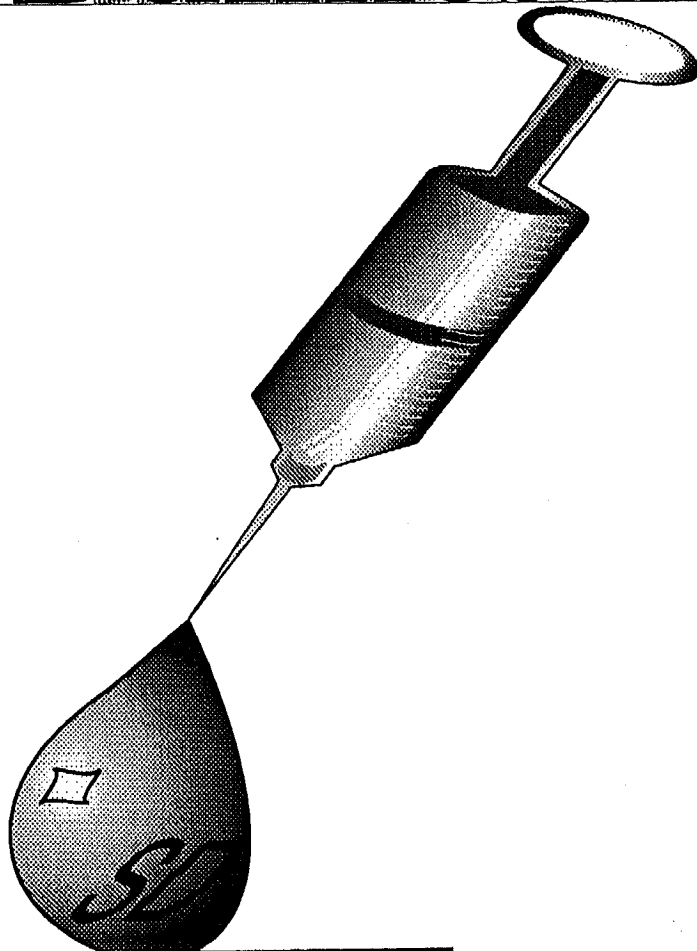


# Shifting Dullness

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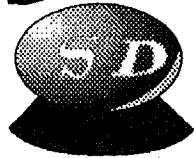
March, 1995



## **With This Dose of SD**

- **Crystal Ball**
- **Guide to Fun in Durham**
- **Humor by Roadside Assistance**
- **Infectious TB**

# Crystal Ball



Crystal Bernstein

There is a certain syndrome that we all suffer from at some point during medical school, though some of us are loathe to admit it. You all know that of which I am writing. It is the Medical Student Syndrome, also known as hypochondriacism. We all realize that a little knowledge is a dangerous thing; this is especially true for those of us who, armed with a bit of wisdom from a book and even less from practical experience, manage to diagnose in ourselves all manner of strange illnesses.

Take for instance, a male student who encounters a patient with a urinary tract infection during his physical diagnosis course. After eliciting from the patient a detailed list of her symptoms and recording his findings, he leaves for a weekend vacation. On the second day of his vacation, after several meals of seafood, he begins to feel ill, suffering from nausea, vomiting, headache, diarrhea, and dysuria. "What could be wrong with me?" he wonders between his all-too-frequent trips to the bathroom. "Surely I should be able to think of some differential diagnosis for my problem, being such a brilliant medical student and all." He runs through his list of symptoms and settles on dysuria. "Eureka!" he exclaims. "I must have a urinary tract infection!" We all realize, of course, that the nature of the male anatomy does not lend itself to the development of urinary tract infections among members of the male sex. However, the power of suggestion is a curious thing, and it convinced this student that his problem was, indeed, a UTI until late in his second year, when he realized the improbability of his contracting that particular illness.

Also consider the student who, after preparing and examining a blood smear of her own cells during the same physical diagnosis course,

notices a preponderance of monocytes and immediately suspects she has leukemia. She spends several worried days in the medical center library researching the particular sort of leukemia she is convinced she has developed. Never mind that it is a very rare sort of disease and occurs almost exclusively in people over the age of 60. She has also noted that she has been rather exhausted for some time, and considers this to be additional evidence that she has developed a strange and incurable illness. She fails to consider that this exhaustion could be attributed to having just finished a year of weekly exams covering immense volumes of material, resulting in profound deprivation of sleep. No, she is convinced she definitely has leukemia, and worries until she begins her internal medicine rotation when, subjected to a new form of sleep deprivation that was, until then, unknown to her, she promptly forgets all of her previous preoccupations.

I myself have not escaped the clutches of the Medical Student Syndrome. Upon developing some postprandial dyspnea and occasionally waking up at night short of breath, I began to suspect that I had a strange anatomical abnormality causing my lung size to be restricted which prevented me from taking full, deep breaths. I thought my stomach was compressing my lungs and causing my breathing difficulties. From some far recess of my mind I dragged an illness whose symptoms I vaguely remembered, but whose name I had forgotten. "What is the name of that disease where your stomach takes up space where your lungs should be and you wake up at night and you can't breathe?" I asked a friend. "Do you mean Pickwickian Syndrome?" this person, an M.D., replied. "Yes!" I said. "That's what I have!" He looked at me and laughed. "That occurs in almost nobody except middle-aged men who weigh 300 pounds," he

Continued on Page 12

Shifting Dullness



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# Upcoming Events

## Around Duke and Durham

Chris Gamard

1. **Care of the Soul with Thomas Moore:** The best-selling author of *Care of the Soul: A Guide to Cultivating Depth and Sacredness in Everyday Life* will give a lecture in Page Auditorium on Tues., March 21st at 7:30pm and will lead a workshop designed for those in the helping professions on Wed. the 22nd from 8:30 to 4:30pm. Tickets available from Page box office; call 684-2909 for info.

