



The Albany Medical Nexus



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The Student Newspaper of the Albany Medical College, Albany, New York

Friday, April 27, 1979

Medical students under stress

By HAYAT ABUZA

Perhaps the greatest handicap faced by a medical student coping with stress is the thought that he or she may be the only one who cannot make it. This sense of personal failure at not being able to handle one's problems goes hand in hand with the stigma attached to seeking help.

If students did not feel it before, soon after entry to medical school they pick up the prevailing prejudices of the medical profession toward psychiatry. Moreover, emotional "weakness" seems antithetical to the practice of medicine itself. "If you can't help yourself, how can you expect to help others?"

Statistics show that stress-related problems are quite common among medical students and that many students do, in fact, seek help, although the belief persists that only a few have problems "that serious." Dr. Gordon Deckert's figures show that 65 to 85 percent of students get some kind of psychological counseling sometime during the four years of medical school, but this may include informal sessions with deans and advisors. Most schools report about 12 percent of the student body receives formal counseling each year (Harvard 13%; McGill 18%; Baylor 9%), but about one-third of all students are thought to have problems that could benefit from psychotherapy, according to a 1967 article in *Current Psychiatric Therapies*.

It is commonly accepted that the most stressful times are the initial shock period of freshman year overload, the hypochondriacal reactions during Pathology and Psychiatry the second year, the third year anxieties about patient contact, and the senior year fears about leaving the sheltered student life. A classification of chief complaints shows 69% anxiety and depression,

"...65-85% of students get some kind of psychological counseling sometime during the four years of medical school."

59% work difficulties, 36% family and relationships, 28% sexual problems, 25% psychophysiological symptoms, and 10% severe disorders.

Follow-up studies show that "those who get help become more effective students, have lower attrition rates, and become better physicians (and about 20% become psychiatrists)". No significant differences were found in the above study between treated and non-treated students according to age, sex, or academic performance, but significantly fewer of the treated group were married. This may reflect the fact that the treated group had fewer interpersonal skills and less social support.

Another study, however, in the November, 1978 *Journal of Medical Education*, found that while 9% of the whole student body sought psychiatric help at one school, this consisted of 6% of males and 21% of females. Moreover, while 30% of the men came for academic problems, only 8% of the women did so. Of those women seeking help, 48% were married, with a frequent complaint being role definition problems in two career marriages.

At AMC Dr. Robin Tassinari, director of student mental health services, estimates that the percentage of treated students follows the national average, and in one class more than one-third of the members came for help sometime during their education. The average treatment is 5-6 visits and Dr. Tassinari reports no greater incidence of women visits here.

The system at AMC is unusual in that treatment is totally free and confidential and is given by faculty psychiatrists, psychologists, and social workers. At most other schools, residents do student counseling and it not unusual that students must pay part of the cost.

Dr. Tassinari has nothing but praise for the administration here, because they recognize that only the total autonomy of his office will gain student trust and maximal utilization of services. Most students self-refer for help, but even in cases where faculty or administration refer a student to him, there is never any communication about that student again. Additionally no charts are kept on students — only the student's name and the name of the clinician to whom the student is referred.

Medical School: A Health Hazard?

Just what makes medical education so particularly stressful? Rosenberg, writing in the June 1975 *Journal of Medical Education* says, "The violence done to the self-image of the medical student most serious consequence of his educational program." Most researchers feel that medical school begins a pattern of stress that continues throughout the physician years, making medicine one of the high risk professions. "Their training and career may produce an individual who is highly intellectual, uninvolved with his feelings and family, and partially accepts society's views of the physician as quasiomnipotent. The emotionally disturbing nature of the issues physicians deal with — death, illness, and sex — may require suppression of emotional

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Dean Bondurant resigns

By RON WOLNER

Dean Stuart Bondurant has announced that he will leave the post of President and Dean of Albany Medical College in August to assume the deanship of the University of North Carolina Medical School.

Bondurant asserts that he has "unqualified respect for Albany Medical College and absolute confidence in its integrity, quality and future." His departure has not been prompted by any feelings of dissatisfaction with his present role. He has accepted the offer from the University of North Carolina because he desires a different challenge and wishes to return to an area where he has many friends and family members. The move to Chapel Hill has been "the most difficult professional decision" he has made.

