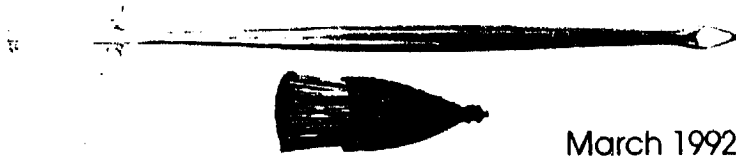


Shifting Dullness



March 1992





News Capsules

Michael Weiner

• Foscarnet (phosphonoformic acid (Foscavir)) is a synthetic antiviral drug for CMV retinitis in patients with AIDS, especially in ganciclovir-resistant cases. An organic pyrophosphate analogue, it acts by inhibiting HIV's reverse transcriptase and herpesviruses' DNA polymerase. Thus, it is also effective against some acyclovir-resistant cutaneous lesions in patients with AIDS. Although more expensive (\$65/day) and less well tolerated than ganciclovir, foscarnet is generally not myelosuppressive and, when used in conjunction with zidovudine, is thought to have synergistic activity against HIV. Adverse effects include nephrotoxicity, anemia, hypocalcemia, hypomagnesemia, hypophosphatemia, and hypokalemia. The usual dose is 60 mg/kg IV q8h x 14-21 days, followed by 90-120 mg/kg IV qd (lifetime maintenance). Ganciclovir remains the drug of choice for non-AIDS CMV ((1) Foscarnet, *The Medical Letter* 34 (1992):3-4; (2) Studies of Ocular Complications of AIDS Research Group, and AIDS Clinical Trials Group, Mortality in patients with the acquired immunodeficiency syndrome treated with either foscarnet or ganciclovir for cytomegalovirus retinitis, *NEJM* 326 (1992):213-220; (3) Foscarnet useful against AIDS-related CMV retinitis, *Ophthalmology Times*, 1 Jan 1992, p. 41; (4) M. S. Hirsch, The treatment of cytomegalovirus in AIDS—more than meets the eye, *NEJM* 326 (1992):264-265).

• Functions of many cerebral cortical neurons are determined after neurogenesis. To label progenitors and progeny of cerebral cortical cells, a library of 100 retroviruses was injected into lateral ventricles of fetal rats. Progeny of a single progenitor share the same viral tag, regardless of neuronal migration through the cortex. Researchers found that in many instances, a cell's progeny were distributed throughout the neocortex, often including a variety of functional regions. This suggests that these neurons' functions are specified after neurogenesis, perhaps through subsequent intercellular interactions ((1) N. Angier, A brain cell surprise: genes don't set function, *The New York Times*, 28 Jan 1992, p. B5; (2) C. Walsh and C. L. Cepko, Widespread dispersion of

neuronal clones across functional regions of the cerebral cortex, *Science* 255 (1992):434-440).

• CF gene transfer leads to production of vital proteins. Mutations of the human cystic fibrosis transmembrane conductance regulator (CFTR) gene, located on chromosome 7, are responsible for CF. In vitro, chloride permeability can be stimulated in some cells infected with a normal gene. Obstacles to gene therapy for CF have included the complex respiratory anatomy and generally slow epithelial turnover rate. A normal cDNA has now been transferred, using a replication-deficient adenovirus vector, directly to tracheal epithelium in cotton rats. Following infection, human CFTR protein was detected in bronchial epithelial cells, and transcripts were found for up to six weeks. The new in vivo work increases the hope for success of gene therapy in patients with CF ((1) R. Kanigel, Scientists intent on taming a killer, *The News & Observer*, 2 Feb 1992; (2) M. A. Rosenfeld et al., in vivo transfer of the human cystic fibrosis transmembrane conductance regulator gene to the airway epithelium, *Cell* 68 (1992):143-155).

• Fragile-X carriers detected rapidly with inexpensive test. Fragile X syndrome, the most common inherited cause of mental deficiency, stems from an increased number of CGG repeats on chromosome X. A clinical test for the gene takes 10-14 days and costs about \$200. Researchers have now devised a more reliable test, and some speculate that it could provide results within 36 hours, at a cost as low as \$50. The test uses the polymerase chain reaction, electrophoresis, and hybridization to a (CGG)₅ probe. Although the method has correctly identified all tested carriers and affected males, success in detecting affected females has varied, and suggests that exclusive use for prenatal diagnosis await further trials ((1) J. E. Bishop, Test developed for defect tied to retardation, *The Wall Street Journal*, 4 Feb 1992; (2) R. G. Pergolizzi et al., Detection of full fragile X mutation, *Lancet* 339 (1992):271-272.)

(see Capsules, p. 3)

• Myotonic dystrophy (DM) is characterized by increasing sizes of chromosome 19 as it is passed through generations. Patients with DM, an autosomal dominant disorder and the most common form of adult muscular dystrophy, experience muscle weakness, myotonia, and cataracts, among other symptoms. The progressive chromosomal enlargements, thought to be insertion or duplication events, are associated with increasing severity of disease and earlier onset (anticipation) in subsequent generations. Researchers have now isolated virtually the entire gene, whose abnormal form is active in brain, cardiac, and other muscle tissue. This work will likely lead to earlier and more reliable diagnosis ((1) Genetic flaw is linked to muscular dystrophy, *The News & Observer*, 6 Feb 1992, p. 1A; (2) H. G. Harley et al., Expansion of an unstable DNA region and phenotypic variation in myotonic dystrophy, *Nature* 355 (1992):545-546; (3) J. Buxton et al., Detection of an unstable fragment of DNA specific to individuals with myotonic dystrophy, *Nature* 355 (1992):547-548; (4) C. Aslanidis et al., Cloning of the essential myotonic dystrophy region and mapping of the putative defect, *Nature* 355 (1992):548-551).