2. **Downtown Durham Highlights:** The Carolina Ballet Theatre will perform its "Romantic Repertoire," a program of original choreography and classical ballet performed with an orchestra, on Sun., March 12th at 2:00pm. The internationally acclaimed New Vic Theatre of London will perform their wild and hysterical renditions of "The Hunchback of Notre Dame" and "The Canterbury Tales" on Wed. the 22nd and Thurs. the 23rd, respectively, at 8:00pm. All of these events take

place in Carolina Theatre (Fletcher Hall). Call 560-3030 for info & tickets. \*\*For current and complete Downtown Durham event info, call the Durham Bullhorn at 1-800-772-BULL\*\*

3. **More Great Music:** It may not be Seattle, but the Triangle has its share of great acts to see this month. Here are but a few of the diverse offerings: The Ramones will play at the Ritz in Raleigh at 9pm on March 13th (tickets are \$13.50 and can be purchased at Poindexter Records); The Chieftans, an internationally renowned group of traditional Irish musicians (who have collaborated with the likes of Van Morrison, the Stones, and Sting), will perform at UNC Memorial Hall on the 24th at 8pm (call 962-1449 for tickets); Jazz Explosion, featuring combined performances by several jazz vocalists and instrumentalists, takes place on March 7th at 7 & 9:30pm at the Carolina Theatre, Durham. And finally, for all you Dead Heads throughout the Med Center, the Grateful Dead will be playing the Charlotte Coliseum March 22-24th at 7:30pm (Ticketmaster). Don't forget to have a fun (and lucky) St. Patrick's Day!

# Shifting Dullness

## EDITORS

Matt Hepburn  
Ed Norris  
Jamy Ard

Shifting Dullness is a Duke University School of Medicine production. Any opinions expressed on these pages do not necessarily represent the opinions of Duke University, the Editorial Staff, or the individual writers.

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Tanya Wahl  
Mark Weinberg

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.

# OSR INFORMATION

Mark Weinberg

- **MSI's**

Congrats to our new representative. Unfortunately at deadline time we don't know who it is.

- **Financial Aid**

Congress is considering a proposal to eliminate government payment of interest on Stafford loans while we are in school. This would mean that your Stafford loans would accumulate interest during medical school. Borrowing \$48,000 would translate into owing close to \$66,000. AAMC president Dr. Jordan Cohen has detailed ways that students can help prevent this legislation:

(1) write to Congress - a sample letter is in the OSR info folder in Linda Chambers' office. All you need to do is copy the sample and add a few sentences in your own words!!!

(2) send letters-to-the-editor to local newspapers and medical journals. Dr. Cohen has also written a sample letter-to-the-editor.

The best way to prevent Congress from making these changes is to let them know how we feel, and what effect these changes would have on medical students.

- **OSR info folder:**

A large volume of information is sent to OSR reps. A folder now exists in Linda Chambers' office so the student body can have easy access to this information. Check it out.

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

Doug Skarada 382-7303

Jenny Sung 489-6952

Mark Weinberg 493-4373

# MEDICAL STUDENT UPDATES

## MS I Update:

Force MD, the savvy MS I basketball team, suffered a shocking defeat in the semifinals of the Duke IM basketball tournament. Led by Matt Kalady and Anthony Beutler, the team bounced back from a 14 pt. first half deficit against a solid team from the Kappa Sigma fraternity. With gritty play from Dan Yoder and Rick Nettles, we were able to nurse a small lead for much of the second half. With a mere second remaining and Force MD leading by two, the opponents had the ball on an inbounds play from the side. Then, the unthinkable happened. Some dude caught the ball and threw up a no-look shot that somehow found its way into the basket. Force MD lost 58-57 in a classic game for the ages... Trip Meine and Mike Bolognesi, self-proclaimed "PathHeads" are entertaining the option of taking off a year of classes to follow the Pathology dept. Road Shows around the country. Apparently, PathHeads are very similar to Deadheads. They even wear tie-dye clothing, but astute observers will notice that Trip and Mike's clothing are stained with hematoxylin and eosin!... On February 12, Jane Gagliardi raced to first place in the 20-24 age bracket at the RCAA Eastern Regional half-marathon in Hampton, Virginia. Congratulations, Jane. Jeff Drayer reports that he and Jane were recently engaged, but Jane fervently denies this claim.

## MS II Update:

Lost in paradise on spring(?) break!!

## MS III Update:

Although this piece of news may be old to most of you, it has not been highlighted in SD as of yet. Mike Royster and Camille Haisley are engaged and will be married this summer. We applaud them as the only existing class couple that we know about. After surviving the rigors of the surgery rotation together, this couple looks prepared for any hardships. Congratulations and best wishes to two outstanding individuals. ■



## Albert Who?

"Schweitzer."

