing in Livermore, Calif.

Schwartz cautions that the endoscope blade comes within 2 mm of neurovascular structures that cannot be directly observed with the particular endoscope used, an Agee 3M (Minneapolis, Minn) Inside Job System.

Incomplete release most commonly occurred distally, "where concern about the superficial palmar arterial arch may have caused hesitation." The fat pad between the edges of the cut transverse ligament obscures the view and may also contribute to incomplete sections, he says.

"The recurrence rate in patients undergoing endoscopic carpal tunnel release must be scrutinized long-term in

light of the high incidence of incomplete sectioning and the very narrow margin of safety," concludes Schwartz.

"We've all heard of sporadic cases of digital nerve and arterial lacerations" with endoscopic release, comments Roy Meals, MD, chief of hand surgery at the University of California, Los Angeles (UCLA) Medical Center.

The fact that the study was done by experienced endoscopists discounts the possibility that a steep learning curve is to blame, says Meals, adding that it "might have been safer for the patients had the authors done the cadaver study first."

Meals notes that neither of the clinical studies examined or controlled for conservative preoperative treatments, or for what guidelines were used to recommend surgery. "So at best we can draw only general conclusions," he says.

"Rather than perfect treatment, we should perfect prevention," he adds.

Summing up, Meals predicts: "We are not going to solve work-induced carpal tunnel syndrome with any kind of surgery." This is no more likely than expecting "to solve asbestos, highway carnage, or any other environmental hazard with surgery," concludes Meals.

—by Paul Cotton

Miscellanea Medica

Jordan U. Gutterman, MD, (JAMA. 1990;263:195-196) has been elected executive vice president of the Albert and Mary Lasker Foundation, New York, NY, and director of the Albert Lasker Medical Research Awards Program (JAMA. 1990;264:2615; 1990;263:1609; and 1989;262:1742). He will continue his clinical and administrative work at the University of Texas M. D. Anderson Cancer Center, Houston. Michael E. DeBaKey, MD, Baylor College of Medicine, Houston, continues to chair the Lasker awards jury.

A smaller space station is planned by the National Aeronautics and Space Administration (NASA) in response to recommendations of the Augustine committee (so named because Norman R. Augustine, chief executive officer of Martin Marietta Corp is chair). These recommendations include redesigning the space station to serve primarily as a biomedical science laboratory, ceasing to use shuttle craft for missions that can be performed without human presence in space, and rethinking schedules for astronauts to return to the moon and go

on to Mars (JAMA. 1990;263:195-196, 347-351, and 489-490). NASA concedes its has experienced "several disappointments" in recent months, but says a permanent return to the moon and exploration of Mars (by the year 2019) might be carried out. Vice President Dan Quayle, who heads the White House's National Space Council, says that the Augustine committee—formal title of which is the White House-NASA Advisory Committee on the Future of the US Space Program—has pointed out "the need for fundamental changes in our civil space program."

Thomas E. Starzl, MD, and colleagues at the University of Pittsburgh (Pa) Medical Center have announced that the novel immunosuppressive agent FK506 will be used in randomized clinical trials to treat patients who have type I diabetes mellitus. The 2-year study will test the drug's ability to arrest the disease during the "honeymoon" phase, when the β islet cells have not yet been destroyed by the autoimmune response. The center is seeking patients aged 18 to 45 years who have been re-

cently diagnosed and have not taken insulin for more than 7 days. FK506, which is less toxic and 50 to 100 times more potent than cyclosporine, has demonstrated powerful immunosuppressive qualities in more than 1000 transplant recipients at the center, and has been shown to reverse autoimmune diseases including psoriasis and pyoderma gangrenosum. Inquiries may be directed to the Pittsburgh Medical Center Referral Communications Center at (800) 544-2500.

Bernadine P. Healy, MD, chief, Cleveland Clinic Foundation Research Institute, is the new director of the National Institutes of Health (NIH), the main campus of which is in Bethesda, Md. Her appointment as the NIH's 13th director was confirmed March 21 by the US Senate. William Raub, PhD, has been acting NIH director.

Editor's Note: Miscellanea Medica normally appears in the Medical News & Perspectives section several times each month. Items submitted for consideration should be directed to the attention of Phil Gunby, editor/director, Medical News & Humanities Division.

THE HIDDEN LIFE OF DOGS

Elizabeth Marshall Thomas. Read by Suosie Kurtz. Time Warner. Two cassettes, 180 mins., \$17 ISBN 1-57042-026-2

"What do dogs want?" That simple question spurred anthropologist Thomas to action. Misha, a husky in her care, has a case of serious dog wanderlust. So she decides to follow him around as he covers large tracts of Cambridge, Mass. With close observation—how Misha crosses streets, urinates, relates to fellow dogs—Thomas begins to decipher a credible version of "dog consciousness." Comparing dogs to their ancestor the wolf, Thomas proposes rationales for the sometimes mysterious behavior of the domestic canine. As narrator, Kurtz (of TV's *Sisters*) reads with knowing reserve, never letting the material come across as too cuddly or cute. On tape, Thomas's manner of anti-anthropocentric observation is personal and enthralling. *Based on the 1993 Houghton Mifflin hardcover. (Feb.)*

LIVE FROM THE BATTLEFIELD

Peter Arnett. Read by the author. Simon & Schuster. Two cassettes, 180 mins., \$17 ISBN 0-671-88659-2

War correspondent Arnett covered the Gulf War live from Baghdad. The job didn't just fall in his lap, however; it capped 30 years of hardcore reporting. In candid but self-stroking terms, Arnett tells how he got where he wanted to go. Born in a sub-nowhere region of New Zealand, the silver-tongued Arnett glibly recounts how he used his verbal smarts to get jobs in journalism. He colorfully recalls his first stop, Southeast Asia, where he covered the early days of the Vietnam conflict for the Associated Press. There, working from the trenches, he filed graphic stories that raised the hackles of President Johnson. The tape leads to Arnett's Gulf War recollections. He describes sneaking makeshift equipment into Baghdad and broadcasting from a downtown hotel under siege. Operating in tricky territory, he landed an exclusive interview with Saddam Hussein. The producers have interspersed sound bites from Arnett's field reports, which crackle with electric energy. The overall emotional tenor of Arnett's spoken autobiography is more measured, conveyed with grace and skill. *Simultaneous release with the Simon & Schuster hardcover. (Feb.)*

MOTHER DAUGHTER REVOLUTION

Elizabeth Debold, Marie Wilson and Idelisse Malavé. Read by Sandra Burr Nova. Two cassettes, 180 mins., \$17 ISBN 1-56100-364-6

Can a feminist polemic serve as a self-

help guide? This tape strives to do just that. The authors call on women to "mother differently" in order to "confront the status quo." They focus on the specific moment that girls enter adolescence. At this time, girls are represented as losing their childhood freedoms and natural sense of authority. A "wall of patriarchy" is shown surrounding them, and their own mothers may "betray" them. As audio, the thesis comes across as brisk and focused. But it's a veritable minefield of buzzwords of political correctness. Daughters are said to suffer from "classism" as well as "racism." Burr reads this material with the breathless enthusiasm that is endemic to the self-help idiom. It's a narrational manner that can seem at odds, however, with the seething anger of the authors' words, even though Burr's reading aims to create an air of comfortable shared confidentiality. *Based on the 1993 Addison-Wesley hardcover. (Feb.)*

CARPAL TUNNEL SYNDROME: THE INVISIBLE THREAT

Kate Montgomery. Read by the author. New Life Options/Stay: Well (14431 Ventura Blvd., Suite 312, Sherman Oaks, Calif. 91423; 818-990-5410). One cassette, 55 mins., \$10.95 ISBN 1-880688-03-4

Computer operators, musicians, weight lifters—beware. Healthy wrists are in jeopardy. That's the message of this tape on CTS (Carpal Tunnel Syndrome), a condition that results from "repetitive motion injuries to the hand." This is part of a new self-help series devoted to work- and sports-related health problems from audio newcomer New Life Options. In it, sports specialist Montgomery counsels listeners with an air of clipped diagnostic efficiency. Statistics and medical jargon abound, followed by long lists of scary symptoms. Exercise segments—"nonsurgical drug-free" corrective wrist techniques—are introduced, augmented by a photo-illustrated pamphlet. Montgomery trades off narrational duties with an unidentified male who contributes a rather pompous voice-over. The second side of the tape is devoted to canned orchestral "exercise" music, somewhat forcedly uplifting in tone. In all, this is a mixed-bag program on an unquestionably pressing subject. *Original production. (Feb.)*

Correction: The Audio Renaissance June tape *Black Betty* by Walter Mosley is based on the W. W. Norton hardcover; it is not based on a Crown book, as listed is our February 7 Spring Audio listings.

