

THE HUMAN CONDITION 2007



身体健康
平平
学業順利
相愛復久
銘+痘
願意
祈願
2006.2.27

3/23/06
I Pray for better handwriting and for a pool or dart thing but first of all good health and happiness for my family and friends. Cal
願意
7/3/2006

健康第一な生活が
送れるようにお願いです。
みんなの笑顔が溢れるように。
いっしょに頑張ろうよーに。
2006.3.24 和菜

家族みんな健康と楽しく
笑って生きてゆこうに。
ネコも長生きするように。
2005.12.25 花江

祈願
神様へ
お願い
今年も健康で
過ごせるように
お願いです。

発展
諸田 淳
来年もまた
二人で来よう!!
家内安全
身元も一輪に
お願いです。
麻子



MICHAEL GERMAN, MSIV

THE HUMAN CONDITION

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EDITORS' NOTES

SHARONA BEN-HAIM has mastered the art of functional procrastination. **MELISSA KAGNOFF** would like to add, "I'm Audi 5000, G." **MIKE GERMAN** gives the benefit of the doubt. **MAIKA ONISHI** has enjoyed getting to know the creative side of her classmates. **CLARA LEE** is on a quest to develop neutral facial expression; here I come hospital. **JAMIE NICOLE HEINZEN** is moving to Europe in 6 months! **RISHI DOSHI** is a figment of your imagination. **IRENE WONG** wonders much about poetry, polyps, and llamas lately. **NIC KANAAN** has learned through experience that you can, indeed, make friends with salad. **JAKE HARTER** is not not an editor. **AWE LAPCHAROENSAP** is a part of your balanced breakfast. **KRISTEN KIPPS** hasn't slept for ten days, because that would be too long. **AMANDA ROUBLICK** is protesting the 'no eraser' rule and keeping one in her back pocket. **OMEED SAGHAFI** is feeling the urge to use the third person. **KEVIN PENG** is watching the waves.

LETTER FROM THE EDITOR

The Human Condition exists as a forum for students, faculty and staff affiliated with the UCSD School of Medicine community to express their literary and artistic talents. We are fortunate to have so many exceptional contributors to the magazine each year: from patients to attending physicians, medical students, residents, and alumni. Founded as a forum of creative intellectual expression by and for medical students, this magazine serves to convey the interests of our young medical community beyond the confines of our immediate structure.

In this edition, we were fortunate to interview the famed physician and philosopher, Dr. Deepak Chopra. Dubbed "the poet-prophet of alternative medicine," Dr. Chopra is well known for his lectures and many publications, including his bestseller *Ageless Body, Timeless Mind*. In the interview, he speaks of the benefits of integrating Eastern philosophies of holistic healing with traditional Western medicine, and reminds us of the importance of maintaining humanism in the practice of medicine.

This publication takes us on an international journey with stunning scenic imagery from around the globe, multilingual poetry, and literary pieces which touch upon universal humanistic traditions. We are proud to present this 12th edition, and we hope you enjoy our creative endeavor.

Sincerely,
Sharona Ben-Haim, MSIV

ACKNOWLEDGEMENTS

Special thanks to Ramon Aldecoa for his tireless contributions and to Dr. Sanjay Nigam, Writer-In-Residence at UCSD School of Medicine, for his perennial support, without which the magazine would not be possible.

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We would like to thank Joyce Cutler-Shaw, Artist-In-Residence at UCSD School of Medicine, whose art installation inspired the title of this magazine.

And a final thanks to Michelle Yu and the EdCom staff for their artistic contributions and technical support.

Submissions or correspondence to *The Human Condition* should be mailed to: Office of Student Affairs, School of Medicine, UCSD, 9500 Gilman Drive, La Jolla, CA 92093-0606.

THE LIGHT IN THE BASEMENT

NINAD ATHALE, MSIII

The basement of the old Gleason house is a remarkable place. It is not completely underground so that the small windows, just inches from the ceiling, are sunken into the earth and capture only half of the available light. The floor is bare concrete, and the walls are covered with fiberglass insulation that looks like cotton candy. In the corner is a large oak cabinet that reaches all the way to the ceiling. It is the only piece of furniture in the basement now. Like a night watchman, it towers over scattered boxes of miscellaneous junk, guarding the secrets of the basement. It stands just to the right of the staircase that leads up to the rest of the Gleason house. At the bottom of the stairs, there is a single light bulb which is operated by a string dangling from above. During the day, light peeks through those small windows and gives the whole room a mystical appearance, like a mausoleum. But at night, or in the early morning hours, there are no traces of natural light, and that single light bulb is all that stands in the way of solemn darkness.

These days, Howard Gleason wakes up between nine and ten in the morning. He used to be an early riser like his wife, Sofie, up and out the door before dawn. He used to love the feeling of sitting in his kitchen, listening to the faint sound of the car's engine warming up with the muffled sounds of the radio playing within, while he laced his boots and put on his coat to face the cold morning air. He used to love that feeling. Today, like he has done every day for the past several months, he opens the door to that basement and lumbers down the old wooden stairs. At the bottom, he grasps the dangling string and slides his hands down it, as if he cannot decide whether to turn on the light. He lets the string go – there is no need for artificial light between nine and ten in the morning. He turns towards the cabinet and opens it.

Inside are shoeboxes, paper boxes and large plastic crates stacked to the top. He removes one shoebox and gently lifts open the lid. The smell of worn paper seeps out, and Howard takes a deep breath. With trembling fingers – he has noticed that his hands have started shaking more in the past few months – he pulls out some of the carefully sorted letters within. There are postcards, there are letters still in envelopes, there are greeting cards. There are more modest-looking scraps of paper, notes written on plain, undistinguished white stationary, now yellowed with the stains of time. On some days, Howard sits there alone until the strained sunlight fades, leaving the basement in a melancholy glow.

* * * *

The basement was even darker every morning at 5:30, when Sofie Gleason slowly marched her way down the steps, carefully and methodically, always wearing slippers —because you never knew how many splinters there were in those old wooden stairs. As she approached the last stair, she gingerly swept her hands in front of her face and grabbed the string, jerking it swiftly to turn on the light. She knew exactly where the string was, by habit. She went straight to the wooden cabinet and picked out a shoebox – she knew exactly which one – and then carried it gently under her arm like a small child up the steps. As a habit, when she walked back up the steps, she never turned the light off for fear of tripping in the dark and scattering her box of precious letters all over the floor.

Sofie lived the last several years of her life in the blissful, tireless work of organizing her memories. She was not a pack rat as much as she was an appraiser of sentimental value. She kept all correspondence between herself and her husband from when they were still just dating – he had been stationed in Korea and she was a flight attendant, living with her parents in Wisconsin. She had sent him postcards from all of her destinations around the country, and made him promise to bring them back home safely, just as she had kept every letter of his. After they got married, she kept all correspondence of any kind with everyone she ever knew – even holiday greeting cards from people she had long since forgotten. She had kept a telegram that had been sent to her from Germany when her father died. She had a photograph of the World Champion Green Bay Packers football team – she frequently used to fly with that team when she worked for Delta.

She went down once every morning and brought back up a box of old letters so that she and Howard could spend a few hours of their retirement reminiscing about the past. Over the years she developed a method, a meticulous way of organizing so that the most recent set of cards would go on the top shelf of that giant oak cabinet, and the oldest ones would go on the bottom shelf where she could reach them herself. In this way she had access to the oldest of the memories, the ones she thought she might forget the most easily. Sofie had one single fear: the fear that she would lose her memories. She feared the myriad possibilities: Alzheimer's disease, dementia, strokes and vegetative states. She was determined to save her most precious possessions in a location more secure than her own vulnerable mind, hoping to stave off forever the darkness of forgetfulness.



