

Shifting

*The Stimulation
of the Pancreas
Issue*

April, 1997

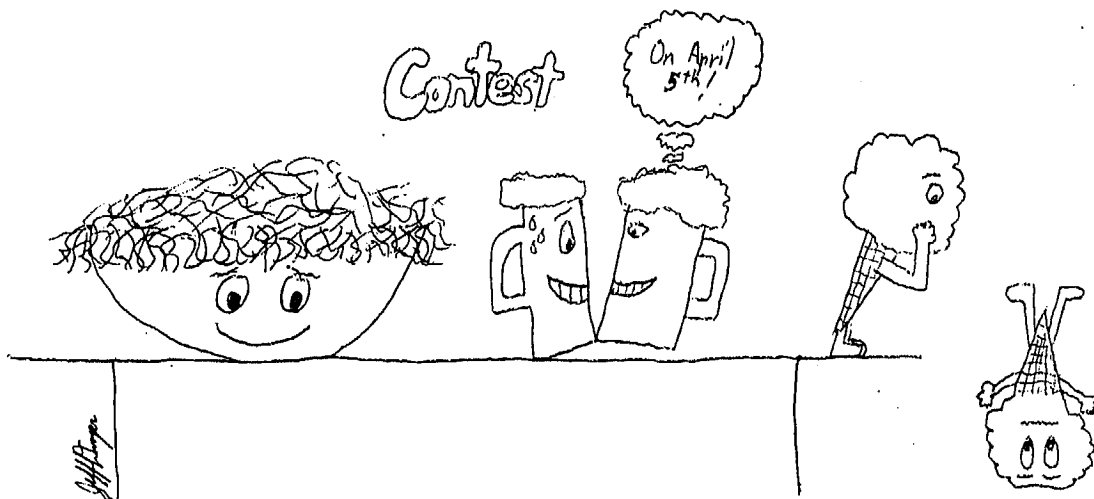
Dullness

The 24th Annual Shifting Dullness

BEER, PASTA, DESSERT

Contest

On April
5th!



In this Pasta-riffic issue:

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Plural Effusions

Jeff Drayer

With the absence of Duke basketball leaving a gaping hole in my life, I've found myself forced to search for something to fill in the void. Home shopping networks and afternoon talk shows worked at first, but even that became boring, leaving me only with seventeen types of carrot peeler and an intricate knowledge of the turmoil suffered by lesbian dwarves who love their overweight mothers. I turned my attention, therefore, in the obvious direction, exhuming once again my fervent zeal for radiology research and the thrilling quest toward the description of the characteristics of hard-to-detect pulmonary nodules.

And so, after months of "data" collection, study design and rigorous observer training, I finally sat down, made up some numbers that fit into a straight line, and plotted a couple of graphs, as well as several color pie charts, many of which were labelled. Which brought me to the most important step of all—the writing of my paper.

Now, writing a paper for an academic journal is not as easy as one might expect. First of all, it has to be at least six or seven pages long, which is difficult to do when your research, as it invariably will, doesn't actually show anything more interesting than that *Klebsiella* grows faster on agar containing ten rather than nine percent tryptophan at temperatures less than 289 degrees Kelvin. So how do you do this, other than by putting in six different graphs which all show the same thing? It's easy; you have to write every single word out in the most basic, plodding manner possible so that any scientist reading it will never be able to misinterpret anything that was stated. For example, if you just wrote a paragraph in your materials and methods section for the *Rumanian Journal of Golgi* about how you soaked,

dried, resoaked, coated, columnated, iced, shampooed, and then resoaked a protein, you can't complete the paragraph with "And then we ran a Southern Blot on it." No, a much more appropriate sentence would be "And then the experimenter, using number four La-Tech brand Latex gloves placed the aforementioned protein, heretofore stored in a polyurethane class seven BestTube brand test tube, into the second (2) well of a 1992 Blot-tastic X2799 version 2.1 GelRunner for analysis using a standard three-tailed logarithmic matrix with 23 degrees of freedom." And why does it need to be written like this? Because scientists, people who have spent most of their lives in small dark labs, apparently without any shaving equipment, don't entirely understand the English language. Their bacteria don't speak English. Their proteins aren't talking to them late at night. Their computers speak only in "code." And so their language networks have atrophied over the years, even as their *Star Trek* pathways have grown larger.