"I think he was jungle doctor," I offered, summing up everything I knew about a man who received the Nobel Peace Prize for over 40 years of service in Africa. At least I was closer than a fellow MSII who thought he was a famous Nazi general. Since then I have learned a little more about Dr. Schweitzer's remarkable life and would like to share his tale with any who care to read further.

Although known primarily for his humanitarianism, Schweitzer was also a remarkable scholar. Before becoming a medical doctor, he received doctorates in both philosophy and theology. He was also a renown organist and an expert on traditional organ building. His musical talent would later become an important source of funding for his work in Africa, as he toured Europe playing benefit concerts (kind of like Farm-Aid, although he was way cooler than John Mellencamp...Cougar...whatever).

His motivation for going into medicine was rooted in his strong religious faith (his father being a Protestant minister). For Schweitzer, doctoring was an opportunity for atonement. He explains, "At the university, enjoying the good fortune of studying and even getting some results in scholarship and the arts, I could not help but think continually of others who were denied that good fortune." He was searching for a way to pay back for the gifts he had received. Why Africa? The idea came while reading a magazine. He was reading an article about missionary work in the Congo and the need for doctors there; so he decided to help out. His family and friends tried to talk him out of his decision, claiming that he was like the foolish general who led the charge instead of safely guiding troops from behind the ranks. Schweitzer was not swayed. "I decided I would make my life my argument. I would advocate the things I believed in terms of the life I lived and what I did." He was a righteous dude.

When his ship arrived in Lamberene (part of

Gabon) in 1913, he was the only doctor for a thousand-square-miles. His first clinic was a refurbished chicken-coop. In time, however, he would be given supplies to build a hospital - now a major medical center. Unlike the European colonists, he did not believe in remolding the customs and habits of the Africans. His hospital reflected this, with outdoor hibachis for family members to prepare a patient's food (the natives did not trust food prepared by others for fear of poisoning). With continued colonization of the region Schweitzer became an advocate for the protection of African rights. This was in accordance with his belief in a "global community."

Another guiding principle in Schweitzer's life was his "reverence for life." Such reverence may have accounted for his outspoken protests to nuclear testing (which afforded him much criticism). Yet, his compassion was not limited to human life. "To the man who is truly ethical, all life is sacred including that to which from the human point of view is inferior."

At the time of his death in 1965 (age 90), Albert Schweitzer was internationally regarded as one of the great humanitarians of our time. Albert Einstein had this to say about him: "He did not preach and did not warn and did not dream that his example would be an ideal and comfort to innumerable people. He simply acted out of inner necessity."

Those interested in learning more his life are encouraged to read Schweitzer; A Biography by Poling and Marshal, or his autobiography Out of my Life and Thought by Cynthia Boyd.

### **SCHOLARSHIP MONEY AVAILABLE**

Throughout his life Albert Schweitzer constantly struggled to get funding to support his work. One agency that came to his rescue was the Friends of Albert Schweitzer, operating out of Boston. This agency still exists today, and currently offers scholarship money for part-time projects helping the medically-underserved in North Carolina. There is still time to apply (applications due mid-March). Info- Steve 382-0784. Applications are in the financial aid office.

# DAVISON COUNCIL NEWS

Vickie Ingledue

## Upcoming Social Events

A **Mardi Gras Party** is tentatively scheduled for Saturday, March 11. A location is still needed, so if you are interested in hosting a Davison Council Party, call Greg Della Rocca (403-8538).

The **Match Day Party** will be March 15 at Satisfaction's from 2 p.m.-5 p.m.

The **Davison Ball** is scheduled for March 25 at the Duke Museum of Art. Plans are well underway. This year we will have a DJ rather than a band. The DJ is to be obtained through A&A Productions and comes highly recommended from a number of other schools. Julie Lapp has confirmed a tuxedo deal through Tyndall's Formal Wear. Three styles are available and will rent for \$29 each. Invitations will be in your boxes soon!

## Elections

At the Davison Ball, six **Excellence in Teaching awards** will be presented to those faculty and housestaff who are most deserving. These individuals will be chosen based on YOUR nominations. Therefore, please include a good description of why you feel your nominee deserves this honor. Nominations are due by March 3rd.

The nomination period for the 1995-96 **Davison Council members** ended February 24. Candidates for Executive Council will be required to submit statements prior to the elections which will be held in March.

## Update from Dean Blazer

Dean Blazer discussed various aspects of the new longitudinal clinical experience to be

integrated into the MSI curriculum in 1996-97. The course will integrate Clinical Arts, Human Behavior, and Introduction to Clinical Medicine in the framework of one afternoon/week of systems-based learning and continuity clinics as well as several two-week focused blocks interspersed during the first year. MSIs will work in clinic with the same clinical mentor throughout the year. One of the main goals is to expose medical students to clinical medicine earlier and allow them to establish relationships with individual clinicians.

This year's **CPX exam** went well. As in the previous year, Duke students scored basically the same as other medical students throughout the state. Concerns about improving the standardization of the "patient" at each station are being addressed.

Dean Blazer is in support of allowing medical students to pay a "**beeper fee**" in order to provide beepers to all medical students who want one. However, a consensus among the medical student body would have to be reached before such a measure would be instigated. Greg Della Rocca is in charge of defining a policy and determining the opinion of the student body.