JOSH BRESLOW

In this endeavor she enlisted her husband's help. Every night before bed she would go back down to the basement, reorganize the boxes, and call from the bottom — "Howard!" — when she needed to reach the top shelf. And Howard would come down, kiss her goodnight, and she would slowly climb back up the stairs while he would place all of the boxes in their designated spots. After he was done, he would climb the stairs pausing briefly to glance back over his shoulder to reach for the string hanging from above. He would see the oak cabinet and smile, shaking his head and marveling at his wife's persistence. Then he would turn off the light and head upstairs to bed.

Howard was usually patient with his wife's idiosyncrasies, but her obsession with that cabinet bewildered him. In his lighter moods, he would poke fun at her. "It's a fire hazard," he would say. "I bet you if that thing caught on fire, it wouldn't last a minute!" She would smile, and mumble something like, "Stop it, Howard," but through her forced smile, you could see her eyes glistening as she would slip into some distant memory.

When their first granddaughter was born many, many years ago, Sofie had received a card from her very best friend (and bridge partner) Pauline — the first time she had ever been addressed as "Grandma" in the form of paper correspondence. Inside the card, Pauline had copied down an old Victorian poem about a man reflecting on his dead grandmother; it was hardly an appropriate sentiment, but Pauline didn't know much about poetry. She wrote neatly in her best handwriting because she knew how much her dear friend loved words. And it had meant a lot, being the first time anyone had acknowledged Sofie's new grandmotherly status, partly because up to that point it had almost been a source of shame. Her youngest daughter, Susan, had been pregnant out of wedlock and had chosen to have the baby by herself. Amid the increasing anxiety that came with every subsequent week of her pregnancy, Sofie had lost perspective, so that when the baby was finally born, she told almost no one except Pauline. When Sofie read those words, so carefully written in her dear friend's handwriting,

*Oh, if you now are there,
And sweet as once you were,
Grandmamma,*

she began to cry, without even finishing the rest of the poem.

On that night, she had thought long and hard about where to file that card, even calling Howard to come down to send it up to the top of the cabinet, then deliberating some more when he finally arrived. Howard waited and tapped his foot impatiently as she wrestled with the decision. His arthritis had been acting up, and he had been avoiding trips up and down stairs, preferring to spend the night in the living room watching *I Love Lucy* re-runs and letting his throbbing knees rest. As he watched her, his restlessness grew and grew, and finally he turned his back on her and muttered, "Dammit all, woman," and stomped up the stairs, pain shooting through his legs, just turning back at the top of the stairs to look

down at his wife sitting silently, staring at the floor.

* * * *

Howard is now vividly reliving these memories as he stands in his basement. He sees Sofie once again sitting on that floor. And in a flash, he tears open the cabinet and pulls out boxes one by one, looking for that card. He reaches for one shoebox above his head; it is stuck on something, and now in a fury he pulls as hard as he can and the box rips open spewing its contents like confetti over the floor. Howard is sobbing now, sobbing and trembling, and he collapses, and in the darkness he once again reaches for that string, dangling from the ceiling, tugging repeatedly to illuminate this dark corner of the basement. He pulls and pulls. The light bulb has burned out long ago, and he knows this, but habit forces him to pull, pull in frustration, pull in desperation. It was habit, after all that made him wake up early for forty-eight years; forty-eight years of lying next to his wife and waking up when she woke up and sleeping when she slept. Habits are neither memories nor emotions, and they seem to have a life of their own, outliving all else. It was his habit to spend many years with his wife with their shoeboxes of memories, and soon it became habit for him to count out her pills each morning, to take her to her chemo sessions each week, and to dress her and bathe her when the cancer got so bad that she was unable to get out of bed because of excruciating pain. As Howard thinks of these things, his eye catches something in the dim light. It is a small card. He reaches for it and pulls it close to his eyes, but by now the sun has set and the darkness takes over. He stands up again, and lumbers back up the steps until he reaches the top. Once there he can barely make out in the ambient light the flowing, cursive handwriting of a poem:

*Oh, if you now are there,
And sweet as once you were,
Grandmamma,*

*This nether world agrees
'T will all the better please
Grandpapa.*

HC

BEFEHLSHABER DER TODESKANDIDATEN

White bodies naked on the low damp ground
And bones cast in a little low dry garret,
Rattled by the rat's foot only, year to year,
But at my back from time to time I hear
The sound of horns and motors, which shall bring
Sweeney to Mrs. Porter in the spring.

--T.S. Eliot, *The Waste Land*. 1922

I place chambers in rows of ten
Each chamber contains eighty or so adults—
Whether male or female—it is difficult to tell
They struggle with upturned legs
For breaths of stale air which diffuses through a spoiled
Yellowed sponge
They claw glass
With banana-slopped footpads
Gasping all the while

Hypodermic needles mount gas tubes
Before mounting silvery gas valves
I flip a valve—with my perfectly manicured nails—
Needle thrust their fleshy sponge and observe
The blackened mass flutters about like
Swallows beaten with dark wind
Coughing now but unable to speak
Those in cold chambers
Gasping and clawing more than before

Somewhere over Midway my grandmother's lover swallowed the sea
And when the black sea gulped him down he was all alone
His rusty plane somewhere at the bottom of the ocean
His scarecrowish bones scattered and scarred more deep
O swallows O swallows
Ein toter Hund beisst nicht

I imagine that when I am no longer
God will put me in a square room with a judge and jury
A room with wooden accents and one chair
I see them
Their red eyes watching me
I would sit cross-legged arms-crossed
Holding my head low against a red gaze

With footpads over mouths they point and whisper—
Arbeit macht frei

But yes me yes
All is well is well
I remember, I remember—
I remove the needle and the sponge
and dump the rags into a bubbly solution
Watching bodies trying to escape as they are swallowed
beneath tombs of salty white bubbles
Eventually they reach the bottom of the jar
drowning

I imagine this is how he felt
Od' und leer das Meer

Sean Hickey, MSI



BANSARI SHAH, MSI



HOI SANG U, M.D.

WHY IT MAY BE IMPORTANT
TO TREAT SINUSITIS

I want to put this
down in black and white
Catch that thought
not let it out of my sight
Record this fleeting moment
of revelation for posterity
Share this window of immortal wisdom
with you and eternity.

But water pushes
on my brain
My ears are bursting
with pain
My conscious mind
feels fuzzy
My breathing in a bind
My hands slow down

And that epiphany escapes me.

Oh, the immeasurable price paid
For catching the common cold!

-- Neha Jain, MSIV



MICHAEL GERMAN, MSIV



HOI SANG U, M.D.



LISA HOANG, MSII

HOW THE EARTH GOT ITS NAME

A *JUST SO STORY* IN THE STYLE OF RUDYARD KIPLING

JAKE HARTER, MSI

In a time long ago, O Best Beloved, the land had no name. In this new time the creatures had only just chosen their own names and filled with ‘satiableness’ went about inquiring – for so long ago animals did not squeak or squawk or bark or hiss, but spoke the same simple language – as to what to call what. The most ‘satiably curious’ of them all was the rabbit – you might have heard the cat to be most ‘satiably curious, but curiosities tend to lead them astray and I assure you a dead cat makes for neither a pleasant nor particularly good story — who so chose his name because it sounded like the hops and bounds he made as he bounded about the land. Now the creatures didn’t know that the flattened and scorching hot land, where even the sunlight would waver and wobble in the midday heat, was called the Savannah, but then again they had hardly decided upon their own names – so!

Any new sound would get the young hare – his cousin, the mongoose, had called him this for his fine dusty, speckled coat of hair – to investigating for he had a fine long set of ears which piqued his ‘satiableness’ with the slightest rustling. He’d hear the scritchity scratching of the porcupine and hop over with his flat feet flipping and flopping as he went.

“Pardon me, sir, I know the rhinoceros has two rather large horns atop his nose and such, but you have so many thin horns clattering about your body. Whatever for do you use such queer bitty horns?”

But being rather ornery – with all those spikes poking here and there when you tried to walk you’d be grumpy too – the porcupine simply replied:

*My prickly quills
Treat me just fine,
So you mind yours
And I’ll mind mine.*

Yet with that ‘satiableness’ pringling and tingling the young rabbit could not be contented with such a brisk and unsatisfactory reply so he continued, “But no relative of mine has prickly spikes here and there. Where did a creature such as yourself come from?”