• Laser to fight CAD. The Food and Drug Administration has, for the first time, approved a laser device to treat occluded coronary arteries. The AIS Excimer Laser Angioplasty System may be used alone or in conjunction with balloon angioplasty. Studies of the new plaque vaporizer have shown successful revascularization in 91% of cases; of patients reevaluated six months after treatment, 56% still had patent arteries. Laser treatment may be indicated especially in patients with unusually long plaques (FDA Electronic Bulletin Board, bulletin P92-4, 6 Feb 1992).



Student/Faculty Show t-shirts now available

Shifting Dullness

MSI

Franco Recchia

CONGRATULATIONS! to Lella Posaw and Scott Lunin for their Emmy award-winning performances on General Hospital with Dan Rather; to Daryl Chen, on his recent engagement and honeymoon plans to backpack through eastern Mongolia; to Beth Jo Berkowitz, recent mother of twin boys, rumored to be named Wayne and Garth; to roommates Peter Argenta, recovered completely from his longterm syphilis, and John Savarese, improving steadily after the recent trauma of his first date not with Pete; to Diane Allen, winner of the 1992 Ms. Amphitheater pageant, and to runners-up Ajita Grewal and Robb Romp.

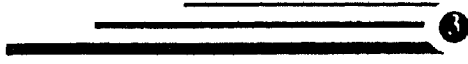
Near-future activities include: a mailer to be sent on behalf of the first-year class to new acceptees - give your submissions to Franco (Box 2709) ASAP; a class outing with the "Outward Bound" program (a day of frolic in the forest) - see Andrea Coviello for details; spring clean-up for Adopt-a-Highway; work with Habitat for Humanity; Intramural softball; and an official Devin Binder-sound-alike contest.

In the words of philosopher-in-residence Chad Hughes: "This block won't be so bad once it's over."

MSIII

Lyndon Jordan

1. Student-Faculty Show T-shirts now available while supplies last at the Medical Center Bookstore (temporarily located at Trent Hall).
2. Parents Weekend is scheduled for April 11-12.
3. Davison Council invites you to the Fourth Annual Davison Ball on March 20 at the Sheraton Inn University Center. Tickets are \$5. See Len or Mary for details.
4. AOA Research Symposium planned for April 16. Watch your mailbox for details.
5. Course registration for summer classes and rotations deadline: March 2. Remember to obtain Dean approval for your work prior to that date.
6. MSIII Beach Trip being planned for May. Watch for information. Call Lyndon Jordan for details: 493-7877.



Announcements

Income Taxes: The Financial Aid Office has mailed a copy of IRS #520 *Scholarships and Fellowships* to each student whose grant or scholarship exceeds the cost of tuition, fees, books and supplies. Whether to file a tax return is the student's responsibility.

Career Opportunities with the U.S. Public Health Service:

1) National Health Service Corps (NHSC) Scholarship Program—Provides up to 4 years of full tuition and stipend funding. Requires one year of clinical practice in Health Professional Shortage Areas per year of funding (minimum service obligation is 2 years). Preference given to those interested in primary care and to those from disadvantaged backgrounds. Application (available in Financial Aid Office) deadline 3/27/92.

2) Commissioned Officer Student Training and Extern Program (COSTEP)—Provides \$1850 monthly salary plus travel expenses for work for many different organizations (Indian Health Service; Health Resources and Services Administration; National Institutes of Health; Food and Drug Administration; Centers for Disease Control; Alcohol, Drug Abuse, and Mental Health Administration; Agency for Toxic Substances and Disease Registry; Agency for Health Care Policy and research; Bureau of Prisons; U.S. Coast Guard; Immigration and Naturalization Service; Environmental Protection Agency.) Academic credit may be available.

Shaver Hitchings Scholarship: \$400 scholarship designed to recognize the graduate student, physician's assistant student, or medical student committed to helping others in the area of drug and alcohol addiction. Application (available in Financial Aid Office) deadline 3/15/92.

Northern California Black Women Physicians' Medical Student Emergency Grant Fund: \$500 award for an African-American medical student from Northern California in emergency need. More info in Financial Aid Office.

North Carolina Academy of Family Physicians Foundation: \$1000 available to medical students in financial need seeking careers as family physicians. More info in Financial Aid Office.

Albert Strickler Memorial Fund: \$400 to \$800 interest free loan for needy first year students, preferably of the Jewish Faith. Application (available in Fin. Aid Office) due 6/30.



Financial Aid Application Packets: Now available in 126 Davison Building. Re-application required each year for need-based awards. Deadline for upperclassmen 4/15.

Classified: Senior Physical Therapy student from LSU-New Orleans looking for apartment to sublet from 5/8 to 6/26, while here doing a PT rotation. Please contact: Kristin Cottingham, Office of Student Affairs, School of Allied Health, LSUMC, 1900 Gravier, New Orleans, LA 70112 tel: 504-833-6528 (home) 504-568-4254 (school).

Athletic facility scheduling change: most buildings, including Card Gym and East Campus are now open following IM events until 2 am, M-F. Additionally, there are extended hours Sat and Sun. Watch for memo for specifics.

The Medical Center Bookstore will reopen on Monday, March 2 in Room 01A, Trent Hall, next to the Trent Cafeteria. If you need to place and order, please leave a message on our Voice Mail, 684-2717.