## Graduate and Professional Student Council (GPSC) Update

The medical school student body is now being represented at **GPSC meetings** thanks to Lou Brenner and Neil Horowitz. Important issues which have arisen include:

\*The University has funds available for graduate students to travel abroad. Applications can be obtained in the International House on Campus Drive. (The Medical School also has funds for international travel. Information can be obtained from Linda Chambers.)

\*Graduate students will be involved in the yearly reevaluation of the Duke University

**Continued on page 12**  
Shifting Dullness

# PUTTING IT ALL IN PERSPECTIVE

Howard Weeks

I can empathize with what many of the first & second year students are thinking: How could I have been so stupid as to enter medical school? When will the work end? When does the fun start? When do I sleep? When will I ever repay my loans? If you are like me, you reached the end of your rope several months ago, climbed back up only to slide back down to hang precariously over the abyss. But before you head to the Bell Tower with a high powered rifle, let me tell you about an event that changed my life.

I had just finished a grueling 3 1/2 months of Surgery and Psychiatry when I was greeted with a 4 day reprieve before Cost Effective Medicine. Of course I decided to go backpacking to get in touch with nature, smell clean air and get as far from Durham as possible. Since misery loves company, I decided to find some companions. Happily, it seemed that Matt, Sean & Todd all wanted to bond with me in the woods. Predictably, the night before we left the temperature dropped to below 50o F so Matt & Todd wimped out. (Incidentally, Todd is now in the process of having his Eagle Scout Award revoked due to his pathetic attempts at upholding the BSA ideals). So that left Sean and myself.

Sean and I headed out to Mt. Rogers, Virginia bright and early. Along the way we discussed our experiences in the hospital, our subsequent deterioration of social skills, plans for 3rd year, and the fact that Sean had not brought any gloves, flashlight or toothpaste (hey, it is only going to be 48 hours). We stopped for lunch in the metropolis of Elkin, NC. During the stop I had a profound realization. There were no sub-Arctic temperatures. Therefore, my wool pants were going to be way too hot and since I hadn't packed any shorts I had a decision to make. Either hike naked and risk scaring the

local wildlife or buy shorts. Luckily, Wal-mart came to the rescue. However, I neglected to remember that it was December and the clothing stock is seasonal. Luckily, there was a clearance rack with shorts. I thought that the creased bright green shorts added a certain amount of dignity to my impending expedition. After departing Elkin we passed through Sparta. We were planning on visiting the student there on family med, but we blinked and missed the town.

We finally arrived, loaded the packs and discovered the dead camera battery, hence no accompanying picture of my camping attire (Sean really wanted a picture - I think for blackmail purposes). After hiking for 45 minutes we reached the top of Wilburn Ridge giving us an unobstructed view for miles all around. I can't describe the beauty of the distant mountain chains, the wild ponies grazing in fields, the flocks of birds over head and the bright orange caps and jackets of hunters scattered across the landscape.

Why, yes, it was deer hunting season. It really wasn't all that bad. We figured if we stuck to the trail and sang no one would mistake us for deer. After the first two shots we decided that singing might just be pissing the hunters off, so we elected for the occasional laugh. We arrived at the shelter around 4:30 pm just in time for the sunset. Sean went to get water from the spring, but came back early. It seems he was concerned about the failing light and all the rapid rifle shots he was hearing as the hunters tried to get that "last one in" before dark.

We quickly ate our dinner of noodles and drank cups of plain hot chocolate for warmth (It seems that someone had forgotten to get the packages with little marshmallows) and found ourselves snuggled in our sleeping bags by 7:30 pm on a Friday night. The twelve hours spent in

Continued on page 8

**Perspective, cont. from 8**

those sleeping bags might seem luxurious by surgery or medicine standards, but let me tell you what I had to put up with. There was a constant roar of someone snoring who will remain anonymous to avoid embarrassment, the rustling of mice in our gear and the stomping and snorting of a herd of ponies; however, some sleep is better than none at all. The next morning after eating breakfast, we noticed there were two hunters 200 yards behind the shelter patiently waiting for us to give them a clear shot. Deciding to forego refilling the water bottles we slunk away down the trail. We opted for dropping our packs and walking up the spur trail to the summit of Mt. Rogers. Here we enjoyed the isolation of dense vegetation and the distant constant crack of rifles. Returning from the summit we stopped suddenly as we heard six rapid shots fairly close. At this point Sean made a very astute observation. We were standing behind a clump of trees and could not be seen from the valley below. It was a unanimous decision that this was probably a good time to leave. As we descended the trail (often fighting over who got to walk point) we came upon two hunters. It turns out they were shooting at deer approximately 100 yards to our right.

