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## GUEST EDITORIAL

### MEDICAL EDUCATION

By AUBREY MILUNSKY

(Chairman Medical Education Committee)

" . . . . To seek and to find a method of instruction, by which teachers may teach less, but learners may learn more " — COMENIUS.

THE PROBLEMS of medical education have been discussed by Governments, medical teaching staffs and students since the advent of true medical schools, more so since Flexner's astounding report at the turn of the century, and it is my sincere hope that debate will continue at last till the time when medical schools are replaced by "Institutions in Race Production," or the like. For surely amicable intelligent debate will rapidly equate with improvement and advance?

It was then in our own little way, and with the concept embodied in the opening aphorism that the S.M.C. Medical Education Subcommittee embarked upon the continuance of the above debate, with the production of their "Commentary on Medical Education."\* Herein we glimpsed at the dynamic and tremendously complex environment in which a medical student attains the stature of a physician, prefacing the more detailed year by year commentary by an extensive discussion based upon our concept and approach to the general principles of medical education.

One has heard the occasional student mutter almost inaudibly about the right and ability of a co-student to expound upon a matter so complex as medical education. Waiting as undergraduates our tone throughout has coloured with humility our inexperience which continually bears witness to our every criticism. Moreover it is not the right, but the DUTY of products of a system to comment constructively, that future generations of students may benefit. And finally we note humble pride the tremendous honour—and hence recognition — accorded us by the invitation to address the Faculty Board of Studies.

In the opening general discussion we examined the curriculum in the light of five questions. Are we, or our teachers in fact, aware of something which is just as, or probably more important than the acquisition of a million facts, examinations, etc? Are we being taught to learn how to learn? Are we becoming more mature students, grounded in principle and method? Are we being encouraged to think logically and critically? Through our learning are we able to see what the whole of medicine stands for and means?

It would be impossible to review adequately in any reasonable manner the many proposals envisaged in the "Commentary." Perhaps to attain a little depth in this editorial just the odd comment or two from the discussion on the various years of study may serve to indicate the general approach. The theme propounded throughout was one of more seminars and tutorials and fewer lectures.

In concluding comment on the introduction of integrative medicine in the second year of study, one expressed the sentiment that it would be desirable to enunciate and inculcate a tone concept of disease at this early stage. Let our teachers of Anatomy and Physiology ingrain into their students as the basis of medical training and rational approach regarding disease as simply a deviation from the normal, stressing therefore the need to know the normal, and variations which fall within the normal range.

Referring to Pathology a suggestion was made that the particular syllabus be covered in tutorials and seminars (the discussion topics being posted on the boards monthly), with lectures acting as guiding presentations. Hereby the true student will learn by himself and be taught by his teachers to learn how to learn. Then ultimately, the student will study for the purpose of understanding, while both he and his teachers will realise that learning

and teaching, if either one is to be successful, cannot be dissociated.

Discussion included the postponement of the examination in Preventive Medicine to 5th year in a combined medicine paper; Resident Psychiatry; Attendance Registers; Clinical Genetics; the Humanities and History and Philosophy of Medicine, to mention but a few topics. Participation by the student in the teaching programme in clinical years was particularly stressed.

The paper was written with a spirit of devotion, with our fervent hope that our criticisms would be viewed as constructive. The comments were aimed at the teacher, that he might instil the fundamental principles of disease processes so deeply, that his students will approach the problems of their patients not only with all the proficiency of the art of medicine, "but also with that scientific discipline which gives to their observations exactness, to their deductions logic, and to their therapy, understanding."

The Editor,  
"The Auricle."

Sir,

Although you and your staff are to me complimented in initiating literally the last word in elegance of production of your journal and certainly evoking the last snigger in risqué jokes, topicality is conspicuous by its absence. I concede immediately that snatches of news occasionally drift in from the nether regions on the deft extract stick of World Student News about Phillipine failures, Jap jobs and British boat races.

Undoubtedly this is a subtle comment on your part on the idyllic isolation in which Medical School, tortoiselike, immerses itself in these troubled times. But sometimes, sir, it is necessary to hurl instead of cast ones pearls.

Certainly any attempt at political (pardon the dirty word) indoctrination will be justly resented by your gentle readers — even bearing in mind the compensation of the comic strips. Certainly these courageous crusaders against disease would resent being made aware that they live in times comparable to 1937 Germany and are reacting with as little distinction as their German counter parts in their consent by silence. Buried in their books they mutter:

"If I am not for myself, who then is for me?"

Could you not perhaps, sir, through the medium of your journal remind them that the saying goes on:

"And if I am for myself alone what sort of a man am I?"

Yours,  
PHAGOCYTE.

Wife: "Don't you think, dear, that a man has more sense after he's married?"

Husband: "Yes, but it's too late then."

• • •

Father: "Sonny, I'm going to tell you a story."

Four-Year-Old: "O.K., but keep it clean. The old lady might be listening."