Corrections: In the last issue of *Shifting Dullness*, Phil Belmont's name was inadvertently left off the staff list. He created the calendar. In addition, in the last issue the C.A.R.L. Building was incorrectly referred to as the Karl Building.

Shifting Dullness Staff

Editors

Kenny Bookvar
Greg Lucas

Business Manager Calendar Writers

Garrett Nichols
Franco Rocchia
Hussein Elkouisy
Phil Belmont
Eric Bachman
Mark Beckus
Garrett Nichols
Michael Weiner

Graphics and Layout

Kenny Bookvar
Greg Lucas

Computer Consultant

Andrew Mellin

Shifting Dullness is a publication of Duke University medical students. The contents herein are copyrighted by *Shifting Dullness* unless otherwise indicated.

March 1992

Clubs Med

The **AIDS Volunteer Network**, in only its second year of existence, has become an extremely active service organization. With projects assisting the Durham community as well as those involving our beloved hospital, the Network continues to expand its base; last month, a petition favoring the maintenance of Durham County as an anonymous HIV testing center was forwarded to the state government, and two first year students began working with AIDS patients on the general medicine wards. New projects are hatching daily; here's how you can get involved:

* We are developing an educational "road show" regarding HIV awareness and preventative behaviour; trainees will be working with the Durham school system, the Durham Congregations in Action, and community-based peer leadership groups. Mandatory training is scheduled for March 11 at 5pm; if interested in participating (or contributing expertise), contact Garrett Nichols at 383-3377 or Katie Moynihan at 419-0469.

* The Spring ACRA cleanup is coming soon; stay tuned for details.

* Community outreach projects are ongoing, but always looking for warm bodies; call Katie Moynihan for details.

AMSA Update

After a couple years of dormancy, the Duke chapter of the **American Medical Student Association** has been reactivated. The goals of the Duke chapter are to provide a forum for discussion of issues pertaining to medicine, such as health policy and international health, and to provide contact with people working in these fields. Upcoming programs include lectures/discussions on the Canadian health care system in April and on domestic violence in later in the Spring. Meetings are held on alternate Mondays in CTL between 12 and 1 pm. New members and new ideas for future programs are welcome. For more information call Rebecca Usadi 929-8272.

Christian Medical and Dental Society (CMDS) meeting on 3/27 at 7:30 pm (place TBA). The speaker is to be Dr. Newland Oldham, attending cardiothoracic surgeon, who will relate experiences from his one year sabbatical in Africa.

Shifting Dullness



Medical Students Hooping It Up

Mark (Gluteus) Backus

Once again Duke Medical students have left their mark in the highly competitive world of intramural athletics. Three basketball teams entered the IM fray from our third year class, as well as three from the first year class and one from the fourth year class. Surprisingly, no DUMC teams ended up winning the post season tournament. Sid's Down Under (so named because former team leader Robert Sabury is currently enjoying life in Australia), struggled to a 2 and 3 record for the MSIII's. This was a disappointing finish for a team that traditionally visits the playoff's. Physical stamina proved to be problem this season as well as injuries; even the vaunted hoops star Gerry Reece could not prevent a losing season. Frank (Salad) Tong (Impending nuptials) and Sanjay Hegde were fierce competitors. Sponsorship by Clearly Canadian (Kenny Lukes as sponsorship contact and skilled guard) highlighted the season.

Run DUMC of MSIII fame also struggled this season at 1 and 3, despite the bearded boarding of Andy (Lou) Kaplan and skilled shooting by Mike (Folkbaby) Felker. Tim Smith (more nuptials) gave steady scoring as well. The big win came over a talented but inexperienced first year DUMC squad, by 20 points.

Under The Rim proved to be the only third year team with the fortitude to make it to the playoff's, after a lovely 4 and 1 season. The first round loss in the play-offs to Fuqua was a difficult one, although the Fuqua team did make its presence felt all the way to the final four in the play-off tournament. Brilliant play was exhibited by Van Ha and Cleveland Lewis. Matt Roe was excited enough to host a fest on March 29, 1992 at their abode near South Square. Added attractions are Lenny (Lenster) Steinberg and Larry (Lawrence) Kelly. Everyone's invited!

(see Hoops, p. 6)

Hoops (from p. 5)

Hoops of Henle was a medical school team punished throughout the season because of their chosen team name. The final result was a 1 and 3 record despite the bulkiness of Steve (Rooster) Lee MSIII and tenacity of Shu Lin and other MSIV's.

MSI teams abounded this year, despite the bitter head cramming that accompanies first year classes. The Durham Otters set themselves apart first by having a sort of random name, and second by going undefeated in the regular season. Heinocily ruled as they lost to AOπ in the playoffs. Stars abounded on the team, and contracts went out for further play in the Co-rec league in April. Two other MSI teams shined despite geeky medical

names such as the Lesser Splanchnics and the Hematomas. Both teams had some difficulty winning games, but at least they boosted MSIII egos. Prepare yourselves for more IM's this spring and summer. Co-rec basketball and indoor soccer teams are currently being formed. Much luck to our Marathon training MSIII's Dave Scher and Jeff Hartman. Incidentally, Jeff Hartman is always looking for a few good men for his hoops games. Also, given so many medical school cagers, perhaps Matt Roe should organize an all school tournament or something equally cool. P.S. MSIII's shake Lyndon Jordan's hand for organizing stellar class activities.