So after writing a crappy paper, I allowed my advisor to make about a zillion changes, such as replacing every word with three different words. And after I followed his instructions and replaced all of my words with the ones he wrote, he became convinced that I'm the world's expert on subtle pulmonary nodules. This meant it was time to submit my paper to a journal. But which one? Would the *Annals of Pulmonary Functioning Assessed By Radiograph* be more likely to accept it than *The Milwaukee Confederated Abstracts in Radiology*? Should I send it to the more clinically based *Nodule Weekly* or the more scholarly *Academica Radiologica Finlandia*? Who could tell? Since

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Shifting Dullness



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Shifting Dullness

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Any and all submissions are welcome and need
only be placed in the "Shifting Dullness Box"

Hanley in the Kitchen

One beautiful aspect of Duke medical school is the flexibility of the third year (I would say free time, but that might give the impression that I am not doing much work - entirely not the case). Last week, I took full advantage of that flexibility and spent a week in Honduras on a medical mission. The trip was the grand finale of a third world medicine/ethics course which began in January. We set up clinics to serve the people in utterly remote regions of Honduras. Overall, the trip was a rewarding experience and one that I would highly recommend (however, that is a topic for another article).

Despite the medical focus of the trip, I still found time to sample a little of the Honduran food. Actually, I have to admit that I did more than sample their food. I ate mass quantities, for it was truly excellent. Some of basic elements of the Honduran diet come as no surprise - beans (I ate so many beans that I had to declare myself "a flammable substance" at customs when I returned to the States), rice, plantains, and of course tortillas. A quick word about the tortillas. Late one afternoon, our group was invited to participate in the tortilla-making process. Our instructors were four of the local women, who as it turned out, were intensely trained, blackbelt-ninja tortilla makers. After demonstrating the process, our teachers encouraged each of us to give it a try. Being the eager one, I immediately snatched up a handful of the dough and started to mold and toss it, imitating the fluid moves that I had just witnessed minutes before. Then, unintentionally, and perhaps a result of my overzealousness, I launched my tortilla into the air, and watched it fly into the underbrush where it came to rest in several pieces. As I looked up, there were eight little ninja eyes staring me down. At that moment I realized what I had done. I had desecrated a tortilla in a country where tortillas are practically viewed as a second currency (most items in the stores had two price tags on them - one for the monetary value and the other for the tortilla value). Thankfully, I was spared the usual punishment for committing such a crime (50 lashes with a stale tortilla) on the account of being a gringo/americano. Needless to say, I am retired from tortilla making.

This month's recipe is an inspiration from my recent trip to Honduras. It is a green sauce, much like the Italian green sauces used to accompany broiled meats - only instead of basil, this one blends the flavors of cilantro and jalapeno. Originating out of Argentina, it is called chimichurri (not to be confused with the macarena). Like it's name suggests, the chimichurri possesses a distinct tangy flavor that will surely add a characteristic Latin flavor to any dish you make. It is best served with meat, preferably over a thin broiled steak (or chicken) with fresh tomato wedges.

The Chimichurri

6 cloves garlic	2 jalapeno peppers, stemmed, seeded, and halved
4 large bay leaves, crumbled with center stems removed	1 tbsp dried oregano
1/2 cup packed fresh cilantro leaves	1 tsp. salt
1/2 cup distilled white vinegar	1 cup packed Italian parsley
	1/2 cup olive oil

- 1) Combine first 5 ingredients plus 1/4 cup cilantro leaves in food processor. Process until finely chopped.
- 2) Add remainder of ingredients including the rest of the cilantro. Mix until thick, granular sauce is achieved. Season with pepper.
- 3) Serve over broiled/BBQ steak or chicken. ■

Pleural Effusions continued from page 2

matter where I send it to, because it will be returned in no more than 67 weeks, rejected, because I didn't, in my results section, list every single number that already appears clearly and concisely in Table 1. By the time I resubmit the paper and it actually gets read, though, seven other experiments will come out saying exactly the same thing I'm trying to say, in more words and with prettier graphs, so that no one will want to print my paper anyway. Which is okay, because by then I'll be firmly established in my private practice in Boca Raton, paying junior high students to come to my beach house in the afternoons to feed me coconuts and clean my olympic sized clover-shaped jacuzzi by hand.