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SALES TOOLS

HEALTH HAZARDS: HIDDEN PERILS IN THE WORKPLACE

BY BRISTOL VOSS,
SENIOR ASSOCIATE EDITOR

Desk jobs, it appears, aren't as safe as you would think. While white-collar workers may not operate forklifts or spend long hours on an assembly line, the tools they do use—and the ways they use them—nevertheless pose varying degrees of risk, with even the workplace environment itself coming under scrutiny as a potential hazard.

And it's not just the health of individual employees that's being affected; corporations themselves are suffering, facing soaring workers' compensation claims that have risen 150% since 1980. Combine this with increasingly stringent laws regulating the office environment, and you begin to get an idea of just how important an issue health has become in today's workplace.

DUCK & COVER

Like nuclear fallout, some of the most potentially serious hazards aren't that easily avoided. For example, the omnipresent computer, while eliminating paper cuts, has introduced a rash of new risks into the office environment. One such element is radiation. A computer's video display terminal (VDT) generates both extremely low frequency (ELF) and very low frequency (VLF) electromagnetic radiation—although it should be noted that virtually all electronic equipment generates similar ELF emissions.

Optimists may be reassured by a study conducted by the National Institute for Occupational Safety and Health (NIOSH), which showed that there was no relationship between working in front of a VDT for more than 25 hours a week and an increased risk of miscarriage and other pregnancy and birth-related problems.

Pessimists will no doubt note that the study only followed pregnant women, thereby excluding a significant chunk of the general population. Also, because of the way controls were set up, it only examined VLF, not ELF, fields. Nor did it examine the relationship between VDT radiation and cancer.

So what do the experts know? Well, for one thing, says Louis Slesin,



editor of New York City-based *Microwave News*, radiation drops dramatically with distance, "so you'll greatly reduce your exposure if you keep your monitor a full arm's length away. Also, the radiation field is even more intense at the back and sides of VDTs, so you should try to stay four to five feet away from other workers' units."

When shopping for a VDT, keep in mind that there's tremendous variation in radiation levels, even among models made by the same company. Several manufacturers, such as Apple, have responded to consumer concerns by producing an optional line of "low emission" monitors, offering them at a \$50 to \$200 premium over regular VDTs.

Some companies, such as Optical Coating Laboratories of Santa Rosa, Cal., make inexpensive screens of glass or mesh that are advertised as barriers against the electrical fields. While the screens block higher levels of radiation, it's extremely important to know that these screens will *not* stop ELF or VLF radiation (which penetrates lead and can only be blocked by a thick layer of iron and other magnetic alloys). They will, however, prevent the static that attracts dust and other airborne contaminants.

"To avoid the issue entirely," notes

Slesin, "use a laptop. Neither liquid crystal display (LCD), gas plasma, or electroluminescent screens generate significant radiation."

LET THERE BE (PROPER) LIGHT

By far the most common detectable problem workers have with computers is eye strain. According to the American Optometric Assn. (AOA) in St. Louis, about 50% to 75% of workers using VDTs experience vision problems. This isn't the fault of VDTs alone, but of lighting in the office environment as well.

The AOA's first suggestion in the battle against eyestrain is to visit your optometrist at least once a year. Other recommendations: Take routine breaks from watching the video screen (about 15 minutes every hour or two), minimize glare by shading office windows, put an antiglare cover on the VDT screen, and adjust the screen's brightness and contrast.

If your eyes are still tired from staring at a computer screen all day, you might consider eyeballing the psychedelia offered by Red Bank, N.J.-based Vision Aerobics. The \$99 software program is designed to strengthen the eye muscles by forcing you to focus on objects that appear to be at different distances.

Of course, not all sleepiness, headaches, eye strain, and other vision problems are caused by VDTs—the culprit may actually be your office lighting. The problem, as Dr. Peter Boyce, a researcher at the Rensselaer Polytechnic Institute's Lighting Research Center in Troy, N.Y., explains it, is that "fluorescent light pulsates at sixty hertz. By contrast, your brain's maximum efficiency is about thirteen hertz." According to Boyce's theories, a throbbing fluorescent light will affect you subtly—pushing you beyond alertness into a state of agitation.

Besides banishing fluorescent light, Boyce recommends a triphosphor lamp for most office work. Still, even with light that's good for you, you shouldn't overdo it: "It was once thought that good light meant lots of light," Boyce notes, "and that's not true. A better idea is to use just enough light to see what you need to see. Also, be sure that there are multiple light sources with indirect and reflected light (shadows) surrounding you." ▶

ERGONOMICS

After eye strain, the next most common computer-related problem is Carpal Tunnel Syndrome (CTS), striking people who do a lot of typing and other repetitive hand movements at the keyboard. Workers submitted over 125,000 CTS-related claims in 1990 alone, according to the Social Security Administration's National Council on Compensation Insurance. Symptoms of CTS include intermittent numbness, pain, or a tingling sensation in the thumb, index, and/or middle fingers.

To combat this problem, Visionary Software of Portland, Ore., is selling LifeGuard, a \$60 software program that monitors keystrokes and mouse clicks and tells users when to take a break. It also suggests exercises to prevent CTS while at the same time strengthening the wrists, arms, and eyes.

Hands and wrists aren't the only parts of the body in danger of injury from office equipment that doesn't perfectly conform to its user. NIOSH says back injuries cost U.S. corporations over \$14 billion a year. Although good posture is paramount in combating dorsal distress, several chair manufacturers have created desk chairs designed to support the lower back—the lumbar

region—to maintain the natural inward curve of the spine.

Greenville, Pa.-based Knoll International's Bulldog chair makes the back adjustable vertically as well as horizontally. Another posture-perfect chair comes from Holland, Mich.-based manufacturer Haworth. The Comforto has a fixed back but utilizes an internally adjusting lumbar support that can be moved four inches up or down. Brayton Int'l, a subsidiary of Grand Rapids, Mich.-based Steelcase, offers its Rally chair, which has extra foam in the lumbar area that can be molded to fit different spinal cavities. While chair prices vary depending on mass orders, most range from \$600 on up.

SICK BUILDING SYNDROME

By far the toughest quandary for employers is the so-called "sick building syndrome," characterized by employee fatigue, nausea, dry skin, and sore throats. Not only is the problem hard to define—and to separate from other causes—but often the solution (to tear down the building) is impractical, to say the least.

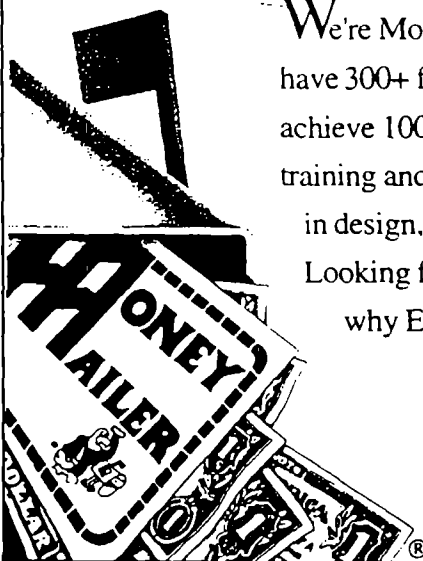
The Environmental Protection Agency (EPA) has identified hundreds of indoor pollutants, about 30 of which

are carcinogens. The problem is that EPA standards of toxicity aren't necessarily the same as those for discomfort. Sensitive individuals can take heart, however, since there are several air purifiers on the market, including the Ambiance model by Richville, Minn.-based AromaFys. The \$129 desktop product ionizes, filters, and scents the air, helping workers gain further control over their environment.

In many areas, U.S. corporations are being forced to raise their ergonomic and health standards, not just by soaring medical costs but by law. The city of San Francisco set the most stringent U.S. workplace standards in December 1990. The landmark law calls for the installation, by 1995, of special lighting, antiglare computer screens, and flexible furniture in companies that make intensive use of VDTs and have more than 15 employees.

Although clean-the-air portions of the original proposal were defeated, white-collar workers can start to breathe a little easier—literally and figuratively. Workplace air quality standards are currently part of another proposal, and as trend spotters know, where California leads, the nation will soon follow.

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BETTER BREAST EXAMS

Every woman needs to do accurate breast self-exams (BSEs). But many are unskilled—even women with a family history that places them at high risk of breast cancer. Over half of seventy-five high-risk women studied at the Johns Hopkins Medical Institutions, in Baltimore, failed to check the likeliest spot for lumps—the upper, outer quadrant of each breast. Moreover, when asked to find lumps in a breast model, only twelve found all of them. To protect your health, check your technique with a health professional, and perform BSEs monthly.