The two grizzled men looked us in the eyes and gave us a piece of advice that I will remember to my dying day: "You boys best get some blaze orange on," they drawled. Those few words stuck with me as Sean and I rapidly headed back to the car. I had become so caught up in the everyday life of a med student that I had forgotten an important lesson. No matter how bad getting pimped on rounds after being up for 36 hours is, it sure is a damn sight better than being shot. Kinda puts it all in perspective don't it? ■

# THE CLINICAL CURRICULAR CONTINUITY EXPERIENCE

Mark Weinberg

A major curricular reform initiative was introduced on January 24th with a faculty and student retreat at Treyburn Country Club. The retreat was moderated by Dr. Elizabeth Rogers (the Associate Dean for Clinical Education) and speakers included Dr. Snyderman, Dean Blazer, Dr. Sabiston, and others. The Clinical Curricular Continuity Experience (CCCE) is a new course that will begin during orientation and continue through the end of year two. The implementation of this course will be the largest conceptual curricular reform since the institution of "third year" in the mid 60's. Much like that change, this initiative began with student feedback. Upon arriving approximately two years ago, Dr. Rogers met with students and discovered that they wanted more ambulatory care as well as the opportunity for longitudinal care. The plan for the CCCE has developed gradually over the past year, and the early stages culminated in this retreat attended by approximately sixty-five faculty members and fifteen students.

CCCE has two major goals:

1) Expand ambulatory, primary, and continuity care opportunities for students.

This first goal is to provide an opportunity for students to develop an early, ongoing, relationship with patients as well as an appreciation for the responsibilities and rewards associated with continuity care. By working with one faculty member for one to two years students will have the chance to develop



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a longitudinal relationship with faculty preceptors who can serve as both role models and mentors. In addition, students will attain increased competency in the knowledge, principles, skills, attitudes, and behaviors necessary for all physicians, regardless of specialty.

2) Develop a combined clinical/curricular driven experience in a controlled, progressive, reinforcing fashion.

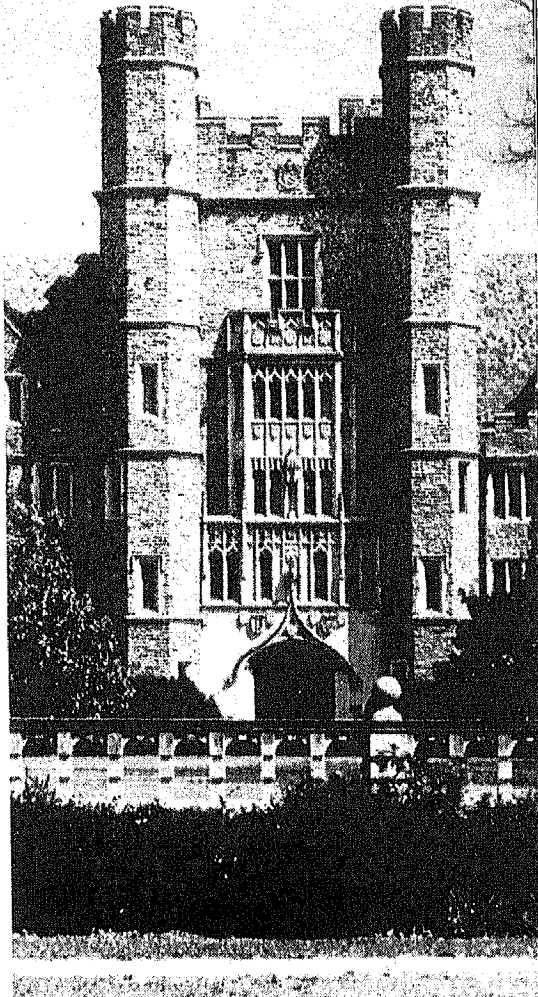
This second goal stresses the importance of correlating the basic sciences with the clinical sciences and emphasizing interdisciplinary education. It will be crucial to develop a course which is viewed, by students and faculty, as an important source of clinically relevant information.

Mark Weinberg, who has been helping with the CCCE's development since September, presented a review of how the new schedule would look. No additional hours will be added to years I or II. The goals will be accomplished through an integration and expansion of Clinical Arts, Human Behavior, Fundamental Issues in Health Care, and Physical Diagnosis. Students will spend one afternoon a week throughout first and second year in CCCE activities with every other week in clinic. A concerted effort would be made to schedule return visits around the students so that they can experience continuity care. Non-clinic afternoons and week long sessions will be spent in lecture and small group didactic activities. Topics will include history taking, the physical exam, epidemiology, pathophysiology, EKG reading, ethics, etc.

The purpose of the CCCE retreat was fourfold. First, inform the faculty of the importance of reforming the curriculum and describe the groundwork on the CCCE. Many faculty members are aware that this change is approaching, but now is the time for them to get involved. Second, make the students more aware of this undertaking and more involved in the reform process. Widespread student input

will be integral to CCCE's success, and students will sit on every committee and task force during the creation and implementation of the course. Third, provide an opportunity to hear what other schools are doing. Drs. Toffler and Fields from Oregon Health Sciences University and Dr. Obenshain from the University of New Mexico School of Medicine spoke about their programs. They have successfully placed first year medical students in clinics. While their programs differ somewhat from Duke's plans, they had valuable advice to give about successful and unsuccessful aspects of their curricula. Fourth, generate excitement about this change and the enthusiasm necessary to accomplish it.

The curriculum changes were enthusiastically received by students and faculty, with several hours devoted to expression of fresh ideas and perspectives. Dr. Rogers commented that, "I was particularly pleased with the comments of the students. Their well thought out perspectives will be seriously considered." Current plans are to institute CCCE for the entering class of 1996. Widespread faculty and student effort will be necessary to insure that this effort is successful and educationally valuable. ■



## DUKE MEDICAL ALUMNI ASSOCIATION

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# INFECTIOUS TB

Todd Brady

I was a little upset that I only got two out of twenty on the "describe metabolism" question on the biochem exam, so I went to scrap some more credit from the professor that penned the exam question. I called his sec beforehand and she penciled me in. "The professor has been expecting you," she said when I arrived. I walked in his cluttered office and closed the door.

