Shifting Manness



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The more things change, the more they stay the same. Or maybe a more accurate statement would be the more things change for some people, the more they stay the same for others. Consider your first-year dean's group. The people sitting around you eating lunch and moaning about the last microbiology exam in some conference room were probably, for the most part, at the same stage of their life as you. They had graduated from college within the last few years. They did their grocery shopping at the same 24-hour Kroger at about midnight on their way home from the library, just like you. They weren't sure about what they were going to do after the next test was over, let alone what residency program they would choose at the end of medical school. They probably weren't even sure about what residency programs there were to choose from.

So what's my point? Well, at the last dean's group meeting I attended, I was shocked to see that a classmate's child who was a tiny, bald infant at the start of medical school now has a headful of curly brown locks and was walking around in overalls, laughing and scheming to run around on the golf course behind Dean Pounds' house. And another classmate who was pregnant when we rotated on ob/gyn together was accompanied by a lovely blond-haired fellow who looked to be only a few years away from being the star player on a little league team. And there were new people at this meeting who hadn't attended the weekly lunches in the conference room two years ago: these were the spouses of formerly single classmates.

When I used to run into people in the hallways of the hospital we would commiserate over the agony of weekly Monday exams and being forced to eat dinner in Duke North or compare our chief residents and swap stories about oversleeping and being late for morning rounds. Now when I catch someone on their way

out of the lab we talk about where they are getting married, what kind of flowers they are going to have at their wedding, and the color of the dresses their bridesmaids will wear. Instead of worrying about whether they'll pass final exams, people worry about the residency match and finding houses at their residency sites that will be big enough to accommodate their families. Classmates now schedule visits to the grocery store during daylight hours and their shopping lists include baby food and diapers. Engagement parties and bridal showers are weekly events.

Yep, things sure have changed around here. And the last few years have gone by faster than Dr. Spach's slides on cardiac contractility. Well, maybe that's an exaggeration. But they've certainly gone by faster than I imagined they would when I stared blankly at the endless lists of muscles and their origins, insertions and actions two years ago. Pretty soon people will look at our pictures in the medical school administration hallway and make fun of our hairstyles. And although in a year I don't think I'll miss peering through a microscope trying to make some sense of a bunch of pink and purple swirls, I'm certain I will miss the people who were doing the same thing at the microscopes next to me and in the rooms down the hall. As a matter of fact, I already do.

But it's comforting to know that there are still a few people around who aren't quite sure what they will be doing in a year and haven't picked out names for all their children. I imagine there will even be some folks left at graduation who haven't completely finished planning their weddings (or at least haven't planned their honeymoons). And although it's a less frequent occurrence than it was two years ago, I still run into people I know at Kroger around midnight every now and then. Like I said, the more things change for some people, the more they stay the same for others.

Shifting Dullness

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Upcoming Events Around Duke and Durham Chris Gamard

- 1. Durham Alive: Enjoy your spring and summer evenings by getting out to these FREE concerts being held on the last Thursday of every month in downtown Durham. Cream of Soul plays on May 25th and Liquid Pleasure ("the more you drink, the better we sound") pours it on for the 29th of June. All shows take place from 5 to 7:30 pm at the Durham Civic Center Plaza in front of the Carolina Theatre. Call 682-2800 for info.
- 2. More concerts: Feeling down because you didn't get to go to the Jazz Festival? Here are some other great shows in the area to ease the pain: Buckwheat Zydeco plays awesome Cajun zydeco music on May 19th at 8pm at the ArtsCenter in Carborro (929-2787). The Triangle Brass Band will play a classical concert on May 17th at 8pm in Baldwin Auditorium on East campus (\$6, \$4 for students— call 571-3431). And for all you head-bangers, the 5th

- Annual Eno River Bluegrass and Old-time Music Fiddlers Convention comes to the West Point on the Eno Amphitheatre on Saturday, May 20th, from 1-7pm (990-1900).
- 3. Da Bulls: The Durham Bulls are back in their new state-of-the-art ballpark. This is a Durham tradition you simply must experience! Even if you're not a huge baseball fan, it's fun to be outside on a spring evening taking in the sights and, of course, the beer. The Bulls are in town on May 9th-11th, 19th-23rd, and 29th-31st. Call 956-BULL (or 688-8211 for group tickets). Play ball!
- 4. Duke Children's Classic: Get out of the hospital and exercise while supporting a truly worthwhile cause. The Children's Classic weekend takes place on May 19th-21st, with the 5K and 15K road races taking place on the morning of Saturday the 20th. Do it for the kids!