“From the same place as any other creature on this land I reckon,” said the porcupine. “But I’ve had quite enough of your bothersome queries and questions,” and with that the ornery creature lumbered off, prickly quills clattering and



MICHAEL GERMAN, MSIV

chattering under the noontime sun.

Now you must understand the most 'satiably curious hare had set out to have one question resolved, but the prickly porcupine had simply swapped another in its place, which bothered the hare terribly. His dusty brown coat quivered and his long, fine ears twitched with curiosity. For the rabbit could just as easily query as to another creature's name as he could leap over a thistle scrub – any hare worth a pinch of salt can so clear such scrub, and I assure you, O Best Beloved, this was a most marvelous young hare in all regards – but he knew as little about where such beasts came from as a fish knows about leaping thistle scrubs. The rabbit knew the mellifluous gazelle who could leap as well as he, just as he knew the magisterial lioness for whom even he would stand still, quiet to his last hair, against the dusty, musty ground. He knew the zebra's stripes, the snake's silent coils, and the hippopotamus' rotting teeth, which belied their great danger. Yet knowing so much, the young rabbit's 'satiably curiosity would not let him forget the question of the name of the land upon which he and his cousins lived.

So early the next morning, before the ants scavenged for things to carry about and the clever baboons came out on the night-cooled rocks to groom one another, the young rabbit set off to find out the name of the land. He dashed and he

A COMPLIMENT

Thou trident of our biologic sea!
Which stirs up watery minions to defend,
From disp'rate starting pathways, numbering three,
Converging on one common lethal end.
Thou clarion call! which steers the teeming rush
Of heroes, giving bearings to the fray.
Thou artist! who applies a chemist's brush
To brand the hostile uniform as prey.
Thou mason of the arch, and architect!
Who, with the keystone laid, begins to build,
Assembling curving segments to erect
A monument wherethrough the foe is killed.
To thee, who clears the way for us to live:
To complement our compliments we give.

-- Steven Ngai, MSII



SAAVANI

to my newborn daughter

rains slake
summer earth

winds cool
rooftop clothesline
saris plucked off
too late to avoid the soak

colors wetten on a village girl
shadow clouds
dance to welcome the quench

Saavani, whose name is derived from the Hindu month of Saavan, invokes the eager anticipation of the first monsoon rains that break the summer dry spell.

Poem and Photo -- Sandip Datta, M.D.

VA SPINAL UNIT

I remember the oddest things.

New to this, I tripped my way into
A pair of pants laid out hours earlier.
His hospital room - curtains stirred
With a cough, a hum, unseen breaths -
Filling with the smell of aluminum
And beer, the sweet rot of a boy's warm room
After a night's sleep.

His kids had called him Mr. C.
He had seen Germany
And Japan and weighed 400 pounds
Before stomach staples, rotted vertebrae
And titanium cages felled him,
Held him ramrod stiff and thin.
Then he mentioned meatloaf. Meatloaf?
And so I learned how difficult it is
To make meatloaf horizontal
In bed, sheathed in compression socks.

Shirt soaked, I thanked him and left,
pausing in the hall.

-- Jacob Harter, MSI

hopped under the red morning sun as fast as his flat, floppy feet could carry him, until at last, when the trees grew thicker and the ground wetter he spotted a scabby, snaky beast with great bulgy eyes upon a thick, bare branch of a rubber tree.

"Pardon me, sir," said the rabbit, "but I have a quick question if you don't mind and whatnot..." But to this exceedingly courteous young hare's surprise the crusty serpent had disappeared from where he stood upon his low rubbery perch. Not fooled – for young hares have sharp darting eyes and even more dexterous reflexes – the young hare continued, "That's quite a trick, but I only desire to impart a quick question as to names and whatnot."

"Indeed, you hairy young cur," replied a crackly, low voice from the tree.

As the rabbit peered closer with his sharp darting eyes he noticed a craggy outline on the branch where the scabby, snaky beast had stood. "You must be mistaken, sir, I'm not a

cur, but a young rabbit," said the rabbit, at which point the bulgy-eyed head of the beast appeared, lolling in mid-air above the branch.

"Mraaah, well I reckon you can proceed with this bothersome inquiry," said this mysterious head, lolling in the foliage of the rubber tree.

"If you'd be so kind, I have been wondering as to your own name and the name of this land upon which we stand," said the most 'satiably curious hare, to which the crackly, scabby, snaky beast replied:

*Call me chameleon
For my colors change and grow,
But as to naming lands
I hear the marsh toad knows.*

This scabby, bulgy-eyed head flashed purple like the kola nut flowers, and bit by bit faded away, leaving this young rabbit to wonder where he could find a toad, for he had never heard of anything sounding quite so wondrously silly as a marshy toad. And so the rabbit continued onward into the thicker trees under the midday sun, thinking all the way that this squishing and squashing under his wide flat feet feels rather marshy, making his 'satiably curious tingle and pringle all the more.

And the young hare didged and dodged further and further and further into the odorous marsh. At last when his legs ached and he could didge and dodge no more he stumbled upon a marshy toad plop in the center of a watery lily platform in a pond. But in this new time rabbits had not yet encountered marshy toads, and as particularly exceptional as this young hare was, he only thought this queer creature as warty and portly, but hardly toady.

"Pardon me, sir, but what sort of slimy, dithery, hairless hare are you?" said the young rabbit.

Being clever – for toads have near many thoughts in their heads as warts on their corpulent bodies – the toad saw an opportunity for mischief and replied, "And I suppose you are the sort of most 'satiably curious rabbit of which passersby have told me much." Now, O Best Beloved, anyone who lived near the dark and odorous marshes knew the toad to be most mischievous – it was for the toad that water lilies came to float atop the blue-black, odorous marshes, but that is another story – and took great glee in tricking and troubling passersby, and the strange, inquisitive hare before him was no exception.

"Tell me," continued this warty, marshy toad, "how did you come here?"

"If you must, the chameleon sent me before he disevaporated in the bendy boughs of the rubber tree," said the rabbit.

Now if this were not such a new time of beginnings and names the young rabbit might have known chameleons and toads were, have been, and will always be in cahoots, sending one another hapless passersby — though this young rabbit was hardly hapless, but to the contrary, quite hapful.

MAPLE LEAF

The morning song of April rain
Cooes fat, balled fists into leafy hands.
Rivulets of amber drool
Crawl along the fleshy grooves that Spring unfurled,
Ciphering encrypted hieroglyphs of its future self.

August brings twirling arms and fanning palms-
To drowsy murmurs and in spinning, dizzying charm
They drift down to me, palm to palm,
On crowns of coal
And smoldering soles
Like a lover's caress- a lusty, slow, gentle balm.

But the richness of youth awakens to a bitter rue
When constancy changes to chameleon hue
And crawling nerves are yellow seen-
By a bone-white moon-
Through half translucent skin, paper thin.

The dry rattle on a pale and winnowed day
As chattering leaves gnaw on threadbare limbs
And by the broken beer bottle brims
Astray down deserted alleyways
The skeletal leaf of maple prays
And is warmed by memory rays.

-- Winnie Wu, MSII

Now, it's quite important to know, O Best Beloved, that the toads appeared quite the same as today, but with two particular exceptions: first, toads possessed a most melodious voice from their finely tuned vocal chords, and a fine small tongue to pluck them with and second, they had great gorging mouths to snatch up any hapless creature they could convince to venture near. And so this marshy toad in hopes of snatching up a sweet knobbly meal, told the young hare, "What a queer name. Whoever would call themselves a chameleon?"

"Well, he's a rather scabby, crackly, snaky beast," began the hare, but the toad interrupted him.

"You must come closer so I can hear you, young hare, for I only have these teeny holes for ears with which to hear you." And it was true, instead of fine long ears the toad had but teeny ear holes and so the hare flipped and flopped those wide floppy feet and ventured out upon the marshy lily pads.

