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THE ARENA

Student American Medical Association

Vol. II No. 2
February 1966

Boston University School of Medicine

CHRISTMAS ASSEMBLY

Several BUSM students had their holiday joy increased above normal due to the efforts of each student toward the goal of academic excellence. These students, having put forth an extra effort, reaped the fruits of their labors in a special way at the annual Christmas convocation and prize day exercises.

Dr. Franklin Ebaugh presided over the ceremonies and added his personal wish that each student benefit in spirit as well as in academic success throughout the holiday season and the new year. A description of the prizes, their meaning, and the recipients follows.

The Alumni Prizes are awarded to three students of the second, third, and fourth year classes. These students are selected by the faculty from the top ten per cent of the class on the basis of conscientiousness, leadership, professional behavior, and any other criteria which the faculty member feels is important, e.g. improvement. Receiving this award from the fourth year class are: Paul Goldenfarb, Ralph Meyrowitz, Herbert Rothman; from the third year are: Peter Glassman, Arthur Schiff, Stuart Siegel; from the second year class: Lyman Davenport, Leon Goldman, Michael Kane.

Peter Sherline received the prize of the BUSM class of 1930 for earning the highest average in the first year.

The Roche Award, presented to the individual with the highest mark on Part I of the National Boards in June, 1965, consists of a watch and a plaque. Ethan Shevach received this prize.

For the third consecutive year, the Pfizer Award for general excellence of performance in medical school went to Peter Deckers.

The Student American Medical Association Scholarship, originated and sponsored by the Boston University chapter of SAMA, is awarded to a member of the third year class for the specific purpose of aiding the student to spend part of his fourth year elective time abroad. The first recipient of this award is Peter Lodewick who is looking forward to spending some time in England.

NATIONAL BOARDS

"National Boards" are a set of three examinations placed at various points in one's medical education; the passage of which can earn the new doctor a license to practice in many states, thus eliminating the individual state exams. The juniors and seniors are intimately familiar with Part I which is given at the end of the 2nd year, but for the freshmen and sophomores, these exams stand as a cloud-enshrouded mountain about which little is known and yet must be conquered before one can continue on to the challenges of the third and fourth years. This article is intended to present some aspects of the National Boards which are both of interest and vital concern to the medical student.

Part I is a comprehensive examination in the basic sciences consisting of six separate tests in anatomy, microbiology, biochemistry, pathology, pharmacology, and physiology, which will be given June 21-22, 1966. Part II is a

(con't. on p. 6)

Observer, Junior
"The Nurse That Roared"

Any reader whose wince is greater than 4+ at the last line of this epic is bravely encouraged to send his opinion and ideas for a better conclusion to the author in Boston. No duplicate prizes; judges decision is final.

Tom Allworthy stood in front of a mirror in the House Officers' Sanitary Salon. This sumptuous facility, built under a grant from the Great Society people, was scientifically designed to combine inspiration with satisfaction. Soothing indirect lighting bathed the walls upon which were hung witicisms and other sayings of such great men of medicine as Benjamin Watercloset. At the moment, Tom was evidently lost in reflection as he studied his likeness-as well he might, since he was a striking young man. At the moment, he was striking various poses, taking advantage of a moment of privacy to determine how his stethoscope should be worn in order to complement his appearance. Draped about the neck in British style? No, some one might think him a socialist. Hung in front of his club tie with the eartips clutching his neck at the level of the bifurcation of the common carotid? Too common. Still undecided, he shelved the matter and left the washroom to attend to matters yet more urgent. He wanted his social arrangements secure for the weekend before getting involved in ward work.

He approached the nurses station stealthily psoas to startle the pretty young thing who toiled there. (We will resist asking for whom the belle toiled) The thing, Miss Wanda Lust, was quite accustomed to what Dr. Allworthy considered his irresistably charming ways, and so effectively inhibited her arousal response as she turned to face him. As their optic axes approximated apposition, he bared his orthodontic successes and popped a question.

"Saturday night?" he breathed.

"What in particular?" she purred.