Woods McCahill, Chairman of the Board of Trustees of the College and former Division Counsel with the General Electric Company, stated that, "Dean Bondurant has done a magnificent job and I am terribly sorry to see him go." The trustees will soon announce the establishment of a dean selection committee, composed primarily of faculty members. The previous committee had included a student and it is widely expected that a student member will again be appointed. The chairman of the selection committee will be Andrew Fisher, former Chairman of the Board of Trustees of the College and former Executive Vice President of *The New York Times*.

"Albany is a great place to be Dean," said Dean Bondurant. The administrative reorganization of the college redefines the Dean's duties as primarily being ultimately responsible for the operations of the college, long term planning, fund raising and representing the College before government agencies. Overseeing the day to day operations of the College has become the responsibility of the newly created position of Executive Associate Dean. It is expected that fewer College officials will have to directly report to the Dean. Bondurant feels these changes will free the Dean from having to constantly deal with "yesterday's problems and permit him to concentrate on tomorrow's problems." Dean Bondurant spends approximately one-fourth of his time interacting in some way with the Trustees and lauds their devotion to the College. He cited the restructured administration and the excellent relationship with the Trustees as making the deanship a particularly attractive position that will interest many high caliber candidates.

Stuart Bondurant had taken the helm of Albany Medical College in *continued on page four*



Dean Stuart Bondurant has announced his resignation.

AMC bookstore — friend or foe?

By HOWARD MALAMOOD and HERSCHEL TRESS

Of great concern to all is the college bookstore. The mystery of its operation has been a constant source of accusations and misunderstandings — some warranted, but many not. Helping to alleviate this problem of communication is one of the major objectives of the Bookstore Advisory Committee, which is composed of members of the administration, faculty and student body.

At the outset, it must be pointed out that this committee was formed to merely advise the management of the bookstore; decisions concerning the day to day operation remain the responsibility of Mrs. P. Almy. Mrs. Almy has done a laudable job in creating a respectable establishment. In addition to supplying students, faculty and physicians affiliated with the college and hospital, the bookstore serves a medical community spanning a 150 mile radius.

Perhaps the greatest amount of strife between the bookstore and its patrons has been over textbooks that were not on hand when needed. Most of the problems arise not from incompetency on the part of the bookstore, but, rather, a breakdown in the communication. Currently, notices are sent to course directors well in advance of the start of the course. Most are completed and

returned with no problems, however, at times, order forms are either not returned or are lost in transit. This results in either no texts at the start of a course or not enough because other students need the same books for different courses. For example, a text properly ordered for a medical school class might also be needed by P.A. students, nursing students, faculty members or any other of the store's patrons. Oftentimes upperclasspersons buy texts shelved for basic science courses. The resulting problems should be obvious.

In attempts to avoid such situations, the Bookstore Advisory Committee has proposed to the Dean's office that advanced notification to the bookstore should be made a direct responsibility of either a course coordinator or a member of his/her staff. In addition, to allow Mrs. Almy more time to handle the more delicate operations of the store, an assistant manager, Ms. Ferne Dutkin, has been hired. If at any time, however, there are still any problems with texts, please bring them to the immediate attention of either the bookstore management or a member of the committee.

There are several services that the bookstore offers that many are not aware of. The store carries over 2000 titles. Many of these are shelved in *continued on page two*

AMC bookstore

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the New Book Section located in the left rear of the store. New selections are constantly appearing, and all patrons are encouraged to browse. Also, the store can order any book that is desired at no extra cost. Mrs. Almy feels that, although special orders take up much time and do have an added expense to the store, it is a worthwhile service that she is more than happy to provide.

The sale of gift items is a sore area for many who feel that either they take away space that could be used for more books or that they just do not belong in a medical school bookstore. To clear the air, gift items take up only 3% of floor space; yet, they account for approximately 15% of gross sales! In addition, Mrs. Almy insists that most of the items are displayed in places which would be unfeasible for book storage. In fact, the Committee favors expansion of the inventory of gift items, especially plants which, in the past, had been a good source of revenue and are mostly displayed in the window showcase — an otherwise deadspace. The sale of small, reasonably priced gift items, especially seasonal holiday ones, have always been profitable. In addition, they provide extra service for the stores clientele, something that Mrs. Almy, is always interested in. It is hoped that the income from plants and other gift items will eventually help decrease the cost of books.

