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This Week

244 HIV: More Tricks Up Its Sleeve

244 Truth in testing

245 'Human factors' and military decisions 245 Surfactant therapy: New questions arise 246 Domesticating an ancient 'temple town' 246 Cold cloud may contain unseen solar dust 246 Oxygen deficit again hinted as SIDS cause 247 Diffusion takes a controversial spin 247 Hot-and-cold Pacific fed Midwest drought

252 Biomedicine 252 **Physics**

Chemistry

Research Notes

Articles

254

249 Clouds Without a Silver Lining

> Cover: Made of frozen nitric acid and ice, clouds in the Antarctic Cover: Made of frozen nitric acid and ice, clouds in the Antarctic stratosphere play an integral role in creating the ozone "hole" by helping chlorine pollutants destroy ozone. Scientists believe the stratospheric clouds most critical to this process form thin veils at altitudes of about 20 kilometers. More beautiful but probably less culpable in ozone destruction are the pinkish nacreous clouds, also called "mother-of-pearl," that fill the lowest part of the stratosphere against the backdrop of a sunset's afterglow in this photo, taken from Antarctica's McMurdo Station in September 1987. (Photo by Jerry Harder, © American Geophysical Union)



Departments

242 **Books** 243 Letters

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Letters

Not acupuncture

"Acupuncture: An old debate continues" (SN: 8/20/88, p. 122) cites a talk I gave at the World Congress of Medical Physics and Bioengineering. It indicates that we used acupuncture to induce analgesia in rats. We do not use acupuncture in our experiments. Rather, we have been investigating trans-cranial electrostimulation (TE). This is very different from acupuncture. TE is delivered at about 10 microamps, well below sensory threshold, and does not elicit a flinch or startle response in the subject.

We found that TE applied with certain voltage, current and waveform structure did induce significant analgesia. We also found that naloxone, an opioid antagonist, blocked the analgesia effect induced by TE.

Malcolm Skolnick University of Texas Health Science Center Houston, Tex.

Results disputed

Sound advice for deaf learners" (SN: 7/30/88, p. 21) reports claims by a study of "oral" deaf students by Geers and Moog which are not supported by the data and seriously misrepresents two studies of deaf children taught through "total communication" (oral plus manual) instruction, for which I was principal investigator. All three studies were funded by NIH to study factors predictive of literacy in deaf adolescents. All three contracts stipulated that every effort be made to identify and test poor readers as well as good readers. We followed the terms of the contract; in fact, we eliminated 21 eligible students from Gallaudet University from our group (whose achievement was far superior to that reported for the oral-only subjects) in order to achieve a balance of good and poor readers. Since this was reported, it is professionally irresponsible for Geers and Moog to misrepresent our two studies.

The results of the Geers and Moog study do not support the traditional oral-only approach but rather represent a devastating indictment of the failure of the traditional

private oral schools for the deaf and highlight their isolation from the mainstream of American education. Geers and Moog originally proposed testing up to 100 oral-only adolescents from three private residential schools for the deaf, with the Central Institute for the Deaf (CID) being the largest source. In pilot testing it became obvious that one-third to one-half of the "oral" sample, consisting of adolescents who had begun their education at CID, had transferred to total communication programs. Rather than work through the public schools, the researchers obtained the final sample by advertising an all-expensespaid one-week camp in St. Louis with assorted field trips in exchange for 10 to 12 hours of testing. Subjects from ages 15 to 18 were flown in from Connecticut to Hawaii and from Quebec to British Columbia. CID, the best-known private oral school for the deaf in the United States, produced only 10 children who met the criteria.

Donald F. Moores Director, Center for Studies in Education and Human Development Gallaudet University Washington, D.C.

OCTOBER 15, 1988 243