"I thought perhaps some dinner and dancing at that Latin night club, the Fascia Lata. Then we might head back to

(con't. on p.7)

Dialogue

THE PAPER

Physicians, graduated in this country, receive doctorates, certificates as to their academic sophistication. "Doctors" are required to continue their education by examination of the "Literature". M.D.'s today, in high numbers, make more or less literate contributions to the "Literature". From such concerns, there has grown, at BUSM, "The Paper".

The third year paper represents our only major creative effort as students. This exercise stands in the midst of a largely didactic and pragmatic curriculum, peppered by scattered seminars and reports.

The students find the paper controversial. Narrow topics. Conflicts with time needed for clinical subjects. Advisors with insufficient time for working with the student. ... A great deal of work for not very much return. I think that glancing through such complaints, one sees a central criticism of this exercise, the lack of relevance; in essence, the student fails to see 1) how writing such a lengthy thesis will help make him into a good physician, 2) what importance the paper has in his formal education, i. e. how does it affect his standing in medical school.

As a student who is oriented toward academic and research medicine, this paper will clearly be relevant to my future medical career. I agree, however, that its role in my preparation to be a physician is unclear.

Perhaps the most important defect is in the adviser system. The adviser,

(con't. on p. 7)

A Brief Conversation with Trichenella
Spiralis
In Memoriam: January 20, 1966

"No, no," I cried with clenched fist,

"From this peregrination you must desist"

But scarcely pausing to turn his head,

"I'm afraid I'll have to encyst," he said

Candida A., I Love You
a chapter from the forthcoming
bestseller.

Med. Student by Doctor X

It was one of those horribly premature mornings that make one wonder if he wouldn't rather be a forest ranger. I groped my way to the stairs and quite suddenly found myself in the living room. As the room spun slowly into view, I noticed a small white round box perched on the mantle just above the stocking. "Well, X," I said to myself, "there's a small white round box perched on your mantle." I strained my memory - and it is a strain - but try as I might I couldn't recall any such box in my sordid past. I sat down on the floor and tried to imagine what might be inside the box. Perhaps, I suggested to myself, a good fairy has come down the chimney (it was still quite early in the morning) or maybe even a bad fairy. (I have no prejudice) and left me some wondrous gift to change the course of my life. It hadn't changed a bit since last Thursday and I was beginning to get restless. But what could be in such a small round box? A very large pearl? A giant ruby? A pituitary gland? I got to my feet and wandered across the room. Greedily clutching the box in my fingers with the avaricious smile of a Pandora I tore off the lid and then...I remembered.

Somewhat to my surprise I found the bus stop just where it had been yesterday, and clutching my battered notebook in one hand and the white box in the other, after trying to get onto three school buses, I finally found a bus that would take me. It was crowded, but there was one seat left by a kindly little old lady. Feigning sleep - not much of a deception - I was startled to hear "aren't you afraid it will melt?" resounding in my ear. I opened my eyes slowly desperately hoping that I wouldn't be on a crowded bus going to school with a little white box in my hand. I was. Praying there would be no response I quietly murmured "What?" "Aren't you afraid it will melt?" It had sounded like that the first time. When I thought it over I had to admit it was a possibility I hadn't considered.

(con't. on p. 9)

SAMA has received the following letters from Boston City Hospital concerning the Christmas Party held on Dec. 23, 1965. We hope this Christmas Party will become a tradition at BUSM.

Dear Mr. Levine:

We appreciate very much your interest in our children at the Boston City Hospital. Your generosity during the holiday season was much appreciated by staff and patients alike.

We like to think of having these continued associations in our mutual concern.

Sincerely yours,

Leon R. Lezer, M.D.

Deputy Commissioner-Hospital Services

Dear Paul,

Thank you so much for your Christmas Party to our children. As far as they were concerned it was a great success, and they hope you feel that way also.

We are most grateful for the time and effort and thoughtfulness the group showed by doing this. We hope you all have a most happy and successful New Year.

Sincerely,

Janet A. Thackeray
Pediatric Supervisor

To The Editor:

I wish to take this opportunity to personally thank all those members of the faculty and student body who were instrumental in making the Christmas Toy Dance and Christmas Party for the children at Boston City and Children's Hospitals a reality. I also want to express my sincere gratitude to Dean Franklin Ebaugh for all his time and effort which helped make these projects successful.