Yes, for awhile I became discouraged at the daunting process ahead of me. After all, I figured, this progressive system of education here at Duke has allowed me to spend 20 and sometimes 25 hours per week learning about the scientific process in between moves of computer othello. All these other med students across the country were so less well-rounded, having wasted their time learning things like pathology and anatomy while I was getting a firm grounding in the method of hypothesis development and testing. Why did I need to actually publish a paper? But as I thought about it some more, I realized that this was my big chance to make a difference. It was my chance to contribute to "the literature." How could I pass it up when I had a responsibility to the medical profession— no, the entire race of humankind— to share my knowledge of the characteristics of hard-to-detect lung nodules? And so even as we speak, the pages of my article are hurtling toward the office of the editor of Abstracts in Thoracic Radiology of Oregon. And if, by some crazy chance, it does not get accepted, look for my article, "Subtle Pulmonary Nodules Detected on Kodak EX431 Bi-layered SuperGloss Ektafilm Using Silver-riffic III PseudoDeveloper" in the May issue of Shifting Dullness. ■

Some Shifting Dullness Personals!!

Yes, many of you out there have been stuffing our box full of personals that you just can't wait to have appear within the pages of SD for our thousands of monthly readers. Here now, are a few.

MADE FOR EACH OTHER?

Are you looking for a guy who loves cuddling, candlelight, and when asked to draw a clockface draws all the numbers on the left side? I'm looking for someone into hiking, long-term relationships, and maintaining the clothing and hygiene of the so-called "right" side of my body. Call 417-4*71.

READY TO CONJUGATE

Can't take the selection pressure anymore? MRSA, single and sexy, is looking to take his external capsule to the "next level" and make vancomycin a problem for the "other guy." Let's find a nice medium and get together for a little plasmid exchange...maybe we'll produce the spawn that will lead us back into the pre-antibiotic era. Anaerobes need not apply. Call 403-6221

The 17th Annual Shifting Dullness Beer-Brewing, Pasta-Sauce-Creating, Dessert-Sculpting Contest is coming!!!!

Yes, that's right, it's that time of the year again. When med students, residents, friends and loved ones all come together to celebrate the art and the science of brewing, cooking, and baking.



So join us all on
APRIL 5th

at Drayer's Place for the biggest
social and gastric event of the year!

You don't need to bring an entry, but for all you
gunners out there, bring a bucket of your home-
brewed *beer*, a pail of your homemade *pasta*
sauce or any kind of home-baked *dessert*.

To Drayer's...

Take 751 (Academy) to 15-501 business, which you take going
AWAY from South Square. Pass the Biscuitville. Pass Foster's.
When you see the tall movie-theater sign that says "Miracle Life
Church," pronouncing who the guest-preacher will be that
weekend, make a left onto Midvale. Take this to the end, and go
left onto Bedford. Keep driving until you reach the big brown
dumpster, and turn right. Drayer is #20. See you there...

MORO REFLECTS from p. 14

Now, as I find myself only one year away from participating in the match, it does make me a bit nervous to think about it, just as it made me nervous to watch the fourth-years open their envelopes. I'm sure that I will make it through OK just like everybody else does.

Nevertheless, I wonder what life would be like if everything were determined by a process like the match where people submit their preferences, and then wait anxiously to see if their preferences matched those of others. For example, imagine going out to dinner with your girlfriend. You carefully peruse the menu, looking for the perfect entree. All the while, your girlfriend is watching you. She asks you what you're going to order. Nervous, you give some generic answer like "Oh I'm not sure what I feel like tonight" because you know that you might, in fact, be competing with your girlfriend for the turkey club sandwich that you've been craving. So, she puts in her order, and you do the same. The waitress then ranks the meals that she thinks you deserve. Fifteen minutes later, the waitress returns to your table, placing a mammoth turkey club sandwich in front of your girlfriend, giving you a paltry order of fish sticks. "Fish sticks! I hate fish sticks," you complain as your girlfriend gloats as she stuffs her face with a turkey club that couldn't have been any higher than her third choice! You are the victim of the cold-hearted restaurant food-ordering match process, and there's nothing you can do.

