Experiences of a First Year Medical Student

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My heart beat is racing. I am running, but my heavy bag gets in the way. I begin to wonder what kind of heavy machinery I might have put in there. I remember — my Chaurasia and Lippincott, enough heavy machinery to give me a severe backache.

I've finally crossed the quadrangle and reached the staircase; phase 1 of my journey is complete. Now for phase 2, climbing the "mountain", three flights of stairs.

I break into a run, in spite of the strange glances coming my way from my fellow "mountaineers".

Finally I reach the landing – phase 3- and enter the lecture hall; I look at my watch - 8.00 am! I've made it just in time.

Most of our mornings begin thus, with a lecture at 8.00 am on the dot.

Who are 'we'? We are the first year medical students at the Faculty of Medicine, University of Colombo.

Six months ago we walked into the faculty, a little lost, a little excited, a little scared and just a little nervous. Now having lived through one end of term examination, many small group discussions, sports days and concerts, it would be wrong to say that our emotions are reversed. We are still lost, excited, scared and nervous. But much less than that morning on the 17th of June, 2008 when we walked in to the faculty for the very first time.

Our days are a blur of bodies and bones, muscles and glucose, migraine and gastritis, lecturers and demonstrators, poetry and prose, tears and laughter.

Almost all of us had been warned about the workload and about how different our medical

student life would be as opposed to our school life. But little did we realize the truth of those warnings, the weight of the work load, or the difference in our lives until we found ourselves completely immersed in faculty life.

The famous "Pacha" tree, a large, sturdy tree at the centre of the faculty quadrangle is where you will find us when not at lectures or practicals. From this vantage point we see the faculty float by. We see the senior batches come and go from the hospital, clad in white coats with a stethoscope in hand and realize that in a few short years, that would be us.

At present though, we are having our own little experiences and adventures. Being a first year at the faculty is by no means easy.

We juggle academics and our extra-curricular activities, and the truth is we do enjoy it, in spite or maybe because of the difference from our school days. It is not easy, not a bed of roses or a walk in the park; but we are learning to appreciate the immense difference in our lives.

Anatomy, physiology and bio chemistry – a whole new vocabulary, large books and a new format of learning, but we do find it interesting. Behavioural and community medicine, small group discussions and tutorials all of these which now seem familiar to us were a mystery six months ago.

And under the "Pacha" tree we plan the faculty concert, in the corridors we practice our dance for the freshers' night, in an empty lecture hall we practice different songs to sing for an upcoming concert. We go carolling late into the night and take part in various sports days during the weekend. We paint, draw, cut and paste to the best of our abilities to produce a picture or a poster for a competition.

We sing ourselves hoarse for the Junior Talent Search, and think up plays and skits with "new and interesting" scripts. We stay over at the faculty for "pirith" and come over on a Saturday for a "shramadhana". We swim, play cricket, tennis or hockey.

And of course, we read the Chaurasia for anatomy, Ganong for physiology and Lippincott for biochemistry and arrive at our first lecture at 8.00am.

We are the first year medical students of the Faculty of Medicine, University of Colombo; no one told us this would be an easy journey; in fact the total opposite. But we are trying to make the most of it because we know that in a couple of years it will be us in that white coat with a stethoscope in our hands and by the end of our years in the faculty, we hope that we will be able to look a person in the eye and reassure them with a simple word or deed.

Answers to the quiz (from page 32)

Ouestion 1

- a. Congenital aganglionic megacolon / Hirschsprung disease.
- b. Rectal suction biopsy, rectal manometry.
- c. Absence of ganglion cells in the bowel wall, extending proximally and continuously from the anus to a variable distance.
- d. Endorectal pull-through procedure.

Question 2

- a. Bilateral Talipes Equinovarus.
- b. Fore foot adducted, supinated

Hind foot – plantar flexed, inwardly rotated

Whole foot – in cavus position

- c. Spina bifida, arthrogryposis, meningomyelocoele.
- d. The aim is to develop plantigrade, flexible and painless functional feet.
- e. Conservative management with manipulation and serial casting (Ponseti method).

Serial, above knee plaster of Paris casts applied after 1st week followed by stepwise correction. If residual deformities are absent after about 6-7 serial castings, a foot abduction brace can be used. Surgical treatment is reserved if residual deformities present after serial castings.

Ouestion 3

- a. Osteogenesis Imperfecta/ Brittle bone disease.
- b. Autosomal Dominant inheritance.
- c. Recurrent pneumonia and declining pulmonary function occur in childhood and cor-pulmonale is seen in adults. Other complications include brain-stem compression, hydrocephalus, and syringohydromyelia.

Ouestion 4

- a. Port-wine stain.
- b. Unilateral left cerebral calcification.
- c. Sturge-Weber syndrome.
- d. Buphthalmos, glaucoma.