## "IN ANSWER TO THE CRITICS"

The Editor,

The Auricle.

Sir,—What is a Medical Student? The answer to this seemingly straight-forward question is not as obvious as it may seem. In my opinion the answer is simply that the average Mr. Student is nothing more than an illiterate, uncultured barbarian who passes his time studying the art of medicine only to emerge six years later as a narrow-minded soul proficient only in his field.

The critics to whom I refer differ from the average student. These are people who wish to emerge from their studies of medicine not only as proficient medical practitioners but as good members of society, who are willing to learn and add to the culture of the society in which they live. Therefore, these students are entitled to criticize the lack of cultural activities at this School. I am the first to admit that their criticism is justified. BUT, and this is the big, big "but", what is the use of offering these facilities to a body of people whose interest cannot be stimulated to rise above the level of Tom and Jerry cartoons?

It might interest these critics to know that at a meeting "held" by the Art society only TWO students turned up. Imagine the ignominy of it all. Having to explain the lack of student interest to a Director of one of the biggest advertising firms in the country.

It might also interest them to know that entry forms for the annual Art exhibition have been advertised for six weeks and that none were received.

What is the use of it all? It is a futile battle to educate the students in fields other than their own, particularly if they show their repugnance to your efforts. I have, myself, given up this hopeless quest until such time as the students realise their folly and show some interest in the culture of the world we live in.

IAN D. SAMSON.

*The Editor,*

*The Auricle.*

Sir, — It has become apparent to be over the past year that a new and unhealthy attitude has crept into those concerned with the running of student affairs. If I were to be diplomatic I could call this characteristic lack of courage, but to be quite honest I would call it selfishness, incompetence and negligence. Although the above may sound like an ill-considered outburst, nevertheless I would stress that it is a carefully considered opinion which can, and will, be backed up by numerous substantiating facts.

During the past six months the S. M. C. received the resignation of no less than six persons who had held important positions either on the S.M.C. or as chairmen of one of the subcommittees. I have no intention of disclosing the names of the people concerned, but I feel it is only right to state that, in my opinion, the reasons given for the resignations have been inadequate, ill considered and unworthy of persons in responsible positions. They have ranged from such excuses as "loss of interest," lack of time due to other extra-curricular activities, allegations of local squabbles and mismanagement and discontent over lack of student support for certain meetings.

Without going into great details, I would like to make two points clear:— Firstly, I would stress that if someone offers himself for a certain post, he must be prepared to carry out his duties for the full duration of his term. Unless he is sure that he is prepared to do this, rather let him not accept the position, and let someone who will not back-out at the first sign of difficulty, do the work.

Secondly, there is the question of the resignations. I wonder if the persons concerned are aware of the difficulties and problems involved when they abandon their positions. The extra work has to be done by his colleagues, who are compelled to spend a great deal of time in order to carry on the somehow and put matters in working order. But, even if I was to minimize this angle, there is the wider aspect which should be considered. Surely it is a challenge to attempt to overcome minor setbacks which are bound to happen to anyone in a responsible position. We would have thought that difficulties and problems would encourage and stimulate one to make efforts to overcome them, instead of which they seem to provide a ready excuse for crawling ignobly out of the affair, surrounded by an air of self-righteousness and injured pride.

I sincerely hope that it will not be necessary to have to comment on this unpleasant matter again.

A. RUBENSTEIN.

*The Editor,*

*The Auricle.*

Sir, — Ever since my having left school and entered a co-educational medical school I have felt a burning desire to view my opinion of my female counterparts. However, fearing an overwhelming assault on one's person by a gaggle of ferocious affronted amazons I managed to keep this desire deep within me. The article appearing in the last *Auricle* ("A re-estimation on female medical students") arrived just in time to prevent this desire from consuming me in a scorching flame. How the writer's mind and thoughts were attuned to mine! How I thank him for putting to paper the words which I had been too fearful to utter!

There are just three points that I would like to add now that my courage has been bolstered by your writer's effort.

1. The fact that female medical students grow nails the length of which would make a Gogi jealous. They utilize these weapons to torture and inflict grievous damage to the poor patients unprotected abdomens when they palpate. (They also make it virtually impossible for themselves to percuss—for fear of loosing the distal phalanx of their middle fingers.

2. Their failure to maintain a fair degree of aloofness from their patients, which we know leads to a destruction of the Patient-Doctor relationship — "Familiarity breeds contempt."

3. They trade on their femininity when it suits them. Who always forces their way to the front in ward rounds and at operations?

I would, however, like to point out that there are exceptions both to my own and to your writer's statements. Is not that paradoxical statement — the exception proves the rule true?

MEDICO-MYSOGYNIST.

(I hide behind my non-de-plume like any other male coward who fears for his life. Nevertheless, I am quite prepared to argue it out with anyone at a time. My other aliases are therefore available to whoever wishes to know.)