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Shifting Dullness is a Duke University School of Medicine production. Subscriptions are available for parents. The cost is \$18.00 for one year.
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Any and all submissions are welcome and need only be placed in the "Shifting Dullness Box" located underneath the candy shelf in the Deans' Office.

May, 1995

In Response

To the Editors:

You can imagine my surprise when, thumbing through the March 1995 edition of Shifting Dullness, I encountered a full-page letter written in response to my previously published treatise on antioxidants. If truth must now be told, that article was not intended for print. Nevertheless, the article found its way into the public arena, I am heretofore prepared to defend it. Like Galileo asserting the ways of the universe or Lieut. Frank Dreben babbling to the chief of police, I now stand naked before the medical school clad only with my belief in the virtues of eating broccoli-type foods.

I doubt that my critics are in any position to debate this issue. Has Jeff Drayer or Trip Meine ever seen a superoxide ion face-to-face? I have. Have Mike Bolognesi or Julie Story-Byerley even pissed off an oxygen radical, spent hours trying to regain the electron that it had stolen, only to see it go and ravage cell membranes anyway? No, they probably have not. I have seen what reactive oxidative species can do, and it's not pretty.

Our only hope, people, is antioxidants. Without them, we are at the mercy of these gnarly radicals. As for my colleagues who penned that infantile letter last month, they have unfortunately declared themselves to be anti-anti-oxidants. I, however, firm of mind and swift of pen, am passionately anti-anti-antioxidant. I hope my detractors burn in hypochlorous acid. Honestly.

Sincerely,

Michael Morowitz

All questions or comments are welcomed by the editors. Please submit any letters on diskette preferrably in Word Perfect format or mail to the editors using the address on the last page..

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Davison Council News

Vickie Ingledue

The 1995-96 Davison Council Elections are final!

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Nishan Fernando, Russell Huffman, Sarah Spratt, Talene Yacoubian

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Anthony Beutler, Mike Bolognesi, Mike Morowitz, John Scarborough

The 1995 Golden Apple Teaching Award winners are:

Clinical Faculty: Dr. Dan Sexton, Infectious Disease

Basic Science Faculty: Dr. William Bradford, Pathology

Housestaff: Dr. Mike Berend, Surgery. These awards were presented during intermission of the Student-Faculty Show on April 22nd.

Social Events

A **Spring Blow-out Party** will be held either Friday, April 28, or Saturday, May 6. Location to be announced. Watch for fliers!

The **Student-Faculty Tennis Tournament** will be held Saturday, April 29, with a celebration dinner afterward at the Hope Valley Farms Swim and Racquet Club. Call Ketan Bulsara (383-5726) if interested in signing up for the tournament.

Duke Med Night at the Bulls' new ballpark may become a reality later in the summer. Look for details as the days get longer!

GPSC Update

•GPSC Volleyball League play begins in early May. A team is made up of six members and each team must have two members of the opposite sex on the court at all times. Fliers are posted in the lounges and near the calendar. For more information, contact Heather Hayter at 684-2363

•Peter Back is serving as **GPSC rep** on the Medical Center Affairs Board of Trustees.

Community Service Update

-Congratulations to Jenny Sung, the recently elected Davison Council Vice-President for Service. Her first major profect is the

Children's Miracle Network Fair on Saturday, June 4th. Lots of volunteers are needed!!!!

This event not only raises money for a great cause, but also allows for fun interaction with children from both the hospital and the community. Please call Jenny at 867-530(Just kidding!) at 489-6952 if you are interested.

