

Shifting Dullness

October, 1994



A Grousequill Eng. del. Etched by G.C.

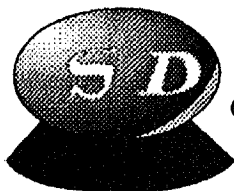
Indigestion..

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Inside this tantalizing issue:

- First Year Impressions
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- Roadside Assistance - Back with a VAengeance

Crystal Ball



Crystal Bernstein

Aaah, the third year. A time to broaden your mind and delve into the magical world of tiny bits and particles. A time to stretch your imagination, to bend your brain around the bewildering building blocks of basic science. A time to say, "truth really is stranger than fiction!" A time to demonstrate your deep and full understanding of all the concepts you were taught in the first year.

But that's not all. Gone are the days of the 4:30 am jangling alarm clock, the nights spent memorizing pages from Harrison's (only to find out the next morning that conjugation of bilirubin really wasn't what your attending was going to ask you about, after all), the endless morning rounds and lengthy discussions of the histological appearance of various gynecologic tumor cells. No longer are you forced to eat all your dinners in the Duke North cafeteria. There are no samples to be carried to the lab or daily progress notes to write. You're free!

Until it hits you. It hit me a few days ago, as I was browsing through the newspaper on my two-hour lunch break, looking for another research study whose investigators were willing to pay healthy young subjects handsomely for very little work. I began to wonder to myself, "Is this what this research year thing is all about? Looking for fast and easy ways to make money so I can afford to entertain myself in my new-found extra time? Hmm. Well, I know I'm supposed to be advancing the scientific knowledge of mankind and all, but I'm not sure if achieving this by serving as a research subject is really what was intended." It took me a while, but I finally

figured it out. This year, I'm supposed to think. I'm supposed to be creative. I'm supposed to devise new and clever experiments to test

things that nobody knows about.

Now, this may not seem like a big deal to you, but it scared me. During the first and second years, you are fed facts and studies and differential diagnoses so quickly you don't have time to ponder their purpose or how they came to be. And you're not really expected to know all the whys and wherefores of their creation. You're asked only to memorize and recite them on demand. But now you are called upon to discover something new, to ask questions that have no answer, that other people haven't even thought to ask. Whoa. And if this knowledge wasn't intimidating enough, I came to realization that, after spending four years in college as a chemistry major, I couldn't remember what the molecular weight meant. I wondered how someone with such a seive-like mind could ever come up with anything that had scientific merit.

Of course, facing the problem is always a big step toward solving it. Now that I've had my realization, I'm beginning to work on rousing my brain from its hibernating state. However, this is a painful process. Just the other day I remembered how to do unit conversion. And believe me, that was a day for celebration.

Not to say that this third year isn't a good thing. I'm enjoying my extra hours of sunshine and sleeping in on weekends. I like not setting my alarm for 4:30 in the morning. I'm glad I have time to go to the grocery store. But it's more of a challenge than you'd think. And it's a little scary to know that you're responsible for your own learning and discovery, that nobody is going to ask you what you read about last night at rounds the next day. Anyway, think about that over your next two-hour lunch in the sun. And if you hear of any high paying research studies, let me know.

Shifting Dullness

Upcoming Events Around Duke and Durham

1. **Oktoberfest:** Friday, October 7th, 10am to 5pm, on the West campus quad. Get outside and hang with the undergrads for live music, arts & crafts, food, and, of course, German beverages. A great study break!

2. **Movies on campus:** Quad Flicks are \$3 and play at 7 & 9:30pm Saturdays, 8:00pm Sundays in the Griffith theatre in the Bryan (student) Center. Coming attractions include:

Oct. 8-9 Maverick
Oct. 22-23 City Slickers II
Oct. 28-29 Wolf

Freewater films are sometimes offbeat, often cult classics, but ALWAYS FREE! These are just some of the features you'll find playing in October (at 7 & 9:30):

Tues. 4 Gandhi (7 & 10:00 pm)
Thurs. 6 Dune
Sat. 8 Lord of the Rings (10:30am)
Thurs. 20 Dead Again
Mon. 31 Rocky Horror (midnight)

3. **Hoof 'n' Horn:** Duke's student musical

Chris Gamard
theater group consistently gives a great show! This fall's production is Into the Woods and is playing in the Sheaffer Lab Theater on the 20th-23rd and 26th-30th. Call 684-4444 for info.

4. **NC State Fair:** This event is a must, especially if you're from out of state. Experience the rides & thrill shows, the midway, the regional food, the country music stars, and, of course, those wacky agriculture exhibits. Oct. 14th-23rd, 9am to midnight at the Fairgrounds in Raleigh (off I-40). Call 821-7400. \$6, \$5 in advance.

5. **Durham Arts Council:** Art exhibits—"What We Witness: a View of Violence by Citizens 6 to 18 Years Old," on display through Oct. 23rd. Also, "Pictorial Echoes of the Past," photos by Alex Rivera, through Oct. 27. Call 560-2787. ****For up-to-date info on any of the arts at Duke (including art exhibits, dance, drama, jazz or symphony) call the 24 hour Artsline: 681-ARTS. Consider yourself informed... it's up to you to get out there and HAVE A LIFE!!

Shifting Dullness

EDITORS

Matt Hepburn
Edward Norris
Jamy Ard

STAFF

Crystal Bernstein
Vickie Ingledue
Steve Crowley
Julie Lapp
Corinne Linardic
Steve Kent
Dave McCarty
Trip Meine
Timothy Lahey

Michael DiCuccio
Rima Nasser
Anthony Beutler
Eric Halvorson
Umeshe Marathe
Chris Gamard
Mike Morowski
Tom Bryce
Ashvin Pande

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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.

Community Service Update

—Steve Crowley

Now that you are all beginning to settle in to your respective roles for this year, you have a chance to survey what else there is to do in Durham. Don't be discouraged. The service committee is on your side, ready to protect you from boredom or from learning too quickly. Here are just a few of the activities available to you during the month of October at no extra charge. In addition, we will be placing a letter in your box shortly to fill in any important event dates that were not yet established at presstime.

