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HEALTH

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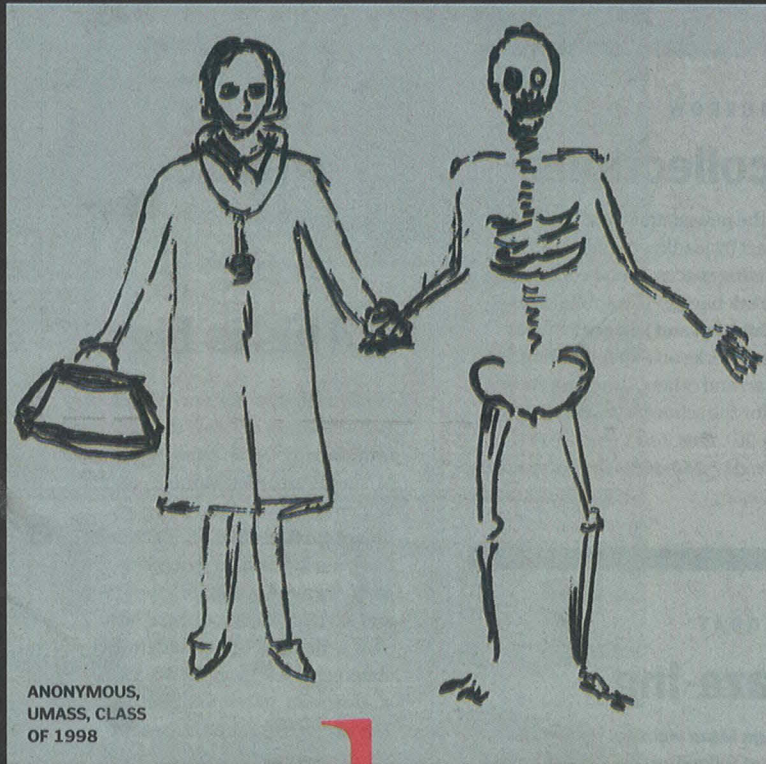
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Me



ANONYMOUS,  
UMASS, CLASS  
OF 1998

and my  
cadaver

How medical students use art and words to survive gross anatomy courses — and become more compassionate doctors. By Tara Ballenger

"First Year Med Student Meets Cadaver," anonymous artist, University of Massachusetts Medical School, Class of 1993



# Me and my cadaver

By Tara Ballenger  
GLOBE CORRESPONDENT

In January, Elizabeth Baltaro stood over her first real patient. With scalpel in hand, Baltaro took a deep breath, readying herself to cut into human skin for the first time. She tried to forget that her patient was dead.

"I remember her nails," recalled Baltaro, now a second-year student at Tufts University School of Medicine. "They were bright pink, and I thought to myself, she must've been a spunky lady."

Like all the doctors who came before her, Baltaro survived gross anatomy, a semester-long course that involves systematically dissecting a cadaver, from the muscles of the back to the hemispheres of the brain. It evokes fear and apprehension

among the uninitiated. Students wonder if they can handle the task of facing a dead body, let alone cutting it open.

But students leave the course with an understanding of the inner workings of the human form. And as they get to know the physical bodies of their cadavers more intimately, many students learn to face death and accept it as an important part of medicine. Working with real human bodies, some students say, reminds them of the individuality of each patient — dead or alive — and makes them more compassionate doctors.

"When you take a step back and think about how the hand you are dissecting once threw a Frisbee, or how the heart you are holding with your own hands once beat to keep the body lying on the ta-

ble in front of you alive, you are forced to grasp the role of death in the life cycle," said Daniel Katzman, also a second-year medical student at Tufts.

Such observations are familiar to psychologist Sandra Bertman, who has been guest lecturing in the University of Massachusetts Medical School gross anatomy class in Worcester for more than 10 years. She specializes in thanatology, or the study of death and dying, and she aims to help students accept the emotions that bubble to the surface during the course. She invites them to express their feelings through words or drawings, and this year she published "One Breath Apart," a book featuring the students' art and poems.

Death is a common theme. Several drawings show the student dissecting a

cadaver that looks identical to the student, and another student drew herself looking into a mirror and seeing a skeleton where her reflection should be. Another depicts the anatomy lab as a cemetery, and one poem is titled, "Kill Me I'm Already Dead."

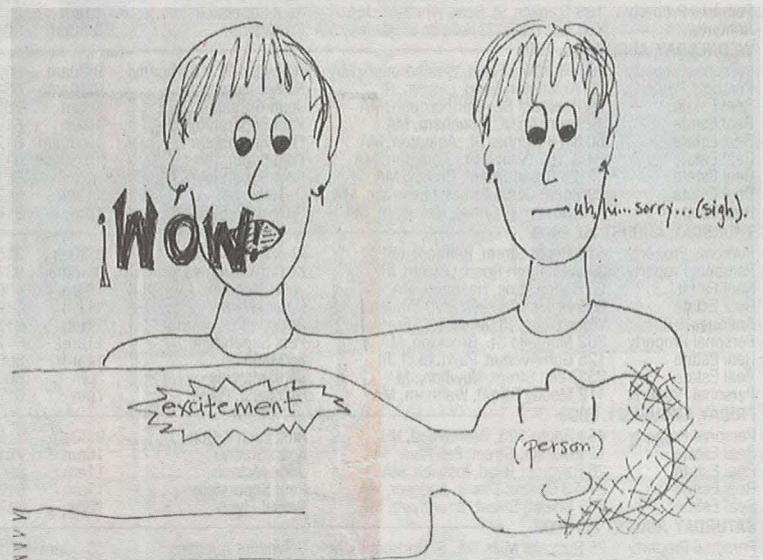
Thinking about the life behind the dead body is intense for many students, said Bertman. "Many of these kids haven't even dealt with death in their own families," she said. "They just don't talk about it."

