

# COLUMBIA SPECTATOR ARCHIVE

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# Letters

## Punctures problematic

### **To the Editor:**

The recent wave of assaults by women on other women as reported in the *Spectator* and elsewhere is both sad and disquieting. There is considerable anxiety in our neighborhood; the attacks are the subject of conversation on the bus; Columbia-affiliated individuals have been among the victims.

At the same time, the medical aspects of this situation should not be exaggerated or minimized. Without knowing what the implements used have been, we can say that a puncture wound always carries the risk of infection, and such a wound should always be attended to. A tetanus shot may be in order.

A puncture wound made by a needle or pin which has punctured someone else beforehand may carry the risk of blood-borne illness, particularly hepatitis-B. A syringe with blood residue is even riskier. Hepatitis-B can be prevented or modified by the use of serums and vaccines. Although no syringe has been identified in these attacks, and even given the distaste most young people have for syringes and needles, such protection would appear to be in order for anyone attacked.

AIDS is a somewhat different matter. While AIDS can certainly be spread by needle sharing and by blood transfusion, the incidence of transmission by incidental needle stick—in the hospital for instance—is very low, and appears to require a certain set of conditions such as a fresh blood sample or a large amount of blood. Such conditions will not exist in discarded syringes where the relatively weak AIDS virus may be presumed inactive. At the same time, the risk from a random needle stick is not zero, it is taken seriously in the hospital, and should be addressed in these attacks. There is no preventative serum or vaccine, but there is discussion and testing which can be used to monitor the situation. The use of specific medications is probably not indicated in these cases, but could be discussed.

Anyone from the Columbia community who was a victim in the attacks on Broadway should call Dr. William Lloyd, in confidence, at the University Health Service. He can be reached at 854-2281. Anyone who wants to talk either individually or in an informal group about the effect the attacks have had on their own and their friends' feelings of safety and security, should call Doris Bertocci, CSW or Dr. William Sommer at 854-2878.

**Dr. Richard Carlson**  
**Director, University Health Service**