*The Editor,*

*"The Auricle."*

Sir,

Medical students who are willing to sacrifice 6 or more years of study in order to have the privilege of treating people, are the only students at this university who are not covered by the Students Health Insurance scheme.

I feel it is incumbent on the S.M.C. to raise this matter either with the Health Insurance Society, or with the Provincial Council. In the past all medics could get free treatment at the hospital — but under the new Ordinance we are denied this basic medical right.

Yours,  
INDIGNANT STUDENT.

The Editor,  
"The Auricle."

Sir,

In reply to your correspondent concerning the Students Health Insurance scheme, I must answer his statements about medical student's participation in the scheme.

At its last meeting, on June 7th, the S.R.C. accordingly passed a resolution whereby medical, physiotherapy, occupational therapy and second year dental students became full members of the Health Insurance Scheme. This means that, in addition to the facilities of the clinic, to which they have always been entitled, these students may now also claim insurance from the Society. There has been no increment of the student's fees for this additional benefit.

The mechanism of claiming is as follows: Any student who has incurred medical expenses, not including drugs and medicines, dental treatment, spectacles or cosmetic surgery, may fill out a claim form, obtainable from the Society's office in St. Georges Street. This must be submitted, together with the accounts of the doctors or specialists concerned, to the Society.

These claims will be paid by the Committee to a maximum of £20 per annum, although this amount may be exceeded in special cases at the discretion of the Committee.

I hope that medical students will avail themselves fully of the facilities now being offered to them.

MARTIN BOBROW,  
Vice-Chairman, Students' Health  
Insurance and Benefit Society  
Insurance and Benefit Society  
Committee.

#### ART EXHIBITION

The annual Art Exhibition now becomes another of the Medical School cultural activities that has been quietly lowered into the grave. In a more simple statement one can say that it has become DEFUNCT!

Student lack of interest in extra-curricula cultural activities must be stimulated, and can only be stimulated by themselves. The art exhibition offered all students the chance to show their interest and to broaden their extremely narrow minds. Unfortunately the offer was turned down—there were only (two) entries—one from a student and one from a member of the staff. This did not warrant any effort on the part of the organisers to carry on with the exhibition. Therefore, there was no exhibition.

Until such time (if ever) as even a positive interest is shown by the students, such cultural opportunities must remain outside the realms of medical school and its immediate surroundings.

A hormone is a chemical substance found in males and females which makes them do the opposite things but act in the same way.

The Editor.

The Auricle.

Sir, — "Medicogynist" shows his abysmal ignorance — ignorance which is not uncommon in the male medical student — when he states that "medicine is a male's profession." In Soviet Russia, as everyone (who is anyone) knows, the medical profession is in the hands of superior females, the superior males reserving their brains and ability for producing sputniks, lunatics, and/or bigger and better atomic weapons. At Wits, too, as every Science student knows, the most intelligent male students are to be found in the Science Faculty.

The male twerps in Medical School are there because they have been prodded into this Faculty by fond parents, anxious to use the musical phrase "My son, the doctor". There are, of course, exceptions, and these exceptions are snapped up and led to the altar by discerning female medical students, who are not concerned with the "wildest dreams" of the male, however interesting these may be.

Surrounded as they are by an ocean of male nit-wits, female medical students are forced to protect themselves from unwelcome male attention (albeit with limited success), by "dressing abominably, wearing flat shoes, and horrible, ghastly, thick, coloured ugly stockings". They also "giggle and whisper among themselves". They reserve their elegant stiletto heels, and sheer nylons, their charming smiles and witty conversation, for the intelligent, interesting, and discriminating men they meet outside of Medical School.

MEDICAMAZON

The Editor,

The Auricle.

Sir, — Through the medium of your magazine could you please enlighten me (and other students) as to when Medical Ball will be held, if it will be held at all and if it is not going to be held, why not?

I have heard rumours that due to the fact that non-Europeans want to attend this function and that the general consensus of opinion is that ——— they should attend, the Council has refused to allow us to hold this annual function. Is this true and if so what steps have been taken to overcome this decision.

UNENLIGHTENED

## EDITORS NOTE:-

Dear Mr. Zundelbob, and anyone else who intends writing to the Auricle. In accordance with the ethics of publication, the board cannot publish any letters unless the writer encloses his correct name with his letter, as a sign of good faith.

## FAREWELL, SOBRIETY!

"You were simply great last night. The moment I heard the clink of those bottles at the back of your car I forecast a memorable evening. I wasn't wrong, either. Even before we'd reached our destination you insisted on sampling the vintage. I watched, fascinated, as wave upon wave of peristalsis rocked your thyroid cartilage on its anchors; listened, intrigued, as your pharyngeal muscles hurled load upon load of fermented raisin juice into your long-suffering oesophagus; heard the protesting borborygmi as the bubbling fluid lovingly embraced your atrophic gastric mucosa. Then, as the last drops trickled down your receding chin, you smacked your lips — albeit less violently than a lady of your acquaintance had on a previous occasion — and thoughtfully contemplated the forthcoming celebrations to mark the end of yet another sterile academic year in your illustrious career. Farewell, sobriety.