"To repeat myself, he's a rather scabby, crackly, snaky beast," began the rabbit for the second time before the toad interrupted him once more.

"Ah, thank you young rabbit, but with my ear holes so teeny, I *still* cannot hear you."

And so the rabbit drew right up next to the marshy toad. But hating to have questions asked to him when he had so many himself, this clever young hare kept his feet flippy and floppy as he began for a third time in his most clear inquiring voice, "To repeat myself, he's a rather scabby, crackly, snaky beast."

Presently the toad's great gorging mouth popped open in order to gobble down the sweet knobbly rabbit, but with a flip and a flop of his fine flat feet the rabbit dodged the toad's gorging mouth and landed with one of those fine flat feet stamped upon the marshy toad's tongue.

"Now I insist, sir," said the rabbit, "Please tell me the name of this land."

But truth be told, the toad had no better idea as to its name than the hare and being so unused to his precarious predicament he gave one great leap. And with a great whippety snap his nice tight vocal chords went limp and his tongue stretched out. With the toad's great warty tongue still underfoot the rabbit insisted once again, "Please tell me the name of this land."

With no choice left, the marshy toad shouted the first thing that came to mind, "Birth," which he knew every creature had come from, so why not the land? Yet with his rattly stretched vocal chords and his long whippety tongue under the hare's fine foot, this sounded more like "Earth" – try this!

Now the rabbit took it on good faith that the toad, being so uncomfortably positioned would tell him the truth, and so didged and dodged away before the toad could try to gobble him up once again. And beneath the hot afternoon sun, he didged and dodged back through the trees to the scrubby Savannah, telling his cousins all the way of his most prodigious discovery. So to this day, all the land we live upon, whether it's the squishy-dank marsh or the scrubby-hot Savannah, is called Earth.

But for his mischief, the poor toad has lost his melodious vocal chords and his fine short tongue to pluck them with. Instead he can now only rattle his throat and eat flies with his swishy long tongue and he always calls out for the 'satiably curious young rabbit, which sounds more to us like "ribbit" because of his croaky, marshy voice.

*Imagine a time before all names
And think of the commotion
Serving tea and cake at three
And as you reach for milk*

*You grab jam - quite the same! –
Creating quite the potion.
And so we thank young rabbitty
And all your long-eared ilk.*

HC

學醫

以仁對人
以忍對疾
以樂對事
以感對心

The Study of Medicine (學醫)

Michael Lam, MS2

Vertical Reading

以仁對人
以忍對疾
以樂對事
以感對心

以仁對人
以忍對疾
以樂對事
以感對心

Benevolence for man
Forbearance for suffering
Contentment for all matters
Compassion for the heart

"The Study of Medicine (學醫)" reflects on the author's ongoing experience in medical school. It employs two different styles of Chinese calligraphy. The "Traditional script" in line 1 and 3, contributed by Steven Ngai, is characterized by organized structure with clear and distinctive strokes – it illustrates the precision and professionalism of medicine. The author's own semi cursive "running script" in line 2 and 4 emphasizes on the emotional aspect.

As in traditional Chinese calligraphy, these words are read in columns from right to left. However, this verse is also designed to have additional meanings when read diagonally, reflecting the admixture of both professionalism and emotion.

Diagonal Reading

以樂對人
以感對疾
以仁對事
以忍對心

以樂對人
以感對疾
以仁對事
以忍對心

Cheerfulness for one's peers
Sympathy for the ill
Altruism for all undertaking
Patience for the soul

ALLUSIONS FROM THE EAST:

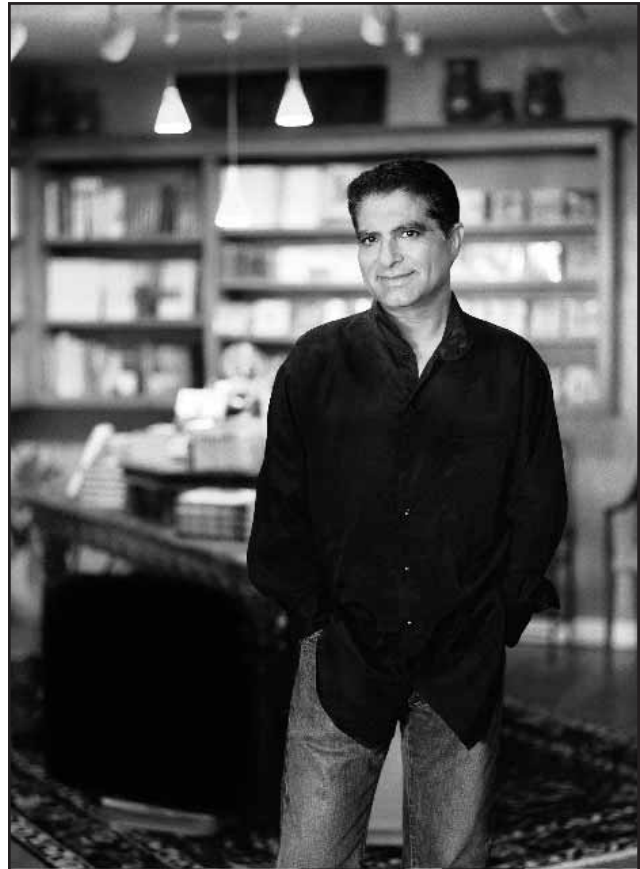
AN INTERVIEW WITH

DEEPAK CHOPRA

BY SHARONA BEN-HAIM, MSIV

I had the privilege of interviewing the notable Dr. Deepak Chopra this year. Dr. Chopra was born in India in 1946 and obtained his M.D. from the All India Institute of Medical Science in 1968. Shortly thereafter, he came to the United States and completed his residency in internal medicine at a community hospital in Plainfield, New Jersey. He was fellowship-trained in endocrinology at the Lahey Clinic and the University of Virginia Hospital, specializing in neuroendocrinology. After completing his training, he went on to a teaching and research fellowship at the Tufts University School of Medicine while building a successful endocrinological private practice in Boston. In 1981 he became Chief of Staff of the New England Memorial Hospital.

Seeking a more balanced approach to medicine, Dr. Chopra began to look to Eastern philosophies and thus embarked on a quest to integrate the most successful aspects of both Eastern and Western medical traditions. Presently, he has authored over 50 books and released more than 100 audio and video titles which have been translated into 35 languages with over 20 million copies sold worldwide. Dr. Chopra is acknowledged as one of the world's leaders in mind-body medicine. He is currently the CEO and Medical Director of the Chopra Center for Wellbeing, where he advocates for the interconnection between mind and body, promoting meditation and self awareness as primary factors in healing.



BEN-HAIM: Tell me a little bit more about your background. How did you get started in the field of medicine?

DR. CHOPRA: Sure. I read at the age of 14 some really great novels like *Of Human Bondage* by W. Somerset Maugham and I realized, first of all, that this book was about healing and that the protagonist was a physician, as was the author - as were many other great authors and role models I later learned. So I was inspired to go to medical school. I was the editor of my school magazine for a while, like you are, and I graduated from a medical school in India that was run by the Rockefeller Institute, so it was very much like medical schools in the United States. I came to this country in 1970 to a small community hospital in Plainfield, New Jersey where I did my internship in internal medicine. The next year I went to Boston and trained at various hospitals affi-

ated with Harvard Medical School like The Lahey Clinic and the New England Deaconess Hospital. I trained first in internal medicine and was chief resident at the VA hospital in Boston, and afterwards I did a fellowship in endocrinology. I became board certified in internal medicine and endocrinology, and then did another fellowship in neuroendocrinology under Dr. Seymour Reichlen who was, at that time, president of The Endocrine Society. Around this time, in the late 70s early 80s, as a result of my training in neuroendocrinology I became interested in neuropeptides and "the molecules of emotion." Around this time I began to question the validity of the mechanistic, or reductionist, model in which I had been trained. Not that I believed it was invalid, but was it complete? It seemed that all of our medical research was aimed at elucidating the mechanisms of disease in order to interfere



AUSTIN KINNEY, MS1



HOI SANG U, M.D.