CALORIE CUTTERS

Breakfast can be as good for your waistline as it is for your health—if you opt for cereal with at least five grams of fiber a serving. Allen S. Levine, Ph.D., of the Veterans Administration Medical Center in Minneapolis, studied folks who breakfasted on juice and cereal with low-fat milk. On the days the subjects were given higher-fiber cereals, they ate up to one hundred fewer calories at lunch—with-out even trying.

A GROWING DANGER ON THE JOB

Judy Simpson, thirty-four, a supermarket cashier in Pittsburgh, can no longer do simple cleaning tasks or give her children an affectionate back rub. She says her problems began five years ago, when laser scanners replaced the cash registers at her store. Operations speeded up significantly, and after two years, Judy noticed numbness and tingling in her hands, then aching throughout her wrists, forearms and neck. Eventually, she needed surgery to expand inflamed ligaments that were pinching nerves in her wrists. Her pain was so severe that it kept her out of work on and off for nearly a year, and the condition hasn't been cured. Now she can manage to work only part-time hours and says her life has changed in many other ways, too: "I had to give up painting and ceramics, which I loved."



Judy is suffering from a form of what the U.S. Department of Labor calls the chief occupational hazard of the 1990s: repetitive strain injury (RSI), also known as cumulative trauma disorder. Experts say it's on the rise because of the influx of computers into the workplace. Women are most at risk; doctors

who treat the disorder estimate that women are at least twice as likely to contract RSI as men. According to Linda Morse, M.D., an occupational-medicine specialist in San Jose, California, that's because "women do much more of the work that is starting to cause RSI."

They're also more likely to hold jobs not covered by health insurance, so women may have trouble covering the costs of this injury. They can't always count on workers' compensation, meanwhile, because employers are challenging RSI cases. Judy Simpson, for example, says she's struggling to pay thousands of dollars in medical bills because her claim was denied on grounds that the injury was not work related. While she appeals, the hospital is pressing her to pay.

THE ELECTRONIC-AGE SYNDROME RSI is not new; it has long been a scourge of meat packers, musicians and assembly-line workers, who perform the same movement over and over. But in the last ten years, the ranks of potential victims swelled to include millions of typists, telephone operators, airline reservations clerks, editors and checkout clerks. The number of cases reported to the federal government has skyrocketed from 23,000 in 1981 to more than 115,000 in 1988. RSI accounts for nearly half of all workplace illness, and the potential cost is staggering. "In another decade, fifty cents of every dollar spent on workers' compensation will go toward these disorders," predicts Roger Stephens, Ph.D., an industrial engineer for the federal Occupational Safety and Health Administration (OSHA). We may see a proliferation of lawsuits, too: A group of Colorado telephone operators is suing a computer manufacturer, claiming that poor keyboard design caused RSI.

AN INSIDIOUS THREAT A mild form of RSI is tendinitis, an achy inflammation of tendons, tendon sheaths and muscle tissue in the arms, wrists or shoulders—whatever area is being stressed. If the wrists are subjected to especially persistent strain, the result can be a form of RSI called carpal tunnel syndrome, in which tissues around the tendons become so enlarged that they compress the median nerve, which runs through the carpal tunnel, a passage in the

(continued on page 118)

MEDINEWS

(continued from page 112) wrist. The hand loses sensation and grip strength, and the dull aches worsen. In some cases the pain becomes so intense that it's impossible for the victim to perform ordinary activities—buttoning a blouse, for instance.

How does light work like word processing inflict such severe injury? Experts say that repetition of small movements can be as crippling as a single heavy exertion. A day's work at an old-fashioned typewriter provided built-in breaks, such as waiting for carriage returns and inserting paper. But with computer keyboards, thousands of keystrokes are made each hour without a halt, increasing the wear on hands. In addition, today's jobs tend to be more specialized, so the chances are even greater that workers will repeat only one type of movement all day.

WORKPLACE SAFEGUARDS Can anything be done to prevent RSI? Yes, experts say. Of particular importance are frequent rest periods (employers should provide breaks every twenty minutes), exercise, good posture and proper equipment, such as keyboard wrist rests and chairs that let you position your arms at the correct height.

■ If you use keyboards at work, take the following precautions: Keep your arms at a 90° angle when you type. The middle row of the keyboard should be at elbow level. Your feet should be flat on the floor and your lower back well supported by your chair—request an adjustable chair or footrest if necessary. The top part of your screen should sit no higher than eye level.

■ Supermarket cashiers should switch hands frequently and use the whole arm when passing items over scanners, avoiding flicking motions.

What should you do if you think you have RSI? Don't discount the twinges. Seek help right away. Ask your doctor to recommend an orthopedist who specializes in treating the hand, or a rehabilitation specialist. If you begin care early enough, you can often avoid surgery and prevent permanent damage to the nerves.

Current therapy for RSI begins with rest; doctors also use heat and massage to relax the muscles, ice packs and

medications to reduce inflammation, and splints to keep wrists in the correct position.

Some companies question the size of the RSI epidemic, insisting the injuries are minor and could happen off the job. Other employers have been more responsive; many newspapers now provide RSI counselors and have modernized their keyboards and furniture. Some localities are exploring laws that would mandate safer conditions for computer users.

Most important, say experts, is awareness of the problem. Often symptoms strike only after working hours, and people don't connect the pain with on-the-job strain. OSHA is developing a three-part program to combat RSI: educating employees about symptoms; requiring the installation of better-designed equipment; and ensuring that doctors get word of the latest treatments. To arrange an RSI seminar at your company, call your regional OSHA office. Look in the telephone directory under U.S. Department of Labor.

—MARGARET ENGEL

ALCOHOL ALERT

Researchers at the Bronx (New York) Veterans Administration Medical Center recently reported some alarming news about women and alcohol: Females get drunk quicker than males—and may also be more susceptible to physical damage from alcohol. The study showed that women's bodies produce smaller amounts of an enzyme that breaks down alcohol; thus, more of the substance enters the bloodstream. According to Markku Linnoila, Ph.D., clinical director of the National Institute on Alcohol Abuse and Alcoholism, in Bethesda, Maryland, you can minimize the risks by limiting daily alcohol consumption to one drink or less: one 12-ounce beer, one 4-ounce glass of wine or one shot of hard liquor. Consider abstaining completely if one or both of your parents has a drinking problem. A family history of alcohol abuse raises your addiction risk.

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HeartGuide™

CURRENT CONCEPTS

ENTRAPMENT NEUROPATHIES OF THE UPPER EXTREMITIES

DAVID M. DAWSON, M.D.

NUMBNESS, painful tingling, or weakness may be the result of the entrapment of a peripheral nerve. These problems are encountered by medical providers of all types, and although common, they often lead to diagnostic and management difficulties. This review covers entrapment of three nerves at three sites. The pathophysiology of each of these syndromes is different, and there are corresponding differences in management. Several recent monographs provide further details.¹⁻⁴

CARPAL TUNNEL SYNDROME

Clinical Features

Carpal tunnel syndrome is produced by compression of the median nerve at the wrist (Fig. 1). Affected patients report numbness, tingling, and pain in the hand, which often worsens at night or after use of the hand. The pain may radiate proximally into the forearm and arm. Examination in the early stages often reveals no abnormality. With more severe nerve compression the patient will have sensory loss over some or all of the digits innervated by the median nerve (thumb, index finger, middle finger, and ring finger) and weakness of thumb abduction.

Assessment

Clinical assessment includes Phalen's test (appearance or worsening of paresthesia with maximal passive wrist flexion for one minute) and Tinel's sign (paresthesia in the median territory elicited by gentle tapping over the carpal tunnel). Tinel's sign has a sensitivity of 60 percent and a specificity of 67 percent; the corresponding values for Phalen's test are 75 percent and 47 percent.⁵⁻⁷ When conducted in the proper setting, these tests can provide useful information. There have been scattered attempts to quantitate the sensory examination and improve its diagnostic yield.¹ In a clinical setting, an assessment of strength, sensory loss, and pain is sufficient to monitor the progress of the syndrome.

Electrodiagnostic testing is important for the accurate diagnosis of carpal tunnel syndrome and should be carried out in most cases. The electromyographer uses sensory fibers to measure the nerve conduction velocity from the finger or palm to the wrist and motor

conduction velocity from the wrist to the thenar muscles. The sensitivity of sensory conduction testing can be improved by making sequential measurements at short distances over the course of the nerve in the palm — the palmar serial sensory study.⁸ Approximately half the patients with carpal tunnel syndrome have abnormalities of the contralateral median nerve. Values in these patients therefore need to be compared with reference values obtained in normal subjects and with the ulnar or radial sensory latency values. Electromyography of thenar muscles innervated by the median nerve is also usually done.