"Who the hell are you?" he demanded in a gruff voice not looking up from his papers. I figured that I'd better get him in a good mood first.

"I have question about a reaction ..."

"What reaction?" he barked while continuing to read the papers in front of him.

"Its a TCA reaction. The one where that lipoamide molecule goes between the three enzymes to make succinyl CoA ..."

"Wait!" he interrupted. He quickly looked up and stared at me with his eyes wide open. His voice was soft and his words slow. "I love that reaction."

"Well, then you know the one I'm talking about," I remarked enthusiastically, "... the long extension of E2 penetrates E1 and gently slips into E3 —"

"That reaction is gorgeous."

"Then there's the multi-enzyme complex that forms around the flexible lipo-probe."

"Don't do this to me," he begged, breathing harder and harder.

"Lets not forget about the stabilized carbanion and the..." I paused for effect. "Ylid."

"NOOOO," he groaned in a deep guttural voice shaking his head with his chin following close behind. "NOOOO." He began to sweat profusely and loosened his collar.

I decided that it was time to drop the bomb. "That's only after the long flimsy aliphatic chain whips from enzyme to enzyme like this." I put my arms together and swerved them from side to

side in wide sweeping motions, back and forth, back and forth.

"YES!!!" he screamed. "Oh YES, YES, YES!!" As I recall, he was banging his hands on the desk.

"Loss of carbon dioxide —"

"YES!! MORE. YES. MORE!!"

"a keto glutarate —" There was a great gasp as his chest heaved up and down. I heard a feeble whine as he suddenly slouched down into his chair, nearly sliding under the desk.

"Cigarette, sir?" I queried, offering him a Marlboro.

After a few drags, he started to straighten himself up. He re-tightened his collar and pulled on his tie, all the while staring dreamily into the corner of the room. Just then, the secretary mustered enough courage to burst into her superior's office and demanded to know what all the affirmative banging was about. Confounded by the professor's expression, she turned her inquisitive gaze toward me. I gave her a wink and a smile. "Cigarette, ma'am?"

Reckoning that I wouldn't get much more out of him that day, I left to find the office of the next teacher, who was on my list due to a problem I had in understanding a certain nuance of the pentose shunt. His secretary didn't seem to be at her desk, so I went ahead and walked in. He immediately looked up as I entered. For a few milliseconds, he appeared to be a little surprised that I was there. A warm smile quickly enveloped his face, though.

"Well, what brings you here this afternoon?" I tried to remain as calm as I could, given the situation.

"Sir", I casually asked, "where is your secretary?"

His smile got bigger. "Oh, I was just giving her some dictation about fatty acids," he chortled, clearly trying to make light of the

Continued on page 12

### Infectious TB, cont from 11

circumstances. Still unsure of what to make of the situation, I stood there, clueless. "Well, I'm sure you have a question about biochemistry." I just looked at him. "Scotch?" he offered, pouring himself a crystal shot glass full. I tried to deny that fact that he had just offered me a drink. "So where can I begin?" "First, sir, you could turn down the music." "Oh yes," he smiled suavely, as he reached for his remote control.

"Second, its a little dark in here to be wearing Ray Bans, don't you think?"

After six hours of listening to the man ramble on about how all his friends around the world really thought he was cool, how he was the most desirable man in the biochemistry department, and how Buffy (his secretary) was just another friend who thought he was cool, I left the biochem department about 11:30 that night.

Following a good deal of deliberation, I decided that it wasn't worth calling my genetics professor at home so late at night. I set off for her house. ■

### Crystal Ball, cont from 2

said. Didn't matter. I was convinced I had it. But as if believing myself to have this syndrome weren't foolish enough, I decided to go to Pickens to get to the root of the problem. There I was told I was suffering symptoms of anxiety and was offered a "tranquilizer." I was quite offended at the time, but at least this suggestion made me get a better grip on reality. And, quite miraculously, I was cured. ■

### Davison Council, cont from 6

health insurance system. Also, selected graduate students (~500 total) will receive an evaluation form from the Public Policy School concerning various aspects of graduate life here at Duke. If you receive these questionnaires, please respond because our opinions are valuable in these evaluations.

\*Lou is serving on the GPSC basketball ticket committee. A new basketball ticket renewal policy for the '95-'96 season is being established. Students who first received tickets in '92 will have automatic renewal, '93 recipients will have automatic renewal if they camp out, and the policy for '94 recipients is unclear. Exceptions to these requirements are available to medical students whose clerkship responsibilities prevent them from camping out. If all of this is entirely too confusing, call Lou at 383-7700 for further clarification.

\*Upcoming GPSC events include a party at the Underground in the Bryan Center in February and a Wine and Cheese party at the Art Museum in March.

Many thanks to Lou and Neil for their involvement in the GPSC and for keeping us informed. ■



# ANNOUNCING: THIS HOMEBREW'S FOR YOU

Shifting Dullness is sponsoring the First Annual Beer Brewing Contest for all medical students.

