

Gift to OU to benefit students

Dennis Pawley, Chrysler Corp. executive vice president for manufacturing and an Oakland University alumnus, recently enriched the lives of OU students, faculty and staff through his gift of \$100,000 to the Oakland University Foundation.

A private, non-profit corporation, the foundation is comprised of business, civic and community leaders. OUF will use the donation to support such areas as student scholarships, academic improvements and technological advancements.

The gift symbolizes Pawley's long-term generosity and goodwill toward the university as well as excitement over OU's growth and strategic. It also demonstrates Pawley's interest and faith in Oakland and continues his unprecedented pattern of contributions of time and money, according to OU President Gary D. Russi.

"Dennis Pawley's commitment to Oakland and his responsiveness to our needs has been truly outstanding," Russi said. "His loyalty to our university and belief in its mission has been affirmed in so many ways. The university community is greatly in his debt for all that he does. His generous gifts and decisions strengthen the institution and its mission to attract students, help them learn and make their experience here rich and varied."

The Clarkston resident's efforts have been reflected in leadership roles with OU's Meadow Brook Theatre and Meadow Brook Music Festival as well as his support of OU research opportunities, faculty and student internships, educational seminars, academic enhancements, training, fund raising and recruitment. Among numerous relationships, he has served as OUF director, chair of the Meadow Brook Executive Committee and is a current OU trustee.

Pawley, who earned a bachelor's degree in human resource development at Oakland in 1982, was named Chrysler's Top Manufacturing Executive in 1991.

Medical examiner seeks infant death study

BY PAT MURPHY
STAFF WRITER

Two infants died recently in Oakland County, a grim reminder of the danger of positional asphyxia — a problem the medical examiner said needs more attention and public awareness.

A 7-week-old girl died Jan. 4, in Hazel Park while sleeping with her mother on a sofa.

Three weeks earlier, a 3-month-old boy died in Rochester Hills while sleeping in a water bed with his parents, who had been celebrating their wedding engagement. The father's blood-alcohol level was 0.19, according to investigators, or nearly twice the level at which a person is considered legally drunk.

In each case, autopsies were performed, and both deaths were classified as accidents. The girl's death certificate lists "positional asphyxia" as the cause of death. The boy's cites "positional/compression asphyxia."

Some positional asphyxia deaths can be prevented, according to Dr. Ljubisa J. Dragovic, Oakland's chief forensic patholo-

gist and medical examiner. But it will take more awareness on the part of the medical community and an educational effort to alert parents to the danger, he said.

Dragovic isn't necessarily against parents sleeping with infants. He and his wife Jadranka, also a physician, sometimes slept with each of their seven youngsters. In some cultures, the medical examiner said, parents sleep with infants as part of bonding.

But there's a danger, Dragovic said. Parents should be alerted that a deep sleep — particularly when induced by alcohol, drugs, sickness or fatigue — can lead to tragedy.

Dragovic has been trying to get that message to the general public since a study conducted by his office disclosed 29 post-natal asphyxia deaths in Oakland County from February 1992, through April 1996. The study found that 12 other infants died from the same cause in five other counties — Saginaw, Monroe, Jackson, Livingston and Sanilac — in which the Oakland medical examiner's office was

consulted.

In September, the results of the study were presented at a meeting of the National Association of Medical Examiners by Dr. Kanubhai Virani, chief deputy medical examiner and a West Bloomfield resident. They insist positional asphyxia deaths are too often misdiagnosed or under-reported leading to a general ignorance about a serious problem.

Dragovic, Virani and their former colleague — Dr. Mark A. Fischione, now a deputy medical examiner in Arizona — urged their fellow medical examiners to look for positional asphyxia as part of their routine investigation of infant deaths.

Dragovic defined positional asphyxia as death resulting from obstruction of the airways because of an entrapment position of the body, with the weight of the body being a critical factor in itself. Sometimes compression from outside the body — another body or object — adds weight pressure to the entrapment conditions, he said.

Some examples:

• An infant might suffocate in

bedding, sofa cushions or other soft materials.

• An infant might suffocate after slipping between sofa cushions or mattresses.

• An infant might die because of "over lay," that is, the body of a parent, sibling or guardian is on top of the baby, compressing its nose and mouth into the bed and causing suffocation.

In one case, Dragovic said, the baby fell asleep on a parent's chest. The baby suffocated in the parent's armpit, he said.

Position asphyxia deaths have always been around. But Dragovic said too often they are not diagnosed correctly, sometimes attributed to SIDS (Sudden Infant Deaths).

That view, however, is not universally accepted within the medical community and has prompted some discussions.

The president of the National Association of Medical Examiners (N.A.M.E.), for example, agrees positional asphyxia deaths may be under reported. But he doesn't necessarily have the same perspective.

"I heard Drag's (Dragovic's)

presentation (in September)," said Dr. James L. Frost, chief deputy medical examiner in West Virginia. "I might differ on some of his conclusions, but I agree this is a problem that needs to be looked at and considered."

On Feb. 18 in New York — as part of a program entitled, "Pediatric Forensic: Challenges in Child Abuse and Neglect," — there will be a discussion on infant positional asphyxia.

Frost agrees medical examiners should be open to the possibility that — as Dragovic and his Oakland colleagues insist — positional asphyxia deaths are more common than previously acknowledged.

The physician said he is also open to the need to change the way infant deaths are routinely investigated by police, paramedics or others medical responders.

The only way to accurately determine if a death is positional asphyxia, the physician said, is to carefully examination the death scene as well as an autopsy.

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