Electrodiagnostic testing is particularly useful for the differential diagnosis and in the presence of co-existing disease. Radiculopathy due to disease of the cervical spine, diffuse peripheral neuropathy, or proximal median neuropathy can pose clinical questions that electrodiagnostic testing can settle. No other test has a higher diagnostic accuracy in patients with a final diagnosis of carpal tunnel syndrome. In that sense electrodiagnostic testing is the laboratory gold standard, but to make a final diagnosis one must have clinical data, including the patient's response to treatment.

Inevitably there are false positive and false negative results. Many of the apparent false positive results occur in patients who have measurable abnormalities of nerve conduction but no symptoms. This is illustrated by the high rate of abnormalities in the contralateral hands of patients with carpal tunnel syndrome. As testing becomes ever more complex and sophisticated,⁹ it is easier to find some subtest whose results are beyond the normal range. Rarely, patients who have typical symptoms have normal nerve conduction tests but respond to carpal tunnel release.¹⁰ With currently used criteria the number of patients with such false negative results should be below 8 percent.⁸

Most electromyographers consider the following results abnormal (with control for the patient's age and limb temperature): an absolute sensory latency of more than 3.7 msec, a difference of 0.4 msec or more between values obtained for the median nerve and those obtained for the radial or ulnar nerve, a motor conduction latency of more than 4.0 msec, and an incremental change of 0.4 msec in the palmar serial sensory study with the use of measurements made at standard distances.¹¹

Thermography shows clear abnormalities in carpal tunnel syndrome but is not reliable for the diagnosis of bilateral cases and has limited value in the differential diagnosis.¹² Computed tomography and magnetic resonance imaging have not been widely used for carpal tunnel syndrome and have no role in management at this time.

Prevalence

Carpal tunnel syndrome is common. A study of the syndrome in Rochester, Minnesota, which examined medical records, included symptoms compatible with the syndrome, and excluded other illnesses, calculated

From West Roxbury Veterans Affairs Medical Center, 1400 VFW Pky., West Roxbury, MA 02132, where reprint requests should be addressed to Dr. Dawson.

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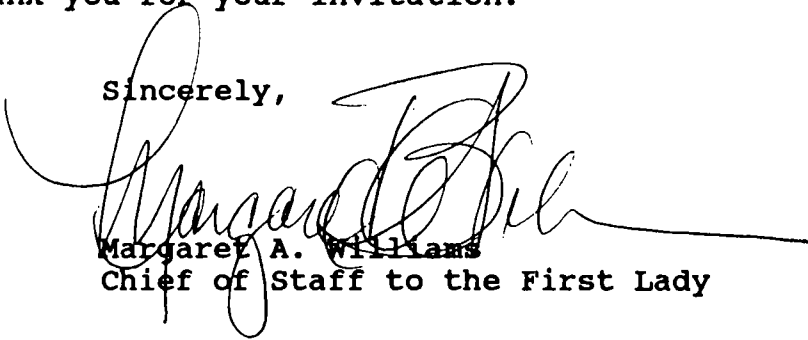
Richard J. Gerber
Phelps Memorial Hospital Center
701 North Broadway
North Tarrytown, NY 10591-1096

Dear Mr. Gerber:

Thank you for your letter regarding Mrs. Clinton's 1993 Distinguished Service Award. Your kind invitation to present this award to Mrs. Clinton is greatly appreciated. I have forwarded your correspondence to the Scheduling Office.

Again, thank you for your invitation.

Sincerely,



Margaret A. Williams
Chief of Staff to the First Lady



December 13, 1993

Phelps
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North Tarrytown NY 10591-1096
914-631-5100

Margaret Ann Williams
Office of the First Lady
c/o The White House
1600 Pennsylvania Avenue
Washington, DC

Dear Ms. Williams:

Thank you for your recent letter regarding Mrs. Clinton's busy schedule and the 1993 Distinguished Service Award which Phelps Memorial Hospital Center has granted her in recognition of her work with children. At the November 20th Seventh Annual Phelps Champagne Ball, Mrs. Clinton's thoughtful letter was presented to our guests. While we were sorry that she could not be in attendance personally, our guests truly understood the demanding nature of her calendar and appreciated her kind words.

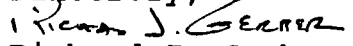
In addition to a well-attended dinner and dance, the evening's activities included the Awards ceremony, which also honored three former Phelps board members and two physicians. The Ball succeeded in grossing nearly \$200,000 for the benefit of our hospital's Surgical Services Department, and these funds will be used for much-needed improvements to our Operating Rooms, upon which adults and children in our community are so dependent.

As the 1993 Phelps Award recipient, Mrs. Clinton joins IBM and the Rockefeller Family, honorees in 1992 and 1991 respectively. We would like to present Mrs. Clinton with her Distinguished Service Award at her convenience. Certainly, if her schedule permits, we would be happy to host her at our hospital for this purpose and arrange meetings with physicians, patients, community residents and/or administrators, if desired. Alternatively, our President Keith F. Safian, Board Chairman Russell Watson III, Board member Rodman Rockefeller and/or other Phelps representatives could make the presentation in Washington some time in the New Year, hopefully by spring. Please let me know when and where such a meeting could possibly occur and I will work with you to coordinate calendars.

Obviously, we are pleased to recognize Mrs. Clinton's outstanding achievements on behalf of children and expect that her continuing efforts on health care reform will bring comparable results.

I do thank you, in advance, for your assistance on this matter, and hope that I may hear back from you soon.

Sincerely,


Richard J. Gerber,

Vice President-Development & Public Relations

Michael J. Gerstley
5819 Rohn Way
San Jose, California 95123

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December 16, 1994

The Honorable Margaret A. Williams
Assistant to the President and
Chief of Staff to the First Lady
1600 Pennsylvania Ave. NW
Washington, D. C. 20500

Dear Ms. Williams;

Approximately fifty seven years ago my grandfather, Dr. Sam Loebenstein, of Kansas City, Mo., started an unique autograph collection. Until his death, he had received over 400 autographs from prominent people in all walks of life. The unique feature was the fact that he sent, to the person whose autograph he requested, an uncanceled United States postage stamp suggesting that persons vocation or something related to their life. He asked that their autograph be placed across the stamp, thus cancelling it.

The collection has been entrusted to me and I have been carrying it on for the past thirty years. It now contains over 6,500 autographs.

I am enclosing a rare stamp commemorating The Executive Branch of our Government. Since you serve as Assistant to President Clinton and Chief of Staff to the First Lady, I feel this stamp is appropos. If you will autograph it, and return it to me, I will be greatly honored.

Ms. Williams, I am a pure collector. I have never sold an autograph, nor do I intend to.

Thank you for your time and your kind consideration.

Very truly yours,

Michael Gerstley

Michael J. Gerstley

NEWSPAPER

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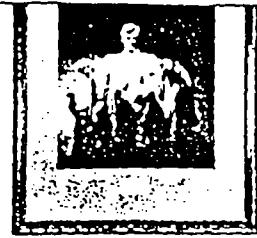
A Cahners Business Newspaper

January 22, 1990

Vol. 14, No. 19

(ISSN 0149-360X)

Gerstley puts his own stamp on huge autograph collection



Mike Gerstley, vice president of major accounts for Spring Air in Union City, Calif., collects autographs.



UNION CITY, Calif. — Mike Gerstley, vice president of major accounts for Spring Air in Union City, says his autograph collection is unlike any other in the country.

For one thing, he has more than 5,000 autographs. That's right — 5,000. But the unique thing about Gerstley's collection is that each autograph is connected in some way to a commemorative stamp.

Among his prized signatures is that of Abraham Lincoln. He also has autographs from 30 other U.S. presidents and from all the current Supreme Court justices except Antonin Scalia, who doesn't sign autographs.

Gerstley's collection dates back to 1935, when his grandfather decided to combine his two hobbies of stamp and autograph collecting.

His grandfather would send a stamp to a person whose autograph he wanted and ask them to sign the stamp, which was linked in some way to that person. For example, stamps commemorating the state of New York were sent to the governor and senators of New York.

When his grandfather died, he willed the collection to his only grandson, Gerstley, who was about 4 years old at the time. Gerstley didn't become interested in the collection until 1960, when he was recovering from the Hong Kong flu.

Gerstley's collecting is all done by mail. He positions the stamp on a card and mails it to the person whose autograph he wants. His response rate is better than 90%. "Most people say it's so unique that they are pleased to do it," he said.