Computer Interest Group News

Michael Weiner

Information Systems Fair. The third Information Systems Fair of the Integrated Academic Information Management System will be held on 24 March 1992, from 9 AM to 4 PM in the Searle Center. The Fair provides an opportunity for developers and users to share their ideas. A number of computer applications will be available on the premises for hands-on experimentation. In addition, demonstrations will be held continuously throughout the day. Topics of demonstration or discussion will include the CTL and audiovisual workstations, National Board of Medical Examiners' simulation cases, Quality Assurance Review Management Information System, Operating Room Information System, SICU workstation, digital radiography, Resident Tracking Program, computational molecular biology, Statgraphics, the MCNC supercomputer, genetic databases, electronic mail systems, CD PLUS, the progress of the Common Services Network, the DUMC Bulletin Board System, and multi-user Netware. A series of four one-hour workshops will also be held in room E of the Searle Center, and we encourage

you to come early, since the seating is limited. These will concern grantsmanship and computer applications in research, administrative information needs of the medical school, bedside computing as a platform for care maps, and computer-assisted instruction. All sessions are open to the community; no registration is required. For more info, contact Jean Rabold (684-8442).

Symposium on Computer Applications in Medical Care. This meeting will be held in Baltimore, Maryland, from 8-11 November. Students are invited to submit papers expressing original ideas and research or development efforts involving the application of computing and information technology to patient care, health sciences education, or biomedical research. For details about the student paper competition, contact Jim Cimino at (212) 305-8127. For other information about the symposium, contact the office of the American Medical Informatics Association at (301) 657-1291 (Health Info-Com Network Newsletter, 2/9/92).

Rejuvenate your Macintosh Classic. The new \$200 Classic Performer by Harris Laboratories Inc. (tel. (612) 941-2948) is a 16 MHz accelerator for the Classic, easily snapped onto the Classic logic board in less than 10 minutes. Although it boosts speed and performance by 75-95%, the device does not offer 68030 features such as 32-bit addressing and virtual memory, which will be increasingly important with new software. For the richer users, Apple's own \$700 Classic II logic board upgrade does offer these features, as well as support for more than 4 MB of RAM (MacWEEK Reviews online, 2/17/92).



Cast and Personnel of the 1992 Student/Faculty Show

"Willy Davison and the Doctor Factory"

Producer: Mark Somers
Directors: Brian Bowman
 Jason Dimsdale
Business Manager: Matt Areford
Stage Manager: Tim Young
House Manager: Jordan Hsu
Music Directors: Jeff Byers
 Tim Smith

Singers—

Rappers—

Oompa Loompas—

Brian Bowman
 Katrina Stidham
 Elizabeth Whitaker
 Tim Young
 Marc Somers
 Karen Zempolich
 Brian Bowman
 Mike Felker
 Jill Levy

Cast of Characters (In order of appearance)

Rod Serling— Tim Young
Wilbert Davison— Mark Vakkur
Crystal Violet— Kate Moynihan
Bruce Fuqua— Jeff Johns
Verucca Vulgaris— Theresa Flynn
Seymore Data— Jordan Hsu
Students— Steve Kent
 Susan Moran
 Shona Ferrier
 Patrick Kim
 Ed Schatte
 Suzanne Eaton
 Nancy Louls
 Rita Clement
 Hiran Rajasingh
 Jonathan Schreiber
 John Savarese
 Peter Argenta
 Mike Sicard
 Katrina Stidham
 Marc Somers
 Karen Zempolich
 Diane Zipprich
 Lee Cothran
 Elizabeth Whitaker
 Nita Ahuja
 Bruce Klughertz
 Steve Stasheff
 Andrea Monroe
 Jeff Byers
 Herb Chen
 Bruce Klughertz
 Steve Stasheff
 Karen Greene
 Diane Zipprich

Chorus and Dancers—

Lorl Langdon
 Amy Opperman
 Steve Lee
 Bruce Capeheart
 Annie Drapkin
 Jane Woo
 Tony Friedman
 Scott Shawen
 Phyllis Chang
 Laura Havrilesky
 John Savarese
 Sharon Strong
 Nikki Gorman
 Jol Lenczowski
 Patrick Kim
 Lee Cothran
 Nancy Louls
 Mike Sicard
 Diane Zipprich
 Elizabeth Whitaker
 Barbara Osborn
 Steve Lee
 Anne Ducey
 Christine Chang
 Mike Eng
 Jeff Johns
 Brian Bowman
 Karen Patton
 Betsy Hilton
 Diane Grigg
 Andrea Covello
 Diane Allen
 Karen Greene
 Annemarie Thompson
 Alison Morris
 Bruce Klughertz

Shifting Dullness



The Politics of Discontent: Presidential Primaries

W. Garrett Nichols

The circus finally left town.

After over two months of hand-shaking, baby-kissing, and mud slinging, the New Hampshire primary is over. Every four years since 1972, it happens: 0.2% of the American population, politically conservative and relatively minority-free, mold the future of our presidency. Issues important to all Americans were bantered about, such as the status of a closed military base on the New Hampshire shore. The media, led by outstanding journalists from ABC and *Star* magazine, provided 24 hour coverage: In an issue that included Harrison Ford's "brush with death" (he received 4 stitches), millionaire Gennifer Flowers accused Bill Clinton of having a twelve year affair with her. To add to his woes, Clinton was branded a draft dodger for a letter written in 1972. The economy, however, was the most frequent topic of debate, with a Janet Jackson rejoinder: "What have you done for me lately?" President George Bush had one answer: in a cynical display of incumbent advantage, Bush accelerated Medicaid payments to the state to help balance its budget, and designated New Hampshire the first beneficiary of a new Small Business Administration lending program.