This program was unique in the Boston area and I am proud that Boston University and the Student American Medical Association were the first to initiate it. It might interest you to know that nearly 100 toys were donated by the students

(con't. on p. 8)

WORDS OF ONE SYLLABLE

She is as a fawn,
Desirous of the morn.
Her preserve radiates, her dreams unfold;
The sorrows hidden, the joys untold.

She waits impatiently for me
to come;
But I am here,
but I am dumb.
She sees me not, for she is blind,
And yet she knows me in her mind.

I see, for her, the dove;
She speaks, to me, of love.
We see, we speak, we are
together one.
For ever thus, No! Never,
to be undone.

Harold M. Ginzburg

 DR. WILLIAM MC NARY

Boating, including boat-building, and fishing are among the many sports enjoyed by Dr. William F. McNary, Jr. of the department of anatomy. Less active pastimes in which Dr. McNary indulges are cooking special dishes and reading of all types of literature besides the wealth of journals, textbooks, and papers continually published in his field of anatomy and electron microscopy.

Dr. McNary and his wife, the former Jean Willson of Bellville, Ohio, live in Attleboro, Massachusetts. They have two children, Judy, 4, and Scott, 5. In Attleboro on Saturday and Sunday afternoons in the fall, Dr. McNary is the arm-chair quarterback for some of his favorite college and professional football teams. In the summer, however, the scene shifts to Toussit, Rhode Island, where the McNarys have a summer home. This brings sailing, boating and ocean fishing out of mothballs and makes the summer heat bearable.

Dr. McNary was graduated from Tufts University and received his Ph.D. from Boston University. He served with the United States Army in the Infantry and trained with the Special Forces.

Last fall many students attended a

talk given by Dr. McNary in which he discussed some of his past work with lasers. Presently, Dr. McNary's responsibilities include anatomy instruction for the freshmen, research on the lung using the electron microscope, and directing some of the plans for the education building to be constructed under the building program. He is a member of several professional societies. He serves as a member of several medical school committees. Dr. McNary's office was very busy last spring handling student applications for a summer research fellowship. For a few days in late June Dr. McNary is busy supervising the National Board exams.

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 SAMA SCHOLARSHIP AWARDED

The first annual European Study Grant was awarded by the Boston University Chapter of the Student American Medical Association to Peter Alan Lodewick of the Class of 1967. Mr. Lodewick will spend a part of his fourth year elective time in London and will use the SAMA scholarship to help finance his trip.

The funds for the Grant were obtained through various SAMA functions and from a \$200.00 donation from Dean Ebaugh. Recently, however, Gerald Healy, SAMA President, has had a series of discussions with President Claude Welch, M.D., of the Massachusetts Medical Society who has informed Mr. Healy that the Society will donate \$200.00 to this year's fund at its next annual meeting this month. Dr. Welch also indicated that his Society

(con't. on p. 5)

SAMA SCHOLARSHIP com't, from p. 4

was giving serious consideration to fully supporting the project in the years to come in conjunction with SAMA.

The grant is completely administrated by students which is its most unique feature. A seven man committee consisting of the SAMA chapter president, the president of the Student Council, and five other members will annually select the student in the upcoming fourth year class they feel most qualified to receive the award. Already this project has gained national attention and many SAMA chapters throughout the country have decided to incorporate it as part of their respective programs.

Gerald Healy

THE APATHY SYNDROME

Membership attendance at the last general meeting (Wednesday, Feb. 9th) of the B. U. Chapter of the Student American Medical Association was, to put it mildly, TERRIBLE!!! Not only has the attendance been poor (only 6 members out of over 100 showed up on Wednesday) but membership participation in SAMA projects and events has been extremely disappointing.

Why don't the members participate?

1) Is it the hour? The meetings are scheduled for 1:00 p.m. on Wednesdays, since both the Freshman and Sophomores are finished with class by this time and many Juniors are also free. Last year meetings were held at 5 o'clock after a long, hard day when everyone was tired and hungry, with the imminent prospect of missing a delicious City Hospital dinner or getting home an hour later. We thought that Wed. afternoons would constitute a better time than any evenings but we won't know unless someone says something.