-Medical students are needed to volunteer at the Thursday evening clinic at the **Shelter for Good Hope**. This clinic functions as an ambulatory care unit as part of the Lincoln Health Center. Volunteer physicians see patients for no charge. Similar to the Rural Health Coalition, MS II-IV's can see and evaluate patients and assist the physicians. This clinic is a great opportunity to improve your clinical acumen while serving the community. Rising MS III's will be needed especially for the Fall. Please call Matt Hepburn at 490-5706 for details.



Announcements

OSR Update

by Mark Weinberg

• The Regional Meeting: Keep your eyes peeled for the OSR update of our regional meeting in Richmond, VA. Mark Weinberg, Jenny Sung, and Jeff Drayer attended.

• Congratulations: Congrats to Jeff Drayer, the MSI rep. Ask him lots of questions, tell him what's wrong with medical school, medical

education, your life, etc.

Congrats also to Mark Weinberg. He was elected chair of the Southern Region and will be serving on the adminstrative board of the OSR

beginning in November.

• Financial Aid: You recently received an OSR update about the impending changes in interest deferment. Under the terms of the lesgislation a Stafford loans of \$48,000 would transfer into owing close to \$66,000. WRITE TO CONGRESSIII A sample letter and addresses are available in Linda's office.

• Primary Care Day: Seth Kaplan (MSIII) will be coordinating the second annual primary care day on September 28. If you have any sugges-

tions let him know.

Any further questions, or if you want more information contact:

Jenny Sung 489-6952 Mark Weinberg 493-4373 Jeff Drayer 309-0084

-The **26th Annual AOA Symposium** was held on April 19th in order for third and fourth year students to present their original scientific work. Special recognition was awarded for exemplary presentations and posters. The winners were: oral presentation, Bryan Krol and Edward Norris; poster presentation, William Downey, Carla McGuire, Steve Lane and Ben Yeh. Congratulations to everyone who participated.

-The first annual Shifting Dullness Culinary Competition was an overwhelming success. The winners and honorable mention finalists were as follows:

CategoryWinnerHonorable MentionDessertLisa CriscioneAllison EvanoffPasta Sauce Beth GibbsJohn PazinHome BrewRory PryorDave LeeMike Dicuccio

Each of the winners will enjoy a dinner for two at a fine dining establishment (Macaroni Grille, Cafe Parizade and Satisfaction). However, the real winners were all who attended as they had the privilege of sampling the delectable cuisine and robust home brews. Thank you again to everyone who submitted entries and to the exquisitely discriminating judges.

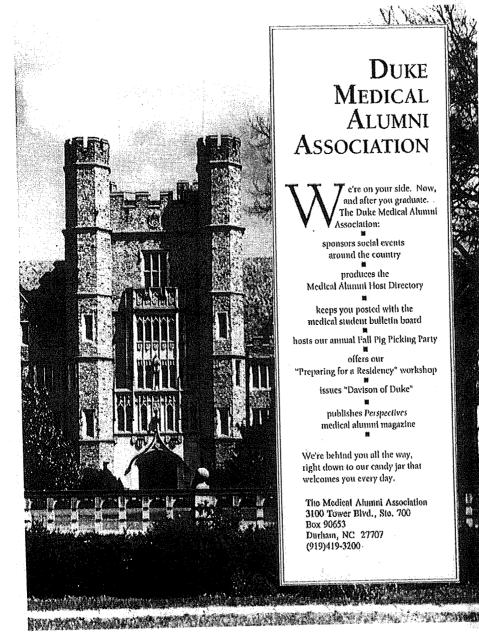
-The Basic Science Review Course is

Over!!! Thank you to everyone who helped with the lectures, including Russell Rothman, Jeff Cusmariu, Umesh Marathe, Chris Gamard, Julie Lapp, Crystal Bernstein, Cynthia Boyd, Elahe Mostaghel, Shannon Putman, and Steve Crowley. The course was organized by the MS III class to supplement our preparation for the Boards. We chose the topics and the lecturers, and assumed responsibility for all AV materials during these lectures.

