puter screens are produced by bulky cathode ray tubes. (One exception is hand-held computer displays produced by a film of amorphous silicon; such devices, though, are much slower than their crystalline correlates would be.)

In addition, says Brown, with current silicon technology, there is no simple way to isolate the numerous wafers in a given device from each other; this limits the speed and voltage that now can be obtained with crystalline silicon. Therefore, says Brown, there is strong motivation not only to successfully grow a thin crystalline silicon film for flat-panel displays, but also to grow that film on an insulating substrate to prevent unwanted electrical interactions between the transistor devices that will be embedded in it. At the MRS meeting, several independent research groups reported progress on this front.

One of those groups was Michael Geis and colleagues of the Massachusetts Institute of Technology's Lincoln Laboratory in Lexington, Mass. They are trying to grow a thin-layered, device-quality silicon crystal using a technique called "zone-melting recrystallization." This process actually was first described in 1953 but then largely neglected, Geis says. Now, it is experiencing a rebirth, he says, due to the development of laser- and other heat source-methods that permit the melting of an entire silicon film in discrete zones.

In Geis's version of the zone-melting method, an insulating layer of quartz (SiO_2) first is laid down. Then, the thin film

of amorphous silicon to be melted and recrystallized is placed on the insulation. Next. Geis and cohorts cap the silicon with a 2-micron layer of SiO2 and a .03-micron layer of Si₃N₄; this double-layer encapsulant has been found to protect the silicon and to increase the probability that it will re-solidify into one single-oriented crystal. Finally, a graphite heater oven—a strip of carbon through which a current is passed — scans the sandwiched silicon, causing the silicon to melt, narrow-zoneby-narrow-zone. As the heater moves along, the trailing edge of liquid silicon re-solidifies into a thin, largely uniform, high-quality crystal structure.

Thus far, Geis and colleagues have not yet grown the desired perfect single crystal. Subboundaries, electrically inferior areas where ever-so-slightly different oriented crystals meet, still spontaneously appear on the film. However, the Lincoln group has discovered that by varying the temperature along their graphite strip-heater, they can manipulate where those defects occur. Such an ability to predict the location of defects could ensure that transistor devices are placed only on the defect-free areas of the film.

Moreover, says Geis, he and colleagues are "pretty close" to achieving growth of a single crystal. And, "there are several other groups close to it," he says; "I think we'll hear it reported in the next year or so." Says Brown, such an achievement would be "technologically very important."

—L. Garmon

Reagan appoints two

Earlier this year, James B. Edwards vowed not to leave the Department of Energy until his agency had been successfully dismantled. He thought better of the decision and resigned from the agency's top post on Nov. 5 to become president of the Medical University of South Carolina. "To be truthful," Edwards said in a departing address, "when I took this job, I knew that it was a losing proposition." But "all in all, it was worth leaving my oral surgery practice to take on the task of restructuring our energy problems." Donald Hodel, a 47-year-old lawyer and undersecretary of the Interior was immediately named by President Reagan to succeed Edwards as secretary of the department. Previously, Hodel served with the Georgia-Pacific Corp. and as administrator of the Bonneville Power Administration, a Northwest electric utility.

On Nov. 2, the President named Edward A. Knapp to replace National Science Foundation Director John B. Slaughter. Slaughter had resigned a day earlier to become chancellor of the University of Maryland at College Park. Appointed last September as NSF's assistant director for mathematics and physical sciences, Knapp had previously directed accelerator technology at Los Alamos National Laboratory in New Mexico.

Both appointments will require Senate confirmation. \Box

Berkeley voters ban ECT, shock psychiatric profession

The citizens of Berkeley, Calif., voted overwhelmingly last week to ban the use of electroconvulsive therapy, or ECT, within the city limits. The vote may represent the first occasion where citizens have taken the initiative in limiting the use of a specific medical practice. In response, organized psychiatry has raised questions not only about the wisdom but also about the constitutionality of the referendum.

Popularly known as shock therapy, ECT has been steeped in controversy since 1938, when it was first used in Italy as a treatment for psychiatric disorders. As the name suggests. ECT involves the use of electrical current (applied through electrodes to a patient's scalp) to cause convulsions; although it is not known how the convulsions work to abate psychiatric symptoms, many psychiatrists consider ECT an effective therapy (some call it the treatment of choice) for serious depression and catatonia. The ECT controversy focuses on side effects: where opponents argue that ECT treatments cause everything from headaches and nausea to significant memory loss, brain damage and even death, proponents say that ECT has been so improved as to eliminate significant risk. It is the prohibition that is dangerous, psychiatrists say, because it

denies patients their right to what could be a life-saving therapy.

The Berkeley initiative was organized by the Coalition to Stop Electroshock, a patients' rights group that gathered the 1,400 signatures necessary to put the measure on the ballot. Voters approved the prohibition by a margin of 5-3, making the administration of ECT a misdemeanor punishable by a \$500 fine or six months in jail.

According to Berkeley psychiatrist Wilson Yandell, who headed the opposition to the measure, the immediate consequence of the new law will be inconvenience rather than real danger; very few patients now receive ECT in Berkeley (48 in 1981), and those who require the therapy can travel 15 minutes to nearby Oakland where ECT is legal. Of much greater concern, Yandell says, is that citizens have passed a law that denies mental patients their right to appropriate treatment and intrudes upon the prerogatives of the medical profession.

Yandell says that the constitutionality of the new law will be challenged. By prohibiting the use of ECT, the Berkeley law contradicts the existing state law, which permits the use of ECT with patients who have volunteered informed consent. Ironically, Yandell says, the California law is one of the most restrictive in the nation, requiring the recommendation of two physicians; counseling about the possible side effects and the controversy surrounding ECT; a 24-hour waiting period before therapy begins; and the absolute right of the patient to withdraw from ECT at any time. Opponents of ECT argue that patients who receive ECT are so debilitated by depression that they are incapable of understanding the risks and offering truly informed consent.

In a related development, the Food and Drug Administration last week began hearings on a petition by the American Psychiatric Association to reclassify ECT devices. Currently the machines are included in the most stringent class of neurological devices, meaning that the government could prohibit marketing and demand further research on the safety and effectiveness of the product. APA would like to see the devices reclassified so that the only condition for marketing would be that the machines meet a performance standard; APA has written such a standard, which the FDA will be evaluating along with testimony from industry, mental health professionals and patients.

—W. Herbert

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