Another service of the bookstore is its charging privileges. Customers may use Visa or Master Charge, however, the store's own charge plan is very accommodating. As all probably know, there is never a finance charge on account balances. Also, one need not pay a bill for two months before permanent revocation occurs.

After reviewing the financial statement for the fiscal year 77-78, it

is apparent that, under the present system, it would be impossible to discount textbooks. That year, the store was in the red several hundred dollars; this appears to be the usual case. All expenses of the store, including cost of goods sold, salaries, extra costs of services such as special orders and Visa/Master Charge, indirect costs and the like are paid for from income from total sales. The most questionable expenses are most likely the indirect costs, which include space, heat, power, etc. The bookstore pays the same amount per square foot that any other department does — no more, no less! It goes without saying, though, that costs would be lower if the store was located off college grounds.

Textbooks are purchased by the bookstore at discounts up to 20% off list price; list price is charged in all retail sales. However, this does not mean that the store is making an incredible profit. It must pay shipping charges both to the store and back to the manufacturers when returns are sent. These costs, in addition to those mentioned above, result in the store, a nonprofit business, barely breaking even.

The student members of the Bookstore Advisory Committee have several proposals for plans that may help decrease the cost of books. These will be presented to the committee for deliberation at the April 30th meeting. A report of these ideas and their reception will be discussed in a later article.

Hopefully, some problems common to many have been cleared up in this article. It is important to realize that the bookstore is not an arch enemy. Yes, there are still problems that need to be worked out; the Committee is making every attempt to assist in this effort. However, what we really need is direct feedback from the students and all other patrons of the bookstore. We would appreciate all comments and criticisms — be they positive or negative, specific or general. Please contact Howard Malamood and/or Herschel Tress,

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RISLEY'S MEDICAL
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YET HE DIED A WEALTHY MAN



HELP HELP
By Victor Mark

It's concert time!

On Thursday, May 10, 1979, the Albany Medical College Chamber Music Players will present its second concert of the season. The event will be held in the CDPC Large Auditorium at 7:30PM. As before, members of the faculty, staff, and student body as well as other friends of chamber music will perform various classical pieces.

The success of the two previous concerts has convinced us that there is a musical life here at Albany Medical College. We hope to continue to grow, both in performances and range of musical fare offered.

Coffee and doughnuts will be served following the concert. Please set aside this time for an enjoyable evening of entertainment.

AMSA meets in syracuse

By ADAM NORTICK

Hayat Abuza and Adam Nortick led a workshop on "Stress in Medical Education." The main feature was a segment of Dr. Gordon Deckert's talk, "The Psychological Journey of the Medical Student," given at AMC in Dec. 1978.

Everyone was entertained by Dr. Deckert's theatrical style which wonderfully accentuated his major theme, that medicine is a high risk profession. He pointed out that doctors and medical students are quite capable in handling logic and deduction; however, we are often deficient in interpersonal relations. And yet by the nature of the profession we are dealing with people in crisis states. Therefore, the practitioner is stressed where he is weakest, and he often turns to alcohol, drugs or suicide as an escape.

Following the videotape, a discussion was held on some of the more common problems facing the medical student. Some of the topics included failing courses, inability to do "routine procedures," and the strain on marriages in medical school. The concept of various forms of student psychological support was also talked about. The ideas ranged from discussing the problem with a close friend, formalized student support groups or psychotherapy. It was accepted that a serious problem existed, but no single solution was agreed upon.

The last activity of the day was a workshop on "Taking a Sexual History" lead by Dr. Posch of the Upstate Medical Center and Dave Bloom, a third year student at Downstate. The workshop began with Dr. Posch asking everyone in the class why they came. The reasons ranged from, "I was looking for the

mechanics of conducting the interview," to "we never learnt it," to "I like anything having to do with sex." Dr. Posch impressed upon us that one's attitude and openness with sexual issues are the most critical aspects in conducting the interview, not the opening line or the laundry list of questions. Many people wanted a demonstration of taking a sex history, so Dave Bloom and another student did a role-playing demonstration wherein a boy finds out his brother is a homosexual and seeks help. The demonstration cleared up most of everyone's questions.