2) Is notice of the meetings poor? A notice is placed on the SAMA and all class bulletin boards and announcements are placed on the blackboards the week of the meeting. Don't you look at your bulletin boards?

3) Is SAMA a do-nothing organization? Not any more, it isn't. This year has seen an improved + expanded ARENA, the

first successful Christmas Dance, the first TOY PARTY sponsored by a medical student group in the New England area, and an entirely student-run Scholarship. In addition there is the First Year Facts, and Coffee and Dough-nuts for the new first year students on Registration day. The BU chapter is considered one of the most active chapters in the entire country, but all the work is being done by a handful of students, the rest being content to lean back and reap the harvest of their colleagues efforts. In past years, when SAMA was a nonentity at BU, it had more participation than now when it is making a significant and positive contribution to both you and the medical school.

Perhaps you, the Student Body and the members of BU-SAMA, do not understand the guiding principle of our organization and it might be beneficial to now state, or more correctly restate, it here. The BU chapter of SAMA is an integral part of the Boston University Medical Center and is working to improve, where possible, all facets of this community. The Medical student is a member of a series of concentric communities: the medical school within the medical center within the South End. Granted that his primary responsibility is to his studies, but he should not and cannot lock himself in a closet with a pile of mighty tomes and make believe he is an IBM computer. He owes a responsibility to give to the medical school in addition to just taking; he owes a responsibility to those who worked to improve his education to work to improve the education of those who will follow him; he owes a responsibility to himself to relax a little and at the same time, not waste his time which is so short and valuable; and he owes a responsibility to the community which is training him, by supplying his first patients to both learn on and make mistakes on. Any of these areas is far too large for any one individual to tackle, no matter how ambitious, but acting together we can meet all these responsibilities and make many positive contributions to Boston University School of Medicine and this is the goal of SAMA.

Many students have told me how they look forward to the ARENA, that they

(con't. on p. 6)

were disappointed when the January issue never materialized (no articles and besides, the editors have to study some time, too) and yet only a handful of students ever contribute articles. We have repeatedly asked for serious articles, articles questioning the value of some lecture or aspect of our education or praising another, humorous articles, poetry, and puzzles. Surely when you were an undergraduate, you learned to express your thoughts in complete sentences. And yet, the vast majority of the medical students are quite content to sit in their own little shells, take in any choice morsels that might be offered to them, but shy away from anything which requires even a minimal effort on their part - in simple terms, they are selfish.

Many SAMA members have complained about not receiving their copies of the NEW PHYSICIAN, the journal of the national parent organization. At this last meeting we were going to find out exactly who hasn't been receiving their NEW PHYSICIAN and send in a complete list with addresses to the national organization. Apparently, it is easier to complain than to expend a little effort to come to a meeting when such complaints can properly be brought up and action taken to rectify them. Don't expect the officers to go to each member and personally ask him if he has been receiving his NEW PHYSICIAN, if you are not interested enough to come to a meeting or participate in the Dance, Toy party or contribute to the Arena, there is no reason for us to go out of our way to do anything for you.

Unfortunately, this problem is not unique to SAMA, EVERY student organization at BUSM is held together by a handful of students, and apparently, this same problem afflicts every other SAMA organization across the country considering our chapter is "one of the most active". There is no reason why we have to excel in apathy and lethargy - think of how much has been accomplished this year and how much more can be accomplished if everyone pitches in to any one organization of his choice and participates actively. There will be another SAMA MEETING on Wednesday, March 2nd at 1:00 p.m. in Lecture Rm. C. All members are strongly urged to attend - the officers

and one or two others cannot continue to do all the work themselves.

Paul A. Levine

NATIONAL BOARDS con't. from p. 1

comprehensive examination in the clinical sciences including internal medicine, obstetrics-gynecology, pediatrics, preventive medicine-public health, psychiatry, and surgery and is given during April of the senior year. Application for the National Board examinations must be received at least eight weeks in advance of the date of the examination and closing dates for Part I is April 26 and for Part II, March 8, 1966.

Eligibility for Part III requires graduation from an approved medical school and completion of at least six months internship prior to the examination date.