In the end, the Democratic winner reached the top via regional bias and an inoffensive personal history, and Bush escaped defeat by a narrow margin. Voters predictably left the polls dissatisfied; over 40% wished there had been another candidate on the ballot.

Primaries such as these are not only superficially unappealing; they have fundamentally affected the manner in which the presidential office is won and run. Because success in primary campaigning does not always correspond to success in governing, we may be paying a high price in the search for popular democracy: In our desire as the public of the United States to shape each step of the electoral process, we may inadvertently create a president who cannot rule.

Far from revered foundations in our electoral system, presidential primaries are a recent political invention. In the beginning, presidential candidates were chosen in party caucuses held by members of Congress. Power shifted in the 1830s to the national political parties, another group of experienced politicians that knew the potential candidates' strengths and weaknesses. The capture of a party nomination during this era was a supreme exercise in coalition building, in striking deals and re-evaluating views on central issues. Once a

candidate had reached agreement with the power barons of the political establishment, he could expect their support through the election period and beyond. Party conventions, at which the party nominee was ultimately decided, were exciting (if not somewhat seedy) portraits of the American political system in action: old coalitions broke down and new ones were formed as each candidate tailored his message for maximum appeal.

Tradition gave way in the 1960 campaign of John Kennedy. Initially focusing his attention and money on the fledgling Wisconsin and West Virginia primaries (forerunners to today's Iowa caucuses and New Hampshire primaries), Kennedy circumvented the political establishment by first establishing broad-based popular support, then cornering his party into conceding him the nomination. By 1972, with the Democratic party's internal reforms, power was taken from the bosses and given to the masses. The new campaign favored the photogenic communicator, not the dirty work of the coalition builder, giving rise to individualists such as JFK and political outsiders such as Jimmy Carter and Ronald Reagan.

As a result, today's campaigns are functionally separated from the political parties, with candidates and voters more concerned with "electability" and the cult of personality rather than the central ideological issues each party espouses. Primaries reward theatrical talents—the telegenic appearance, the soundbite, the ability to exploit temporary advantages—rather than those attributes that better determine competence in governing. In general, the modern campaign is mass marketing at its most superficial; ten months on the primary trail only reinforce the phenomenon. Former Kennedy aide Theodore Sorensen ironically berates the system that allowed JFK's ascendancy: media and the populace are not concerned with candidate stances on the issues, but with the "horse race—which horse is ahead, which one has the most physical stamina, which one is lame and which one is attracting the big money."

The rapid-fire primary schedule fundamentally changes the message each candidate can deliver. Campaign dynamics in the primaries are such that it is difficult to separate one's goals from those of multiple competitors. New Hampshire was case in point: candidates such as Tom Harkin had to simultaneously challenge the
(see Primaries, p. 11)

§

March 1992

4th Year Elective Survey

Not just another survey, the 4th Year Elective Survey is your chance to improve the quality of medical education at Duke and to give guidance to rising seniors. Response to last year's survey was tremendous and was very helpful in selecting electives. Please help *Shifting Dullness* pass on your advice about electives and residency selection by completing this survey and returning it to PO Box 2865 DUMC before leaving Duke for greener pastures. Thanks.

Courses you recommend: Please list and comment on why they were good.

Courses you do not recommend: Please list and comment on why they weren't good.

Advice about choosing electives: I.e. do you recommend rotations away, rotations in your chosen specialty, what if you can't decide on a specialty, how do you plan rotations to get recommendations for residency applications, what about consult vs/ ward rotations vs/ Sub-I vs/ units?

tear here

Advice about residency selection: Should you take time off to interview, how many places should you interview at and rank, should you trust what residency directors promise you?

Please indicate the specialty you are entering: _____

Thank you. Please mail to *Shifting Dullness* Box 2865 DUMC by **March 23**. Just tear out, fold, staple, and drop in medical center mail. Our address is on the back.

Please fold along the dotted line, staple, and drop in Med Center Mail. Thanks.



tear here

**Shifting Dullness
Box 2865 DUMC
Medical Center Mail**

term. It still haunts him today; because Bush eventually was forced to renege on his promise, Democrats will declare his every statement in the 1992 campaign one of vote-getting political expediency.

The negative campaigning and blame game politics characteristic of modern government in general, paraded before the public for nearly a year of divisive primaries, does little more than fuel popular disillusion and deepen interparty scars that preclude legislative mobility following the election. Public dissatisfaction with the deadlock, in turn, empowers those candidates that run outside of the government structure, those that lash out at the "low-life professional politicians" and produce a warm, fuzzy gut feeling via catchy phraselets, a sparkling smile, and a family dog. Unfortunately, presidential politicians that run outside the establishment might win elections, but seldom do they get inside afterwards, where effective policies are crafted.

The solution is to return the selection of presidential nominees to the pros—the national party conventions. Unpledged delegates would be free to throw their weight behind whichever candidate best served the party. With more voice in selecting the nominee, elected politicians would have more reason to cooperate with him as president. But more importantly, the candidates would have more experience in the tough decision-making, negotiation, and thoughtful judgment that underlie the day-in, day-out consistency necessary for successful governing. Political pros are simply more qualified to judge the candidates on the ability to govern, a characteristic more important than the ability to captivate a nation of primary voters.

Reform that removes power from the voters is obviously never popular; the public seems to warm to the regional pandering and black-vs-white, good-vs-bad posturing that typify presidential primaries. As happens so often, however, the public does not know what is good for itself. It's time to administer some medicine to our electoral system, no matter how bitter the pill.