The hall was brightly lit as you strode majestically over the threshold and averted your bloodshot eyes around the dance-floor. The usual herd of breasty, reeking females wearing low-cut dresses and frigid smiles, accompanied by their greased and oiled male escorts squirming in stiff white collars and tight underpants. Sober, you might have snorted in disgust at this pompous display of responsibility and gone in search of a daughter of joy, but already within your sluggish bloodstream the steady flow of ethanol molecules to your maldeveloped cortex was under way. The siege of your neurones had begun.

You pulled to a standstill alongside a table loaded with cheap refreshments and stood swaying uncertainly as your vestibular apparatus tried desperately to cope with this sudden alteration in orientation of your body in space and frantically dispatched messages to your already befuddled cerebellum with the efficiency of a Johannesburg telephone exchange during a power cut.

And now to enjoy yourself, my friend, for it has been a hard year, and restitution is long overdue. The lady and gentleman on your immediate left are sitting and quietly nibbling at some nuts and chips, and in your estimation this is deplorably anti-social. Was it Bacchus who once said that conversation is a lost art? For now you are determined to disprove this ill-founded platitude even if it costs you your reputation (which it nearly does). You veer towards them and introduce yourself with much formality. Granted, your lengthy dissertation is marred by a mild degree of aphasia, but does this justify the precipitous departure of the couple whom you had favoured with your attentions? You come to the bitter conclusion that Socrates was right: Conversation IS a lost art.

But do not succumb to melancholy. The night is still young, and so is that lustrous young bundle of oestrogen teetering around the dance-floor with an adolescent Australopithecine. Forward, O disciple of Aphrodite! A couple of gigantic steps in her direction, a misplaced foot, and several collapsible chairs collapse in your wake. You stagger against the table, which suffers a petit mal, causing a bottle of beer to prostrate itself and vomit up its frothy contents onto a discarded stole and handbag. The humour of the situation appeals to you. In fact you are rolling under the table in spasms of laughter, draped in the table-cloth. Legs shuffle around you, smiling faces peer down at you.

You rise haughtily but unsteadily to your feet, and with the firm conviction that while you are maintaining a statuesque immobility the rest of your environs is oscillating to and fro about an uncertain axis, you calmly proceed to remove some peanuts from your hair.

And then, tragedy. Those naughty molecules traversing your cortex have discovered your emetic centre, and are clamouring to gain access to it with such insistence that you feel impelled to wend your way, reflexly, perhaps, to the nearest convenience. Surely it is a nasty trick of Fate which directs you in your confusion through the door on which it is clearly indicated that the establishment is reserved exclusively for members of the fairer sex. No doubt that is why you cannot locate the tiles and gutters which are normally the necessary concomitant of such an edifice. But your oversight is understandable, for within seconds of your arrival your face is transformed to that of a functioning gargoyle while hors d'oeuvres, potage and entree come cascading through your pouting lips in one homogeneous mass of yellow ochre fluid. You mutely swear a savage oath of abstinence, and with blurred vision enhanced by the fact that you minus 15 dioptre glasses have slipped into a most inaccessible place, you feel your way back to the hall.

But the old zest has left you. Your excessive verbosity has given way to a series of incoherent utterances and grunts. The company cleaves before your haggard countenance and after lurching from side to side in search of support, you prostrate yourself on what you assume to be the floor. Your charitable friends step forward and hoist your trembling frame in their arms. The staggering cortege proceeds towards the door as you wave a feeble farewell to curious onlookers.

"The rest is silence."

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### 1ST YEAR NEWS

Me---d-ne M-r-hy and An--o-y  
Mi-ne have been playing anagrams.  
They've been trying to combine the letters  
M.M. and A.M. into M.A.M. The success of  
their venture should be evident by  
September.

Me--in C-h-n and El-en-n We-1  
should abstain from playing kneesy kneesy  
during physics.

D-v-d B--n-rd should be careful or  
his voodoo about SEX will turn to veedee.

### PRIZE-WINNERS

Congratulations and cash prizes go to  
the following people this month:—

Aubrey Milunsky receives £1/1/0 for his  
correct solution to our "Spot the Diagnosis"  
competition.

The correct answer was: Atrial Septal  
Defect.

Prizes also go to the following students  
for their answers in the "Exclusive Books"  
word competition:—

1. N. Hodges.
2. A. Levy.
3. S. Hatnitzky.
4. R. Aronson.
5. K. Smith.

See "STOP PRESS" for this year's Photo-  
graphic Competition winners.