Red Cross Blood Drive Pizza Fund — This activity may very well require less time than any other in this article. To restate the premise: Any med school class that gets 40% of its members to attempt to give blood between 9/1/94 and 11/30/94 wins pizza for those who attempted to donate and lived. The competition is getting ugly. As of 9/20 the standings are **MSI's 9, MSII's 3, MSIII's 11, and MSIV's 4**. Nice work by the MSIV's to match their participation rate with their year number. As you can see, the MSIII's are leading the MSI's by 22% and are on a clip that would give them 50% participation by 11/30, well clear of the 40% mark. While running second to the MSIII's despite the proximity of the Red Cross (4th floor Red Zone) to the amphitheatre, the MSI's are also sustaining a pizza-winning pace with projected participation of 41%, assuming there's no strike. You can be the one to make sure your class' blood donations are not in vein. Call Susan of the Red Cross at 684-4799 to make an appointment or go see her on Monday 11:30-4:30 or Thursday between 9-2.

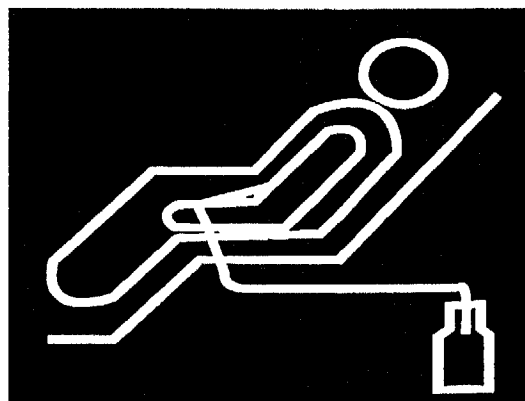
Adopt-a-Highway — Thanks to all the MSIII's who showed up on 9/17 to give our highway a change. The new site (on Cornwallis between 15-501 and Kerley Rd) has more trash to offer than our old site, since the entire Cornwallis exit from 15-501 is one implied garbage can.

We will keep you posted as to the identity of the next class who steps forward to groom our highway.

AIDS Volunteer Network—An AIDS Presentation Seminar at Durham Southern High School is scheduled for Oct. 25. Call Sandy Bliss at 220-7118 for more info. She would also like to hear from anyone willing to help with coordinating the Network for the MSIs this year.

Interested in issues on violence? If so, you may be interested in attending a conference entitled "Facing Our Own Guns: The True Cost of Weapons Proliferation at Home and Abroad," co-sponsored by a group called Physicians for Social Responsibility (PSR). The conference will be held Saturday, October 8, at the Student Union at North Carolina Central University, from 9:15am until 4:00pm. The cost is \$15, which includes lunch and resource information.

PSR is also interested in recruiting medical and other health profession students to communicate the problem and consequences of violence to young schoolchildren. A training session will be held in the fall for interested participants. **Cont. on page 5.**



If any of this interests you, please contact Suzy Sullivan at 383-7097 or call the Chapel Hill PSR chapter at 942-9365.

Habitat For Humanity — In a flurry of activity, the habitat crew was active on two dates during September. Work is now ongoing at the new Gerard St. site. October dates have not yet been scheduled. Check the October Service Letter (in your mailbox) for details.

Homeless Shelter — We are continuing to take 2-3 students each Monday from 7-9 to the Shelter For Good Hope. A sign-up list is posted on the right door of the South Amphitheatre. Sign-up there or call Steve Crowley at 383-1047 to pick a Monday convenient for you.

Soup Kitchen — We serve more than just soup. A hearty group attended in September (2nd Sunday of month from 11-1) and engaged in cleaning and preparing the noonday meal. Clearly impressed with the group's performance, the administrator is vowing to get the October 9 group on the serving line itself. I hope we're ready. Again, sign up on the amphitheatre door or call Steve Crowley to go on October 9.

Lennox Baker Home For Children—This organization has a need for a number of volunteer positions to be filled. Recreation Room Assistants are needed, 1 volunteer on Mondays from 3 - 5PM, 2 on Saturdays from 10:30 - 12:30, and 2 on Saturdays from 12:30 - 2:30. The volunteers would not need to come every week. Tutors are needed on Tuesdays and Thursdays from 9 - 11:30AM. Finally, Lennox Baker is looking for an individual willing to spend time with a 20 yr old man with spina bifida. To sign up or receive more information regarding any of these activities, please call Betty Anderson-Strickland at 681-5455. ■

ANNOUNCEMENTS

-Card access to the Duke North and Duke South student lounges will be installed within the next two weeks. See Sheba Hall in the Dean's Office to receive an access card.

-In response to student requests, the Dean's Office is investigating the ability to provide **beepers** for all students on rotations in need of one. Money is an issue since the yearly cost per beeper is \$200.

-The Dean's Office is also looking into access to the RedEye for medical students who are on-call and must stay overnight in the hospital. Other options include the possibility of providing on-call students with "**meal tickets**".

SOCIAL EVENTS

-Everyone is invited to celebrate the coming of fall at **Octoberfest** at the Ponderosa House on Saturday, October 1. Look for fliers.

-**Great Escapes III** offers whitewater rafting down the Nantahala in western NC! The trip will be on the weekend of October 8-9. If you're interested contact Cynthia Boyd (383-7046).

-The Annual Fall Pig Pickin' hosted by the Department of Internal Medicine will likely be on November 5. Look for information in your boxes.

OPPORTUNITIES

-The 1994-1995 student representatives on the Duke University Medical Center Institutional Review Board are Cathy Petti, Greg Della Rocca, and Gayle Howard.

-The student representative for the Committee for Technology and Health Education is Greg Erens.

-Martin Clowse and Andrea Coviello are organizing a **Student Lounge Committee** to help in implementing of improvements/renovations of the student lounges, especially the Duke North Lounge. Anyone interested in serving on this committee, please call Martin (382-8391) or Andrea (286-2574). ■

Important Announcements

DUMC MIND BODY MEDICINE STUDY GROUP presents

Healing the Heart: A New Frontier in Medicine

First Annual George Phillips Jr. Memorial Lecture

Marty Sullivan, M.D.

Assistant Professor of Medicine

1034 South Amphitheater

Friday, October 14, 1994

12 Noon - 1:00 PM

Dr. George Phillips was highly regarded as a teacher, physician and administrator and had just been appointed Associate Dean of Medical Education at the time of his unexpected death on July 2, 1994. He was also one of the founding members of the Mind-Body Medicine Study Group last fall, and we would like to establish a tradition of remembering him at the beginning of each school year with a special lecture by one of his friends. Along with Marty Sullivan and myself, he helped start this interdisciplinary group to provide a forum for discussion of holistic and complementary medicine which would be open to students, faculty, housestaff and employees at the Medical Center as well as community practitioners. He gave one of the initial open lectures to the group and also led one of the first journal clubs. Two years before his untimely death, George's persuasive testimony before the state legislature was pivotal in the passage of legislation allowing physicians in North Carolina to practice alternative medicine.