Mark this date on your calendars: **Saturday, April 8, 1995.**

All contestants should notify the editors about their intentions to enter and their various brews at least one week before the contest day. Contestants can enter as many beers as they like. A six pack is the minimum amount to be submitted.

The event will entail a party for the entire medical school, including a pasta dinner.

**JUDGES:** If you would like to be a judge for the beer brewing contest, you need to submit a short statement (less than 200 words) on why you are **uniquely** qualified to judge a beer brewing contest. Give your written statement to the editors, or utilize the *Shifting Dullness* box located on the candy shelf in the Dean's offices. The deadline for the applications for judging is **March 21, 1995.** The prizes will entail a gift certificate at one of our fine local dining establishments.

More details to follow in next month's issue.

Void where prohibited. No purchase necessary. Other disclaimers to follow.

## Theoretical Concern

Don't you tell me  
I'm not concerned  
About the problems  
Of this community.

I'll have you know  
That I can talk  
About them all  
For hours on end  
Or until you grow weary  
Of hearing me  
Whichever comes first.

What do you mean  
How long can I do?  
Why I do do  
In fact I'm full of it—  
Doing, that is.

If you don't believe me  
Just take a look  
At this very long list of mine  
And all the things I need to do

Why are all the items  
Preceded by a "1" you ask?  
Oh that only signifies  
Just how important  
Each and every one is  
To me.

So when I get through  
With Number 1  
I'll be sure  
To let you know  
Because I do care—  
In theory, anyway.

—Vanessa Grubbs

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## A LETTER FROM OUR READERS

Dear Editors,

After reading Mike Morowitz's highly opinionated "review" of antioxidant effects on cancer risk, our disgust at such shoddy journalism compelled us to respond. Mr. Morowitz begins his article by demanding that the FDA tell the people of America that antioxidant intake indeed reduces the risk of cancer. If the author's goal was to send the good people of this country into a frenzied state of beta-carotene-consuming hysteria, such a demand might very well accomplish his mission. Based on the author's sourceless "research" and "biochemical studies," perhaps this is a bit premature. Mr. Morowitz then goes on to make several leaps of logic, such as that people who eat more fruit exercise more; observations based only on flimsy heuristics and personal biases. Finally, the article concludes with a recitation of what the author plans to do for himself. Quite frankly, Mike Morowitz's use or disuse of antioxidants does not concern us in the least, and we would, in the future, appreciate more factual and less opinionated journalism from Shifting Dullness. Thank you.

Sincerely,

Jeff Drayer  
Trip Meine  
Matt Hanley  
Mike Bolognesi  
Matthew Kalady  
Anthony Beutler  
Jeff Greene  
Julie Story Byelerly  
Leisha Kneize  
Daniel Yoder  
Amie Hsia  
David Zidar  
Duncan Rougier-Chapman  
John Scarborough  
Ning Wu  
Ashvin Pande  
Jane Gagliardi

March, 1995

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## Roadside, cont from 17

added, like seaweed and limestone. You need a minimal amount of equipment: a boiling pot (at least 12 quarts big), a fermenter (plastic works, but glass is better), straining equipment (a special funnel works well), many hoses (makes you look important), and bottles. Start to finish is roughly two weeks; the beer is better in a month and a half. Anyone willing to sweat the details, call me - I can talk for hours . . .

We leave the country. My roommate took a glorious five-week trip to Nepal. (Yes, my friends, you too can do this. Just wait until third year.) He took many pictures of Sherpas and yaks and the omnipresent bowls of lentils-and-rice (the national dish of the Nepalese, for those who don't know). Some of us went to Puerto Rico, or the Dominican Republic, or Brazil, or the Bahamas, or many other fine places. Yes, third year can be this rewarding, so make good use of it.

We don't date, and complain about it. Love bites. Okay, sorry, I know the broken record meter is really going wild. Ah me, someday . . .

Occasionally we do research. Okay, I admit it, we do spend some time in lab. A random quiz of classmates reveals some startling facts. Many of us are quite adept at breaking equipment and taking responsibility for it. Some of us will harvest cells every six hours (nights and weekends included) until we're thirty. And most of us, at this point (six months in), are frantically redesigning our projects or are becoming resigned to the fact that there will be no results.

The results issue is what bugs most of us. Once, before my seminar class, a friend proudly announced he was giving lab talk this week on his research. A sheet of paper, bearing the numbers 800,000, 5, and 1, was displayed. He smiled that knowing smile and announced that these were his "results". Okay, I'll brag about it for the second time. I do have results and things

are going well in my lab. Of course, the whole results issue is really quite hit or miss; you never know which project will work (but mine worked!).

And there you have it, folks: a behind-the-scenes look at what really goes on during third year. Okay, maybe you didn't really want to know, but now you know anyway. Those who have yet to enter the third year have a lot to look forward to (and a lot to live up to). Sadly, for those leaving third year, a startling revelation should hit you soon.

You'll never be this free again. ■

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## **Community Service Announcements**

by Steve Crowley and Matt Hepburn

-**Habitat for Humanity** will be building again on Saturday, March 18. Call Pat Lager at 383-3168 for more details.

-The medical school has been sending teams to help at the **Urban Ministry Soup Kitchen** on one Sunday each month. The date for this month is Sunday, March 12. Call Community Service Czar Steve Crowley at 383-1047 if you are interested.