Gerstley focuses primarily on politicians and other people of note such as Nobel prize winners. He has all the astronauts since 1960, including Neil Armstrong and the Challenger crew. He also has all the presidents and senators who have served since 1960.

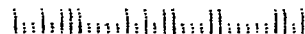
The signature that Gerstley would most like to get is that of George Washington, which generally has a price tag of \$5,000 to \$12,000. The only autographs he has ever bought or plans to buy are former presidents. He paid \$400 for an authenticated signature of Abraham Lincoln four years ago and has since been offered \$2,100 for it.

But, he said, he's never sold an autograph and doesn't plan to. "My kids would kill me if I sold any. They all three want to keep it going." — C.D.S.

Michael J. Gerstley
5819 Rohn Way
San Jose, California 95123



The Honorable Margaret A Williams
Assistant to the President and
Chief of Staff to the First Lady
The White House
1600 Pennsylvania Ave NW
Washington DC 20500



THE WHITE HOUSE

WASHINGTON

April 26, 1994

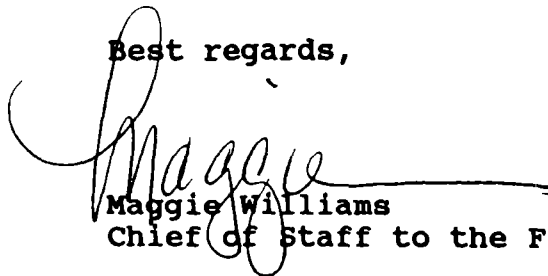
George Gier
The Leap Partnership
22 W. Hubbard
Chicago, Illinois 60610

Dear George:

It was good to hear from you and to get caught up on your news. Two children -- that's wonderful, and your own business besides.

Thanks so much for taking the time to write and congratulations on all your good news. Keep in touch.

Best regards,

A handwritten signature in cursive script, appearing to read 'Maggie', followed by a horizontal line.

Maggie Williams
Chief of Staff to the First Lady

The Leap
Partnership

March 14, 1994

Maggie Williams
Chief of Staff to The First Lady
Room 100
Old Executive Office Building
Washington DC 20500

Sam
Nice letter
hills

Dear Maggie,

A lot has transpired since we worked together on The Children's Defense Fund at Fallon McElligott.

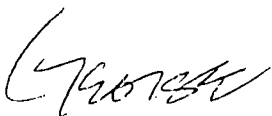
I've been seeing you on the news and have been meaning to congratulate you for some time. So here it is...Congratulations!

I'm so happy for you in your new position as chief of staff to the First Lady. I'm certain it's the most demanding and challenging time of your life. (And fun too.)

A lot has happened in my life as well. I have started my own advertising agency in Chicago (I've enclosed few press clippings). Also I have a wonderful four year old boy and another on the way.

Best wishes to you in your new endeavor. As always, if I can ever be of service, please don't hesitate to call.

Sincerely,



George Gier
Creative Partner
The Leap Partnership

ADWEEK

Vol. XXXIV No. 38

MIDWEST EDITION

September 20, 1993 • \$2.50

LINTAS REVS 'RAD' UNIT

Lintas: Campbell-Ewald is forming a Re-Automotive Division designed to get some of the \$180 million client Chevrolet's dealer associations spend on advertising. A former JWT exec will head RAD. (See page 5)

MIDWEST SHOPS MAKE MILK CUT

The United Dairy Industry Association and the National Dairy Board narrowed the review for their \$50 million account to about 10 agencies, including six Midwest shops. (See Page 5)

BBDO THINKS OF NEW HYATT ADS

"We've thought of everything" replaces the "Hyatt Touch" in the first campaign for the hotel chain from BBDO/N.Y.. The campaign breaks this week with 12-page inserts in *Conde Nast Traveler*. A major TV flight breaks on CBS' *60 Minutes* and during the Major League Baseball playoffs. Cable breaks later. (See page 7)

LEAP OF FAITH

DDB Needham Creatives Jump Ship to Pursue Own Agency

By Beth Heitzman—Three of Chicago's most visible creative stars broke away from DDB Needham Chicago late last week to pursue their vision of a creative-only agency. If successful, the concept stands to make other agencies uneasy and other creatives envious.

Joe Sciarrotta, 31, a senior vp/group creative director and George Gier, 33, a copywriter and vp/creative director, along with Fred Smith, 39, a vp/executive producer, surprised Needham management last Thursday by resigning to "pursue other interests."

Those interests are a new company, The Leap Partnership, that officially opens for business today. The concept, according to the three partners, is an agency that aims to unbundle creative services from the bureaucracy of full-service

(Continued on page 9)

QUESTIONING QUESTIONNAIRES

Suddenly the amount of new business is booming, but so too is the number of consultants helping clients find an agency. Often ex-agency execs, some consultants are making their mark with requests and questionnaires agencies consider not germane to finding the right partner. They ask what's happened to face-to-face meetings. (See page 6)

THE FUTURE: GET USED TO IT

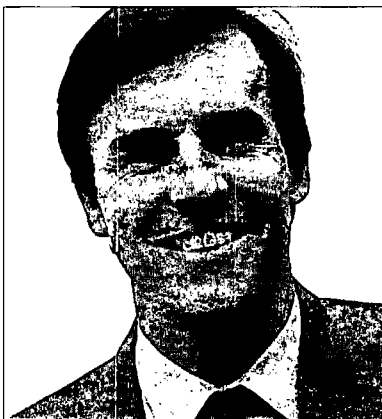
The disillusioned and pragmatic men and women of Generation X are starting to make their presence felt in the advertising industry. Debra Goldman meets with some of the young creatives to see what they have in store. (See page 30)

Planet Reebok

Burnett's Asian Work Earns Global Biz

By Jim Kirk—Just six weeks after presenting Reebok its ideas on global marketing and four weeks after failing to win Reebok's Super Bowl project, Leo Burnett Co. stunned the ad business last week by lacing up Reebok International's \$140 million worldwide advertising account.

The surprisingly abrupt move caught all *(Continued on page 10)*



Creative stars jumping ship: (l-r) George Gier, Fred Smith and Joe Sciarrotta

Frustrated With Agency Bureacracy, Key A-B Creatives Bolt Needham

New Shop Will Offer Creative Services Only To Keep Client in Touch With Idea-Generators

(Continued from page 1) agencies such as media buying services have successfully done. The idea, they say, is to circumvent the current agency malaise of excess overhead, top-heavy management, low morale and continual compensation battles by bringing clients together directly with top creative people.

"The last thing agencies have to market and sell to clients are ideas," Sciarrotta said. "This is an agency about ideas."

"It's not about names on the door or egos and it's not about leaving Needham," Gier said. "It's about three guys who have a vision for something different."

DDB Needham executives, according to other agency insiders, were stunned by their departures. The three are key creative players on the advertising agency's \$50 million Anheuser-Busch Bud Light account and have worked on a number of other major accounts as well, including Clorox and Frito Lay.

Between them, Sciarrotta and Gier dominated The Chicago Show, the local Addy awards competition, last year. Gier, won "Best of Show" for a print campaign for the Lake Michigan Federation. The pair won gold and silver awards for a series of print ads de-

signed to sell Sciarrotta's Porsche.

Exec creative director Bob Scarpelli was out of the office last week when the trio resigned and was unavailable for comment on Friday.

The Leap Partnership will offer clients a pool of creative people who will generate ideas. Unlike traditional agencies, clients won't see, or pay for, account management, media and research services.

"Clients look at the money they're paying their agencies and wonder what, or who, it's paying for. Overhead? Layers of account management? Services they don't use?" Gier said. "If you ask clients what they want from their agencies, they say good creative that sells the product. We're going to be able to tell clients that their money is going to be spent on people who are generating ideas for their brands all day long."

The Leap Partnership expects to add additional partners, and each person will be charged with creating ideas for clients; those who generate results will be compensated on a level on a par with company owners.

The Leap Partnership opens without any clients, but it does have an informal alliance with London-based agency Leagas De-

laney and the support of chief executive Tim Delaney. Delaney said he forms such partnerships with "kindred spirits" and people whose work he believes in.

"This idea is very timely," Delaney said from London last week. "It's the beginning of a new way of working with clients."

Sciarrotta started at W.B. Doner/Detroit, and spent six years rising through the creative ranks at J. Walter Thompson/Chicago where he worked on 7-Eleven, Lowenbrau, Oscar Mayer and Quaker Oats.

Gier, 33, who has been with Needham since March 1990, spent four years at Fallon McElligott working on Porsche, Federal Express and Gilbey's Gin. He also worked for a short time at Hal Riney & Partners/S.F. on the Saturn car account.

Smith, 39, worked at Needham twice in his career, the most recent stint starting in 1989.