After all the scheduled activities were completed there was an impromptu meeting of the AMSA chapter chairman and regional trustees to discuss the upcoming convention.

Adam Nortick is the chairman of AMSA.

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Letter

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Name withheld by request, AMC 3

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Editorial policy is determined by the Editorial Board, an autonomous unit, consisting of the Editor-in-Chief, Managing Editor, News Editor, and the Business Manager.

All interested individuals are invited to submit letters and opinions for these pages. Criteria for publication include clarity, timeliness and relevance. Material must be typed and signed, and must bear the mailing address of the author. The views expressed in articles are not necessarily those of the Nexus. The Editorial Board reserves the right to edit all material. Notices, manuscripts and letters must be received by the 15th of each month.

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End of the year sports coverage next month!

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Debbie, 895-2039, 4-10 pm.

Medical students under stress

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responses... in crisis situations."

A study of Johns Hopkins students between 1948 and 1964 found that 3.1% of graduates and 11.2% of non-graduates died before age 60, with suicide accounting for 34% of these premature deaths. These figures are significantly higher than those of the general population. Women physician suicide rates are 3-4 times higher than those of men. Suicide was bimodally distributed in those who ranked in either the upper or lower 1/3 of their classes.

A study of drug and alcohol use in medical students at Loyola University reported in January 1977 *Diseases of the Nervous System*, shows that alcohol is used to cope

with tensions rather than socially. Of the sample of 172 students from all years, 17% drank while studying. 21% drank between 3 and 7 days of each week, and 10% became drunk every other time they drank. Of the sophomores and juniors, 10% drank most often alone. Sometime during their life, 8% had been in a vehicular accident while intoxicated. Use of drugs, mostly amphetamines, while studying was 18% among freshmen. The authors of this study feel the "major problem is that the student thinks if his behavior parallels his peers, he is not in jeopardy."

Dr. Tassinari reports that alcohol and drug problems do not seem prominent among those who use the mental health services at AMC.

And, he adds, there have been no suicides since he joined the staff at AMC. And, he adds, there have been no suicides since he joined the staff in 1976. "Anyone is vulnerable to stress reactions," he says, "and medical students do well in therapy because they're bright and they're motivated."

This has been the first in a series. The next article will deal with the support services available at AMC and whether students here feel their needs are adequately met. Students are encouraged to jot answers to any of the following questions and return it to H. Abuza, Box 114.

Appointments with Dr. Tassinari are available on request by writing him at KCE 123 through the interoffice mail.

Next NEXUS deadline (final paper of year) is Wednesday, May 2nd.

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1. Before reading this article, were you aware of the AMC mental health service and how to use it? From what source?

2. Have you ever used the service? If yes, were you satisfied? Comments:

3. Have you ever thought about using the service and decided not to? If yes, why did you decide not to?

Bookstore

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AMC box numbers 184 and 887 respectively.

Members of the Bookstore Advisory Committee are: Mrs. U. Poland, chairperson, Mrs. P. Almy, Dr. G. Kaye, Dr. W. Pelton, Mr. J. Mayer, Dr. G. Kanter, Mr. B. Siegel, Mr. R. Santoli, Miss J. Roper, Herschel Tress (81) and Howard Malamood (81).

Talk back!

Did you enjoy reading the *Nexus* this year? Or did it repulse you?

We'd like to print your comments in our gala end-of-year issue next month.

Send your comments to Box 198 by Wednesday, May 2nd. You must sign your name but, if the response is kept clean, can have it withheld.

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View from the floors

On having met one's match

By NANETTE SANTORO

What with Match Day just a memory and the deep, heartfelt cries of "FYBIGMIR!" already beginning to fade, it seems appropriate to discuss a topic that sends many seniors off to the lounge with a yawn (as it does most else).

My edition of Webster's defines it as "an essentially parasitic disease, the victims of which lose all interest in any academic pursuit, shamelessly indulge in vice and sloth, and openly flout authority." Sounds like all the seven deadly sins at once. However, there is hope — Webster goes on to say "Most victims are rapidly cured by precipitous placement into an internship/residence program."

