more than doubled, while the blood flow to the arms and legs dropped to 25 percent of typical flow rates. The pounding headaches, poor appetite, muscle cramps, etc., that climbers experience may be explained, at least in part, by the significant redistribution of blood away from less vital organs and areas, such as the stomach, to the brain in an attempt to survive a low-oxygen environment. The project collected a large data set of imaging duplex Doppler ultrasound of blood flow at high altitude.

Drs. Kamler and Macedonia suggest that climbers going to high altitude consider the pneumococcus vaccination called Pneumovax. It is a one-time vaccination that is considered safe and effective at preventing the major subtypes of pneumonia caused by pneumococcus bacterium. Pneumovax is usually only given to the elderly and people with impaired immune systems. High altitude appears to produce similar risks in impairment of healing and in damage to the system that removes contaminants from our airways. Pneumovax has minimal risks to high-altitude climbers with potential life-saving properties.

SCOTT HAMILTON

Erkimkang, North Face, and Khatung Kang, Ascents. In mid-August I went to the Langtang region, north of Kathmandu, where I retraced the steps of Bill Tilman, who visited the area in the late 1940s. Like Tilman, I made a base at the yersa (temporary settlement) of Langshisa, exploring and making acclimatization hikes in the area. I made an ascent of "Buddha Peak" (Tilman's name, locally known as Erkimkang, ca. 6100m), in three days round-trip from base camp, via the north face. The climb involved some moderate mixed climbing but was mostly snow and ice. I descended to the west, down a glacier. Tilman approached this by crossing the river downstream of Langshisa near the Yersa of Numathang, but now there is a small bridge at Langshisa itself. This may or may not have been the peak's first ascent.

In September I went to Pokhara by bus, then flew to Jomsom. From there I trekked over the Thorung La, and to acclimate climbed Khatung Kang (6400m) from the east by a moderate snow/ice route.

CHARLIE FOWLER

Cho Polu, First Official Ascent. Our team was composed of Dieter Rüelker, Guenter Jung, Dr. Olaf Rieck and myself as leader. On October 13, we started from Kathmandu, reaching Lukla by airplane and continuing on via the normal trekking route to Namche Bazar in a few days of reasonably good weather. On October 18, just as we reached Dingboche, it started to snow heavily, forcing us to stop for two days before continuing via Chukhung to Island Peak (Imja Tse) Base Camp. On the last ten kilometers we broke trail through one meter of snow and dug out a path for the yaks with shovels (while lots of trekking groups waited behind us to enjoy the fruits of our work when it was done). On October 23 and 24, the yaks reached the porter shelter near Island BC, but were not able to continue further to Island Peak or even Cho Polu BC. We lost three more days carrying the loads by ourselves before establishing our BC on the moraine east of Island Peak on October 26 at about 5200 meters.

Two days later we started our first reconnaissance, but due to the vast amount of snow on the Lhotse Shar Glacier it took us until November 1 to reach the base of the mountain. We approached from the west and put in a line on the west face of the col ("Hardie's Col," 6183m) on November 1 after two days of climbing under continuous avalanche danger. Due