HOI SANG U, M.D.



OVERLEAF AND ABOVE: MICHAEL GERMAN, MSIV

with those mechanisms, in order to get rid of the disease. So you have an infection, you need an antibiotic - you have cancer, you need chemotherapy or radiation - you have an ulcer, you need an H2 receptor blocker. Whilst this was quite effective in acute illness, it was very obvious that it did not alter the whole of disease because mechanisms of illness are not origins of illness. Origins of illness have to do much with how we live our lives. It has everything to do with cognition, perception, moods and emotions, social interactions, personal relationships and the environment; in some way they all affect our biology. So I began to look for a more holistic model, looking to various traditions, and started to integrate my own knowledge of biology with my insights into why the host response of illness was very important.

“Love is a very important component of healing ... physicians really have to learn to love their patients - then we can be healers instead of just technicians.”

BEN-HAIM: Did you have Eastern philosophies or influences at all integrated into your own medical school curriculum in India?

DR. CHOPRA: No, because my medical school was run by the Rockefeller Institute in New York. It was basically totally modeled on American medical training. We had exactly the same books and the same multiple choice questions.

BEN-HAIM: You recently said, "Perfect health is more than just the absence of disease." What, to you, is the meaning of health?

DR. CHOPRA: Well, the word "health" and the word "holy" and the word "healing" and the word "wholeness" all mean the same things. To me, "health" is the return of the memory of wholeness. It is the well-being of the environment, the well-being of our social interactions, the well-being of our relationships, the well-being of our physical bodies, the well-being of our emotions, and ultimately the well-being of that domain of awareness that we call our spirit. Therefore, perfect health is a higher state of consciousness in which we make choices that nurture the web of life. We are an ecosystem, which is part of yet another ecosystem. Our organs are ecosystems, our cells our ecosystems, even DNA is an ecosystem because it is not static, it responds to everything - both your internal as well as your external environment; even your thoughts and your feelings, emotions and memories and desires. It is a very dynamic ecosystem.

BEN-HAIM: In being trained in the Western model of medicine, what do you think we are holding back from our pa-

tients; what are we denying our patients?

DR. CHOPRA: We have become superb technicians in this model and not necessarily good healers. We know everything about the human body, and almost nothing about other aspects of being human. We are human beings who are all the time influenced by so many factors: our thoughts, our feelings, our emotions, our habits, our relationships, our environments, the way we interact with the forces of nature. We don't really take into account all of these factors. We look at the human body as a physical machine that has learned to manufacture thoughts. This kind of approach is good in an acute setting: you have pneumonia, you definitely need an antibiotic; if you break your leg, it needs to be fixed. But we do not go into the deeper origins of what is really happening in the patient's life when they come to us with an illness. When patients come to see physicians, they usually have a story to tell, and the average patient doesn't get to tell their story. Within 20 seconds, the patient is interrupted - he says "I have pain," and we answer "So where is the pain?" "What kind of pain is it?" and in a few minutes, a diagnosis is made and a prescription is given, and out the patient goes. I think if we know anything about the connection between our minds and our bodies and our emotions and our consciousness, then many times what happens in the physical body is a metaphor for what is happening in consciousness. That means that there is a story to be told, understood, and re-written - and unless you listen to that whole story you will never, first of all, satisfy the patient. But moreover you may not even get at the origins of the illness. Our bodies are subconscious minds.

BEN-HAIM: Realistically, how can we integrate such a model into the current paradigm?

DR. CHOPRA: Physicians need to give their patients tools to heal themselves. We have a CME accredited course for physicians at the Chopra Center, and when we train physicians, we tell them that next time they see a patient with heartburn, or reflux esophagitis, or angina pectoris or hypertension, while they are giving the prescription to their patients they can also say: "Mondays and Wednesdays I do a class on lifestyle and attitudes and stress management, and I recommend that you come to the class because if you do, you may have some insights which may make it unnecessary for you to take this prescription. In the meantime here it is." Maybe the patient will not need an antihypertensive after they learn stress management techniques, and learn to quiet their mind, and learn to heal their emotions. Or, perhaps, they will use a lower dose of the medication. Many physicians who do this have patients who feel very gratified. On the one hand, they have the opportunity to develop a relationship with their physician. Secondly, there are other patients coming to this class, and they can find a support group there. There are many studies that show that support groups can have a significant impact on patient well-being, and even survival. So if you start to incorporate this into your practice, you will see that only half of the time you are writing prescriptions and doing procedures.

BEN-HAIM: Do you have any other brief pointers that a

medical doctor can integrate into a 15 or 20 minute office visit?

DR. CHOPRA: One should always ask a patient "What do you think caused the illness?" Let them tell their story. We are very dismissive about subjective symptoms for which we have no objective findings...and yet the clue may be in the subjectivity. Allow the patient to tell their story, even if briefly. Ask them what their own insight is into the origin of their illness. Some patients may be having a very difficult divorce, some patients may have just lost their job. Address that problem. When the patient feels that you care, they are also more compliant with your treatments.

BEN-HAIM: Tell me more about your stated goal to "...bridge the technological miracles of the West with the wisdom of the East."

DR. CHOPRA: "The technological miracles of the West;" some are here, and some are still coming. Things like early diagnoses via scanning procedures like MRI, new drugs including "smart drugs," immunomodulators, etc. Basically, pharmaceuticals are being developed that in many ways simulate the body's own self-healing mechanisms. And then there are the new frontiers of medicine with things like cloning and stem cell research. These are amazing technological marvels - in a few years you may be able to coax stem cells to replace bodily organs. Having said that, let's not lose sight of the fact that there are certain things that no drug will be able to do. Our bodies operate like symphonies and they respond to a deeper intelligence - even the body's biochemical and self-repair mechanisms respond to a deeper intelligence. For example, if you are feeling "intoxicated" by the experience of love - an internally induced state of euphoria - your body is simultaneously making opiates, serotonin, dopamine and oxytocin. Oxytocin is a hormone that is produced during emotional bonding - of course we know its biological activity during lactation and during delivery - but what people don't know is that oxytocin is a pleasure hormone that goes up during sexual excitement and is an immunomodulator. Dopamine and serotonin are also immunomodulators, as are opiates. There is no drug that can simultaneously cause the synchronistic, symphonic orchestration of these chemicals on the internal state - which is really a state that goes deep to the level of your soul. Falling in love is an act of the soul, of our spirit. The body behaves like a symphony. Homeostasis is complex - it is not just the regulation of feedback loops, but rather the regulation of the feedback loops and how they are synchronized with each other. We have thousands of feedback loops from body temperature regulation to blood sugar to hormones to electrolytes - and no drug will be able to orchestrate that symphony, that synchronization, of feedback loops that creates homeostasis. And, ultimately, self repair is homeostasis and self-regulation and that happens when people experience a bond of love, or a bond of compassion or empathy. Even in children; their homeostatic feedback loops are totally dependent on the bonds that they have with their parents. I think that the final message here is that love is a very important component of healing and that physicians really have to learn to love their patients - then we can be healers

instead of just technicians.

BEN-HAIM: What do you think is the major factor holding the traditional, allopathic medical doctor back from incorporating alternative forms of medicine into their practice?

DR. CHOPRA: I hate to say this, but it involves the huge pharmaceutical industrial complex and the billions of dollars that go into that. Our medical education coincides with, and is often supported by that industry; our medical journals are full of ads. But I think even that is going to change because pharmaceutical companies are realizing that unless they create a more holistic model they will alienate part of the general public. So, it is profitable for their industry. Now, having said all that, don't think I am against pharmaceuticals. I think they are extremely helpful, but we must use them selectively. Otherwise we have the modern epidemics of antibiotic resistant infections, nosocomial infections, and drug addiction to prescription medicines. The number one cause of drug addiction in the world is not street drugs, but medical prescriptions. And we have a large proportion of patients in the hospital suffering from iatrogenic disease. I think that we have to understand the benefits of the traditional allopathic model, and recognize that more innovations are on the way with all of the new technology coming from research - but we must not lose sight of the fact that the human body is extremely intelligent and has evolved over millions of years of evolutionary time to actually repair itself. And we must look at all the things that help us to facilitate those self repair mechanisms - whether it is stress management or music therapy, the healing power of touch, along with the new understanding of cognition therapy and behavior modification as well as the use of sensory modulation - how sound, sight, touch, taste and smell can influence our body's own self-repair mechanisms.