What about next year??? It is up to the current second year class to decide whether or not this course will occur next year. If anyone is interested in organizing this project, call Matt Hepburn at 490-5706. We have evaluations of each lecture. Make this happen if you want a valuable review!!!

-Thank you to Eric Williams and Jason Weinberg for directing a superb Student-Faculty Show.

Shifting Dullness



What's in a Name?

Jane "Lolita" Woo

What's in a name? That which we call Clostridium perfringens, by any other name would smell as rank.

In the movie "When Harry Met Sally...," Billy Crystal unforgettably declares that Sheldon isn't a sexy name. In "Stranger in a Strange Land," someone says that women's names that end with the letter "a" suggest a C-cup. In "The Tall Guy," the female protagonist is complaining that her last name is Lemon, and Jeff Goldblum offers, "Well, it's better than Hitler or Tampon."

Is a name just a label that can be peeled off? Theoretically yes, but in reality, no. Can you honestly say that you'd take a job applicant seriously if he or she were named Precious? Can you imagine yelling, "Oh, Bertha!" or "Yes, Myron!" in the throes of passion? Don't you think you might be biased toward hiring somebody named Einstein, as opposed to someone named Dahmer?

When I was twelve, I read a survey which said that men deemed sexy the names Susan and Jennifer ("867-5309"). Jane and Zoe were among the least sexy, but women with these names were more likely to be regarded as intelligent and competent. (I won't comment on the appalling intimation that being smart and being attractive are mutually exclusive.) So, as a seventh-grader, I resigned myself to a sinless, albeit professionally successful, life. Do girls named Elizabeth feel more majestic and important than those named Judy? Do boys named William feel confident, since they're identified with the man who conquered England Do Dominiques grow up to be in 1066? overbearing, and Ashleys docile?

Why are so many people particular about what they call their partners? My sister's boyfriend wants to call her by her real name (Lillian), rather than by the nickname (Beadsie) which she's been using all her life. He thinks the name Lillian is beautiful. We have a friend whose husband hates her name (Martha) and opts always to call her Honey. My mother frequently calls her husband "T.R.," instead of Tom. It's also very common for people to use a partner's unabbreviated name, while everybody else uses a shortened form, e.g., Kenneth for Ken, or Kimberly for Kim. (I don't pretend to understand this phenomenon. It seems to me that the informal name is more intimate and would therefore be preferred by the partner, but maybe this line of reasoning merely belies my own preference for monosyllabic abbreviations). Admonishing her readers of the danger of calling one's lover by the wrong name, Miss Manners wisely points out, "Why do you think the word darling was invented?"

On the subject of surnames, I shall first say that I can't believe how many people find it difficult to pronounce Woo. It's an English verb. for pity's sake. On the whole, though, it's a fun name. On Valentine's Day, people like to give me those chalk hearts that say, "Woo me." Over the years, I've been called Woo, Woomeister, Wooster, Woolette, Woo Woman, Woo Woo, Wooman, and Woomb. These charming sobriquets notwithstanding, I plan to change my name when I get married. Like many other women and girls, I've tried on various last So far, my favorite has been names. Spiegelman. The decision to change my name depends on several criteria. First, the name shouldn't have obvious scatological or sexual implications (e.g., Dick, Schitz, Fuchs). Second. it shouldn't be inordinately difficult to spell and/or to pronounce (e.g., Krzyzewski). Third, I don't want a name that rhymes with my first name; I wouldn't want to be Jane Wayne. Fourth, I'm tired of being at the end of the alphabet, so anything that's even further down than Woo is out. (Eight years ago, a British study revealed that people whose last names begin with S-Z die 10 years earlier than those with A-R names.) Fifth, I don't like to write capital G's and I's, so I'm afraid that Richard Gere will have to settle for Cindy Crawford. Sixth, it would be imprudent for me to take a very common surname. Imagine the ordeal of a very common patient who's prescription v

In light of just keep my i romantic. Th have a lot of thought of all mature femal matter. My i wanted to m begins with H friend tried (Davidson) at name is McM the middle of Norton's mot shedding her and Jody Dic wait to change

Not to be Sean believe should have refuses to tak kids will take certain name Steele and W much like "s both took a n Spiegs, the g taking, says misspelled ar from adopting

Regardles Shakespeare' matter. It Nevertheless. entertaining a to the outrage hilarious, n importance. very common surname. Imagine the ordeal of a patient who's trying to fill an MS Contin prescription written by Jane Smith.