Buying shoes would be no better. During Christmas vacation, you and your best friend go to the mall to do some shopping. What you really need is a new pair of comfortable walking shoes for your next few rotations in the hospital. Thusly, the two of you enter the premises owned by a local stylish shoe vendor. Within minutes, you spot the pair you want. Unfortunately, the store is very crowded, overflowing with people who, in all likelihood, are searching for some practical yet smart shoes just like yourself. You walk up to the counter, take out your pen, and write down

your top three choices of shoes. The manager of the store, an old rickety man, notices you making your list and walks out from behind his desk. His eyes track up and down your entire body, as he makes a critical assessment of your body habitus and tries to determine which shoes that he wants to give you. Your best friend goes through the same process. Half an hour later, that same old rickety man walks out from the back room carrying two shoeboxes, one for you and one for your friend. He smiles as he hands your buddy a shiny new pair of the new Nike Air Jordan sneakers (not too shabby). Then his face goes blank as he hands you a disgusting pair of turquoise pumps. It seems, he mentions in passing, that your first year immunology grade wasn't quite high enough to get you those comfortable Rockports.

What if you wanted a new car? You leave the hospital one beautiful day in April, and go to a large automart which sells at least ten different types of cars, both new and used. You've spent far less money this year than anticipated since you started clinical rotations, and so you have a large chunk of change remaining from your student loans. You put your sunglasses on, and decide to spend frivolously. You are impressed by the vast array of cars for sale, but you remark that there are really only two or three that you could actually see yourself driving. While you walk around the car lot, two shady looking guys who resemble the Italian guys in your New Jersey high school seem to be looking at the same cars that you are. Frankly, you're embarrassed that you're shopping in the same price range as these guys. But you know that, unlike them, you graduated from an Ivy League institution and you did a year of research investigating obesity genes in *drosophila*. It's a fair bet that those guys didn't even know that fruit flies could get fat. So when the three of you walk together into the manager's office to submit your preferences, you have an air of confidence which, although unjustified, seems to be intimidating the others. "I see that

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MORO REFLECTS from p. 8

you go to Duke Med," the manager remarks. "That's a pretty short anatomy course." Suddenly, you become sick to your stomach, which is nothing compared to the retching and vomiting that ensues after you watch the two slimy men drive away in brand new Acuras as one of the employees brings your orange Yugo around to the front of the store.

Needless to say, the worst part about making all your decisions by a match-like process would be getting married. Some time after your third year, you look in the mirror, realize that you're 27 and not getting any younger. Your parents entered the marriage match when they were only 20, and, even though the social landscape of society is different today, you figure that it's about time you get married. You go to the registrar, and fill out an application for the National Marriage Match, including all of the pertinent biographical data, a transcript, and recommendations from three clinical attendings and one former girlfriend. A few months later, you receive a postcard in the mail which describes the details of the marriage match. As instructed, you begin the interviewing process. You start with an easy one, by flying to Chicago to interview with a 34 year old divorced lawyer who has four children and smokes Chilean cigarettes. You're not interested, but it's good to have the interviewing experience. The next interview is in Boston with a female kick-boxer who likes nature walks and soft music. The interview goes terribly, and what's worse is that you have stay with her until Saturday to get a cheaper airfare. Returning to Durham, you're downright fatigued even though it's only midway through the interviewing experience. Luckily, you scheduled yourself on radiology that month, an easy rotation that would allow you to travel around the country. Also on the bright side is the fact that most people seem to think highly of Duke students when they come for their interviews. Eventually, you meet a couple of wonderful young prospects, one in Baltimore (but you hated the city) and one in New York (the rent is way too high). When you finally finish your interviews,