BEN-HAIM: What do you believe to be the role of herbal medicine in this model?

DR. CHOPRA: There are important herbal medicines that, in fact, work. They work through facilitating self-repair mechanisms, and they modulate the stress response to the body, and some have pharmaceutical effects as well - and some can be toxic, as well. I think herbs have to be studied as diligently as you would any other drug. They are useful in that, if you can get away with giving valerian instead of a sleeping pill, you are much better off. Some of these herbs can have a wonderful effect and sometimes you just need a little bit of that - you don't need a nuclear bomb to kill a fly, you need a fly-swatter.

BEN-HAIM: What advice would you give to medical students in allopathic medical schools today?

DR. CHOPRA: First, I would say "Why did you go to medical school....Why do you want to be a doctor?" If your motivation is to help your patients heal themselves, and comes from a level of compassion - than this is a very noble field. Have some reverence for the human spirit which is ancient and wise, and with that attitude of reverence come into the exam room or the operating room, and you will then truly see how magnificent this profession is.

HC

ASPARTATE'S STING

An Extended Sonnet

Ach, fie! Ye chemists that will teach earth's life
And train disciples that essay the same,
Make few attempts that lessen learners' strife
As ye eschew all systematic name.
Pray meditate: aspartic acid scan.
The R-chain in her adds acidic tint.
Yet this diacid's naming hardly can
Dispense a single diagramic hint.
Why shan't we tally C's? with digits sign
The acid pair which terminates the chain?
Then indicate th' amine which leaves the line
There at the link e'er rightly marked as "twain"?*
As if the sin were nary passing grave,
The chemists feel right lengthy is the wait
In writing; hence they divers letters shave
And all the acids' names remasticate.
When presently these chaps "aspartic" see
Will they write "asp," as in the little snake—
Might even script the single letter "D"
When they their acids chain and peptides make.
Whereas this is the case, I scarcely grasp—
I am hard pressed, the answers failing me—
What acids have in sim'lar with an asp?
Where in its name ye sight the letter "D"?
Yea, hence the chemist's "asp" may ver'ly sting
Its learners with a "D" in every thing.

This poem uses only those letters which are abbreviations for single amino acids. The letters B, J, O, U, X, and Z therefore do not appear anywhere in the following piece.

**Twain: "two." The systematic name for aspartic acid is 2-aminobutanedioic acid.*

-- Steven Ngai, MSII



BRIAN LICHTENSTEIN, MSI

THE END OF US

"Alas! They had been friends in youth;
But whispering tongues can poison truth;
And constancy lives in realms above;
And life is thorny; and youth is vain;
And to be wroth with one we love,
Doth work like madness in the brain."

-- *Christabel*, Samuel Taylor Coleridge

There was to be no great whites.

Only a scatter of piranhas
At the seams insidiously feeding.

And time and space proved friends in guise
Snaking sly between you and I
Haply absences excuse and fibs supply
'Till I am earth

And you are sky.

-- Winnie Wu, MSII

RUNNING IN PLACE

BY JAMES HENRY, MS1

Perhaps it is poetic justice that I have such trouble describing Annalise. When we first met, she was testing out adjectives-boo face, poor face, boo hoo face - yet none of them seemed to fit. Vascular dementia had erased the word "sad" from Annalise's vocabulary, and I stood in silence as she floundered for an alternative. Something prevented me from finishing her sentence. Although I had been miming the role of a psychiatrist for weeks, it was not diagnostic objectivity that kept me from reviving our stalled conversation. As her frustration filled the room, a far more selfish impulse held my tongue: curiosity. I wanted to hear the vocabulary that Annalise's mind, out of desperation, would invent.

It is not so difficult to understand why the mentally ill, throughout Western history, have been heralded as visionaries, prophets, and poets. If divine beings do not answer humans plainly, perhaps divine truths hide in ambiguous speech. Or, as Annalise taught me during our first exchange, even the slightest hope for profundity can have a dramatic effect on why, and to what, we listen. I was enchanted by dysfunction, and regardless of the patient's distress, I did not want to repair it. Is there no place, then, for lyricism in the Psychiatric Unit? Is aphasia never beautiful? Should novel adjectives just be signs of dementia? To the extent that linguistic analysis interferes with patient care, it seems that these are the only responsible conclusions. Love the poet, hate the poem.

Like most of my favorite paradigms, this one worked perfectly until it was proven wrong. One afternoon in the

hospital, Annalise was feeling restless and started yelling, "I want to run away." When the attending psychiatrist asked, "Where would you run to?" Annalise paused for a moment and then replied, "Where I am." Again I found myself speechless, but this time, not because I was waiting for something more. Rather, I was floored by the poignancy of Annalise's comment. This was a woman displaced from herself, wanting to run to her "I". For Annalise, quite literally, life was elsewhere. "Where I am" was more than just the wry wink of a damaged brain; the phrase exemplified communication at its purest. It let me witness the world, for a single second, through Annalise's eyes.

Since that afternoon, I have teased out many other meanings of "Where I am." Maybe Annalise meant that she sought help in the hospital, but that it was not enough. Maybe she was trying to ask, "Where am I?" Maybe there are inexhaustible interpretations, and despite Annalise's penetrating words, we never made contact at all? To me she has become J. Alfred Prufrock, hiding behind language, repeating, "That is not what I meant, at all."

I will never be able to pin down Annalise's true intention. In the end, all I really know is that she tried to say something. That, it seems, is the root of our connection. I see myself in Annalise, someone trying to bend language to do an impos-

sible task - to communicate experience. My feeling of empathy, as Annalise spoke, was nothing more than the birth of an analogy. I wish I could find a better way to say it, but my tongue is still stumbling, in concentric knots, toward the perfect words.



JOSH BRESLOW

HC

THE PRAYER BEADS

FOR RANIAUNTY
NEHA JAIN, MSIV

It was crowded in the CT scanner area. Three generations in one room, all with worried expressions mirroring each other. Her liver was failing and they needed to find out if the cancer had spread. She appeared somewhat detached, despite a sense of foreboding - perhaps the intuition that people who are dying seem to have. The prayer beads moved restlessly through her fingers. Her daughter and mother were hurrying to undress her and take away all of the valuables. Nobody paid attention to the dark saffron beads as they were unceremoniously stuffed into the duffel bag.

And when she died, nobody could find them. They had been her favorite beads, a precious memento. The whole house was turned upside down. It was as if she had carried them away with her into the afterlife. Their absence was a small disappointment - yet another to accept as they faced the years when she would not be present at graduations, weddings, or the birth of her grandchildren. She had been the glue holding the family together, and without her, the future seemed so uncertain, their lives so meaningless.

Her husband wanted to fulfill the one wish that he knew she had never asked him for. It was one of several cosmic secrets she had carried in her heart. She had been a blessed



PHOTOS: LISA HOANG, MSII

soul, one of those rare spirits full of compassion and optimism. Her ability to believe in the best in every person she met had brought a lifetime of happiness to her and those close to her. He decided to visit her spiritual sanctuary, the small ashram in a beach town in India that had given her peace and strength throughout the years. She had always wanted to visit, with him at her side, but was willing to wait until the desire came from him. And now, time had run out. He went there with his children, hoping to find absolution.

As they sat watching the sunset, he reached over to get the camera from the duffel bag that had accompanied him like a faithful companion through several towns over the last week. And that's when he found them. How could that be? He had looked, Sameera had looked, Ajay had looked, over and over, into that very same pocket of the very same bag. He had packed all his belongings into the bag just that morning! And yet, lying there innocently, were the beads that they had all somehow missed. Then, he laughed. It was her little message to him. She had come with them on this trip after all.