### FISHY SEX LIVES

*There once was a jolly young sturgeon,  
Who to his surprise was a virgin,  
He found for a mate,  
A large ablong skate,  
And soon all their contents were mergin.*

*There once was a jolly young trout,  
Who certainly knew what he was about,  
For he lurked in a pool,  
A playing with his — arm,  
Which caused all the females to shout.*



## NURSES PAGE

### Wedding Bells

Congratulations to Dr. Stan Bletcher and Staff Nurse Peggy Walsh on their wedding. And Dr. Gordon McCall and Staff Nurse Rosemary Le Cordeur as well.

### Engagements

Congratulations to Ruth Batterson and Annette Schiller on your engagements.

Barbara Smith.  
Lynn Robertson.  
Beth Schwikkard.  
Gery Shrowin.  
Barbara Ellison.  
Fitty.

### Engagements:

Elaine Gunnell.

### Belting Party:

Congratulations to Anna Sanders for winning the Banfield prize.

Claire Rushton for winning the Matrons prize.

And all our other new single stripes.

Anna, Vera, Eykie, Fran, Jandy and Di, how did you get your pictures into the Star??

Joy — Do change those battleships for submarines.

Jackie — We are all proud of Peter and the rest of the S.A. Cricket team.

Coll — What is this thing called "Love"?

We notice that the canteen at the Nurses Home now sells GENUINE Steak and Kidney pies. What ops has Main Theatre been doing lately?

Everyone is congratulating Thyra we don't know why!

Pete has a Mercedes bright land shines at the sight (not only of the Mercedes!)

These All Blacks are making quite a riot. Half the nurses home is in a dither. A big chance is coming up. Prepare yourselves for the worst Girls!

Mary and Collin are having marital problems, quite a few of us are in the same boat.

**Firm Parties:** I'm not so sure firm parties are quite the thing. This has been deliberated for years at the Nurses' Home. Last Saturday night, however, realized a fabulous affair. Everyone was on top form. The sweet and innocent suffered as usual but it's time they grew up.

I always thought members of the medical profession from 5th year onwards calmed down a trifle. I have since changed my mind. Anyhow it was a good party. Thanks.

Gillie I guess you're well over Nev. now. Good girl.

### B.G. ALEXANDER

Congratulations on finally being hooked Alison.

Baggy could it be that the Rhodesian police force, still top of your hit parade.

### Kids

Please tell us more about that wonderful engineer with the Super Healey, Lou?

Borehill — keep your eyes off the doctors. Is that love affair with Johnny still flourishing Coucum?

Stop gadding at half-past two every afternoon with Wit-Wits and get some sleep De Villiers.

June, how are you enjoying your trips to Baragwanath with Arthur.

Why so glum Jam J., could it be because Ralph walks around with his eyes shut?

Still no speakie-speakie with Dr. P. Elaine?

Is the pass-word still frustration Lou? Never mind the first 7 years are the worst. Maybe Mighty Medic may oblige and help you out!

Julie, how was your "honey-moon" weekend in Standerton?

Ardene, are you missing your Scotch rugby player with his "Snuggle up a little closer"?

Nurse de R. Is it true you're been engaged for about a month and no-one knew?

Nurse Cheyne when's your engagement coming off? Soon heh!

Sorry to hear you've been ill Nurse Meeser. Is working with babies getting you down?

How's the Wallish-fou-club these days? Flourishing in Ward 32 I bet.

Why don't you start messing Johnny around for a change Coucie?

### Welcome Back

Helen Johnstone. Glad to see you out of Ward 32. Hurry back from sick leave to night duty seems they are missing you.

Shella Biggs—hope you are feeling much better.

Welcome back from you vac all medical students—hope you had a good time and are all set to work again.

Hope all the doctors had a good holiday and are happy in their new wards.

Holding thumbs for the results next month July finalists—here's hoping for the best results. And happy swotting to the November finalists.

Come on girls—let's all support the Refec. Some of us have been there and it is not so bad.

### RADIOGRAPHERS

Di Vettan is it Dr. ??? that is the attraction or is it his poodle?

How are the "Pokkies" Bren?

A little bird told me you'd been sliding down the stairs at T.M.H. Penny with a little push from Dr. P.

Plathon how's your love life in casualty going?

Cynthia when's the engagement coming off?

## SO YOU WONDERED WHAT BLUE ANGELS DID . . . ?

Because we feel that physios are intellectually under-estimated by the rest of the medical, dental and nursing profession we propose to describe a day in the working life of a Third Year physio. We emphasize the adjective "working" because the after-hours occupation of a physio has no bearing on her intellectual standing generally, and further more it has little to do with you unless you are directly connected therewith in which case it would be unnecessary to waste your time with an account of it. Wouldn't it?

After getting to the hospital at the agonizing hour of eight every morning (unless you manage to get a "top" ward and an obliging partner) the physio proceeds to hammer, cajole, face and persuade a variety of sleepy, irritable, bronchitic patients into doing half an hour's breathing exercises.

These, although having extremely beneficial effects succeed at the time in making the patient dizzy and convincing him (or her) that the physio is an escaped looney and also turns the physio into a physical, mental and emotional wreck (which condition lasts for the rest of the day).