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you schedule a meeting with your advisory dean. You discuss the highs and lows of interviewing, you review your credentials, and she recommends that you rank as your top choice the Pakistani girl with a lisp that you met in San Francisco. You feel as though that's selling yourself short (and besides, what would your mother say?). So you decide to go for a reach—you rank as first the blonde bombshell from New Orleans who writes poetry in eight languages, and you list the Pakistani as your safety. A few months later, you go to the Searle Center to attend the luncheon where the results of the National Marriage Match are announced. You look around, and notice that many of the second- and third- years came to watch, just like you did a few years back. You are tachycardic and diaphoretic. You ultimately walk up to the official table to receive your envelope. Upon opening it, you are horrified to see that you have been matched with your third cousin, an overweight french horn player who was never able to graduate from the University of West Virginia. As the tears stream down your face, you can't help but think that, as a result of some cold-hearted and impersonal marriage match process, you are destined to restricted gene pool and that your children are likely to have multiple chromosomal abnormalities. To make matters worse, one of the people you hate most in the class, who was notified a few days prior that he didn't match, wound up scrambling and matching with some ex-model in Los Angeles. Where's the justice?

Indeed, it's a scary thought, having all of our decisions made for us by a match-like process. Fortunately, it's only a few times in our lives that we have to go through something like the match. What's more is that Duke students seem to make out OK each year with the match. It's clear to me that, after all the anxiety and uncertainty are behind us, we will each be glad that we came from this school. It's the quality of this institution that gives each of us the opportunity to eat the turkey club and avoid the fish sticks. ■

Medical Parents Weekend

April 18-20, 1997

Come and share with your parents the exciting opportunities ahead as you prepare for your future in medicine. Join us in welcoming your family to the Duke family—an introduction to the innovation, the tradition, and the fun of medical school.

- **The Dean's Mixer with faculty,** Friday night
- **A Parent's Introduction to Medical School,** Saturday morning, with talks by Chancellor Snyderman; Dean Blazer; Drs. Brenda Armstrong, Dani Bolognesi, Charles

Johnson, and David Sabiston; and medical student Todd Brady

- **Saturday lunch,** with talks on international medical education by Dr. Hage and medical students
- **Saturday evening casual supper,** followed by *Peter Pancreatitis*, the medical student-faculty show
- **Sunday brunch**

Questions?

Call Brenda Painter, 419-3200.

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Citrin Acid Cycle

Deborah Citrin, MSI

For many of the MSI's, Monday is now a relaxing day to look forward to in anticipation. This amazing turn of events is due to the determination and hard work of Greg Grunberg, an MSI, and Dr. Lawrence Burk, a Duke professor of Radiology. Together, Greg and Dr. Burk have initiated a Mind Body training lecture and exercise every Monday afternoon. Dr. Burk and several local experts lead the group in exercises in anodyne imaging, meditation, and yoga. The lectures and exercises are open to any medical and allied health students interested in furthering their knowledge and experience in alternative forms of therapy in use at Duke today.

Many other medical schools are making alternative medical therapies part of their curricula. This fact, along with a personal experience in Eastern medicine, prompted Greg to initiate the Mind Body group. Greg studied classic Chinese medicine and consciousness training during a trip to Japan. This influence has shaped much of Greg's desire and interest in medicine, especially concerning health and wellness. He suggests that Eastern medicine is a practice based on meticulously documented clinical evidence, and for many people, can be an important step in the process of taking responsibility for one's own health.

Greg hopes that this Mind Body training will help students to look at health in a new light, "as a process that must begin with each individual, at a point long before they present in the emergency room." He encourages students to examine their own relationship with health, and to explore their own potential in making positive changes in their own lives. "A big part of the exercise of medical school," he says, "should be the deep and patient exploration of what it means to lead a healthy life, despite all of the challenges of daily living—like tests, tough attendings, and high self-expectations. This is an area

where the anodyne model has a lot to learn from." Greg remarks that "people go to alternative practitioners when they are searching to feel better and to see doctors when they could not possibly feel worse." Greg contends that more people go to practitioners of alternative medicine in the US each year than visit MD's.