Shifting Dullness

Rep. Valentine Responds to Petition

To the Editors:

Recently, I received a petition from a number of Duke University medical Students protesting the possible elimination of resident physician student loan deferments. As I was unable to read many of the signatures on the petition, I believe that writing to *Shifting Dullness* would be the best means of responding to the concerns of the student body.

Legislation has been introduced by Representative Austin Murphy that would expand the deferment to the full duration of any residency. I am a co-sponsor of this legislation.

During consideration of the reauthorization of the Higher Education Act, the education and labor committee, of which I am not a member, included repeal of the current two-year deferment. I am currently considering various ways to implement a deferment program. In my view, it is important to design a program that meets the needs of young physicians and also achieves much needed improvements in health care in rural, underserved areas.

I greatly appreciate the professional advice of the Duke University medical community on this issue. You can be assured that I will keep the views of Duke medical students in mind when medical deferments are considered in the house.

Cordially,
Tim Valentine,
U. S. House of
Representatives

Shifting Dullness accepts letters of opinion from all members of the medical school community. Opinions expressed do not necessarily reflect those of the editorial staff. *Shifting Dullness* reserves the right to edit letters for length and style. Mail to *Shifting Dullness*, PO Box 2865, DUMC or drop them in the *Shifting Dullness* box in the Alumni Affairs Office (candy room) or in the Duke North student lounge (6th floor).

"Enveloping the wound..."

Bach, E. -

Lord, the world is divided into two groups - those who eat their crusts and those who don't - and a suzerainty, those who eat other people's crusts. I am struck by this while changing a colostomy bag/debriding a foot ulcer/examining a fungating breast carcinoma/performing any of a hundred repulsive activities which if not for desensitization and leaving my body at the door would put "retching" at the top of the "Today's Procedures" list. I yearn for the time when I can sublimate effectively - the physical as spiritual encounter - rather than rely on profane fantasy (feeling the wound/licking the wound/enveloping the wound) to get through the unpleasanties. Occasionally, I am struck by another thought: We will be unable to explain the popularity of Erma Bombeck to future generations.

Last week, or sometime, I watched K. Sutherland et al. doctor doctors in "Flatliners." What amused me was the hyperlogue during the codes - everything, from monitoring heart sounds to uttering the word 'bretylum' "Tell me a better way to check a tire for a leak than the mechanic's way..." to evacuating air from a syringe, was performed at 78 RPM, as if rushed

exchange became the physician. I was worried not because they were doing a credible job (Rule #1 regarding actors performing with paddles: You are not qualified to say "CLEAR" until you see a man in V. fib DC'ed so many times the word itself causes tetany), but because it was another victory for art imitating life imitating art. The syringe cleaning maneuver, for example, was certainly first performed years ago by a (bad) actor playing a doctor (why would any sensible person empty it like they were shooting a pistol into the air?) yet it has now become de rigueur for anyone attempting to be doctor-like; indeed, no doctor can engage in it without attaching greater significance to their action. "I am doing an important thing (forceful ejection, impatient flicking, syringe and chin elevated, scrutinizing (what?) as eyes look over spectacles), a purposeful thing in which only those who have attained my station can participate." Sure. Now hand them an ABG syringe and ask them to get the air bubble out, pardner.

People have accused me of being a misanthrope, or, like Navin Johnson's attacker, of "hating cans." James Agee's *Let Us Now Praise Famous Men* (probably the most reverential treatment of the common man ever penciled, the title comes from a verse in Sirach, one of the books of the Apocrypha) contains, among other scatological wonders, the following contribution: "I went out to the porch and pissed off the edge, against the wall of the house, to be silent, and stood looking out." This on the house of the Gudgers, the family he most admired.

To glorify the act of urinating on your host's home, to defy micturition. It is unfortunate that Agee did not live long enough to elevate watery diarrhea to the pinnacle of human achievement.

Let us offer up instead a paean to those who deserve it - mechanics. Real mechanics, not Pirsig's Zen Revivalists or the thinly veiled "master mechanic in Janovy's *Yellowlegs*, but the genuine article, people who know how to open a hood just from the make and model,

people who talk like the cigarette was glued to their upper lip. These are the true diagnosticians, not some pansy-ass who

asks, "But how does the murmur change with squatting?" ("Well, sir, it certainly gets lower.") as we have been led to believe. Tell me a better way to check a tire for a leak than the mechanic's way - pumping it up to 50 or 60 psi, dabbing some water on promising sites, and if none are found, submerging it, looking for telltale bubbles trailing to the surface. Brilliant. It cannot be improved upon. Specificity approaching 100%, sensitivity dependent only on the quality of the sensor used - eyesight, oxygen probe, salmon glued to the tread - the only worrisome aspect in the inflation, which could potentially cause a bigger rent in the tire.

Nothing you could suggest - inflating the tire with a gas that underwent a harmless reaction (preferably one which labelled the site of exit) when it came in contact with a bathing medium, filling it with radioactive gas and detecting escape with a ring of Geiger counters, using the tire as a particle accelerator and capturing emitted light with photomultiplier tubes - would help locate a leak

(see Ishmael, p. 13)

12

March 1992

any better, or any safer, and certainly not any cheaper. While some might argue that all of these methods are indirect (and the best diagnostic similar, albeit on a different scale, to what one does when locating a hole in their pants), a real time atomic force microscope is Daedalusstuff, and probably more expensive than getting a whole new set of tires even if it were shop-ready.