During the past year, George, Marty and I met frequently at the Center for Living to discuss appropriate ways of integrating mind-body concepts into the teaching and practice of medicine at the Medical Center. There are numerous researchers here already pursuing

projects in some of these areas, so it has been the mission of the Study Group to provide a network for exchange of clinical and research information between departments and with the local community. Some of the most exciting work in mind-body medicine is being done at the Center for Living's Healing the Heart Retreat Program which has as its goal the reversal of heart disease through comprehensive lifestyle changes. This program integrates more traditional interventions such as exercise and a low fat diet with mind-body techniques such as yoga, meditation and group support therapy. Marty Sullivan is the coordinator of this program, so it is appropriate to have him give the first lecture in memory of George.

D. Lawrence Burk, Jr., M.D.

Associate Professor of Radiology

BASIC SCIENCE REVIEW COURSE

The first lecture is Wednesday, November 2 from 5:30 to 7 pm. in the South Amphitheater.

Topic: Cell Types and Pathology.

The 1994 Golden Apple Award winner, Dr. Thomas MacIntosh, will be inaugurating the new Basic Science Review lectures on November 2nd. These lectures will be every Wednesday from 5:30 to 7pm from November to April. **ALL MEDICAL STUDENTS ARE WELCOME!!** MS III'S are strongly encouraged to attend. The faculty has agreed to commit the time and effort to lecture as long as students attend. Please participate as much as possible. There is a meeting for all of those people interested in assisting with the organization of the review course on Oct. 5, at 7:30 pm at the house of Ed Norris *et. al.* Call 490-5706 for details. Thanks for your help.



Medicine Abroad

Corinne Linardic

This is the third in a series of brief reports concerning issues of medicine abroad.

Earlier reports in this column focused on opportunities for residents and physicians to work in the international community. This month will address a broader international health topic: the issue of world population and family planning, as discussed at the U.N. International Conference on Population and Development, which occurred September 5-13 in Cairo, Egypt. This was the third such conference (Bucharest in 1974, Mexico City in 1984) held to address the alarmingly rapid population growth. Over 150 delegates from the world community attended, with the four main socio-political blocs consisting of Muslim countries, the developing world, wealthy Western nations, and the Vatican and its allies.

The main goal of the conference was to outline and implement a globally acceptable policy to curtail world population growth. With optimum results, the current world population of 5.67 billion would increase to 7.27 billion by the year 2015; without family planning, it is estimated that there will be 7.92 billion people on the planet in 2015, and 12.5 billion by 2050. As expected, the issue of abortion as a means of reproductive control was a central source of angry debate. Opposing blocs spent days arguing over phraseology, with the Vatican being the prime mover of the efforts to dilute any reference to abortion. At times the point of contention was word order or the use of a preposition; in one particularly heated session the phrase "fertility regulation," which the Vatican argued could be used to refer to abortion, was changed to "regulation of fertility."

The final outcome of this conference was a 113 page document entitled the "Program of Action," which outlined a 20-year blueprint for slowing world population growth and making family planning available world-wide. The new concept of "reproductive rights" was intro-

duced, with the main focus on women-- for the first time in world history, women were formally declared to have the right to reproductive and sexual health, defined in the document as "a state of complete physical, mental, and social well-being." Governments were urged to provide material means of curtailing population growth, such as by supplying contraceptives, as well as by providing reproductive education for girls and a range of choices of family planning methods for women. The document was generally acceptable to the four major socio-political groups, but with at least 20 delegates (Vatican and Muslim) registering formal protests to the language on sex and abortion. Most surprising was the partial support of the document announced by the Vatican on the last day of the conference. (During the past two conferences the Vatican attended but rejected the final recommendations of the conference.) While endorsing chapters of the document such as the family as "the basic unit of society," and "gender equality, equity, and empowerment of women," the Vatican stated that it "has not changed [its] moral position on abortion, or opposition to contraception or sterilization, or to the use of condoms in AIDS prevention programs."

The "Program of Action" document is not binding, and as a result the groups opposing abortion and the use of contraceptives are extracting their own interpretations of specific chapters in order to support their own agendas. Although there was not a united front at the United Nations, this third population conference has succeeded in forcing certain issues to the table. As pointed out by Wade Roush in Science, the numbers show us that it is no longer possible to play ostrich; during the nine days that the conference convened in Cairo, the world's population grew by 2.1 million. Sources: The New York Times Sept. 13, 14, and Science, Vol. 265, pp. 1164-1167.

First Year Impressions

Some of the most creative first year medical students have submitted their first impressions of our glorious city and university. We look forward to their continued input into SD.

I said goodbye to mom & the cat and went for the Jersey Pike. Gazed over the toxic swamps that dot the foreground of the Manhattan skyline. Whipped past Newark airport and then all of the smelly smokestack nuclear bomb factory chemical plant things with "We're watching out for your environment!" or something plastered on a radioactive silo - holding my nose. I was thinking about how awesome this 'Sib' party was going to be where I don't know anyone, and I just got a haircut that makes me look like a skinhead ('did I say 1/4 inch? I meant 1/2 inch'). Sweet first impression. Then my car died. On I-95 going through Richmond. At rush-hour. Nice.

Half an hour later, these two chimeric dudes from the backwoods pick me & my car up with their tow-truck. They asked if I knew that Richmond was the @#!* of the world (had they taken anatomy?). I asked them if they had ever been in a movie with Burt Reynolds, jamming on some banjo, or playing farm. They looked at me blank - no compute. They asked me if my car had one-a-them fuel 'jecters, or if it was 'carbed'. Silence the rest of the way.

Finally got to the VW dealership. It was closed. Right on. Dropped the car off, strolled down the lovely industrial park zone mall development highway to a Best Western. I had taken my guitar with me. I looked like a struggling wanna-be folk-singer. What a tool. I fell asleep hoping the party had really stunk.

My first day of medical school! I spent a lovely day at Hawthorne VW, Inc. \$200 later, they figured out that my car needed a new engine ('zero compression, man'). I didn't feel too bad: it was my first car, it had seen me

through high-school and college, it took me out to Arizona and back, I had just put \$900 into it a week before. The junk yards offered \$200, the body shop guy \$500. Bastards.