Greg's faculty contact has been a tremendous help in initiating the Mind Body Training group. Dr. Burk opened the door to anodyne imaging at Duke and the VA in 1992, when he expressed interest in hypnotherapy for claustrophobic patients undergoing MRI to a renowned expert, Donna Hamilton. Dr. Hamilton later came to Duke and gave Grand Rounds, encouraging over 40 people to complete training in anodyne imagery. Dr. Burk remarks that trained employees use these techniques, in one form or another, over 1000 times per week at the VA and Duke in such diverse situations as urology, endoscopy, and cardiac catheterization.

Dr. Burk teaches similar classes to Duke undergraduates and senior citizens in the community. He encourages students to attend and familiarize themselves with alternative therapy, and remarks that the medical center will be shifting in this direction in the future, especially with the current focus on preventative care. "These may be some of the most important things you will learn in medical school—things you can not learn from a book."

Future subjects for the class might include consciousness training, massage therapy, Tai Chi, Eastern medical theory, and music therapy, depending on student interest. The Mind Body study group welcomes any interested students to meetings every Monday at 5:00 in CTL 422. If you are interested, want a calendar, or have comments and suggestions, please contact Greg Grunberg, MSI (geg1@acpub.duke.edu)■

DRAYER MEETS SEUSS

Just a couple days ago Dr. Epstein, chairman of ophthalmology, mentioned that there wasn't enough information in Shifting Dullness concerning diseases of the eye. What a tremendous coincidence, then, that the very next day, as I was searching through some of Dr. Seuss' rare personal papers, which I have on loan from the history of medicine branch of the library, I came upon this article, which originally appeared in the American Journal of Ophthalmology. I hope you learn as much from it as I did

One Cone, Two Cone, Red Cone, Blue Cone

One cone
Two cone,
Red cone
Blue cone

A superficial gray opacity's a corneal scar
Myopic eyes can't see too far
What a scary number of eye diseases there are!

Homonomous hemianopsia's the tragic fact
When you have a lesion in your optic tract
And though you may still accomodate and react
No red reflex suggests a cataract

Exophthalmos signals Graves' disease
Torturous vessels are copper wire arteries
Retinal reattachment holds no guarantees
But success is increased in retinoic acid implantees

For yellow sclera jaundice is the cause
Episcleritis produces nodular flaws
Trigeminal lesions numb your face and jaws
And for blepharitis wipe with wet, warm gauze

Most muscles are controlled by cranial nerve III
But you need cranial nerve II so you can see
Edinger-Westphal's purpose always escapes me
But without the optic nerve you get atrophy

An enlarged optic cup suggests glaucoma
Either one or two hits gives retinoblastoma
And you don't need some kind of fancy diploma
To know not to induce mydriasis if they're in a coma

One cone
Two cone
Red cone
Blue cone

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Shifting Dullness

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Dr. Jim Gifford (2)
Medical Center Archivist
Box 3702, DUMC

Moro Reflects

Mike Morowitz MSIII

This was the first time that I attended the MATCH, the luncheon at which fourth-year students receive an envelope containing the name of the residency program that they will join next year. I was surprised to find that, even as an impartial observer, calmly waiting in the corner of that large holding a turkey sandwich and a glass of champagne, I was rather nervous. I was nervous watching the fourth-years strolling up to the table with the envelopes in question, pretending just a little too hard not to be nervous, and opening their envelopes. Why in the name of Courveoisier was I nervous?

I was thinking about it later that day, and I decided that what made me uncomfortable about the match was the seemingly small amount of control that medical students have on the process. While applying to college or medical school, many of us

were fortunate enough to have many good choices, and it was only after evaluating these choices that we wound up where we are today. But the match process seems so much different. You make your preferences, the residency programs make their preferences, all the preferences go into a computer together, you pray and hope that there was some overlapping (or, as we say in the lab, homology) between those lists.

Luckily for Duke students, this angst-provoking process often works out for the best. Our school once again this year had remarkable success in placing students at one of their top choices for residency programs. But still I am wary of the nature of this process in which individuals have only a limited amount of control over the matching results. Is there any other process like it?

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