
Letters to the Editor

Keeping It Interesting

To the Editor:

I very much enjoyed writing the article about the Siamese twins, "Why Did Eng Die?" [NC Med J 2001;62:66-8], and yet the thing I have enjoyed most is the response to it. Of all my publications, none has generated as many favorable responses as that one. These came from people who wrote notes, people who called on the telephone, and people who passed me in the hall, and told me how much they had enjoyed it.

The *North Carolina Medical Journal* continues to be a very important historical document for North Carolina and for medicine in particular. I only hope the leaders in our profession in North Carolina will see fit to continue the publication of this very important journal.

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Clarification of Terms

To the Editor:

Please educate me. I understand oral-oral transmission and fecal-oral transmission for H-pylori [Shah M, et al. *Helicobacter pylori*: a view from a primary care perspective, NC Med J 2001;62:198-202]. I do not understand gastro-oral!

John R. Dykers, Jr., MD
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The Author Replies:

Gastro-oral transmission is similar to fecal-oral transmission but involves the gastric contents. Examples of such transmission would be (1) a nosocomial infection from uncleaned or improperly cleaned EGD scopes, or (2) vomitus getting into a water supply and then individuals drinking that water. Hope this clarifies the transmission types. Thanks.

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The Journal's a Page-Turner

To the Editor:

On the first of July, I finally got a quiet afternoon to curl up with the May/June *North Carolina Medical Journal*. I had flagged "Hearing the Story" by Mike McLeod [NC Med J 2001;62:119-21]. We've invited him to the Thursday Morning Intellectual Society, and I hope he'll come.

Then I got wowed by Bill Hensel's article on the education of an educator [pp. 122-3]; was greatly appreciative of Dr. Strawcutter's thoughts about therapeutic abortion [p. 124]. I was fortunate also to have time to read about estuary associated syndrome [pp. 126-32], and I'm trying to remember the name of the lady who originally investigated this and got so sick.

Then I got the wonderful treat of learning about vipomas and vasoactive intestinal polypeptide [pp. 134-9]. My sincere thanks to Charles Smith et al for relieving this chunk of my ignorance. Now I can't clean up this place; I have to save a space for this copy of the *Journal* until its treasures are better integrated into my synapses.

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From the Editor:

The name you're looking for is probably that of Joann Burkholder, PhD, Associate Professor of Aquatic Botany and Marine Sciences at North Carolina State University.

More on Spirituality in Medicine

To the Editor:

I really appreciated your "grain of salt" commentary on the article by Keung and McQuellon ["When Medical Meets Spiritual" NC Med J 2001;62:192-4]. In these days of evidence-based medicine, we ought not to be required to believe in the supernatural.

The doctor who is without a biopsychosocial model is like a stool with two legs. Even the surgeon whose patient will be temporarily unconscious must use psychosocial skills before and after surgery.

As a psychiatrist I must treat the patient as a person

whose joint participation in the treatment is essential. I have heard of self-styled Christian psychiatrists but do not place their competence above that of Muslim, Buddhist, or atheist psychiatrists.

No patient has ever asked me to pray for him. One, as soon as my office door was shut, closed his eyes and prayed out loud that I would be able to help him. I was—but no more or less than thousands of others who did not pray!

I believe that we medical professionals should interact with the very real personal problems of our patients and leave their spiritual concerns, if any, to spiritual professionals. Even so, as a professional who gets to know as much as possible about his patients, I can grade each person's religiosity on a scale of zero to extreme. Knowing their belief or lack of belief contributes to my understanding of the patient as a whole human being without my having to define "soul" or "spirituality."

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A Becoming Modesty

To the Editor:

I read with particular interest the article entitled "Two Neurosurgeons" in the July/August issue [NC Med J 2001;62:210-11]. I was fortunate to have been associated in practice with the author, Dr. William Sullivan, for some years. It was typically quite modest of him to recount others' accomplishments and not to state his own. He himself is a role model for all, both as an outstanding physician and as a skilled general surgeon.

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It's Never Too Early to Start

To the Editor:

I am currently a premed student getting ready to apply to medical school. I was wondering if and how I could get a subscription to the North Carolina Medical Journal. And if that is possible, how much is it for a one-year subscription? Thank you for your time, and I look forward to hearing from you.

Timothy Corbett
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A Child's View of Caring for Epileptics

To the Editor:

Thanks for publishing my article, "Learning The Thunder," earlier this year [NC Med J 2001;62:43-4]. I've received many communications in response to this piece. Also, as a result of the article I've been invited to speak at the International Conference on Epilepsy Care later this month.

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And One Who Appreciated It

To the Editor:

As we grow up, we all deal with problems with our families. These no doubt mold our lives. My heart goes out to Blaine Hall after reading his article in the *North Carolina Medical Journal* [see above. Ed.] I think he has an important message for his colleagues in medicine: to have just a little more empathy for the patients they see. I think if persons who take care of patients with epilepsy would listen to him, they would gain a great deal more insight into the needs of their patients.

My thanks to the author for that article. I know the Lord loves him.

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We encourage and welcome letters from our readers. Type and double-space all text, keeping length to under 500 words. Longer letters may be considered for publication as commentaries. We reserve the right to edit and abridge all copy. Send by mail: North Carolina Medical Journal, Box 3910, DUMC, Durham, NC 27710; by fax: 919/286-9219; or by email: nash0004@mc.duke.edu.