Robert Bouchie, the anatomical gift program coordinator at Boston University School of Medicine, wants the students to know as much about their cadavers as possible.

"I tell them their age, their cause of



Drawing by anonymous artist, UMass Medical School, Class of 1993



Drawing by Natalie (Wood) Vogel, UMass Medical School, Class of 2003



Cadavers in the anatomy lab at the UMass Medical School.

SANDRA BERTMAN

## Medical students use artworks to share the life (and death) lessons they learn in the dissection course gross anatomy

death, and their occupation," said Bouchie. "It gives this person an identity. This person was a truck driver or a teacher, or worked in a floral shop. I want them to know and care."

The appreciation of the humanity behind each cadaver is one advantage of having students dissect real people as opposed to virtual dissection using high-tech simulators, said Bertman.

"We're really concerned that [students] don't start developing this armor or detached concern."

The individuality of the cadavers has benefits beyond fostering empathy, said Al-Walid El-Bermani, associate professor of anatomy at Tufts. It shows that physically, the nuts and bolts that constitute our insides are not standardized.

"The variability of the human body is amazing. A computer program [for anatomy] tells you where things should be, or ought to be, but a cadaver shows you the variations, and where things really are," said El-Bermani.

As the semester wore on, Baltaro's and her classmates' apprehension turned to wonderment and gratitude.

"I remember being scared that I'd be grossed out by the smell or the experience of touching a dead person. We were all anxious, but then you realize there is nothing to be scared of," said Baltaro.

She remembers the awe that her cadaver brought her, like when she opened her heart to examine the fibers inside the ventricles and discovered they looked like thousands of tiny tree branches.

"I would never have expected, in my wildest dreams, that they would be that beautiful," said Baltaro.

Most medical schools have a memorial ceremony for the cadavers after classes end in the spring. UMass invites the families of the donors to be there as medical school students honor what they call the "ultimate gift."

"I wanted to know who worked on my dad — who knew every inch of him, without knowing who he was," said Dana Robinson, whose father, Aubrey Gould, a retired family doctor, donated his body to UMass last fall.

Robinson said meeting the students who dissected her father was one of the best experiences of her life.

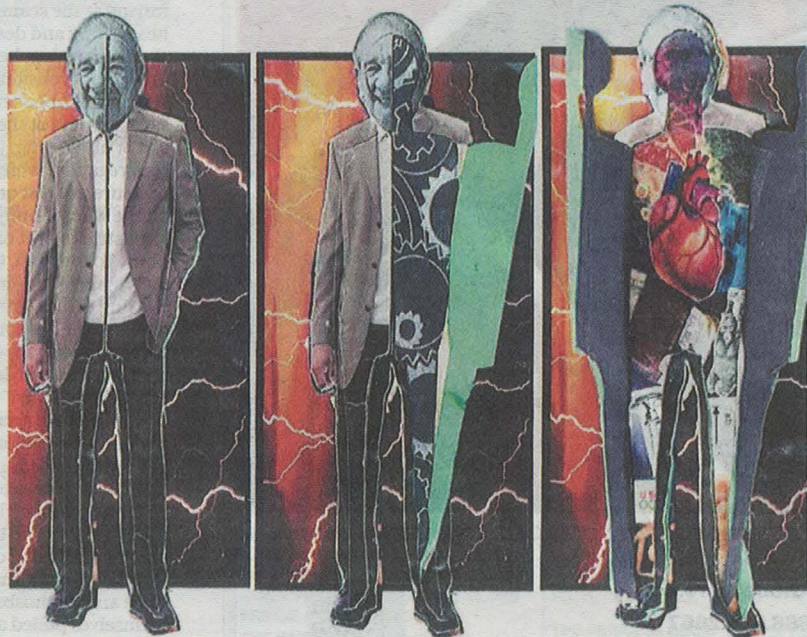
"They took care of him and they treated him with respect. I could sense how much it meant to them," she said.

For Baltaro, the cadaver was a teacher who educated her about the body, and, more importantly, taught her not to fear death.

"We don't really see a lot of death in our society. It's something that's hidden," and not often discussed in medical school, Baltaro said.

A lot of doctors feel lost once their patient becomes terminally ill, said Bertman. She urges students to realize that helping patients and their families deal with death is an important part of their job description.

"Now I can accept death and not be so anxious and intimidated about the idea of someone being dead," said Baltaro. "A lot of diseases medicine can't cure and it can't fix. Sometimes, your role as a physician is to help someone understand more about the end of life."



Sculptural collage by Kristin Burns, UMass Medical School, Class of 2004