The tests are designed by experts in each of the fields, for example, Part I is created by 6 panels, one in each of the basic sciences tested. It has been noted that the exams have become increasingly difficult in 1964 and then again in 1965. The Basic Science Committee is planning a meeting for March "with a view to maintaining the difficulty of the test material at an appropriate and consistent level from subject to subject and from year to year."

Many states are beginning to use the National Boards in place of a separate, state-written exam. In 1965, the National Board provided state boards with a total of approximately 20,000 tests that were used by them for the examination of about 2600 physicians. In recent years, as state boards became more familiar with the reliability, impartiality, and quality of the National Board Examinations, an increasing number of requests were received to provide individual tests, or complete sets of Part I, Part II and Part III for the use and purpose of the state boards.

During 1964, a total of 5274 licenses to practice medicine were issued by

(con't. on p. 7)

endorsement of the certificate of the National Board of Medical Examiners by 42 state boards, the District of Columbia, Puerto Rico and Guam. This total can be compared to 4730 in 1963 and 3377 in 1959.

(The above information was taken from "The National Board Examiner", a bulletin published by the National Board of Medical Examiners.)

Observer, Junior con't. from p. 2

my place and listen to a little music, drink some wine. Okay?'

Saturday night came as expected. Having dined and danced, the couple repaired to Tom's apartment where the young doctor planned to further his medical education in matters which Hippocrates ruled out with regard to patients, but left moot with respect to ancillary medical personnel.

Tom unlocked his door, turned on the lights, hung up their coats and brought out the wine. She turned her attention to the artefacts of a liberal undergraduate education which hung from the walls, sat on tables, and cluttered the ceiling. Tom prided himself on his faithfulness to the whole-man concept, having gone as far as taking two courses on the fine arts. He was very current in his tastes, although not quite so in his understanding. Tom offered his companion a half-filled glass of Pinot Grand Fenwick '59 and began the guided tour ploy.

"Do you like that? It's the latest addition to my pop art collection. The radiologist has doubled his income since aesthetes have been buying his chest films. Notice here the delicate contour of the great vessel shadow, and how the contrast medium brings out the symbolism of the hilus. Rather Northern Renaissance, n'est-ce pas? But come over here and look at this; it's easily the best thing in the room."

At this point, strategic proprioceptors guided his right hand around her back. Gentle pressure informed her that she was to move to the adjacent wall which was spanned by a thin strip of paper.

"Read it from left to right. It's an electrocardiographorama. Notice here the inverted Twave, the prolonged PQ interval.

Smashing! And here, the pen of the, er, artist has caught the notch in the peak of that spike - and here the ventricles make their own pace - tense, huh? - and here the macabre end, complete fibrillation, realistically changing to a straight line. Actually existential! Marvelous!"

The aforementioned proprioceptors had not been idle during his discourse. They continued to guide his hand hither and thither; here and there the afferents would be confirmed in their message by an action potential along the pathways of tactile discrimination, stereognosis and seduction.

Thanks to her nursing training, Wanda was not caught lying down. Her own educated hands, skilled at removing a splinter from a toe and a dressing from a wound, were fully as capable of removing their mistress from this situation.

She removed his paw from a place she had hitherto regarded as her own business and handed her host the empty wine glass she was holding. She went to the closet and put on her dignity. As she opened to door to leave, she fixed her eyes on the startled male who had scarcely yet absorbed the full import of this rebuff, and said,

"You have tried my patients, Doctor Allworthy, but I can ward you off."

Richard Goldwater

DIALOGUE con't. from p. 2

ideally, represents the 1:1 student: faculty contact. He is able to criticize, applaud, and analyze the student's work on an intimate basis.....without any immediate penumbra from a grading sheet. I find little reason for students to write such a paper, if as some advisers intimate, they are capable of doing so without guidance and instruction. The Library?.....is it necessary to write a 10,000 word research-review paper to learn how to use a library? How many medical school graduates, poor or good physicians, are unable to find appropriate reading matter when it is required? I would suggest that the desire to use

(con't. on p. 8)

the literature and the ability to understand what one reads are the more critical points. Both of these qualities depend on the student himself and his instructors, including his advisers. Perhaps more advisers could be found among junior faculty members, or some form of seminar program might be used to stretch the time of those men who are available.