This daily routine is followed by a lecture which lasts for anything from fifteen minutes to an hour depending on how long you chat to your patients and how long one can take getting from the hospital to Medical School.

Now the picnic starts! Owing to the increase in hospital rates the average physio spends the next two hours scrubbing window-sills, cleaning wax baths, polishing machines, watching Fourth-Years drinking tea (if there's room around) and moaning that she's learning to be a cherwoman. The slightly luckier ones (25%) give a series of exercise classes for anything from hallux valgus to Bell's palsy, faradic floor

baths (which consist of persuading the patient to put his foot into a bath of electrified hot water and to endure a train of electric shocks which cause convulsive contractions in his lower limb—especially if your not quite sure how the numerator works), infra-red radiation (which incidentally is NOT the sole occupation of a physio as some people seem to feel), massage to any amount of foot complaints and a selection of other complaints and post-natal exercises.

The very lucky physios (1%) have more work than they know what to do with—they spend month long periods at various departments which shall be nameless re-vealing in the work and experience which is sadly lacking at this stage.

In case anyone should surmise that our day stops here let me hasten to assure you that we now proceed to learn how to treat our patients more effectively, efficiently and completely in a programme of lectures and practicals. The physio "school" being such a nice compact little place we walk an average of about ten miles a day between lectures at the hospital, the hut, Medical school and normal college—all this no doubt keeps one fit and healthy but also exhausts the victim in the process and wastes an awful lot of petrol for the lucky few!

The physio then goes home to swot and consolidate all she has learned in an interesting but somewhat exhausting day, as you no doubt will agree.

This little episode will, I hope persuade you that there is more to being a physio, even a third year, than flashing coloured lights on and off, holding patient's hands and other Black Magic we heard about in a recent debate.

"PORTIA"

### DENTAL NOTES

Fr-d, V. D. M - - we:— Only a few months of carefree bachelor life left now. How does it feel?

K - m M - z - - hi:— Notice how quiet "The Federation" was until you got home. What did you do?

Ar - - e G - u - d says that the only Province to beat the All Blacks at Rugby is 'VRYSTAAT' . . .

M - k - A - -ns - on:— Have you taken any good photos lately?

Heartiest congratulations to Lennie Zybutz and Helen on their engagement.

The Third-Year Dental Rugby Team has now gone into retirement after a successful although brief season during which they won the Merwyn Shear Interclass Rugby Cup. Their overall record for the season is as follows:—

Played 7, won 6, drawn 1, lost 0.  
For 126 pts. Against 22 pts.

### SOCIAL COLUMN

It seems that spring is in the air once again, and Auricle takes this opportunity of congratulating the following people on getting married:—

Ivan Samson (5th)

Mr. Kaufman and Dr. Pam de Beer of the Anatomy Department.

Gary Katz (6th).

And of course those who have decided that this fine season is just the time to announce their marital intentions, namely: Bernice Seeff (2nd) and Ray Coll (5th).

Stan Zale (6th).

Gerald Lampert (6th).

Clarissa Bozzoli (2nd).

Anne Counihan (Physio), and last but not least, Dr. Syd Mervish of the Phys. Department.

Congratulations to all of you!

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## A GLIMPSE OF MEDICAL EDUCATION IN ITALY

The medical curriculum at the "University of Studies" at Bologna, as at most Italian schools, is laid out as follows:—

### 1st Year:

Histology, Chemistry, Physics, Biology, History of Medicine, Micro-Biology, Anatomy I (Osteology and Myology).

### 2nd Year:

Anatomy II (The rest of the Anatomy course as we know it), Topographical Anatomy, Chemical Biology, Physiology of Alimentation, General Physiology I, General Pathology I.

### 3rd Year:

General Physiology II, General Pathology II, Medical Pathology I, Surgical Pathology I, Psychology, Surgical Anatomy.

### 4th Year:

Medical Pathology II, Surgical Pathology II, Clinical Otorhinolaryngology, Pharmacology, Pathological Anatomy I.

### 5th Year:

Pathological Anatomy II, Clinical Medicine I, Clinical Surgery I, Clinical Dermatology and Syphilology, Clinical Ophthalmology.

### 6th Year:

Clinical Surgery II, Clinical Medicine II, Forensic Medicine, Clinical Obstetrics and Gynecology (2 months), Pediatrics, and Clinical Neurology.

The examinations are "written" three times yearly, at the choice of the individual student. That is, when the student feels himself to be ready for his examination in any subject he informs the Professor who then takes him for an oral examination. There are no written papers, and the student passes or fails on the opinion of the Professor alone, without having the privilege of an external examiner.