HC

GIVING

Of all the things discovered during
The years God's given me that I have lived
Prime is that for life's hurts and ills, curing
For much comes when to each other we give.

Giving can be great, or may be small.
What matters is one gives of oneself.
The act of giving will leave riches all
Who give out, as the act itself creates its own wealth.

I speak of this from experience of my own.
Blessed was I with a mother who by sharing,
Taught by example, so by her I was shown
That the world and oneself gains from such caring.

So my experience shows me each day.
So I hope others can find in their turn.
Generosity of hand and heart is the way
To better the world in this life I have learned.

Sandra Frank, Traumatic Brain Injury Survivor



PHOTOS: JULIE TSE, MSI

ACCEPTANCE

There is a peace in acceptance,
Surpassing any other I know.
It comes when one lays down defenses
Used fighting against that which is—seeing it is so.

There is a joy in the serenity
That with this acceptance comes.
My regrets' effect had so worn me
Down with fear as to leave me numb.

Acceptance of change means then
The ability to move on past
What was starting the process that sends
One to a new happiness that can last.

This happiness will be different from that before.
But from my acceptance it is to be found.
So as I find what life has in store,
All is eased as acceptance brings me 'round.

Sandra Frank, Traumatic Brain Injury Survivor



MICHAEL GERMAN, MSIV



LISA HOANG, MSII

WHIP IT WITH A WHIPPLE

LAUREL FOX, MSIII

She had been feeling odd for a while. Too tired for the usual activities, too exhausted to travel to watch all of her son's football games at the local high school. She was simply exhausted. She'd noticed lately how she had lost weight, but as she had always been a slender woman, it hardly seemed a gift of the gods to become thinner.

Even her sister had mentioned that she should try to gain some weight. "I'd try," she thought, "if only I had an appetite to help me." So, on it went for a time, thinking it was simply 'the change,' she was grateful to be free of the hot flashes her older sister had been downed by. Tired. I can handle being tired.



NIC KANAAN, MSII

At the next appointment with her primary care physician, she mentioned how strange the symptoms seemed, and he was more concerned than she had anticipated. He wanted to run some blood tests. "Nothing serious," he promised. But she continued to lose weight and it became even more difficult eat certain foods. The tests came back with something amiss, but the doctor was unable to clearly explain the findings to her.

He recommended a few more tests. Something just wasn't right and a few more tests would clarify what this was. Wearing only a hospital gown, she submitted herself to the MRI and CT scans on the cold table of the imaging room.

She and her husband decided not to tell their son. This was nothing after all, and there was no need to get worked up about nothing. How embarrassing to tell your teenage son that his mom was going through 'the change' and having problems! She could not bring herself to do it. She accepted his anger at a missed game or two and planned to make it up to him later. Until this situation was settled, she had to be careful how she prioritized her day. Dealing with whatever this was had to be a bit higher on her list than spending a few more hours on the stands worrying that he might get hurt as helmets cracked against each other.

When the doctor called the next day, his voice sounded more urgent than in the past. "There is a problem. It looks like your pancreas is not quite doing its job."

"Does that mean I am diabetic?" she asked.

"Not quite, but it should come out. I have made an appointment for you."

On Wednesday, she met the surgeon. She had been told it was imperative she be seen at his office as soon as possible. There, behind closed doors, she was told she had pancreatic cancer.

It was difficult for her not to suspend her disbelief. In her fifty years, she had never thought it possible to be so sick so young! She was experiencing pain and weight loss but she could still get up and walk and eat. But the doctor said she was dying. A *Whipple*, as it was called, could save her life. It was made clear that this was her hope.

"I always thought you needed a pancreas," her husband commented with concern.

"Of course, it is better that way," the doctor joked. Then with a serious voice he explained that sometimes it is important to take it out.

The Internet sites she consulted explained a lot about pancreatic cancer. The symptoms -- the rapid weight loss, the pain in the middle of the back that never seemed to go away -- she had them all. Her husband watched her as she sat with a pad of paper and wrote out her questions. She slowly read through them. "What are the possible complications? How long will I be in the hospital? Are there dietary requirements?" When she looked down at her paper and said nothing, his heart broke and he struggled to prevent tears. He knew that as much as he loved her, he could not fully fathom her experience.

The doctor looked at the paper. "Ah, she asks an important question. What is the mortality rate of the surgery?"

Well, either 100% or 0%. You either live or die. Who cares what the statistics say? Can you die 20%? No. It is either 100% or 0%. Next question."

And that was it. No more talk of death. Thirty years together and they could read each other. When their eyes met, the husband nodded his head. "Okay," she said, "I'll do it."

That night, they lay in each other's arms. Quietly, he stroked her hair. He longed to tell her that everything would be fine, but he had no idea if everything would be. Once she was asleep, he slipped into the office. In the dark he found himself online reading about the pancreas, about cancer and about this *Whipple*, which was going to make everything better. It was the first time he allowed himself to cry. The line drawing showed the removal of the pancreas, then some of the intestine -- it seemed like more than half of the abdomen would be removed! Suddenly her illness was too real to him. He crept back to bed and held her. He did not sleep that night, just held on.

The next day, they decided to talk to the family. They

GETTING MARRIED

We pierce the night with a scream
To decry the naïve notion
That even a poet's words
Could define these emotions
Our eyes lock, and our eager throats
Sing a new key
To defy the silent chains of gravity
We began the ride
Strapped in and apprehensive
But the loops and corkscrews
The sudden lows announced
By blissful highs
Twisted our sense of logic
Until nervous sighs gave way to laughter
And swerving momentum
Propelled us faster
When I glance at you I finally know
How this wild world can celebrate
Such a rollercoaster
In our dancing smiles, it shows

The long wait for the weightless
Is over.

-- Rishi Doshi, MSIV

began with the sister. When his wife's voice began to crack and her eyes began to water, the husband interrupted her, "I read about the procedure," he said. She looked up at him, surprised and grateful, as he explained how it had revolutionized the treatment of this cancer. The sister struggled to focus on the words but was comforted by the confidence they had in the doctor.

They never clearly told the son what was going on with his mother. After keeping him in the dark for so long, how could they possibly open with, "Mom has cancer. She needs surgery." It was too much. So when he asked about what was going on, she brushed it aside. "It's just a little procedure, no big deal." She assumed there would be time after the surgery to explain it all.

The son was more intuitive than they had recognized. He had used the computer, seen the searches and watched his mother gradually whither away. He had denied it himself, just as she had. But with all the denial, he did not have the heart to break the paper-thin calm in the house. He played the game. He was a star.

Monday was the day of the surgery. On the way to the hospital, she sat in the back seat of the car with her sister. The husband kept catching himself looking in the rearview mirror. He thought, "So young, so beautiful...this cannot be real!" But as she changed into the gown in the hospital, he knew it was their reality. He struggled to be supportive, to be a source of strength for his bride. He held her hand as they waited for her to be wheeled back. When he realized

that he was going to lose his composure, he relinquished his seat to the sister.

They sat quietly and prayed. With a rosary, her sister made the sign of the cross and quietly chanted, "To God in Heaven, we pray that You will be with her through this day, that Your wisdom will be in the hands of the doctors, that Your benevolence fall upon us."

The husband watched as several people in scrubs began to surround the bed. It was time. He was grateful she was falling asleep from the medication. He turned aside. He could not watch her leave the room. He was crying again.

Having been told it would take seven hours, the sister and the husband found a quiet corner of the hospital. While the sister sat on the couch, the husband paced. Finally, she beckoned to him. They sat next to each other. No words needed to be exchanged. All of a sudden, he crumpled into her arms.

In the operating room, the doctors began to cut her abdomen open, following the natural line of rib cage, from one end to another. Almost as soon as she was open, the face of the surgeon fell. Hard as a rock, it was everywhere. When he said that he had never seen anything like it, the whole room knew where the operation was headed. As they inspected each crevice of the abdomen, it became apparent that speckles of the cancer were as numerous as the stars in the sky. White freckles on the liver, on the omentum, on the stomach.