Luckily the rental car place was way on the other side of town. Brought it back around, unpacked the corpse, filled up the resented rental, got a pizza, and went on my way - pizza keeping warm on the dash, defroster preventing intrusive pizza-steam from condensing on the windshield. It works. Got into Durham just in time to be welcomed by my empty house and stay up until 2am unpacking.

My second day of medical school. Met about a million people whose names shot right out the other ear. Dave. David. Matt. Mike. Matt again. Mike. David again. . . Aamer Farooki. Sat down in amphitheater, entranced by fascinating lectures on. . . something about med school. At last! **Eric Halvorsen**

The establishment of friendship, camaraderie, and a sense of shared identity among persons of varying ethnic, religious, and personal backgrounds can be problematic due to the lack of common cultural and personal ground. In my first six weeks at Duke med, I've been struck by how the school provides a common set of experiences, rituals, and symbols to unite people of varying personal backgrounds and identities, and engender a feeling of shared identity as future physicians.

The major shared experiences of our medical education so far - lecture, lab, and so on - have tended to be uncontroversial and to reinforce a feeling of shared progress toward a common goal and identity. The secure future that is largely assured those in medical school and the pass/fail grading system at Duke promote unity and limit competition among medical students. I see the collaborative and



scientific aspects of medicine as important in the establishment of camaraderie and group identity. Medicine is a collaborative endeavor, and cooperation among its practitioners is encouraged and associated with success. This positive evaluation of cooperation and collaboration pervades medical education and influences attitudes even at our early stage. I believe both the content of our education so far and the implications of that content have largely lacked the subjectivity and personal and political implications that would tend to fragment students. Graduate school in areas such as sociology or history might tend to reinforce and encourage the expression of gender, racial and other group identities and allegiances, particularly where such identity intersects with the political. So far, the medicine we have learned seems largely to lack the broad paradigm divisions, whether politically based or not, that capture the loyalties of and sometimes divide those in other fields. (I note the existence of such divisions among "allopathic" schools such as Duke, and schools of "osteopathy" and chiropractic.) The only important possible exception I've noticed so far would be conflict between some religious beliefs and the evidence for and assumption of the evolution of life in much of our curriculum. In practice, however, I've found that students who hold creationist beliefs seem to have little difficulty harmonizing their views with the prevailing scientific paradigms.

I suspect that later in our medical education, the isolated basic science environment we have experienced so far will be complicated by the conspicuous introduction of issues such as the politics of health care distribution, particularly as such issues relate to gender, October, 1994

Writing a summary of these first weeks of medical school is like poking my head up from a foxhole to report on a battle: I can't see clearly for all the confusion, and I might lose my head if I look too long.

race, and other major identity affiliations. At any rate, as medical students, we are largely guaranteed a secure future commanding social prestige, authority, and power, and should be careful to not allow this position and newfound identity to detach and desensitize us to issues of justice in the larger society.

Tom Bryce

Writing a summary of these first weeks of medical school is like poking my head up from a foxhole to report on a battle: I can't see clearly for all the confusion, and I might lose my head if I look too long. But here's what I see through the smoke.

First, I've been amazed by the stories of the class of '98: Keith Killian spent last year sipping tea in Parisian sidewalk cafes while researching at the Pasteur Institute; the proud owner of the lowest entering G.P.A. in our class (0.0), Lisa Soltani just returned from a three month stay in Iran; Martha James has joined us after repenting her sinful lawyering ways—maybe she can divert Aliceson King, our resident M.D.-J.D. candidate, from a life of abject folly; then there's Dan Yoder, our very own Holy Roller, whose incisive questions are often the only thing between me and a pool of sleep-drool on my desk; and I have to admit that I was initially intimidated by Ning Wu, since he graduated from the prestigious Foreign College Not Coded, but he turned out to be a great guy and a hell of a volleyball player as well.

Speaking of, who'd a thunk it that we'd have three smokin' volleyball teams, a soccer team, a bunch of hearty whitewater rafters, and some pretty gnarly tennis players too. And I was worried that life outside Davison would

Continued on Page 10

First Impressions Continued.

come to a screeching halt. We have amongst us, just to name a few, a nascent (but bassless) rock 'n' roll band, a string quartet replete with two pianists (go figure), and a regular crew of Habitat for Humanity manual laborers.

And then there's the work. I think a lot of it is fascinating, but mark my words: I hereby solemnly vow to buy every member of the Duke Med class of '98 a bottle of the finest champagne if I ever once in my clinical practice comfort a patient by regurgitating the number of ATP generated by the oxidation of one mole of fatty acid. (That bitter tone you hear creeping into my voice has nothing to do with the fact that I just got my biochem exam back.)

And then there's the important stuff: the houses we will build some Saturday mornings in a downtown slum, those final buzzer baskets we'll witness as Duke regains the National Championship, and that sunny picnic in the park with a newfound friend. I am convinced that the friendships and the memories we'll acquire in the coming years are just as valuable as the skills we'll learn, and far more precious than all the praise we will ever receive. My ultimate goal is this: that in four years or so, when we don those funny robes and add a couple of letters to our names, I can look back and say I had a lot of fun, that I learned how to become a caring doctor, and that I did some good. Nothing else matters.

Back to the foxhole. Good luck.

Timothy Lahey

I should have known we were in for a bit of a time when the rental car agency goofed up on our reservation. Being poor college students made poorer by the astronomical expenses of medical interviewing, I had requested a super-economy, sub-compact car, complete with can opener just in case one of the doors jammed shut. However, upon arrival at RDU Airport,

the slick-haired Hertz man told my wife Angie and I that due to "a computer-error" they had no more Geo Metros available. Instead, at no extra charge, they would provide us with a Chrysler New Yorker. For those of you whose car anatomy is a little on the rusty side, a New Yorker is that huge tub driven by wrinkly-old Ferd and blue-haired Myrtle at a steady 45 mph down the fast lane on the freeway. The New Yorker does not have brakes; it uses anchors. It looks like a brontosaurus from Jurassic Park with slightly less attractive lines.

Being young and adventurous we boarded "Daisy Lou" as the gas-pump attendant affectionately called her, and headed towards downtown Durham, eager for our first taste of "Eastern Culture." Interviewing at Duke Medical School presented the exciting prospect of moving from the laid-back Utah lifestyle to "the intellectual Ivy League." Little did I suspect that to reach the top of the Ivy, you must first navigate the Labyrinth.

