Lost in translation

Switzerland offers fertile ground for medical students to practise medicine ... and languages

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It was June 2008. I had finished my last clinical exam and was on the way to Zurich, Switzerland, the country where I had lived for the 4 years prior to matriculating into medical school. I had the special privilege of learning how a hospital was managed in a European country. It was a surgical rotation with 1 week being spent on a different subspecialty. First up was urology. Although I had a very basic command of Swiss German, I had not yet learned how to say, “Mr Meyer, this part of the physical exam requires me to palpate your prostate.” The power of full body demonstrations on one’s self, however, can be instrumental in conveying an idea.

The second station was general surgery. I was advised by one of my colleagues to study well before entering the operating room. One of the chiefs of the department, whose name translates to “Cutter,” was known to intensely question medical students while simultaneously correcting their retracting technique. The terms inadeguacy and helplessness still come to mind. Pimping, I recently learned, refers to the action of quizzing a student, resident, or fellow on relevant medical trivia.

“What are the top three risk factors for acute pancreatitis?” she shouted in Swiss German. I thought she was kindly asking the float nurse outside of the operating room to bring more sponges. Apparently, she was talking to the Canadian medical student situated right beside her.

“Sorry, my German is not so good,” I responded in broken Swiss German. Switzerland has four official languages, and English is not one of them. I was certain that I dodged a bullet. She switched to fluent English. Successfully pimped. Although I will never, ever forget that alcohol, gallstones, and medications are the top three risk factors for acute pancreatitis, the Pavlovian phenomenon has always caused my heart to go into sinus tachycardia whenever asked this question.

After touring through the other slices of surgical services such as orthopaedics and emergency trauma, I arrived to cardiac surgery for the grand humbling finale. It was Thursday afternoon and I had just finished lunch, a double espresso with a stick of Swiss chocolate. The telephone in my pocket had rung, which meant that the sternotomy was likely finished and that my mastered skill of spraying a fine mist at the ultrafine suture material was needed. This allows the surgeon to effectively graft the new blood vessel to the patient’s heart so that it can better perfuse previously starved regions and ultimately contract more efficiently.

One of the things that I appreciate most about surgery is the opportunity to work in team-oriented environments: anesthesiologists, surgeons, nurses, and technicians all functioning together to bring comparatively immediate improvements to patients’ lives. I had just arrived to operationssalle nummer acht (operating room 8). The technician had successfully harvested the saphenous vein, one of the frequently used vessels for coronary artery bypass grafts, and passed it to the cardiac surgeon. “Bitte Inizieren” (please inject). The saphenous vein needs to be

UBC medical student Daniel Malebranche (left) tries to navigate his way through Swiss operating rooms. In Zurich with Swiss surgeons Dr Daniel Perez (right) and Dr Eva Rüegg (centre) inserting a dynamic hip screw.

Continued on page 18
Learning at your convenience

Acess to clinical information is often best used when the physician is at the point of care. But what about the kind of learning that requires quiet contemplation? Continuing medical education at the point of convenience, when the learner has the time to focus and concentrate, is clearly ideal. This can be achieved by listening to audio files on portable CD or MP3 players, or even on smartphones. Audio-Digest Foundation, an affiliate of the California Medical Association, has been offering recordings of lectures of CME meetings from across the USA for more than 50 years. The lectures cover a wide range of specialties including anesthesiology, emergency medicine, family practice, gastroenterology, general surgery, internal medicine, obstetrics and gynecology, ophthalmology, orthopaedics, otolaryngology, pediatrics, and psychiatry. The College Library subscribes to these lectures in CD format and makes them available for loan. Furthermore, since 2006, the files have been available in MP3 format. Through the Library’s account at Audio-Digest, College members may download hundreds of files and listen to them on their computers or mobile devices for free. Instructions for access are on the library’s web site at the Audiovisual & PDA page, www.cpsbc.ca/library/pda-video-audio. A limited number of these files have been made publicly available by Audio-Digest on the iTunes web site, but access using the College’s web site offers a much larger selection by virtue of the Library’s subscription.

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References