PUBLIC HEALTH

Oppose Doctor Speed-Up

Forecast doctors, on basis of experiences during war, will oppose speed-up in training of medical students that President's Committee is expected to recommend.

THE PRESIDENT'S Health Resources Advisory Committee is expected to recommend a speed-up of the medical school course to get more doctors trained for the Armed Forces, Science Service has learned.

This will bring immediate opposition from deans of medical schools all over the nation, but not because they want a slow-down or easier medical training. This opposition will come because of the great fear that medical education will be set back by a so-called speed-up.

It's just a medical fact that the educational process needs time and some of what has been called "divine idleness" to really operate.

Doctors cannot be made, the medical deans know, by cramming information into young heads 12 months every year. The students need the eleventh month out of every 12 for complete freedom from studying. Without it they may crack up. Experience with shortened, speeded courses during World War II showed that after a year and a half the medical students had become "rebels," as one authority put it.

They were sloppy, careless and unable to do good work.

Medical school deans will be insisting on vacations for their students not with the idea of vacation good times for young men and women, but to give them leisure to assimilate what they have learned.

H. A. Overstreet, author, educator and philosopher, called attention to this need for leisure in the educational process in his book, "The Mature Mind."

"The process of psychological maturing," he wrote, "is more than the process of receiving impressions, one after another. It is the process of savoring these impressions until they yield up their meaning. It is the process of letting new experiences turn around and around in the mind until they find the angle at which they want to settle down among old experiences."

Medical students need to acquire psychological maturity as well as knowledge of diagnostic tests and disease remedies.

If we do not give them time for some "divine idleness" we may in ten years have medical artisans, carpenters and plumbers

ROCKETS FOR FRONT LINES—A Marine helicopter prepares to unload a rocket launcher at a site somewhere along the First Marine Division front in Korea. Supplying combat units by helicopter is part of a vast land, sea and air transportation service that must deliver about a ton of supplies to each front-line man every 30 days.

as doctors themselves would say, but no real physicians, and no men and women capable of doing good medical research for ways to save and lengthen human life.

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SURGERY

New Stomachs for Old Successful in 20 Cases

SUBSTITUTE STOMACHS have been provided approximately 20 persons through a new surgical technique developed by doctors at the University of California at Los Angeles Medical School and the West Los Angeles Veterans Administration.

The surgical technique was designed for cases in which cancer of the stomach demanded complete removal of the stomach, and in some cases, parts of other abdominal organs. It was developed by Drs. John M. Beal and William P. Longmire.

The operation involves removal of a segment from the upper portion of the small intestine (jejunum) and transplanting it between the esophagus and the duodenum.

In all cases the new stomach has appeared to be adequate, and the operation is much simpler and less hazardous than other surgical techniques designed to provide substitute stomachs.

Providing a substitute stomach after removal of the organ is not always necessary, said Dr. Beal. Many patients adjust themselves eventually to a normal mode of living without a gastric reservoir.

However, those patients provided with substitute stomachs by the new technique seem to adjust more rapidly and without the marked lack of capacity for food, upper abdominal distress and inability to regain their former weight that often characterize the adjustment period.

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BIOCHEMISTRY

Antibiotic Available For Amebic Dysentery

FUMAGILLIN, AN antibiotic or socalled mold remedy specifically effective against the germs of amebic dysentery, is now available for doctors to use in treating patients with the intestinal form of the disease. Capsules of it to be swallowed are being put on the market by Abbott Laboratories, North Chicago, Ill.

The antibiotic was originally isolated from an Aspergillus organism by Drs. F. R. Hanson and E. Eble of the Upjohn Company, Kalamazoo, Mich. Its first promise of becoming good medicine for amebic dysentery has now been followed by reports of good results in more than 200 patients. (See SNL, March 3, 1951, p. 133.)

The drug is unusual because it does not act against the bacteria normally found in the intestinal tract nor against viruses and fungi, but only against amebas, the germs that cause amebic dysentery.

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