Way back in 1840 something, Brigham Young had the wisdom to decide that the streets in all Utah communities would run directly north and south or east and west, thus dividing the town into boring, but easily navigable square blocks. So basically, anyone who has played Pac-Man has no trouble getting around in any Utah town. Brother Brigham also declared that the grid-like streets would be given names corresponding to their geographic positions from the center of town. Thus the street located one block south of the town center is named 100 South, the street four and a half blocks north of the middle of town is 450 North and so on. Durham was not built under the Brother Brigham plan. In fact, I believe there are two possible explanations for the logical and orderly layout of the Durham city street plan: 1) Durham's original city planner was an opium addict who didn't own a ruler, or 2) the Durham city fathers fed loco

weed to a bunch of cattle, turned the whole herd loose in Durham, and then built a street wherever one of those cattle went.

Not only are the roads in Durham crooked as cow-trails, but the road signs don't make sense. Sure they have road signs in Durham, you know the usual, "147 North =>." But instead of putting the sign 20 yards or so before the turn to 147, in Durham they put the sign 20 yards after the actual turn off. So instead of a polite "Those travellers wishing to take 147 North, please turn right at the next intersection, thank you" the Durham signs communicate a cynical "Congratulations Idiot, you just missed 147 North." And since U-turns are legal but impossible and without cosmic physic powers there is no way of knowing where the next road will take you, the chances of finding your way back to 147 North are inversely proportional to your anxiety level over how soon your interview is supposed to start.

Once you have mastered the art of telepathic turning, Durham's next trick is requiring a Ph.D. in Thoroughfare Nomenclature. I desired to travel on a major boulevard in Durham, Hillsboro Road. At least, that's one of it's names. This happy wanderer is also called SR 15, Business Loop 70, Main Street, Markham Road and if you're not careful, this Hillsboro *et. al.* will unexpectedly plop you out right in the middle of I-85. You're just minding your own business following the road straight as she goes and suddenly BOOM!! its a freeway. You don't turn, but suddenly the road changes name. In fact, it may do it three times in one block.

Even worse than one road with four names are four roads with one name: Chapel Hill Drive, Chapel Hill Street, Chapel Hill Boulevard, and Chapel Hill Road (doesn't anyone here go to a church on flat ground?). These are all real roads, all real hard to distinguish for a non-Durham native, especially because the natives will try to fool you by dropping the

distinguishing suffix. "Oh, Red Lobster," they say with a knowing smirk, "That's just right up the road. Turn left on Chapel Hill." So you proceed, seeing the Chapel Hill Road sign 20 yards too late, of course, so you miss the turn. Then, as you are about to make the requisite U-turn, you notice that this next street is Chapel Hill also, this one of the Blvd. variety. Meanwhile the Durham native has rented a pair of binoculars and has invited his friends over to eat pizza while they watch you in your dilemma. Add to this the fact that the only chance Durham ever had for some semblance of order is the biggest faux pas of all, and you get a pretty complete picture of the Durham "spider-web-from-Hell" road system. Interstate 85 runs North and South from Montgomery, Alabama to Richmond, Virginia. In fact, and surprisingly enough, it even runs somewhat north and south through Durham. But to get the Interstate through Durham, the engineers put a giant sideways S curve in the road. You guessed it. I-85 North runs mostly south through Durham and I-85 North goes south. I suppose in retrospect it seems only fitting that way.

So, how did our trip go? Great, actually. I'm here aren't I? You probably won't believe this, but we weren't late to even one appointment, even though we got turned around, mixed about, and thoroughly confused on many occasions. How'd we do it? We owe it all to Daisy-Lou, the New Yorker. When we were in a bind, I'd just drive like she was used to driving: right down the middle of three or four lanes of traffic, nice, slow, and easy. So, if someone you know is planning a trip to Durham in the near future and needs a rental car, might I suggest a New Yorker?

Anthony Beutler

"OK, I think the next slide will illustrate my point very clearly. Note that the decreased Km
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First Impressions continued.

value reflects the action of the competitive inhibitor on our substrate, and contrast the sigmoidal shape of the curve to the somewhat more mundane linear relationship on the right. And now let's move to the more difficult material in today's lecture..." With that, I turned my frayed attention to the half-filled Chronicle crossword lying before me. **43 Across.** A six-letter word for "lost, flailing soul." It occurred to me that I fit that description quite well, and so I slowly entered my name M...A...R...V...I...N.

I am the unfortunate spawn of an admissions office experiment gone awry. Two martinis deep into the faculty Arbor DayFest last year, an unusually bubbly Dean Pounds cornered the cabal of Advisory Deans and offered the following: "Selecting med school students has become oh so blasé. Senior thesis this, valedictorian that. What's say we spice it up a little? I have on my desk the application folder of a student so grossly unqualified, so blatantly inept, that I'm willing to bet he can't find his way to the Amphitheatre, let alone survive the first block. Any takers?" And thus, I was invited to Duke.

Of course, nothing worth learning can be taught. So after classes had ended, I scurried to the orange zone for yet another fun-filled and informative installment of Clinical Arts. It was my turn to play "Doctor." I escorted the patient into the room and asked her a few simple questions. "What brings you here today?" "Are you experiencing pain?" No answers, only nods. "Are you taking medication?" Nod. "Does your head hurt?" Nod. "Would you classify your discomfort as a sharp pain?" Nod. "Sharp like an ice pick through your left orbital cavity?" More nodding.

I had to take the initiative. "Ma'am, I am new at this, and so I'll need you to answer this question out loud. Tell me how long you have been feeling this pain." She gave me a blank look,

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Reflections on Health Care Reform

Ashvin Pande

Poor George Mitchell. You see, poor George decided a few months ago to pass up a plum Supreme Court spot so he could devote his few remaining months as the Senate Majority Leader to passing President Clinton's Health Care Reform Act. And George tried his hardest. He huffed and he puffed and he said to his fellow senators, "You'll get no vacation 'till we're done with Heath Care." And so our fearless elected representatives waxed eloquent about "socialized medicine", and "quotas," and "rationing," and that dreaded word, "Taxes." And soon enough, they finished with health care.