In light of all these exceptions, why don't I just keep my maiden name? Ah, I am a hopeless romantic. The reader might think, "She must have a lot of spare time on her hands, if she's thought of all this." Not true. Plenty of diligent, mature females have considered this delicate matter. My friend, Hollie Harton, has always wanted to marry someone whose last name begins with H, so that she can be HHH. Another friend tried on her boyfriend's surname (Davidson) at the end of their first date. Her last name is McMillan, and she claims that being in the middle of the alphabet is stressful. Carol Norton's mother had always looked forward to shedding her maiden name, Eck. Nikki Zarick and Jody Dick, two of my college friends, can't wait to change their names.

Not to be left out, men have joined in, too. Sean believes that everybody in his family should have the same name, so if his wife refuses to take his name (Kennedy), he and the kids will take hers. Tom has observed that certain names shouldn't be joined by a hyphen. Steele and Woo, for example, would sound too much like "steel wool." Mosha and Rebecca both took a new name when they got married. Spiegs, the guy whose name I wouldn't mind taking, says that his surname is frequently misspelled and he plans to discourage his wife from adopting it.

Regardless of what Ms. Capulet says in Bill Shakespeare's celebrated tragedy, names do matter. It's an unfortunate prejudice. Nevertheless, they're useful at the very least and entertaining at best. Ranging from the ordinary to the outrageous, from the embarrassing to the hilarious, names are hardly of nominal importance.

In Search Of...... NEW STAFF!!!!!!!

As the MS IIIs proceed into their fourth year and begin to comtemplate Board exams, subinternships and Residency applications, the time that they can devote to Shifting Dullness becomes limited. THIS PAPER NEEDS NEW BLOOD!!! We are asking for volunteers willing to carry on the fine tradition of this information source. We need:

Editors, Photographers, Artists and Writers.

Anyone who feels they would like to be an editor and shape the future course of this newspaper, please promptly contact Matt Hepburn or Ed Norris at 490-5703 (we're roommates), or Jamy Ard (688-6410). We would also welcome any new creative talent. Get involved, help us out and make a difference!!

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The Foibles of Free Food

Stuart Winter, MD

The editors of Shifting Dullness are pleased to have this article from Dr. Stuart Winter. He is currently finishing a fellowship in Pediatric Hematology-Oncology this summer and will be moving to New Mexico. Dr. Winter is an avid reader of Shifting Dullness.

We encourage all readers of Shifting Dullness to submit articles.

The Red Eye cafeteria opens every night at 7:30 p.m. It is here that on-call physicians break from busy schedules to enjoy a nutritious dinner, free of charge, courtesy of the Duke University Medical Center. Most physicians dining in the Red Eye are residents, although a few fellows and attendings dine there too; everyone must "sign in" and "pass" the Red Eye Attendent, who sits strategically by the entrance. I recognize most of the faces in the crowd, but wait, I see a face I don't recognize: eyes held to the ground, glancing nervously around, doesn't resemble name badge, stuffing cookies into every pocket . . . must be a medical student! Medical students are not allowed in the Red Eye. Nevertheless, I have enjoyed dining with medical students on many occasions, and on their part, I have seen some very creative methods of gaining access to the Red Eye. Means of access fall into three main categories: Plaintive/Bartering, Masquerading and "Other".