Senioritis. It's our only excuse. Those beer-swilling, dope-smoking, party-crazed freaks cavorting in the halls of this institution are, if you will note, all the bearers of name tags ending in...AMC 4, not 3, and certainly not 2. Anyway, it's merely a temporary condition. Those same students who can recite the game-show TV schedule for the next six weeks but cannot for the life of them tell you the meaning of "ergophony" will get their due.

They will become interns.

It's not merely a Bacchanalian celebration before the hard times come — it's a deliberate attempt at suicide, to arrest the horrifying natural course of events.

Have you ever *seen* an intern? Most of us seniors briefly saw a few skulking about when we did our A1's, and believe me, it's not a pleasant sight. Those ashen, anemic creatures could be found muttering to themselves in some laboratory, drooling Gram's Iodine if in Medicine. The first-years in Surgery have never been seen, except as indistinct blurs stabbing a Jelco into a patient's arm. The electric eye that opens the door to the operating room cannot detect them.

Is this, then, our lot?

The next time you feel an urge to reprimand one of us pitiful creatures for our impassioned determination not to do any work, I pray that you will try to understand the maelstrom of emotion behind the response that you will get: **FYBIGMIR!**

Nanette Santoro, is, of course, a senior.

A few things to keep in mind

Saturday, May 5-
11:30- Sundown Picnic at Thatcher Park
Details to follow, but plan being there!

Friday, May 4-
4:30-7:30 Cocktail Party at the Student Lounge followed by **GRAND ROUNDS** followed by 9:00-1:30 Band Party w/ Milestone at the Dorm



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Bondurant resigns

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1974, at a critical juncture in its 135 year history. Harold C. Wiggers' long tenure as Dean had then culminated with a substantial augmentation of the physical plant of the College and a considerable increase in the size of the College. The Medical Education Building and the Schaffer Library had been completed in late 1972. At the same time the Medical Center Hospital had undergone a significant expansion and the adjoining Capital District Psychiatric Center was created. Bondurant's stewardship might be characterized as consolidating these gains.

Bondurant has felt that a strong and viable Graduate Studies Program is "essential for the integrity of the scientific base of the Medical College" and has made commitments to strengthen the program. The position of Associate Dean for Graduate Studies was created to help effect these goals. Mandatory procedures for the students' evaluation of all the courses were established. Dean Bondurant has indicated that student feedback is of critical importance in the maintenance of an effective learning process. During Bondurant's term there have also been changes in the curriculum. With the organization of the Department of Family Practice and the Division of General Internal Medicine greater emphasis has been placed on the teaching of primary care skills. There has been a concerted effort to emphasize the legal, ethical and sociological

aspects of medical issues in all of the courses. The recently completed administrative reorganization, made in accordance with widely accepted business practices, is hoped to make the College function more efficiently and provide greater financial controls.

Dean Stuart Bondurant has noticed from his frequent contacts with medical school officials throughout the country a steady increase in the visibility and level of prestige of the Albany Medical College over the past decade and foresees this trend continuing.

Stuart Bandurant — A profile

By RON WOLNER

A slight accent which surfaces in close conversation and his extremely polite and non-rushed ways underscore Stuart Bondurant's Southern origins. He is very much a product of North Carolina, born and educated there, first at the University of North Carolina and then at the Medical School of Duke University. After completing his residency at Duke and Peter Bent Brigham he left for the Indiana University School of Medicine where he became Professor of Medicine and Associate Director of the Indiana University Cardiovascular Research Center. He went on leave for a year as Chief, Medical Branch, Artificial Heart-Myocardial Infarction Program at the National Heart Institute. At this point in 1967, at the age of 38, he was tapped for the post of Chairman of the Department of Medicine at Albany Medical College and Physician-in-Chief of the Albany Medical Center Hospital, which he held until 1974 when he was appointed President and Dean of the College. Recently he has come increasingly into the national limelight as President-Elect of the American College of Physicians and Chairman of the Council of Deans at the Association of American Medical Colleges. He has authored many research papers in the cardiovascular and pulmonary fields, publishing particularly extensively on the problems of air and space travel.

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