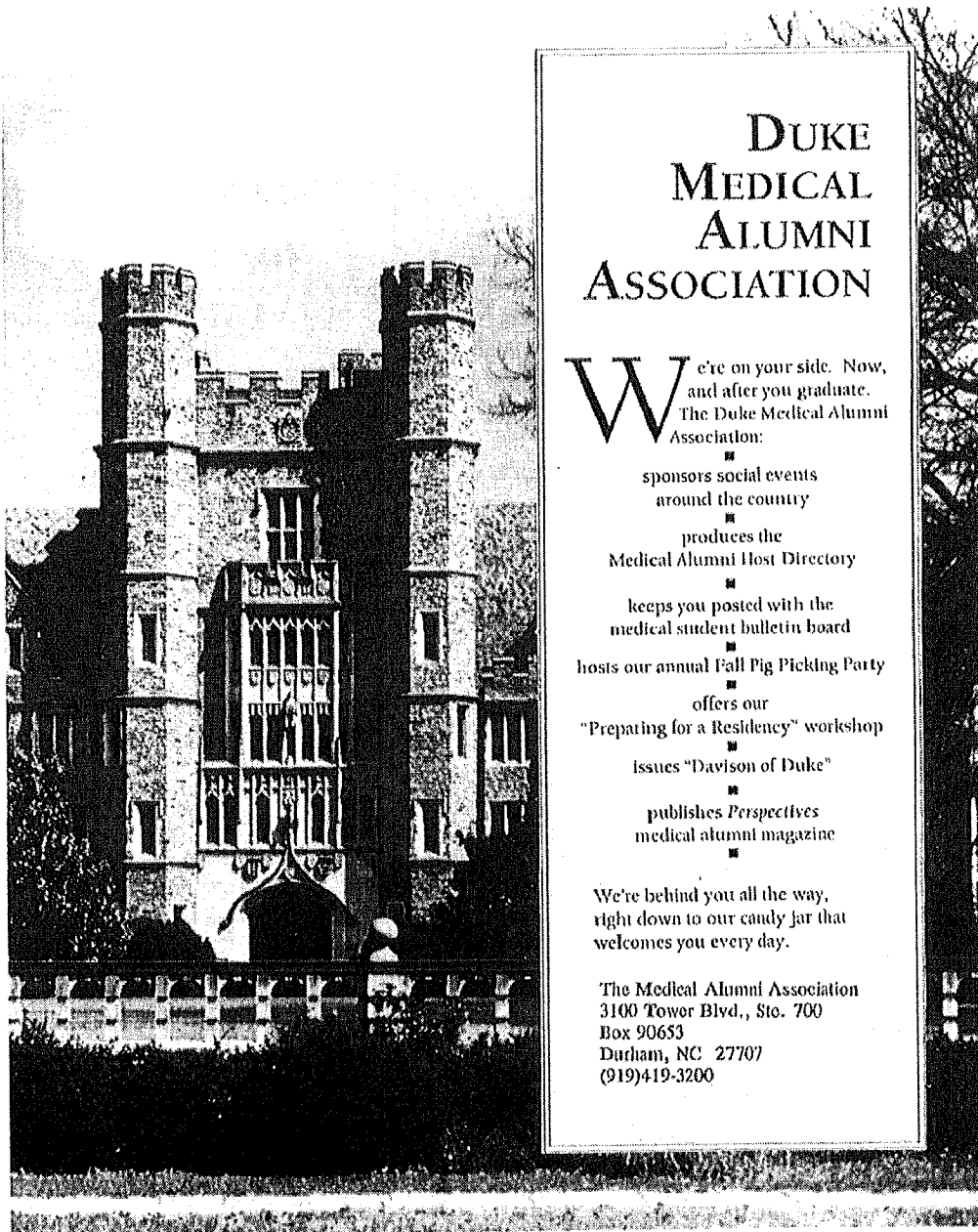
As future doctors, all this is of more than casual interest to us. "Managed Care" has become the catchword of our professional generation, and doctors of medicine's Golden Age whisper to us, "Don't expect medicine to be like it was before." We're waiting for the dust to settle, to see where we'll fit in when it's all over.

And so it is with little cheer that I mourn the Clinton Administration's courageous initiative towards reform. It is not that I was particularly enamored by the Clinton or the Mitchell or the Breaux or the Moynihan or the Dole or the Packwood plans. I believe that reform is an incremental process (like evolution), yet at the same time, each stage marks a constructive step towards a predetermined goal (unlike evolution). Rather, what saddens me about the fiasco of health care reform is the process of it, the ethic of obstructionism and the stubborn inability to create. Because what we saw this summer in America were the politics of destruction, the politics of stagnancy and small-mindedness, and worst of all, the politics of myopia.

Nor are Bill and Hillary and their gang in the White House free of blame for the failure in

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Shifting Dullness



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Places to go, People to see

Rima Nasser

Hey! Yet again, we are back to provide you with more ways to please your palate, your soul, and maybe your body, so hang on for new outlets to fun. I must say that my research has been scarce the last month, since I was out of town, but I will try to make up for that.

I-Places to hang: This time, it will be places to go to if you don't really feel like talking.

A-Durham:

Duke Coffeehouse: I have been there a few times, and had fun every single one of them. The music is loud, but interesting. Quite a few bands have played there before making it big, so if you are into the alternative music scene, give this a try.

Location: Duke East campus, in Crowell Hall, which I think you can get to from Buchanan blvd. Tel 684-2957

B-Chapel Hill:

Cat's Cradle: This is another alternative music club. Wild bands, some really good.

Location: in Carrboro, on 300 E Main St. Tel 967-9053

II-Restaurants:

A-Durham:

Parizade: Delicious Mediterranean and Nouvelle Cuisine, in a very pleasant setting. I tell you when I walked in for the first time I forgot I was in Durham.

It has big city sophistication, with Durham prices. Good wines, great atmosphere, specials every day, and wine tasting with free appetizers on Wednesday (see Other section). Price range: like most of the other places around \$20 a head give or take a few.

Location: In the First Union Plaza, I think the B building.

B-Chapel Hill:

The Flying Burrito: OK Mexican food, fun, young atmosphere. The Margaritas aren't bad

and the guacamole is quite good. Cheep and good.

Location: Off of Airport rd. Take Franklin, right on S. Columbia St. which will then turn into Airport. Keep going and it will be in a little plaza on your right.

III- Dance clubs:

A-Durham:

The Power Company: The only place around here that simulates a dance club. Techno pop. Loud. Interesting. You can shed a few calories funkng it up to the rhythm.