Plaintive/Bartering This method requires a glassy-eyed, hollow-cheeked appearance. Extra points go to those that can develop of course tremor to go with the facial expression. In the words of the Attendent, "you've got to look like you haven't eaten for a couple of months". Begging helps, but not to the point of being obsequious. Those wishing to barter a free meal usually promise services-in-kind. For instance, the Attendent rests comfortably at night knowing that he has this coupon: "Free Antibiotics With Your Next Episode Of Gram Negative

Sepsis". On the other hand, he's not expecting to use his coupon for "10% Off Your Next Visit For Pelvic Inflammatory Disease".

Masquerading This is the most common method to gain entrance to the Red Eye. Friends that are residents must be willing to provide the medical student with a pager, white coat, and a name badge with "MD" on it. This method works well when the Red Eye is busy. For the best effects, medical students arrange to be paged the moment of walking through the door. To get to the phone, they must saunter past the Attendent. While on the phone, they say important words like "cardioversion", "epinephrine" and "sub-acute sclerosing panencephalitis". When finished with the conversion, they just blend into line, and that's all there is to it. Oh yeah, don't forget to give the pager back to the rightful owner, or you could be in for a long night.

I see a face I don't recognize: eyes held to the ground, glancing nervously around, doesn't resemble name badge, stuffing cookies into every pocket . . . must be a medical student!

"Other" In this catergory, creativity know no bounds. The Attendent's favorite story involves a female medical student who ate dinner at the Red Eye and left without so much as a nod of thanks. An invitation back to the Red Eye was looking very unlikely, until one day she showed up at the door "with a big smile and a very short miniskirt". Some things will never change.

I'm glad the medical students can occasionally get past the Attendent. One day, you will all have MD degrees, and when you do, bon appetit!



Photographs from our Immensely Successful First Annual Beer Brewing and Cooking Contest



May, 1995

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Journal Watch by Umesh Marathe

Safety, immunogenicity and efficacy of live attentuated Vibrio choleraa 0139 vaccine prototype.

Coster et. al The Lancet 1995;345:949-52.

Recently a new serogroup of Vibrio cholerae,0139, has spread rapidly in areas where 01 cholera is epidemic. This indicates that immunity to 01 cholera is not protective against 0139 and new vaccines are neeeded. Attentuated V cholerae vaccines were made by deleting multiple copies of the cholera-toxin genetic element from two virulent strains of the organism. The purpose of this study was to evaluate the safety. immunogenicity, and efficacy of three vaccines in 12 healthy volunteers. Symptoms of all vaccines were mild. Immunogenicity was assessed by measuring vibriocidal titers, antiviral antibodies were increased four to eight fold for two vaccines. For volunteers receiving the two immunogenic vaccines, live virus challenges were initiated. The clinical efficacy of these two vaccines was 83%. The authors concluded that a particular vaccine subtype, Bengal-15, is a safe live attentuated vaccine candidate for cholera caused by the 0139 serotype.

Rebound increase in thrombin generation and activity after cessation of intravenous heparin in patients with acute coronary syndromes.

Granger et. al Circulation 1995;91:1929-35.

Heparin has become an integral component of patients with acute coronary syndromes. Recently, investigators have identified a clustering of thrombotic events following the abrupt cessation of heparin, which suggests there may be a rebound increase in thrombin activity. This study examined 35 patients with an acute MI or

unstable angina who had received at least 48 hours of intravenous heparin. Patients underwent ST-segment monitoring, and blood samples were collected for determination of thrombin generation and activity at 5 time intervals following cessation of heparin therapy. Results indicate that a transient rebound increase in thrombin activity as well as in activated protein C occur upon sharp discontinuation of intravenous heparin. Four patients had evidence of ischemia by ST-segment monitoring. Clinicians should be vigilant for associated thrombotic events when intravenous heparin therapy has been abruptly stopped.

In vivo emergence of HIV-1 variants resistant to multiple protease inhibitors.

Condra et. al Nature 1995;374:569-71.