While The Leap Partnership is starting with only three people, Delaney doesn't think it's a company for small clients only.

"It's like guys in a rock band being able to produce big hits," Delaney said. "It's four guys in a room...you don't need more people to create bigger ideas. Actually, the fewer people the better." ■

BAD MOON OVER MIAMI

The rash of violence against visitors to Miami appears to have cost Florida more than tourism dollars.

Jim Smyth, ceo of Clio Awards Ltd., based in New York, cancelled plans to turn the advertising industry's Oscar ceremony into a four-day event in Miami after a personal brush with violent crime.

Smyth had visited the city in August to talk with convention and visitors bureau officials about the possibility of moving the entire event to Miami. After his rental car was bumped from behind by four teenagers waving a gun, however, he changed his mind.

"All businesses that require a client or employees to fly through the Miami airport have suffered and are going to suffer further," he said.

Said Robert Lawrence, management supervisor on the Florida Division of Tourism account with Fahlgren Benito, "Our advertising strategy right now, in sympathy for the families involved in England and Germany, is to not be on the air selling Florida at this point."

ONE • TO • ONE

A bimonthly newsletter published by The One Club for Art & Copy, Inc.

NOV / DEC 1993

INSIDE

- **Concepts** Williams & Rockwood tunes up in Utah
- **Clubnotes** The dead rise again
- **Profile** Crispin & Porter
- **Roundtable** Has type gone mad?
- **Flashback** Scali circa '85

TAKE A FLYING LEAP

The Leap Partnership's George Gier on the risks and rewards of leaving the nest

HOW DO YOU KNOW WHEN IT'S time to start that agency you've been dreaming about? How can you be certain that you've accumulated enough resources, enough contacts, and enough money to make a go of it? The answers to those questions: You don't, and you can't.

Starting an agency requires a leap of faith. My partners and I took that leap a couple of months ago when we left our secure executive jobs at DDB Needham and stepped out into the void. We called ourselves, appropriately enough, The Leap Partnership. Did we have clients signed up and locked in? No. Did we have the backing of some big advertising conglomerate? No again. What we had were some notepads, three people who shared the same vision, and an idea that wouldn't leave us alone. We believed—feared—that if we didn't take action on that idea, someone else would.

It all began with innocent conversation. Like everybody else in advertising, my partners and I had a habit of getting into lengthy discussions about where advertising seemed to be headed. And we concluded that it was headed in the wrong direction. The business world was changing all around us, with companies streamlining, unbundling their services, and looking for the most efficient, economical, effective way to get things

done. And yet, for some reason, the ad agencies that serve these companies haven't followed suit. They've continued to rely on the old full-service approach.

So our idea was simply this: Let's take the only thing that advertising agencies have left to offer—ideas—and let's offer that to clients without the layers of management, media, research, and other services they don't need from us.

This hands-on approach benefits us,

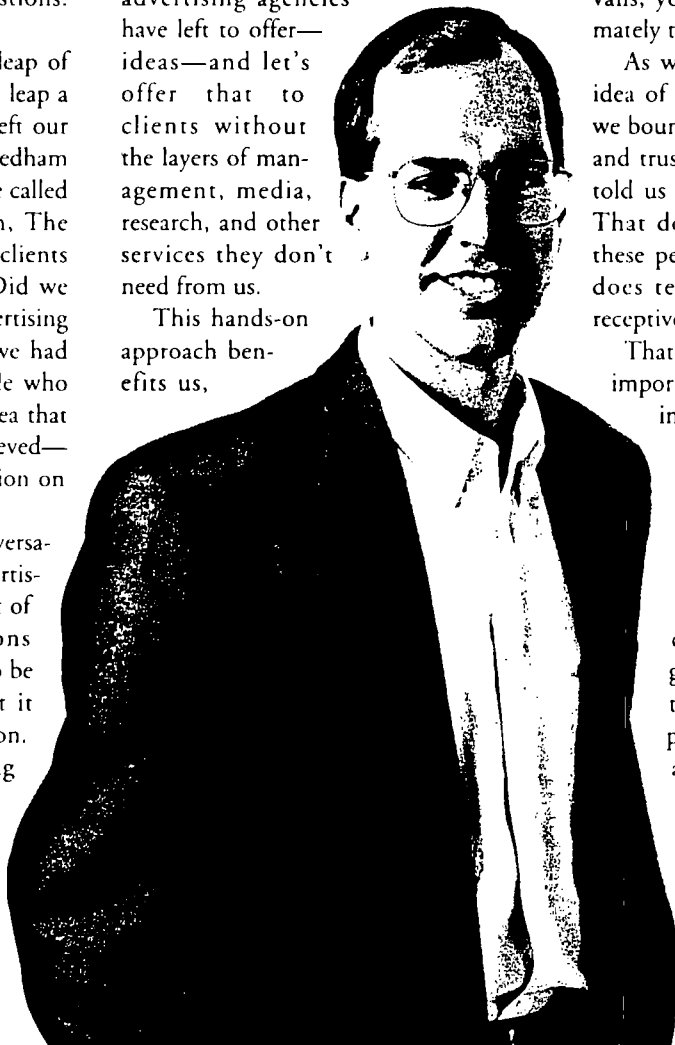
as well as the client. Right now, morale in creative departments is at an all-time low; there's little hope for ownership or reward for great ideas. The attitude at many agencies is, you're lucky you have a job. When that kind of attitude prevails, you can bet the work—and ultimately the client—is going to suffer.

As we continued to talk about our idea of starting a creative-only agency, we bounced the idea off people we knew and trusted on the client side. And they told us it made a lot of sense to them. That doesn't mean we can count on these people to sign on with us, but it does tell us that the marketplace is receptive to our particular philosophy.

That's an asset that may be far more important, in the long run, than having an outside investor or a charter client behind you. Investors and clients come and go; you need to know that your basic philosophy has lasting value in the marketplace. That philosophy must be something that clients want, and that they're not getting elsewhere. In our case, the creative-only approach is a point of difference that sets us apart from others in the market.

Once you have that philosophy, you need leadership to rally others around your vision. If you don't have lead-

(continued on next page)



TAKE A FLYING LEAP

George Gier

(continued from front page)

ership qualities, you'd better make sure your partner does.

Aside from philosophy and leadership, I don't think you need much else to get started. Some will say that you must have a certain amount of guaranteed business signed up, or a huge nest-egg. I disagree. This is a business that revolves around ideas. If you were starting a restaurant, you'd need pots, pans, and tables. But if you're starting an idea business, everything you need—all your inventory—should be right there in your head. Though you better make sure that warehouse in your head is full.

In the end, a lot of the decision to start an agency is going to be based on intuition. It's a feeling that you have inside, telling you to make your move now or you never will. No matter how many case studies you've done, it ultimately comes down to one bold, risky move—a leap.

I realize that talking about bold action and risks is an anomaly these days, in this conservative business climate. In the 1960s, people were starting agencies all the time—they threw caution to the wind and just did it. But these days, everyone's a little worried. People tell you this isn't the time to take a risk, because of the economy.

Don't listen to 'em. Given the turmoil in today's advertising climate, this may actually be the best time to

start an agency—provided it's the right agency for the times. If everyone were fat and happy, there wouldn't be the need for us to come along and provide an alternative. But since it *is* so tough out there, clients are being forced to seek out more creative, more efficient options—and that plays right into our strengths. So we're thrilled to be starting right in the middle of a recession.

My partners and I are in mid-leap now, and I can tell you this: We're flying and loving it. These early days have been the best days of our lives, because we're controlling our own destiny. Every day is an event. The future's uncertain. And we like it that way.

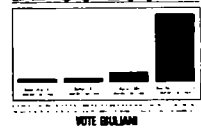
George Gier will speak at Lee One Club on Dec. 7, in the Gold on Gold lecture series.

NIGHT OF THE LIVING DEAD

THE BEER, WINE AND CON-
versation flowed freely.
Everywhere you looked,
there were people laughing.
For a graveyard, it was pret-
ty lively.