The students are required to pass a certain proportion of their examinations before they will be permitted to enter the fifth year. There is no such thing as "failing" a year. If a student fails any particular subject in his first four years, he merely continues studying it until he passes it. He progresses automatically to the next year of study regardless of the state of his knowledge. However, on reaching the fourth year, if he has not passed the required number of examinations, approximately two-thirds, he then remains *fuori corso* which means "outside the course," until such time as he passes the required number. Some students have spent more time *fuori corso* than within the course. This system applies throughout Italy.

The number of students in Italian medical schools is so far in excess of the number of doctors required by the country, and it is so difficult for a doctor to find a job, even part-time, on qualifying (there is no formal internship, and doctors may practise directly on leaving medical school) that the equivalent body of the Medical Association has requested students to consider carefully before embarking on a medical course, and virtually requests them

not to take Medicine.

With the great rise in the standard of living since the last war, and with the intensely religious background of the general population, it has become almost impossible to obtain material for dissection. During the academic year 1958-59 (the year starts in November and ends in July) the Institute of Anatomy of the University of Bologna received one cadaver, and that had already had a post-mortem examination. As a result the "body" consisted of the four limbs and the head (minus the brain).

This shortage prevails throughout the medical schools in Northern Italy, but, ironically, is slightly improved further south where the standard of living is lower. The schools seem to have lost much interest in Anatomy as a consequence of this shortage, so that the students learn most of their Anatomy from "the book." Several schools have attempted to bypass this obstacle, and at Bologna, for instance, the rare body has been dissected layer by layer, each being photographed in colour. Subsequently the students are shown the slides during lectures. None of the schools which I visited (Bologna, Ferrara, Padua, Genoa, Milan, Turin, Pavia, Pisa and Florence) had dissected specimens for study by the students. Pisa is the only school with adequate material, derived from a nearby mental asylum.

The micro-anatomical course ("histology" being more accurately used in Italy to refer to physiology and biochemistry of tissues) consisted of a number of slides being set up each week for study by the students. They are not issued with slides for their own study, as is done here; the suggestion that this be considered was most welcome and obviously as yet unthought of.

In general it appeared, and this was confirmed by discussion with the lecturers, that the ideal student is one who has learnt as much as possible of his work by rote, and that the text-books, being short of figures and diagrams, assist the "memory" process.

My personal experience of this was in practical anatomy. I was presented with a fresh, unpreserved lower limb, and asked to demonstrate the anatomy of the muscles, joints, major vessels and nerves to a group of six students over a period of 10 hours. The six students were the first who had put their names down for "dissection", a number, I am sure, for purely morbid interest. When I examined the group a week later I asked the brightest of them "What is the distal attachment of sartorius?" His answer came: "Well, sartorius is a long flat muscle of the anterior aspect of the thigh. It is supplied by the femoral nerve and acts etc., etc." I stopped him, and asked for only the distal attachment. He repeated his verbal essay. The third time I asked him he repeated the essay to himself until he came to the part dealing with the distal attachment, opened his mouth,

allowed the words to appear, then continued his private recitation. This may not be typical of the students in general, but it was a common observation amongst the dozen or so students whom I examined that day.

The study of clinical medicine is, I was told by the President of the Italian Medical Students' Association, confined to visits twice weekly to the wards in groups of 30 or more students in 5th and 6th year. The students to whom I spoke expressed surprise when told of the clinical material available to South African students, and fairly boggled at being told that we are permitted and encouraged to examine patients from top to bottom, as, I am informed, the palpation of a patient by a student occurs but rarely in Italy.

As I did not have the opportunity to observe clinical practice in Italy, and as I would have been in no position to have judged what I might have seen, I cannot offer any opinion on the success or otherwise of the Italian system. I can only conclude that it was much different from ours and in many respects rather strange.

The lesson which I can draw from my observations is that our students are very fortunate in possessing material for the study of Anatomy and of Clinical Medicine by comparison with the students of Italy, and, I am led to believe, of the "continent" in general.

F. ARNOLD.

#### ARTICLES WE WOULD LIKE TO SEE

Why I wear sandals.—Dr. E. Roux.

How to fail 75% of students in three easy lessons.—Prof. I. Gillman.

The reformation of nymphomaniacs.—Prof. Hurst.

Wind through my hair in an Austin Healey.—Prof. Elliott.

My experiences in lecturing to 8 students outside the Path. Lab. at 8.01 a.m.—Prof. Becker.

Hallowed be my name.—Prof. Du Plessis.

Vitamins and you.—Dr. Hovy.

My first P.V.—Prof. Heyns.

Mucopus in the trachea.—Dr. Manson.

Rape and escape.—Prof. Friedman.

My sister and Elvis.—Dr. C. Prowse.

Surface anatomy as a form of relaxation.—Prof. Tobias.

My favourite baboon.—Dr. C. Gilbert.

#### THOUGHT FOR THE MONTH

God is wise. He meant that we should listen more than we should talk. Otherwise He would have given us two mouths and one ear.