Inhibitors of HIV-1 protease have entered clinical study as potential therapeutic agents for HIV-1 infection. HIV-1 reverse transcriptase inhibitors have been limited in their clinical efficacy by the emergence of resistant viral variants. In cell culture, variants resistant to protease inhibitors have been derived. The authors report in this short communication the characterization of resistant variants isolated from patients undergoing therapy with the protease inhibitor MK-639. Five of these variants exhibit resistance to a panel of six structurally diverse protease inhibitors. This suggests that combination therapy with many different protease inhibitors will not significantly affect viral activity. Also, previous therapy with one compound may lessen the benefit of subsequent treatment with a second inhibitor.

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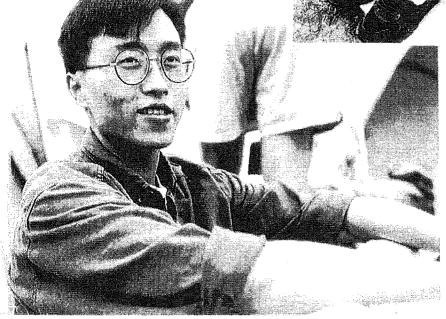
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Santambrogio et. al Annals of Thoracic Surgery 1995;59:868-71

The solitary pulmonary nodule often presents a diagnostic challenge that frequently requires surgical intervention for a definitive diagnosis. The authors have conducted a randomized, prospective trial to evaluate the diagnostic efficacy of video-assisted thoracic surgery versus a lateral thoracotomy. The study group consisted of 44 patients with a solitary pulmonary nodule randomly divided into two equal sized groups. The operating room time was approximately 30 minutes less for the videothoracoscopy group than the lateral thoracotomy group. Five patients in the videothoracoscopy group required conversion to a lateral thoracotomy. The authors conclude that video-assisted thoracic surgery seems to be as effective as lateral thoracotomy in the diagnosis of the solitary pulmonary nodule, but causes less discomfort and requires a shorter hospital stay, approximately 3 days less.





May, 1995

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Roadside, cont. from 15

Some of them will even have Medicine or Surgery left - and a few unfortunate souls may even have both yet to do. Scary, ain't it?

Spring cleaning. Atruly scary proposition, especially in a house that may or may not contain more than the legal limit of unrelated, Y-chromosome-bearing individuals. The fridge, bad as it once was, has reached a state of equilibrium now; we feed it occasionally, and it promises not to get too unruly or moldy. However, other parts of the house defy any attempts at cleaning.

Take, for example, the garage. This is a toxic wasteland. On moving in, we were forced to pack all our belongings in here while the house was re carpeted, a process of no less than three-week's duration. The previous tenant, of course, left much refuse in the garage. A few old beds. Miscellaneous bags of unidentifiable garbage. A sixties-style old hi-fi credenza. We actually found some old bottles of Prozac in this place, obviously intended to help with the coping of this disaster.

The garage now contains, in addition to the refuse that the previous tenant has failed to remove in the past year, boxes of our stuff as well as miscellaneous furniture from previous roommates. There may or may not also be a spare washer and dryer in the back - the archaeological team has yet to complete its initial survey. But, hey, the previous tenant, a Billy Sunday type, promises he'll remove it as soon as he can. Yeah, right.

Panic. Yes, this is something we all do. I know I'm not the only one who's experienced full-fledged panic attacks, replete with racing heart and spinning world. After all, it's only BOARDS, it's only the biggest test I've ever taken, and I can panic if I want. Oh well, one of these days I guess I ought to at least air my study books out - they're brand new, and probably reek of formaldehyde. Plus they need dusting. Oh well, boards are coming, gotta run. Three miles to go. ■

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Shifting Dullness

Roadside, cont. from 16

nothing like the experience of facing the challenge of a 95-degree day (okay, maybe it's not that hot yet) with a gentle trot through the forest. It is, after all, only three miles, it takes less than half an hour, and it doesn't hurt all that much. And it looks good to run. I have these visions of me, humble me, Olympictrained distance runner, ready to conquer any slope, any course, any distance.

In reality, I usually haul myself along in a less-than-graceful manner around the track, occasionally pausing to scrape the moss from my tongue. Ah me. Then there's some of my more intense runner-friends, who never run less than six miles at a time, or who occasionally run marathons. Thankfully, I have not reached this level of masochism, and if I ever do, I hereby ask you to put me out of my misery. And now, a brief intermission for a runner's quiz: The best thing about running is . . . Yes, you guessed it, STOPPING!