The One Club's 7th Annual Night of the Living Dead, held on October 28, showcased the cadavers of dozens of ads killed during the last year. The winning entry came from Justin Rohrlich and Scott Schindler of BBDO, whose campaign ads for New York mayoral candidate Rudy Giuliani—including one that provided death statistics from Beirut and the Gaza Strip to make the point

**NEW YORK CITY'S
BEEN CALLED A
WAR ZONE.
WE SHOULD
BE SO LUCKY.**

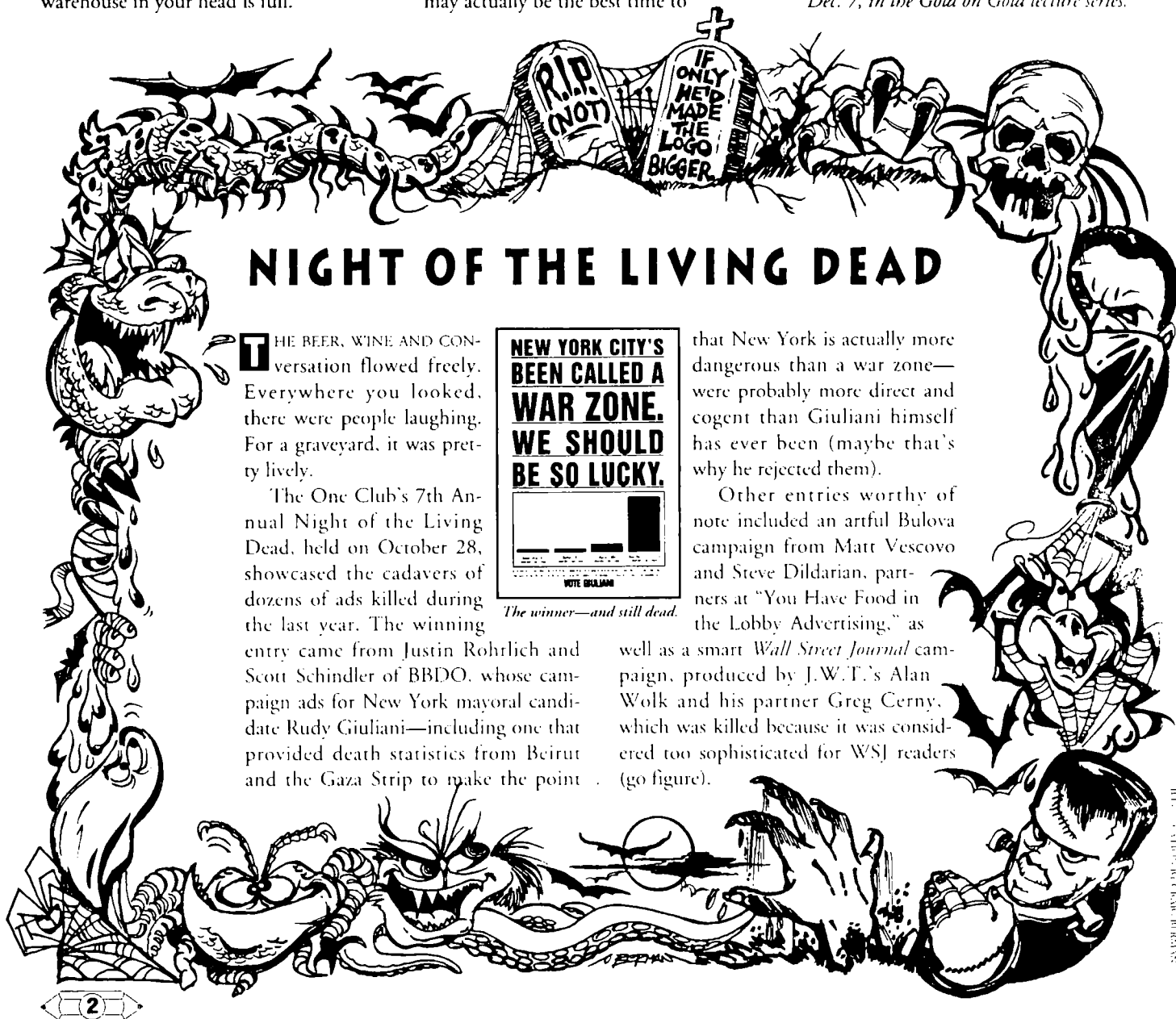


The winner—and still dead.

that New York is actually more dangerous than a war zone—were probably more direct and cogent than Giuliani himself has ever been (maybe that's why he rejected them).

Other entries worthy of note included an artful Bulova campaign from Matt Vescovo and Steve Dildarian, partners at "You Have Food in the Lobby Advertising," as

well as a smart *Wall Street Journal* campaign, produced by J.W.T.'s Alan Wolk and his partner Greg Cerny, which was killed because it was considered too sophisticated for WSJ readers (go figure).



Reprinted from THE WALL STREET JOURNAL.

WEDNESDAY, DECEMBER 22, 1993

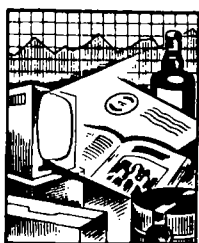
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ADVERTISING / By KEVIN GOLDMAN

Leap Partnership Touts All-Creative Shop

Leap Partnership, a new ad agency with a frog as its logo, feels the current way of doing business along Madison Avenue has gone by the boards. Either change, Leap argues, or the agency business will, well, croak.

The fledgling agency, founded just three months ago by former employees of Omnicom Group's DDB Needham, is an anomaly in the ad business today: an all-creative shop. It doesn't try to offer clients the full array of services, such as media buying and market research.



To introduce itself, it has placed three full-page ads in Advertising Age that skewer business-as-usual along Madison Avenue. Written by two of Leap's senior partners, the ads run over 700 words of small print, much of it inflammatory.

One ad in particular, headlined, "Why you won't get that big raise you were hoping for this year," details what Leap feels is the industry's current malaise.

Leap contends that many in the ad business can forget not only raises, but Christmas parties. Why? "We're sorry to inform you it's not the economy, times aren't tough, and it will not get better." Leap's diagnosis: "Agencies today are more concerned with servicing their debt than with servicing their clients." The results, Leap contends, can be seen in frozen wages and agency layoffs.

The ad continues that because there is no system for rewarding outstanding creative work, "employees give up. Lights go off at precisely five. Elevators race for the parking garage. Thinking stops."

Not surprisingly, Leap Partnership thinks it has the answer. The agency, yet to win its first client, has a single product.

"The only thing ad agencies have left to sell to clients that they can't get anywhere else is creative ideas," says George Gier, a creative partner and co-founder of Leap.

Other companies, such as DeWitt Media and Western International Media and A.C. Nielsen have encroached on typical ad agency functions, such as media buying

and research, Mr. Gier adds. "The client can get anything it wants from outside the ad agency but ideas," Mr. Gier says.

Leap executives are reminded that clients don't even need agencies for ideas any longer. When it sought creative input for its current campaign, Coca-Cola bypassed Interpublic Group's McCann-Erickson, the agency for its flagship brand, in favor of Creative Artists Agency, a Hollywood talent agency.

Says Fred Smith, another Leap creative partner: "CAA only dealt with a campaign's execution. It didn't come up with long-term campaign and brand-building with a focus."

Leap says the full-service way of doing business isn't cost-efficient for the client; it cites an industry study by Mark Gaines for Advertising Age showing that on average, only 17% of a client's agency billings goes to the creative process. Another 21% is siphoned off on "administrative executive overhead," and the remaining 62% is spread out over other services.

In contrast, Leap claims that 76% of what it will charge clients will be earmarked for creative responsibilities.

It's an untested and risky idea. Most large companies seem to take comfort in the security of a full-service agency, such as Leo Burnett in Chicago or Omnicom's BBDO.

In this era of pitched battles for market share, many companies want all their resources under one roof, says Paul Mulcahy, former vice president of marketing services at Campbell Soup, who retired last year and now consults with companies. "While everyone is groping for the next big creative breakthrough, some clients like the idea of one-stop shopping and having all advertising responsibilities under one roof," he says.

Mr. Mulcahy isn't convinced that a creative-only shop is necessarily the solution to advertising malaise. Especially with ad budgets leaner, he says, some clients "want to make sure the ad agency fills all their needs. That's not easy when you're offering just creative input."

Leap argues that until now, clients had no choice: It was a full-service agency or nothing. Should companies demand a smorgasbord of services, Leap even has a recommendation. One of its ads salutes Burnett as "the best full-service advertis-

ing agency in the world," one that it describes as a "high-powered everything-under-one-roof, marketing machine."

After an unabashed self-salute ("offering clients direct access to the top creative minds in the industry"), Leap also prints Burnett's telephone number. Burnett, in response, sent Leap a bottle of champagne and a good-luck note.

Leap says it is the first agency to embark on what some would say risky (Leap would say "sound") strategy. Last year, Jerry Della Femina, the flamboyant creative wizard, opened a new agency, Jerry Inc., with such clients as Newsweek, Pudgie's Chicken, Just Toys and the New York Mets. At the time, Mr. Della Femina said he would employ a new business plan: He would form small separate shops to handle each account. If Jerry Inc. lost an account, it would simply shut down the shop that serviced that client. (So far, so good. Mr. Della Femina hasn't lost a single client yet.)

