

Police

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a very capable and considerate job. I don't think there were any surprises."

Cauble said stories published in weekend editions of the Lincoln Journal-Star misinterpreted the committee's report and his own comments. Reports that a "bar-arm neck restraint" was used are not true, Cauble said.

That restraint is applied by placing the forearm against the front of a person's neck, supporting the forearm with the other hand and pulling backwards. It is a "final means of control," Cauble said, and is considered deadly force by UNL Police policy.

The newspaper reported Saturday that Veskrna used the "bar-arm neck restraint" and reported Sunday that Lincoln Police Officer Luke Wilke had used it. It stated Cauble had verified the latter claim.

But Cauble on Sunday told the Daily Nebraskan that was inaccurate. Cauble said no one used the "bar-arm neck restraint."

The committee report did not specify which officer used the restraint, but the report said, "as we understand it, this technique ... was used on Renteria."

Veskrna did try a "bar-arm take down," Cauble said, which takes a person from a standing position to the ground.

The move is done by standing behind a person, placing one hand around the person's wrist and the other by the shoulder. While pulling back on the wrist, the shoulder is pushed forward, straightening the arm and forcing the suspect off bal-

ance and to the ground.

Cauble said after Veskrna was unsuccessful in applying that move, Officer Wilke tried to apply a "lateral-vascular neck restraint."

That move is done by wrapping an arm around a person's neck, so the trachea is cradled in the fold of the arm, reducing risk. By closing the arm, the suspect then is restrained by pressure on both sides of the neck.

Wilke's attempt also was unsuccessful, Cauble said. Further attempts to take down Renteria were made, he said, and Veskrna tried a move in which she struck Renteria in the right leg with her knee.

The move is designed to hit a nerve, causing considerable pain but no injury, Cauble said.

According to the report, Veskrna told the committee she tried the move to distract Renteria and gain control of his arm. Four or five strikes, however, proved unsuccessful.

Cauble said those were the only actions Veskrna took against Renteria.

The committee report recommends that the use-of-force policy be rewritten, because it is vague and open to many interpretations.

Cauble said a policy that would address every issue was impossible, and training already was in place to address those questions.

Many of the issues raised in the report already have been addressed by the police department, Cauble said.

Cauble said the community relations training was inadequate — both at Grand Island and UNL — but said there never could be enough.

Breast cancer not top killer

By DeDra Jansson
Senior Reporter

Lung cancer has replaced breast cancer as the leading cause of cancer death among Nebraska women for the first time in the state's history, according to a report released by the Nebraska Department of Health.

The 1993 Vital Statistics Report showed that of 3,333 Nebraska women who died of cancer that year, 276 died of lung cancer and 267 died of breast cancer.

Marla Augustine, spokeswoman for the state health department, said the change was significant because breast cancer had been the leading cause of cancer deaths among women for many years.

"Breast cancer has for many, many years ranked in the top three causes of cancer deaths among women," Augustine said. "The significance is it's just not No. 1."

Augustine said she expected lung cancer cases to outnumber breast cancer cases.

"Lung cancer cases among women have been growing over the years, probably as a result of more women smoking," she said.

Augustine said she did not know why more women smoked.

Another report that the health department released recently showed that Nebraska women were less likely to get mammograms.

These are important because they can detect cancer early, when the chances for treatment and recovery are high.

The Behavioral Risk Factor Survey for 1991-92 showed that one-third of Nebraska women between ages 40 and 64 said they never had a mammogram. Women age 65 and older were even more likely to say they never had a mammogram, the report showed.

However, preliminary data from the 1993 Behavioral Risk Factor Survey indicates that trend may be changing. The number of Nebraska women age 50 and older who reported having a mammogram in the last year has jumped from 34 percent in 1992 to 43 percent, the data shows.

Augustine said the increase might have occurred because more women were aware of the need for mammograms. A new program offered by the health department may have contributed to that awareness, she said.

The Every Woman Matters Program was started two years ago to help women become more aware of the need for mammograms, Augustine said.

The program also offers free or inexpensive mammograms to women who normally could not afford them, she said. Women enrolled in the program pay only as much as they can afford based on their incomes, she said.

The program aims to reach low-income women older than 50 and, in particular, minorities, she said. Minorities tend to have less access to mammograms, she said.

The health department has enrolled more than 3,000 women in the program in the last two years, Augustine said. She said it was too soon to tell whether the program helped cause a decrease in the number of breast cancer deaths in the state.

The American Cancer Society recommends women have their first mammogram by age 40. Women between ages 40 and 49 who have had no symptoms of breast cancer, including lumps, should have a mammogram every one to two years. Women older than age 50 should have a mammogram every year.

According to the American Cancer Society, women can get high-quality mammograms at six Lincoln locations.

Those locations are Lincoln General Hospital, Bryan Medical Plaza, Saint Elizabeth Health Center, The Women's Clinic, Bryan Mammography Center and Health America.

As of Oct. 7, all were accredited for mammography by the American College of Radiology. To be accredited, those centers must meet strict equipment and personnel requirements.

Halloween

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day the 13th" movies.

"I remember being scared ... because my parents weren't home and I was all alone," Skaden said.

The worst part of Halloween, said Steve Zurlske, a philosophy graduate student, was getting stupid foods like raisins or popcorn when trick-or-treating. Caramel apples, however, were better scores, he said.

Jim Crable, a senior accounting major, remembers a particularly disappointing Halloween when he lost his trick-or-treating stash.

"Everyone divided theirs up and gave it to me, so it turned out all right," he said.

Because only children usually go trick-or-treating, some students said they found alternative celebrations for Halloween.

Costume parties, dances, haunted houses and just acting crazy all were listed as possible activities.

"I don't care if it is supposed to be for kids," Sweeney said. "Halloween is still fun."

Some students said they carried on family Halloween traditions like carving pumpkins. Laura Spies, a freshman construction management major, said she carved pumpkins for her room, but they rotted in four days.

Kristen Whitted, a sophomore broadcasting major, carved pumpkins for Chi Omega Sorority's Pumpkin Fest. The pumpkins were displayed in front of the house.

Skaden said he had left Halloween in his childhood.

"Halloween goes right by, and I don't even notice it," he said.


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