The current program is narrow, limited to the pathophysiology of disease. Medical practice is far more widely based, it may include the psychology of a transit strike or the biomedical engineering of an artificial organ or caring for the inhabitants of a small town. A more imaginative program could reflect this scope. For example, a student with an engineering background might prepare a proposal for a joint prosthesis, or at the other extreme, a student might take an elective in Africa and discuss, on his return, the state of medical care in an underdeveloped area. Such diversity would present a formidable challenge to our faculty. In effect it would introduce many of the problems of the university, with students ranging through music and theoretical physics, into the narrower world of medical education. For the student, however, it would provide an experience pertinent to his interests. A broader subject matter would also make available more advisers. The answer, as always, must lie somewhere between this ideal "universal" approach and what is practicable.

The last issue is that of the status of the paper in the curriculum. At present, it lies somewhere on a line joining the doctoral thesis and the undergraduate term paper. To be successful its position between these extremes must be more clearly defined, it must be "worth doing" intellectually and have some definite importance in the curriculum. This latter need not be stated as so many tenths of our final grade, but it should indicate whether the paper is a side issue, "homework project", or more important. If the importance is placed high then perhaps the paper should be due at the culmination of our medical careers, the senior year; on the other hand, the paper might be allowed to be written at the end of any of the eight semesters, why not after Biochemistry, or

Surgery, or after an elective instead of after Medicine?

It is evident that dropping the paper would not do much measureable harm to the curriculum. Didactic learning would remain much as it is now. National Boards should be unaffected. The major loss would be the student's chance to experience learning a single, if narrow subject, at a deeper, "graduate" level. This is particularly important when one considers the high percent of graduates who will be involved in writing papers, (one survey of BUSM students reported 50%). There should also be satisfaction to the student in knowing one topic, if only one, well enough to be an expert rather than an amateur. This is all, however, extraneous to the necessities of a medical education, and the value of such a program must be measured against the load it puts on the student.

The potential of The Paper as part of The Curriculum is clear, what is needed is a more definite understanding of its practical role as part of our training for the Doctorate of Medicine.

Steve Schwartz

To the Editor cont. from p. 3

and faculty of the Medical Center and for this I am sincerely grateful. The looks on the faces of those children told me that the many hours of work on the part of chairman Paul Levine, '68, and all the other SAMA members in collecting and sorting these gifts had not been in vain. Of course, I cannot overlook the academy award winning performance of Ed Glinski, '68, in his spectacular role of Santa Claus.

It is my sincere hope that both of these functions will become annual traditions here at the Medical School in the years to come and that they will continue to gain support in faculty and student circles alike. Thanking you all once again for your kind and generous support, I am

Sincerely yours,

Gerald B. Healy, '67
President, BU-SAMA

CANDIDA A., I LOVE YOU con't. from p. 3

Repressing an urge to scream, I managed to ask "Afraid what will melt?" There was a pregnant pause. The kindly little old lady looked at me with surprise. I looked at her with sheer horror. "Why the ice cream, of course," she said. "Oh, yes," I gasped as my respiration resumed. "I certainly hope so!" I smiled blandly. Suddenly I was aware that the little white box was no longer clutched in my little white hand. I looked at my hand a few moments, hoping faintly that it was someone else's. "X", I said to myself in a casual sort of voice, "something has happened to the little white box." I looked around trying very hard not to look like a person looking for a little white box. It was standing on its side right in the middle of the aisle. In a casual sort of way, I leaned over into the aisle and stealthily reached out my hand. At that precise moment the bus stopped, I fell heavily on a small but surprisingly vigorous cocker spaniel, and the little white box went rolling smoothly toward the front of the bus. With a convulsive leap I managed to separate myself from my little friend, knock down three people, and rip the cover off my notebook. Just to show there were no hard feelings I ripped out a few pages of pharmacology notes and scattered them on the floor.

On reaching the front of the bus, I discovered a stunningly attractive girl shaking my little box with an intent look of curiosity. Looking her straight in the eye with calm assurance I said "I believe that's your little white hold I'm boxing." She gave me a quizzical look. Then she smiled at me and as I was picking up my notebook I heard her say, "Let me guess what's inside." "Ice cream?" I suggested quickly, watching the rest of my pharmacology notes drift down the aisle. "It's not cold enough to be ice cream," she said. She had me there. "Melted ice cream?" I croaked, but she wasn't listening.