Of course, for the really hip, there's always roller-blading. I recently acquired a set of blades and a generous amount of padding, and do enjoy zipping around on them. Plus, it's a great work-out. And it sure as hell beats studying for some dippy exam. There is one slight problem: the roads around my house are uniquely unsuited to the practice of inline skating. In fact, with a few exceptions, they're a downright travesty. So I'm left with scouting Durham for available parking lots. A few come to mind.

Lowly PG-III is a wonderful place to go blading. The straight-aways are plenty long enough, and the slopes are easy. Just don't skate blatantly by the Front Office, and don't do anything to alert the Scream-Cam. And beware the Public Safety Goons and their snarky little Minivans with the Hip Yellow Lights. They, ah, don't appreciate the aesthetic beauty of blading in the deck; they would rather kick your butts out of there (not that I have personal experience with this).

There are other places to go, naturally. The large lot by the CCIF (the Community Center for Involuntary Flatulence - oops, sorry, the Cance Center Isolation Facility) is actually a pretty decent place to go, and I don't think they can really kick you out of there. I do have thes dreams of someday hitching a ride off a bumpe onto 15-501 just for the hell of it. Sorry, tha road is a skater's dream - acres and acres of new smooth pavement.

Golf. I haven't been doing a whole lot of thi lately, probably because Mr. Citibank is cur rently unhappy with my credit status (or, alter nately, they could be really happy, seeing a they are finally making some money). But, on: gorgeous day when I'd rather not be in lab, I can think of nothing better than driving to an open field and beating the hell out of a little white ba while learning new and inventive ways to caldown divine retribution on my clubs, the course, the bird that chirped, or the mosquit that bit.

Television. The bane of society. That black box that sucks all creativity and free-though from your mind. Of course, the America's Cuis on now, and that's always a good way to wast several hours. And Jeopardy! - can't miss it And Frasier. And Thursday Night. And so on . . I guess I seem to get sucked in easily.

Of course, for the mentally underdeveloped we have the day time talk shows. Ricki Lake and Montel Williams and (heaven forbid!) Richard Bey. For those Second Years out there, these ar shows normally on from 3-6 pm, a time of the day when you are, of course, doing more productive things, like changing bed-pans, or per forming rectal exams. But don't worry, Third Year will come, and you can avoid these show like the rest of us do.

Incidentally, a strange notion struck me a few weeks ago. We Third Year Types are, for th most part, finishing up by now; some of us may even already be back on the wards (heaver forbid!). And the Second Years, poor them, ar slightly more than halfway done with their year

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Shifting Dillness

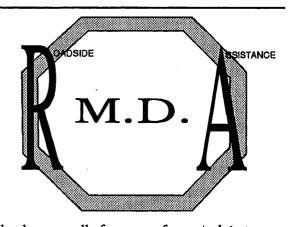
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THE USMLE IS COMING,

the USMLE is coming . . .

And thusly April has passed, and summer is around the corner. And thusly a young third year's thoughts turn to the outdoors, boards, sports, Boards, exercise, and did I mention BOARDS? And, as we all prepare to exit labs in a less than glorious manner, I can think of nothing I'd rather be doing than studying twelve hours a day for some blasted test. Except, of course, digging out an ingrown toenail. Or picking lint from my navel.

Why is it that I cannot bring myself to study for boards? I have, after all, bought my review books. I must say that they look mighty fine lying in a stack on my bedroom floor, appropriately next to the Piles of Dirty Laundry and the Heaps of Miscellaneous Paperous Refuse. Let's take a look at what factors might



lead any or all of us away from studying.

Gorgeous weather. This may or may not be my chief problem. With gorgeous weather comes the irresistible desire for physical activity. Why study when your time is better spent running, or roller-blading, or golfing?

Yes, despite knee and ankle problems, I manage to run a few times a week. There's

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Shifting Dullness

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