Saved from the barrage was the pancreas. Half joking,



KEVIN MCELROY, MSI

the surgeon asked if they had the right patient. It was the stomach that was riddled with disease. Everything grew from there. There would be no Whipple. The medical student in the room, hoping naively that she misunderstood, asked what the next step was.

"She'll go to the ICU."

"OK, but... what about after that?"

"She will have chemo, and that will help. If she lives two months, we will have done well."

The student reflected on the patient she had seen in the clinic. Meekly, the woman had asked her questions while walking in and out on her own power, fighting for any chance. She had become thinner but never looked sick; at fifty, she seemed young and vibrant. No longer. Now she was a shell of a person, an object laid open on a table - a specimen. A specimen sentenced to a painful death.

After two hours, the doctor met with the husband. Having expected the surgery to last seven hours, he checked his watch, wiped his eyes and stood. He thought that seeing the surgeon meant a miracle had happened. All was well... a mistake had been made! "I knew it would be alright," he thought, momentarily relieved

The face of the surgeon was more forlorn, without a hint of a joke or a crack of a smile.

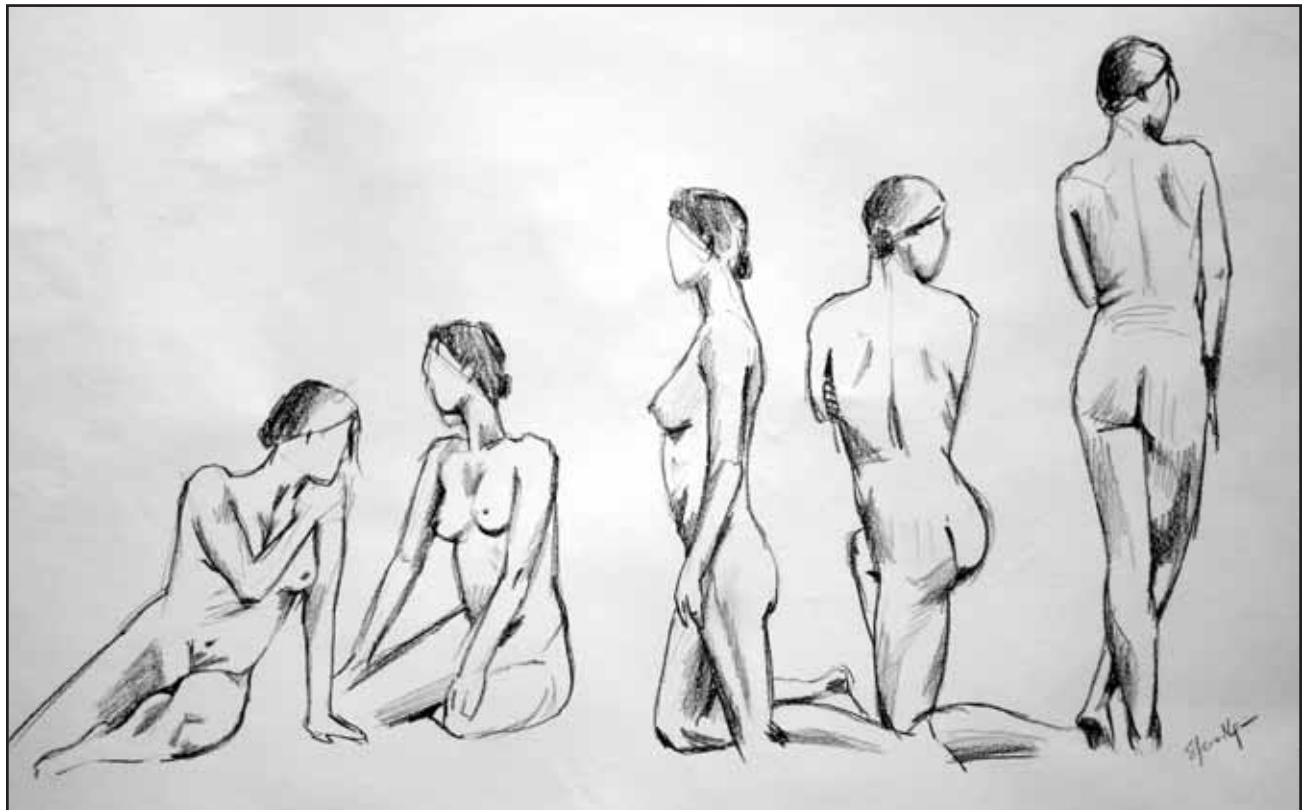
"I'm sorry," he began.

LOS ANGELES FREEWAY

Smooth curves slicing through air,
Silently, mutedly,
Space demarcated into airy domains.
Highways arc,
Like the forearm, nape, back and soles of dancers
Scimitar of flesh;
Free, bare figure,
Tinted nude under rising sun,
Stretching its arms,
Opening its legs-
Elbows, knees ebony white beneath tightly stretched skin-
To the city
Bed hungry
In fluttering gauze of
Morning fog.

-- Winnie Wu, MSII

HC



STEVEN NGAI, MSII

大将のもらい泣き
(Sympathy Tears for the General)

桜花天気ですが、
中では雨がポツポツ降る。
今日は空気中に不安が、
なぜありますか。

It may be cherry blossom weather,
but inside it is pouring.
Why is there uneasiness
in the air today?

歩いて、一人、考えて、
悪いことはなぜ同僚に
起こりますか。

Walking alone, lost in thought.
Why do bad things,
happen to good people?

覚えています。
あの日、電話をくれた時。
私に尋ねてきました。
ギラン・バレー症候群は何ですか？

I can remember
that time you called.
You had asked me
what is Guillan-Barré?

見える、あの建物
古い、この病院は
腐食している。

I can see the building
it's old, this hospital
corroding away.

白い壁、
色が欠けています。
多くの看護婦、
急いでいます。
非常時は何ですか？

White walls,
devoid of color.
So many nurses,
rushing around.
What is the emergency?

白い部屋、
テーブルの上では、
それは座っています。
一輪の花、
花瓶の中で、垂れ下がる。

A white room,
on top of the table,
it sits.
A single flower,
drooping in a vase.

そして、
私は見ます。
私たちの大将です。
担架で横たえる。

And then,
I see it.
It's our General
laying in that gurney.

いたる所にチューブ
助けたい,でも
一年生には何ができるの?
医者でさえあれば。。。

あなたが泣いているのを見て、
目で痛みを見ることができる。
もらい泣きして、
涙がポロポロ流れる。
問題ないふりをして、
同情しているのはどっち?

筋肉を精一杯努力して
指を動かすだけのために
がんばります;
絶対あきらめない。

突然、剣道はそれ以上ととも、
重要に思えなくなる。。。
しかし恐らく、
それは同じです:

もし頑張れば、
絶対負けない。
中では雨が降りますが
桜花天気はあなたを手招きします。

回復して下さい

Tubes everywhere,
I want to help,
but what can a first-year do?
If only I was a doctor...

I can see you cry,
and see the pain in your eyes.
Sympathy tears come,
streaming down my face.
You pretend that there isn't a problem,
so who is the one being sympathetic now?

Straining your muscles,
to only move a finger,
doing your best;
Never giving in.

Suddenly, kendo seems to have
lost its importance ...
but perhaps,
it is the same:

If you just try your hardest,
you cannot be defeated.
For even though it might be raining inside,
the cherry blossom weather beckons you.

Get Well Soon.

--Mark Schultzel, MSII
and Ann Tamura

THE LAST PAGE

THE HOME STRETCH

RISHI DOSHI, MSIV

Slow and steady only won the race
Because of the hare's arrogant mistakes

I wake from slumber, shed halfshell shelter
And feel the fur bristle

Three laps remain
Pistol fire echoes in memory

When damp flippers fail to finish
Trample hubris and debris

Upon a tortoise's gravel grave
Let my feet run free

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