"I'll bet its a pair of earrings for someone, isn't it?" she demanded. I shook my head earnestly with a tragic look in my eyes that she should think I would give earrings to anyone but her. I was about to tell her that they were hers

for the asking when I remembered. "I'll bet they are too," she declared resolutely, and with an acute sense of impending doom I watched her bring her other hand up to the box. Shrieking incoherently I wrested the box from her grasp and was moving rapidly toward the emergency door when a firm hand gripped my arm. "Just a munute, friend," ordered a voice fairly reeking of authority, "Let's see just what is in that box of yours." The common belief that the doors of buses can be pushed open only from the outside is not strictly true.

(This is January's OBSERVER, JUNIOR)

Observer, Junior
"Erythema, Mon Amour"

He awoke to find her gone. His sino-atrial node gasped with the shock, and for a second his ventricles paused, slavishly awaiting further instructions before contracting again. They sighed and gave a half-hearted beat, expressing impatience in their own sluggish way, then yielded their unwonted autonomy to excited demands from higher up for haste and vigor. The man swept the covers back and bolted from bed. He had not taken two steps when he was struck by a profound dizziness, the orthostatic hypotension of diabetic sympathetic dystrophy which forced him to wait for a delayed homeostasis. Once his sensorium was clear he hastily dressed and flew out to find her. It would not be easy. He had no idea where she was.

Some instinct, perhaps resident within the fluctuating serotonin stores of his pineal gland, but probably not, directed him to the part of town where shocked tubes of neon alternately allured in flashing systole and rested in more honest diastole. He ignored them and squinted hard through the tinted window of a bleak bistro he had sulked in, with and without her. She would not be there. She hated the joint. He walked on, faster now.

The city yawned and wanted to stretch;
(con't. on p. 10)

Observer, Junior con't. from p. 9

it had grown weary of the night's unnatural bustle and needed time for privacy and sleep before facing another grimy day. Perhaps a subterranean hypothalamus regulated the city's sleep-wake cycle; perhaps the nerve-train tracts which traced the course of the urban anatomy conveyed action potentials along with the action people who travel fastest while hanging from straps. Perhaps the man who waited numbly inside a train pausing at the 135th Street cervical vertebra was unaware that his striped pajama bottoms had begun to peer with decreasing caution from below his rumpled pants cuffs. Perhaps he did not care.

He stared at Central Park and cursed his androgens. She was not ready for what he made her do, and she had fled. He had only intended to prime the pump, as FDR might have put it, but his bodily economy demanded more. And now he could do nothing to lift his depression but return to his fiat as alone as when he had left it.

He turned the corner of his block, but walked past his front door. He took a seat at the counter of the adjacent caffinary. He watched the thick brew flop into his cracked ceramic cup, and strained it through the diastema which unaesthetically came between his two front teeth. A second later his gastric mucosa shuddered as the viscous bolus reached it, and an agonized crypt cell underwent a tripolar mitosis to die unmourned in anaphase. After a time he felt refreshed and equal to the business of returning to bed.

He was a little tachypnic at the top of the fourth flight of stairs and had to cough, unproductively. Typical, he thought. He did not bother looking as he routinely fitted the key into the lock. But the door was open. Startled, a flurry of RNA molecules skittered from some particular glia to an adjacent neuron, but there was insufficient data to satisfy him that he had left the door unlatched. His pupils strained to dilate to their limit, the rhodopsin in his rods raced through the visual cycle, beta waves brutally blocked the alphas at the occipital cortex, the ~~cremsters~~ tensed expectantly.

She was in his bed, repentant and ready.

Richard Goldwater

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(days until 7 p.m. only please)

Mrs. Stanley A. Carlin
30 Florence Avenue
Revere, Mass. 02151

ATTENTION - THERE WILL BE A S.A.M.A.

MEETING ON WEDNESDAY, MARCH 2nd, 1966

AT 1:00 P.M. IN THE HISTO. ROOM.