My friend (Imaginary, call him Queequeg) and I, post-call, are eating pizza in the hospital. I have introduced him to the practice of calling whatever pizza you get the 'special' and thus saving even more off the employee price. I give him my drink (medium Sprite, no ice) because I have a can of Sprite from earlier in the day, when I encouraged a couple to rock a vending machine so hard that it tipped over, killing them instantly. He is showing me a clenched-fist injury sustained a few days prior, which lacerated the web between his index and long fingers quite nicely. He offers me his scab, but I decline, having already finished.

Later, while he is asleep at a conference, I take the opportunity to look at his wound in more detail. The tissue is not devitalized, nor is it fluctuant. Aside from difficulty in making a peace sign, I can think of no other long-term complications. There is a slight risk of infection with Clostridial species. Not having a culture tube with me, I quietly ease Queequeg's hand into some warm water, and count the bubbles as they rise to the surface.

One...

Two...

Three...

---Gotta go, Ishmael

Letters to E Bach are actual submissions from members of the Duke Medical community. Send letters to Eric Bachman at PO Box 2704 DUMC or drop them in the Shifting Dullness box in the Alumni Affairs office (candy room) or in the student lounge, Duke North.

Shifting Dullness



Dear E Bach

Dear E Bach,

I've been given new life by a recent enlightenment. I guess I'd been reading the letters to the editor in *The Chronicle* too much, and I'd become frustrated with all the world's injustice. Like all of the letter writers, I wanted justice for the world, but more importantly, for myself. But then I got to thinking—what would life be like if everything and everyone treated me the way I deem fair? Being of the self-perpetuating human nature, I'd have things pretty kush. Then how much fun would things be? I recently ran a marathon—coming across that finish line was the biggest rush I've ever had. And those who know me will attest that I've tried a hell of a lot of things to get a rush. But if it had not been for the miserable failures of everything athletic I'd attempted in my life, this would have meant nothing. This is just one example of my new philosophy that badness is an absolute necessity because without it there would be no happiness.

So, E Bach, I leave you with my evening prayer, and my creed:

Dear God, thank you for allowing life to screw me over today so that I may blow out of proportion my few trivial successes to the extent that they make me a happy man.

Peace,
Jeff

Dear Jeff,

Your soulful entreaty leads me to believe that you have graduated into a realm of self realization, and you may be ready for passage into the less denigrating, more appreciative phase of unabashed selfishness.

E Bach is no stranger to adversity. Early in this year I was greeted by the Furies, who must have left Oedipus in search of easier prey. I've waited fully 26 years for the Buffalo Bills to claim the ultimate victory, only to have my

(see E Bach, p. 14)

hopes dashed for a second straight year. Both post-superbowl Mondays were truly depressive, from a clinical standpoint. Then, to add insult to the gaping wound from which my lifeblood continues to flow unabated, Duke lost at the hands of the Tar Holes. Talk about instant sobriety. If these events were not enough to cause Medusa herself to solidify, become brittle and vanish as dust in the wind, I was greeted by athletic woes.

Your shining example in the marathon was an inspiration to me, and I enlisted in the Shamrock Virginia Beach Marathon. The free massages at the end of the race were alluring. But no, one of the gods was not appeased by my daily sacrifices, and injury beset me. Undaunted, I took the prescribed polypharmacy approach and nursed myself back into a shape, only to have some punk slam in my face during an intramural hoops game. Yes, it is a technical foul to slam in intramurals. And yes, I bricked both shots. The stage was set for tragedy. I awoke every day with the timorous disposition of Job, fearful that every step I took would invariably be backward.

When faced with transgression, turn to your mentors. You have your own, but let me share with you what I have gathered from the spiritual influences in my life, Mark Twain and H.L. Mencken. Both men were incredible cynics. It seems that, for them, life was too simple and random to make sense of. They rest peacefully now, but perhaps their slumber would be deepened if their fears were assuaged by realizing that life isn't supposed to make sense. How can the Bills lose twice in a row? Will they suffer the endless appellation of Super Bowl chokers? The Denver Broncos of the '90's? Next year I'm taking out life insurance.

Mencken makes your lot seem optimistic. His view held that we can "...abolish all the sorrows of the world by the simple device of getting and keeping the whole human race gently stewed." He goes on to assert that all major wars have been caused by teetotalers. Charitable to others he is not, saying that marriage is an agreement with someone who disgusts you less than others around you. E Bach doesn't entirely share these views, but I do embrace the idea of candor and honesty when your opinion is to be heard.

Your pain is amplified by the loss of the male identity in today's world. Gone is the ideal of the sensitive man. The world doesn't really want sensitive men, contrary to the popular blige that we have been weaned on. It's difficult

to define our role, and impossible to escape the daily, unmitigated bombardment of accusations that men are sexist, racist, unfeeling and emotionally inchoate.

There's a book on 1001 things in life to be thankful for, written by some persnickety blueblood who sees life through rose-tinted glasses. I bet she never had a paper route. I'll wager that she never survived on mac and cheese for months on end. Wayne's World is not listed. That book should be burning this very day next to Albert Goldman's caustic biography of Elvis Presley. E Bach will tell you what to be thankful for.