-The **Shelter for Good Hope** needs medical students like yourself to volunteer serving meals on Monday nights, from 7-9pm. Call John Pazin at 383-1047 if you are interested in helping.

-Right from the Horse's Mouth: The **NC Center for Therapeutic Riding** will be re-opening in March, which means medical students will have a chance to assist handicapped children in their therapeutic riding. The enchanting Cynthia Boyd is the coordinator of this project. Give her a call at 383-7046. ■





all of my classmates. These mysterious forces (named for Steven Herman, a person you will never ever meet) control how people interact in groups. You see, a closely huddled group of people (i.e., third year types) exerts a strong attractive force on people of like distinction (i.e., other third year types) who happen to walk by. Thus, a random meeting of two of our ilk will soon burgeon into a crowd of five or more that will definitely block traffic and cause mayhem. And, of course, the nice thing about having a law named after this phenomenon is that, suddenly, it is beyond our control. It is not our fault we spend such time outside of lab; van der Herman's forces kept us out.

Number B: In those rare instances in which loitering happens non-spontaneously, it is because we do not have a life. Those of you stuck on wards or in lecture constantly whine, "If I only had some time. God, what I could do!" Someone with a busy schedule can often think of a dozen things he/she would rather be doing. He/she might even make a list of such things. And what happens when the free time is granted? He/she takes one look at the list, crosses everything off, and chooses to watch Ricki Lake or Jerry Springer instead.

Now, imagine that this is always the case. We often have so much free time that it is somewhat burdensome to come up with so many things to do. Sure, we could study for boards, but they're months away. Sure, we could read some papers, or do what little course work we have, but that's boring. Oh well, I guess it's time for Ricki Lake . . .

We party. Okay, lately we haven't been doing enough of this. Need I mention the glaringly obvious fact that (excluding the Christmas Party at Dr. Bradford's), we failed to have a Davison Council party between the Halloween Party and the Valentine's Day Party. What happened to the amazing party

atmosphere? Even when trapped on the wards, in the pits of Last Year, we managed to have quite a few memorable parties.

To set the record straight, despite the lack of Davison Council parties, there have been a considerable number of smaller get-togethers. It just seems that someone else should pay for the beer for a change. And, of course, while the Big Bashes are always fun, there is something to be said for smaller, perhaps not-so-quiet evenings.

We ski. So we've only done this once, but nonetheless, it was such a fantabulous weekend it deserves mention. What better to do with all our free time than road trip to Snowshoe and ski for a couple of days? And when we return we can all wear that familiar smug I-went-skiing-this-weekend-and-you-didn't expression on our faces. Well, okay, maybe I'm the only one apt to wear such a smug expression. Also we can model our (insignificant) ski injuries. Okay, maybe I'm the only one with really sore hips, maybe it was my first time on downhill skis, and maybe I know where you live and have many more guns than you (trust me on this) . . .

We brew beer. Have I mentioned recently that zymurgy is a great hobby to take up during a third year? Maybe with the imminent Homebrewing Competition, others will see why it is such a great hobby. There are many schools of brewing; I happen to belong to the "cost is no object" school. My brewing pipe-dreams frequently involve stainless steel fermenters with built-in agitators, blow-off valves, and a bottom drain. Quite pricey, in case you don't know. And, yes, my beer is better than yours as a result.

Without boring you on the subject, you need only four basic ingredients for beer: malt (extract or grains or both), hops, yeast, and water. There are some luxuries that can be

**Continued on page 16**

# Shifting Dullness

Duke University  
P. O. Box 2865  
Durham, N.C. 27705

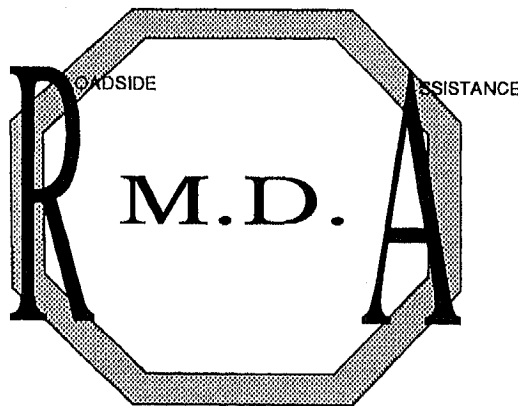
Dr. Jim Gifford (2)  
Medical Center Archivist  
Box 3702, DUMC

## Ever wonder what we really do third year?

Of course, my lab is ideal. My day begins at a time that I will euphemistically refer to as "late", and I work until I am done for the day, but not later than six. Unlike many people, I have results; my project is going swimmingly, and I will be writing soon. To top it all, I work in a great, low-stress, non-anal, and fun lab with nifty people.

And so, Mr. Roadside Assistance, what exactly is it that third year medical students at Duke University do? Yes, we here on the cutting edge like to ask the questions before you even think of them. Well, I'll tell you what we do . . .

We loiter. We surpass all others in our ability to waste time outside lab. You may find



us on the walkway, or at the candy room, or in the halls of Duke North. For those who do not know, prime loitering time is between 11:00 and 2:00. The heavily underpaid Roadside Assistance Research Staff has conducted significant primary work in this field. We now can make the following conclusions:

Number A: van der Herman's forces apply to

**Continued on page 17**

Shifting Dullness