Location: "Downtown" (ha) Durham. Go to Main street, take the downtown loop and it will be on your left, I think.

The Palace International: Also a restaurant, though I must say I never tried the food there. A sort of dance club, sometimes good reggae bands, fun, something different to do. Go with a group.

Location: On Parrish street, which is also in downtown Durham, parallel to Main street. Go on Main, do the downtown loop, left on Corcoran St., right on Parrish, and it will be on your right.

B-Chapel Hill

I already talked about **Local 506**, some people also enjoy **Players**, however my feeling is that Players sucks, because the music sucks and I just don't like the place. I was also recently informed about a new place (something hall or whatever), but since I have not tried it out I won't suggest it yet. We give you quality here, not quantity.

IV- Other:

Other random things to do include

-A **Farmer's market** on Saturday early mornings: stay on Franklin St. all the way until you get to Carrboro, and then you will see signs.

-In that same area, just across the street, there

is a wine tasting and free bluegrass music on Thursday evenings (around five) .

-**Parlaze**, which I have already raved about, is a restaurant in Durham located in the First Union Plaza. On Wednesdays, between five and seven p.m., they have **free appetizers**, and certain featured wines (which are not free) -**Fowler's** is a place you need to know about: located in Brightleaf Square, it provides you with an excellent wine selection, good coffee, multiple interesting beers, and most of the ingredients needed if you would like to attempt making your own gourmet meal. They also have salads and ready made foods, desserts etc. It's a good gourmet food store.

- As is **A Southern Season**. There I have found essential ingredients for certain dishes that I had trouble finding anywhere else in the area. They sell everything from pistachios to cutlery, plates etc... They also have very good food (a sort of restaurant kind of thing). Located in CH, in that shopping plaza that you can get to either by staying on 15-501, in which case it will be on your right, or if you take Franklin, it will be on your left, I think before you reach the Sienna Hotel, but I'm not positive.

-On a totally different note, the **Duke under grad campus** is filled with things to do, that I wish I had known about the last couple of years, so I suggest you mosey on to the Brian Center and check the activities out. One such interesting thing is the Freewater presentations, a series of free movies that are shown every Tuesday, Thursday, Friday, and Saturday, free for Duke students, three dollars for all others. Schedules are located at the Brian center on campus.

All right. I apologize for not having more places to hang, and still no info about Raleigh, but you must understand that I just spent my last month jet setting around the Mediterranean... I could tell you about some bars in Santorini, or even better, Beirut. I will try to research Raleigh this month. Enjoy!•

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First Year Impressions from page 12
and when her mouth finally cracked opened, I heard the following, "Shi, wo jiu shi. Xi huan zhong guo fan." I looked to our overzealous scribe, who had already filled two easel pages and dried out two magic markers. Together, we faced our smug facilitator. "Dr. Neelon, um ... I think she just ordered General Cho's chicken in Mandarin Chinese." He only smiled.

Memo to myself. Learning issue: Learn Mandarin Chinese.

I tarried a few moments after class, but not too long. I let everyone else set out for the hospital exit and then followed behind them — I had forgotten to leave a trail of bread crumbs this morning. As I gathered up my books, Dean Pounds slipped into the room. "So, Mistak—, uh, Marvin. How is your first year going? Are you finding your way to the Amphitheater all right?"•

Mike Morowski & Trip Meine

Health Care Reform continued

reform. While Clinton proposed the most ambitious social and domestic agenda since Lyndon B. Johnson and his Great Society, our friend from Arkansas lacked the awesome political arsenal and the unmatched sense of the legislative process that Johnson had mastered. The Clinton Administration's secret meetings, faithless wavering, and sheer incompetence committed health care reform to its certain doom.

And so now poor George is left out in the cold. There'll be no Mitchell Health Care Security Act, there'll be no Justice Mitchell, and possibly most unfortunate, there's no Commissioner Mitchell to untangle the baseball strike. Caught between the Scylla of Congressional equivocating and the Charybdis of administrative inconstancy, we have fumbled away the greatest opportunity for substantive health reform in the past 20 years. It was the least we could have done for George.•

Sports News: Athlete of the Month

OK, all of you loyal AOTM fans.... I know that you missed my column last month, but I have a valid excuse. I was so depressed about the state of affairs in the baseball world that I just couldn't bring myself to write about anything athletic. Even now, the trauma of the cancellation of the baseball season hurts, but I shall not let you down.

This month's athlete is an MSII who comes to us from Stanford, and it is because of her recent soccer feats that she has gained this prestigious award. Her name is Elizabeth Joneschild, and I once again got the exclusive interview.

Elizabeth has been playing soccer since she was in the third grade, and played all through school, eventually ending up on the women's varsity team at Stanford. She was instrumental in taking this team to the NCAA tournament during her sophomore, junior, and senior years. After graduation, she then took a year off to play for Team Diadora, a women's club team in Seattle. Even in med school, she couldn't get enough soccer, so she worked out with the Duke women's team.

Julie Lapp
Elizabeth is a testimony to the fact that you really can have fun and still somehow pass first year (take note, all you first-years who I heard discussing the mean on the Cell Bio exam today!!!). This past spring, Elizabeth played on two teams. One was the semi-pro Greensboro Dynamo, a member of the United States Inter-regional Soccer League. The team is largely made up of ex-UNC players, as well as current Duke, UNC, and NC State players. They went all the way to the nationals this year, losing in the final, 1-0, to Sacramento. If that wasn't enough, she also played on a state team from North Carolina, which won region 3, and will be traveling to the national tournament over Thanksgiving break.

In her "spare" time, this midfielder likes to run and downhill ski. She also supports our wonderful intramural sports programs by participating in basketball and (guess what?) soccer. We salute Elizabeth's commitment to sports, and wish her well in the upcoming national tournament. Congratulations, Athlete of the Month!!!! ■



1994 Aesculapians are here!

Ally Tevrizian and MSIII women are so excited that they can hardly contain themselves.

For the uninformed, these are our yearbooks. If you ordered one, you may pick it up from Linda Chambers, between 8:30 a.m. and 3:00 p.m. If you did not order one, there are a few available to purchase now. A note of interest: there has not been a yearbook for Duke Med in **10 YEARS!** Take a look at this one. Do you want one for your class? Interested people see Linda Chambers.

Roadside Assistance continued

radial arteries; no pedal pulses were appreciated."