1. You've graduated from Iowa. How was intro physics?
2. Free massages at the end of many marathons.
3. Every time you pass a Duke undergraduate (who each year get better looking) you have the opportunity to taste "...the liquor never brewed." That is, this campus is a single person's cornucopial horn of plenty.
4. See this month's Sports Illustrated.
5. Satisfaction Monday nights.
6. Friday happy hours.
7. Wayne's World. They make cave-dwelling an attractive occupation.
8. You are male. Aren't you tired of apologizing for your gender? My mother never taught me the toilet seat deal, so don't expect me to learn quickly.
9. Helms is aging.
10. Graceland. An American mecca that will be the subject of a separate E Bach column this summer.

Next time you see a sunny day, get in your car and drive, preferably with the top down. Alone. Play some good classic rock. Petty's credo that "even the losers get lucky sometime" is a potent antidote to the disease of living. Life gets better and better the more selfish you become. Not to promote base selfishness and hedonism, to be sure. I will, however, tell you to be true to yourself follow your bliss. The world would be a better place if people made themselves happy before answering to the needs of others.

Don't let life screw you today. Screw it back. If there be happiness from within, then it will shine and exude happiness from without. Let me know of your trivial successes, and whether you can add to the above list.

As always, I remain

Sincerely yours,
E Bach

"Siena Mi Fe'; Disfecemi Maremma"

Among the pickled foetuses and bottled bones,
Engaged in perfecting the catalogue,
I found the last scion of the
Senatorial families of Strasbourg, Monsieur Verog.

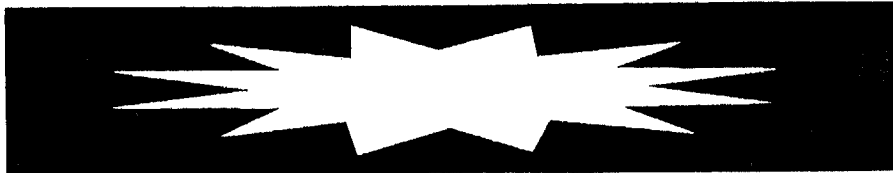
For two hours he talked of Galliffet;
Of Dowson; of the Rhymers' Club;
Told me how Johnson (Lionel) died
By falling from a high stool in a pub...

But showed no trace of alcohol
At the autopsy, privately performed—
Tissue preserved—the pure mind
Arose toward Newman as the whiskey warmed.

Dowson found harlots cheaper than hotels;
Headlam for uplift; Image impartially imbued
With raptures for Bacchus, Terpsichore and the Church.
So spoke the author of "The Dorian Mood,"

M. Verog, out of step with the decade,
Detached from his contemporaries,
Neglected by the young,
Because of these reveries.

—*Ezra Pound*



March Calendar

ART EXHIBITS

Duke University Museum of Art - Main Gallery: "Psycho-analytic Drawings" by Jackson Pollock 1/31-3/29
North Gallery: 20th Century Drawings from the Weatherspoon Art Gallery 1/31-3/29. Mars exhibit cases— photographs by Barbara Hayward 2/17-3/16; Children and Hospitals Week 3/16-3/23; National Social Work Exhibit 3/23-4/3; Watercolors by Hjordis Tourian (wife of Ara) 3/1-3/30.
Eye Center Tactile Art Gallery: Regular Collection of African, Central American, and Egyptian Art weekdays 10 a.m.-1 p.m.

FILM

Freewater- All films at 7 p.m. and 9:30 p.m. In the Griffith Film Theater in the Bryan Center. Free to Duke students.
March 3: Gigi
5: Gallipoli
6: Paris Is Burning
6: Repo Man at midnight
12: Picnic at Hanging Rock
24: Rebecca
26: The Getting of Wisdom
27: My Own Private Idaho
28: The Apple Dumpling Gang at 10:30 a.m.
31: The Innocents

LITERARY LUNCHTIMES

Fridays at noon in the Dean's Conference Room, M32
Green Zone Duke South
March 6: Dr. Francis Neelon will lead on "The Physiology of Poetry"
March 13: Open Reading
March 20: "The Adulterous Woman" by Albert Camus
March 27: Poet Kate Daniels will read

MUSIC

March 1: Contemporary American Music by the St. Stephen's Chamber Orchestra at 8 p.m. in Baldwin Auditorium.
March 5: Songs from Jerusalem at 8 p.m. in the Nelson Music Room, East Duke Building.
March 8: Organ recital by Carole Terry at 5 p.m. in Duke Chapel.
March 11: Harpsichord recital at 12:30 p.m. in Duke Chapel.
March 11: The Orchestra of the Eighteenth Century with Frans Brueggen conductor at 8 p.m. in Page Auditorium.
March 15: Durham Symphony Young Artists' Concert at 8 p.m. in Baldwin Auditorium.
March 21: American Chamber Players - Elisabeth Adkins, violin; Anthony Cecere, horn; Miles Hoffman, viola; Julia Lichten, cello; and Ann Schein, piano at 8 p.m. in the Bryan Center.
March 28: "Encounters with the Music of Our Time" Double Edge at 8 p.m. in Baldwin Auditorium.
March 29: Organ recital by Robert Parkins at 5 p.m. in Duke Chapel.

SPECIAL EVENTS

March 7-29: Playmakers presents "Eleemosynary," Paul Green Theatre in Chapel Hill. Call 962-PLAY.
March 24-25: X-Sight! dance-based performance group at 8 p.m. in Reynolds Theater.
March 26: Royal Winnipeg Ballet at 8 p.m. in Page Auditorium.

About the cover: Mid-eighteenth century medical instruments; top to bottom: two-edged saw, two early skull saws, bone brush, lithotome, probed knife, amputation fork for use in amputation of the breast. From Bennion, Antique Medical Instruments (1979), p. 63.