But while Jerry Inc. is unconventional up to a point, it buys some of the media for its clients.

So who are Leap's audacious founders? Mr. Gier, 33 years old, is joined by Fred Smith, 39, and Joe Sciarrotta, 31, as creative partners. The three met while toiling on Anheuser-Busch's Bud Light account at Needham's Chicago office. The team, says Mr. Smith, is responsible for the current Bud Light ads, including a spot in which men dress up as women to take advantage of a bar's Ladies Night and thus imbibe Bud Lights at a cheaper price.

The three resigned in September, surprising their Needham employers. "It was always our dream to open our own agency," says Mr. Gier, who also worked at Fallon McElligott in Minneapolis and Hal Riney & Partners in San Francisco.

Leap hopes to announce a roster of clients next month. Its business plan calls for 10 large clients (each with billings exceeding \$100 million), as well as smaller companies primed for rapid growth. Although Mr. Gier declines to be specific, he says the agency is involved in discussions with companies ranging from automotive to liquor.

As for its employees, Leap says it will pay employees a salary plus "incentive pay."

Adds Mr. Gier: "We're giving creative people a new lease on life."

THE WHITE HOUSE
WASHINGTON

September 16, 1994

Mr. David C. Girona
1515 East Las Palmaritas
Phoenix, Arizona 85020

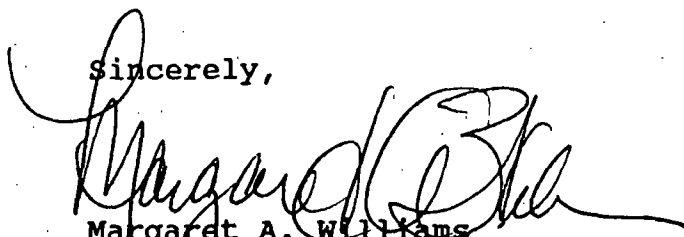
Dear Mr. Girona:

Thank you for your letter of June 17, 1994 and accompanying document with the Preamble to the Constitution. I regret the delay in sending you a response. However, we have received thousands of letters from concerned citizens and we appreciate their patience as we try to answer each one.

Thomas Jefferson continues to inspire us. You were very thoughtful to send me a copy of his important words.

I wish you continued good recovery from your illness, and again thank you for your thoughts.

Sincerely,



Margaret A. Williams
Chief of Staff to the First Lady

*We hold these truths to be self-evident,
that all men are created equal,
that they are endowed by their Creator
with certain unalienable Rights,
that among these are Life, Liberty
and the pursuit of Happiness.——*

*The unanimous Declaration of the thirteen united
States of America, IN CONGRESS, JULY 4, 1776.*

Copy of T.
Jefferson's
Statement in
Declaration
of Rights -
re: Truths -

Withdrawal/Redaction Marker

Clinton Library

DOCUMENT NO. AND TYPE	SUBJECT/TITLE	DATE	RESTRICTION
002. letter	To Margaret Williams from David C. Gironde re: Declaration of Independence (partial) (1 page)	06/17/94	b(6)

COLLECTION:

Clinton Presidential Records
First Lady's Office
Maggie Williams (Correspondence)
OA/Box Number: 17604

FOLDER TITLE:

[Correspondence from 1994]: G [1]

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- b(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
- b(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
- b(9) Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

Asst. to Pres. & Chf.Stf. to First Lady Margaret Williams
THE WHITE HOUSE - West Wing
Washington, DC 20500

June 17, 1994

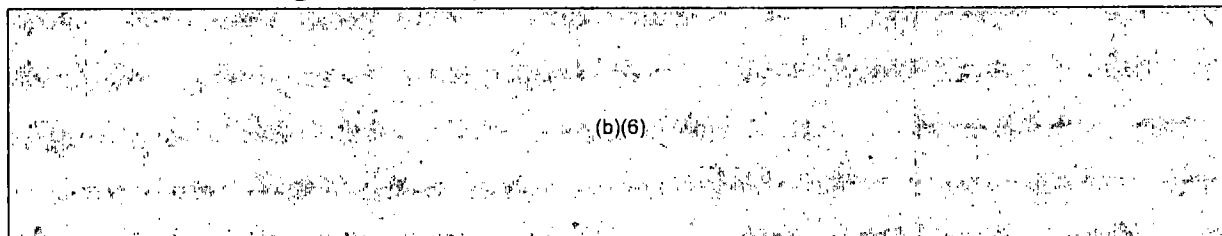
RE: Copy of a Portion of the engrossed Declaration of Independence

Dear Administrator:

Ten score and seventeen years ago, the founders of this great Nation declared our Freedom in this most profoundly articulated document, putting the world on notice that, realizing the injustices of past human discourse and social disorder, a new human order had evolved. This revered document serves as the foundation of our Constitution and organization of powers that, so far, have withstood the test of time, serving as the framework for liberty, justice and equality within the entire world.

As we approach the 218th anniversary of the signing of that document, let us reflect on a portion that must serve as a *National Creed*, a summary of fundamental beliefs that should remain in our daily consciousness, as we strive to maintain the human order professed so eloquently and precisely by our gifted predecessors. Following the introductory sentence "*When in the course of human events*" the second sentence is the text deemed to be most important as the initial position statement in the portion known as the "Declaration of Rights" founding this new order, as paraphrased below:

*"We hold these truths to be self-evident, that all men are created equal,
that they are endowed by their Creator with certain unalienable Rights,
that among these are Life, Liberty and the pursuit of Happiness."*



[002]

(b)(6) I was inspired that I should share this with friends and those in important public office. Enclosed you will find a copy of the original calligraphy of the above quote authored by Thomas Jefferson, as was ordered July 19, 1776 by the Continental Congress to be "*engrossed on parchment*" for their official signatures, as penned by a scribe named Timothy Matlock, and as eventually endorsed and signed by the 56 members of that first Congress.

It is your charge and our collective responsibility to uphold these Truths, regarded by our founders to be self-evident, undeniable precepts, that all mankind of every race and gender are equals, recognized to be endowed by their divine Creator rather than as merely mandated by others, to have human Rights that are non-revocable, of which the most prominent are resolved to be Life, Liberty and the pursuit of Happiness. This passage was enlarged and reprinted on parchment 8-1/2 by 11 inches, so that it can be suitably well framed and displayed for your daily reflection and for those who visit with you, as a constant reminder of the indispensable beliefs that we are all entrusted to uphold. You may make copies as you desire, noting this isn't for sale. Thank you.

Respectfully Submitted,



David C. Gironda

THE WHITE HOUSE

WASHINGTON

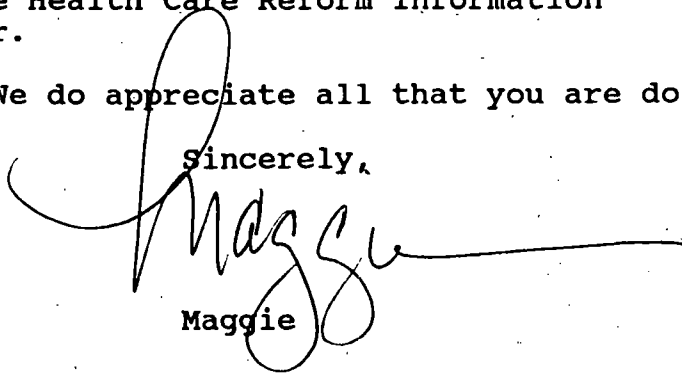
October 24, 1994

Dear Roger:

Thanks for forwarding the GW Magazine issue with the cover story on Mrs. Clinton's health care reform efforts and the article on the Health Care Reform Information Center.

We do appreciate all that you are doing.

Sincerely,

A handwritten signature in cursive script, appearing to read "Maggie", with a long horizontal flourish extending to the right.

Maggie

THE WHITE HOUSE
WASHINGTON

October 17, 1994

MEMORANDUM FOR : MAGGIE WILLIAMS
CHIEF OF STAFF
OFFICE OF THE FIRST LADY

FROM : ROGER GOLDBLATT 
DIRECTOR
HEALTH CARE REFORM INFORMATION
CENTER

SUBJECT : ARTICLE

I Thought Mrs. Clinton might be interested in the article in GW Magazine. Besides the cover story on her efforts on health care reform, there's a very flattering article on the Health Care Reform Information Center (page 36). If she does read the article, I would appreciate any feedback.

Please let her know that we're still plugging away at the Center, having personally responded now to over 100,000 letters. The most recent mail is quite supportive, highlighting more personal stories with quotes such as "Don't give up, people like us need you more than ever".