### SPORT MEDICO-ENGINEERING INTERFACULTY GAMES

The event of the year will soon be upon us. Here is an opportunity for each and every single student to get in a bit of exercise and to bring out the "sportman" in you.

What sports will be played?

1. Rugby.
2. Soccer.
3. Hockey.
4. Badminton.
5. Tennis.
6. Squash.
7. Table Tennis.
8. Basketball.
9. Bridge.
10. Chess.
11. Snooker.

Remember the honour of the exalted noble Medical Faculty is at stake. We have got to maintain our reputation as "cock" faculty. So watch the notice-boards!

#### RUGBY

The finals of the inter-class games for the Medical School Cup will be played soon. Support your class.

Alan Menter (I) and Tony Murray (III) got their games for the Transvaal Under 19 Team. Congratulations.

#### BADMINTON

Ann Counihan (Physio IV) and Issy Heller (IV) shone in the recent Inter-University tournament held at Wits. Ann was selected for S.A. Universities, and Issy would probably have won the men's title if he had not an injured knee which forced him to withdraw.

#### WEIGHTLIFTING AND WRESTLING

Raymond Coll (V), Edgar Freed (V), Ernie Robertson (V), all took part in the recent Sports Festival at Pretoria with success. Clive Noble (V), the chairman of the Weightlifting Club, has taken up throwing the discus. Why? Ask him!

#### BASKETBALL

The new season is about to start and Costa Gazides (V), Wolfy Utian (IV), Errol Goeller (IV), Arthur Hovis (IV), as well as rugger star Robin Rathgeber (IV) ararin' to go and chewin' gum.

#### SQUASH

Lennie Blieden (IV), Mike Kew (V) and Alan Gottlieb (VI), as well as Transvaal player Jeff Maisels (V) are showing good form in the Transvaal leagues.

#### HOUSEMAN'S INTERVARSITY

This was held recently in Pretoria. "A good time was had by all" Wits' graduates were captained by (Flash) Harry Ofsowitz (Houseman in Ward 21). The score? Oh, well . . .

# WORLD STUDENT NEWS

## PAKISTAN

The number of medical colleges in Pakistan has trebled since 1947 to meet the ever increasing need of trained doctors in the country. At present there are nine medical colleges in eight cities of Pakistan, while there were three such colleges prior to 1947. Two medical colleges are located at Lahore and one each at Karachi, Multan, Hyderabad, Peshawar, Dacca, Chittagong and Rajshahi. Of the two colleges at Lahore, one is exclusively for women. Annually, these institutions are turning out 900 medical graduates — 650 men doctors and 50 lady doctors. The number of doctors has also increased three times during the past twelve years. In all there are at present 9,200 qualified doctors working in both parts of Pakistan as against only 3,500 doctors in 1947. (Student Information Bureau, Karachi).

## UNION OF SOUTH AFRICA

The police have warned the university authorities that if any further student demonstrations take place during the emergency, the demonstrators will be summarily arrested. This dramatic revelation was made by the Principal of the University of Natal when the Students' Representative Council (SRC) approached him to obtain permission to organise all-day pickets on Open Day, in order to remind the public that the University Education Act removed the freedom of the South African Universities to teach whatever they saw as the truth to whomsoever they wished. The Principal absolutely forbade the organisation of any such demonstration, and the SRC withdrew their plans. (Nux, Pietermaritzburg).

A conference to be attended by every Students' Representative Council (SRC) in South Africa was planned by the University of Natal in Pietermaritzburg SRC in view of the disturbances in the country and the growing rift between its students. The conference was held on the 5th and 6th of August, 1960, in Pietermaritzburg. This conference was the first full meeting held between English and Afrikaans-speaking students for 27 years and is the first full conference between all European and Non-European students ever held. (Nux, Pietermaritzburg).

*A gentleman living in Fife,  
Made love to the corpse of his wife.  
"How could he know, judge?  
She was cold, did not budge—  
Just the same as she'd acted in life."*

★

*There was a young lady named Hall,  
Wore a newspaper dress to a ball.  
The dress caught on fire  
And burned her entire,  
Front page, sporting section, and all.*

## INDIA

Calcutta police have unearthed a fake medical college which has allegedly sold hundreds of medical "diplomas and degrees" to their students. Armed with information the police raided the Silver Jubilee College in Machua Bazaar and recovered blank and fake diplomas and degrees. The police also found a list of students who had received the faked testimonials. The college principal has been taken into custody. (Special Report).

## NEW ZEALAND

Fifth year medical student Mike Gill of University of Otago has been invited by Sir Edmond Hillary to join the scientific and mountaineering Himalayan expedition which leaves later this year. He has been granted leave of absence for one year by University authorities. He will spend three months at Oxford learning special physiological techniques and the remainder in Nepal. Mike will spend most of his time compiling medical data concerning the body's need for oxygen at high altitudes. The expedition will also search for the Yeti or "Abominable Snowman" which is believed to exist on lower levels of the Himalayas. (Critic, Dunedin).

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