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three or four other tigers hanging around, seeing whether the commotion meant a meal for them. My light hits the shark, which is twice as long as I am -- a stunning sight. He doesn't notice me and is merely re-orienting himself. I swim behind him for a minute or two, working hard to stay within sight of a disoriented, slowly swimming animal. Finally the folks in the boat overtake and recapture the tiger. Dean unloops the tail rope, and the shark is gone.

Overhead, the moon has set and the stars are even brighter. Dean looks at me. "Well?"

I say the obvious: "Nothing like that in the world. Incredible."

K. L.

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**According to the Museum of Natural History, your chance are of being killed while playing soccer in Britain are 6,000 times greater than being killed by a shark. And more people in the U.S. are killed each year by pigs than by sharks.**

# Encounters with the Top Predator

## *Readers report on five Bahamian shark dives*

Certainly one reason to dive the Bahamas is that at the right places you're bound to see sharks, up close and personal. However, even a shark dive may not be a shark dive. Look at these five readers' perspectives:

John A. McCormac (St. Petersburg, Florida) visited Scuba Bimini last summer with nine other divers, and though package value was good and the dive operation accommodating, the shark dive didn't measure up. "The advertised shark dive is infrequent, perhaps because it's a long distance, so the sharks are not accustomed to regular feedings. Only two nurse sharks, and a reef shark so small an amberjack chased it from the food. Long distance to shark dive site. Skip the shark dive, unless they develop it more."

Barry Yoss (Camp Hill, Pennsylvania) did the shark dive at Nassau Scuba Center in August. "Shark feed attracted 15 to 20 six- to eight-foot Caribbean reef sharks, one nurse shark, two

groupers, and numerous yellow-tails. Well controlled, but still exciting, especially with sharks coming over your shoulder; one brushed my chest. . . . The operation is friendly and accomodating."

The shark feed dive at Xanadu, says Lynn Offhaus of

Hamburg, New York, who was on Grand Bahama Island in December, was "exciting, and the crew made these dives safe." But other than that, "the reefs were mostly dead or badly damaged. We were allowed to dive our computers only on some of the dives. Changing dive sites was not offered for more experienced divers."

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I don't believe it's wrong to feed sharks any more than I believe it's wrong to feed birds in the back yard. They benefit from the food, and we benefit from the experience of seeing them consume it. What's the harm?

### *Feed 'Em!*

Sometimes if you want to experience something, you need to go out and make it happen. We need to learn to live together with other animals, not avoid them. We've spent the past eon fearing sharks. Isn't it about time we learned to appreciate them as something other than man-eating beasts that should be destroyed?

The food we're giving them is the same food they naturally eat (in fact, they're pretty picky about their diet). I'm sure the little bit each one gets from the milk carton doesn't even approach their daily needs. In the process, they're learning that we're their friends. We gain a better appreciation of their habits.

Bernie Hirsch  
U.S.A.

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Walker's Cay offers by far the most exciting Bahamas shark dive. In September, E. W. Strawbridge (Jacksonville, Florida) joined the

animals. "The reason to go is the shark dive! The feeding is done so the sharks do not directly associate the divers with the food. They

treat divers like a rock they have to swim around. You can be comfortably in awe in the midst of more than 100 sharks, along with large groupers, chubs, and snappers. We went back on nonfeeding days to photograph 20 to 30 sharks. Reef diving is unremarkable, but shallow and pleasant."

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## *Don't Feed 'Em!*

The top of my trusty (rusty?) Nikonos IV camera bears the bite of a shark's tooth, obtained during a shark feed in Vanuatu. The excited but pea-

brained pelagic blind-sided me as we lay on the bottom, and knocked my hand off the camera where it was poised over the shutter, biting the camera in the process. It was quite a few seconds before I had the courage to look at my right hand, which fortunately remained unscathed.

On another feed, in the Coral Sea, shark bait dropped from the chase boat floated down directly over our heads, and we scuba tourists had to scatter out of our predesignated hiding place to flee the middle of the feeding frenzy.

I can understand that a diver who has never had the experience might want to get a close look at these incredible creatures in action. However, my experiences lead me to believe that shark feeds might not be such a great idea. Maybe I'm just getting to be an old, not-so-bold diver, but I am perfectly happy to appreciate sharks in the wild without putting blood in the water to bring them up close and personal.

Kenneth D. Knezick  
Island Dreams, Houston

February saw Irby Hartley's (Hixson, Tennessee) second trip aboard the *Nekton Pilot*. "Diving sites varied from super wall sites to ho-hum. But the shark feed was only good for two divers who had air after 90 minutes at 55 feet. Saw one big hammerhead. While the chief divemaster has an attitude problem — needs some shore duty — the rest of crew worked their butts off; anything you wanted to do was supported. Boat is the ultimate dive base."

J. Q.

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# Affair of the Heart

## *When your doctor says yes but theirs says no*

Do you have any medical conditions? Do you take any medication? When you travel abroad to dive, you'll be asked to answer questions like these, sometimes in great detail. Then, if your condition or medication is on the dive operation's proscribed list — or some teenage divemaster thinks it should be — you may be refused the opportunity to dive. None of this "you-assume-the-risk" business; you're just not going to dive with them. They want no liability for you.

While there are clear reasons for the inquisition, it can get silly. A couple of years ago we got a letter from a reader who was not

permitted to dive on his Caribbean trip because he admitted to taking Prozac. The drug didn't count him out, but he was told that "depressed people shouldn't be diving."

So it's not surprising that many divers whose physicians have assured them they're fit to dive elect never to mention their medications or medical conditions.

However, the condition of reader Tom Alsip of Mobile — a benign one, he says — caught up with him in Bonaire. Alsip, 63 years old, has, as his personal physician writes, "relatively infrequent episodes of supraventricular tachycardia (SVT). When he has these, he is not incapacitated. I do not feel that these are a contraindication for him to dive." Alsip describes these incidents as rapid, fluctuating heartbeats.

While on a surface interval between dives with Sand Dollar Dive, Alsip felt one of his rare attacks coming on. He asked the boat operator to radio back and request an ambulance to take him to the hospital, where he could deal with the problem. They did (although Alsip says the ambulance was really a truck). At San Francisco Hospital on Bonaire, Dr. E. W. van de Griendt got Alsip's heart regulated, saw no reason for him to discontinue diving, and said so in a note on hospital stationery.

Alsip showed both notes to the Sand Dollar staff, but they insisted he visit their doctor, who