The fourth of this mad foursome, a man we'll simply call Bud, a man who claimed 22 children, was now shouting at the nurses that he needed to go home now. This gentleman, a man of the earth, had left his hogs and his chickens untended three days ago; if he waited much longer, his hogs would devour his chickens, and then there'd be hell to pay. Bud was, of course, standing in the hall without any pants, Foley in place, scratching himself. He was, you might say, somewhat overdue for his Haldol.

"Abdominal exam was difficult to perform, but was otherwise unremarkable. Rectal exam was attempted but not performed secondary to too much tissue preventing access. His extremities showed three missing fingers on his left hand; he does not know how he lost them, and was surprised to learn they were missing. Neuro exam was, of course, nonfocal. He had a hundred labs drawn on admission, none of which were significant. In summary, Mr. Public is a 74 year old gentleman who presents for further evaluation of multiple chronic medical problems and evaluation for new dentures. We started him on an Ativan taper, since he seems to have a past history of DT's. We've also begun prophylactic lactulose, in case he becomes encephalopathic."

Mr. Jones piped in, "Doc, I'd be real concerned about him. He was talkin' in his sleep last night and, boy, was he sayin' some awful things, like he was gonna kill someone." Mr. Smith joined the fray with a perfunctory belch. Our attending looked frustrated. She enlisted the help of all of us (including Mr. Smith and Mr. Jones) to sit Mr. Public up and listen to his lungs. He sat there, patiently, an incredible mound of flesh measuring three feet front to back. In a few minutes his abdomen began oozing off the side of the bed; to stave off impending catastrophe, manpower was

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shifted to buttress an obvious weak spot.

We laid Mr. Public back down. Our attending announced, "I think he's at pretty good risk for a pulmonary embolus. In fact, I'd like you to get a V-Q scan to make sure he hasn't already had one." The crowd winced as if they'd been collectively struck with two-by-fours. V-Q scan meant radiology - and it meant talking to a radiologist.

It was, of course, the weekend. I attempt to call radiology. The phone rings for a blessed five minutes before anyone answers. Yes, I need to get a V-Q scan. Sure, I'll hold. Ten transfers later, and I was back to the front desk, having spoken to two lab techs, three office clerks, an anesthesiologist, an accountant, and three janitors. The person at the front desk brusquely informs me that I'll just have to call Duke, it's the weekend, and we don't do that sort of thing here, and then hangs up.

Okay, let's try Duke. Yes, I'd like the pager number of the radiologist on call. You're kidding. You mean I can't have his pager number? Why not? - No, nevermind, just page him for me. An interminable ten minutes on hold (after retrying three times), and the resident answers. Yes, we need a V-Q scan stat. I don't care if you're eating dinner, this gentleman could be dying and we need this scan. When again can you do it? You'll try sometime tonight? Well, I guess it'll have to do. (Note: he was not currently unstable, but that's the only way to get one done now).

And so later that evening he got his scan, and there was much rejoicing. Afterwards, Mr. Public, Mr. Smith, Mr. Jones, and Bud were all playing cards, eating dinner, and talking about killing bad guys. Mr. Jones was now belching regularly, Mr. Smith's face had scabbed over, and Mr. Public's immense corpus was suspended in some sort of safety harness to prevent imminent catastrophe. And, of course, Bud had not yet put his pants on. Ah, yes. Another day at the VA. ■

Pseudocommunitarianism:

An Overview of Life at the VA

Michael DiCuccio

"Mr. John Q. Public is a 74 year old white male with a past history significant for hypertension, diabetes, peptic ulcer disease, COPD, three heart attacks, four strokes, peripheral vascular disease, gout, sick sinus syndrome status post DDD pacemaker placement, alcoholic cirrhosis, glaucoma status post bilateral cataract implants, depression, and several gunshot wounds. He's coming in now for a tune-up and an oil change, but what he really wants is a new set of dentures. Over the past two weeks, he has experienced three episodes of hematemesis, one episode of hematuria, and both melena and seeing blood in his stool. He also reports having fallen against a sharp corner and losing consciousness for several hours; he did not seek medical attention, despite lying in a disgusting pool of blood for the remainder of the day."

Such goes the day at the VA. We're in the Big Room (a glimpse at medicine of the future, a happy community of eight disgustingly sick individuals), and our new guy is lying in bed, already looking like a permanent fixture here. And, of course, he's a vet.

"Mr. Public served in both Korea and Vietnam and was a career Marine; he retired in 1971 and currently draws a hefty pension. He reports a 250 pack year history of smoking and quit drinking yesterday; prior to this, he had consumed roughly 2 pints of gin a day for years on end. Significantly he also served a 25 year sentence in prison for kidnapping and manslaughter (although he claims he did it in cold blood); during this time, he reports IV drug abuse and sharing of contaminated needles. He was previously prescribed many dozens of medications, including NPH insulin, glipizide, captopril, atenolol, Isordil, allopurinol, Lasix, Coumadin, an aspirin a day, omeprazole, al-

buterol, Prozac, and quinine for leg cramps; however, he hasn't taken any in months."

These rooms are, of course, social venues for the vets.

I've grown to believe the vets like coming to the hospital, because they're always

surrounded by other vets. A group of us eager medical types now hung over Mr. Public's bed, interrupting his morning gab session with his neighbors, Mr. Smith and Mr. Jones. Mr. Public, being the morbidly obese couch potato that he was, simply lay in bed; his occasional cough produced tsunamis of flesh that sent the covers a-flyin'. Across the room, Mr. Smith, a man of large body, small head, protuberant proboscis, and jutting jaw, sat shirtless shaving without benefit of a mirror, removing large sheets of facial skin. He quickly finished, giving us a gnomish grin, saying "Better wipe off the blood now." He did, and in a flash was buck naked, still grinning from ear to ear, giving himself an elaborate sponge bath. You gotta love these guys.

"Review of systems was positive for everything I could think of, so I won't bother you with the minutiae. Physical exam revealed an intensely obese white gentleman in moderate distress. His head and neck exam revealed marked jugular venous distension, measured 15 cm above the right atrium. His thyroid was frankly goitrous. Chest exam revealed five old gunshot wounds sustained during a night of kidnapping and drunken reverie as a teenager; lung fields were clear, but breath sounds were faint. Heart sounds were inaudible due to his immense chest wall diameter. Pulses were strong with bruits even appreciated in the

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