Editorial

WHAT DO YOU KNOW ABOUT C. A. M. S. I.?

There's yet another obscure organization at Dalhousie. Every year when the medical students register, they each pay a $2.00 membership fee to C.A.M.S.I. At the time they do not realize that they have joined such an organization, and even after a few years, they know the name of it but little else. C.A.M.S.I. is the Canadian Association of Medical Students and Internes. At the present time, all Canadian Universities giving a medical course are represented in C.A.M.S.I.

In this issue of the Dalhousie Medical Journal, we are endeavoring to present to the students those C.A.M.S.I. activities from which Dalhousie gains benefit and also a brief idea of C.A.M.S.I. projects supported by other medical schools.

WHAT DOES THAT $2.00 FEE GIVE YOU?

First of all you become a member of a nationwide organization whose aims are to promote the exchange of ideas among medical students and internes, and to promote the investigation and attack of common problems on a national basis. No matter how hard and full of troubles the life of a medical student may seem to you, you may be sure that across Canada others are finding it to be the same. C.A.M.S.I. tries to alleviate this and to make life as a medical student more interesting.

Even on the first day of attending medical school you may reap the benefits, as C.A.M.S.I. has arranged for life insurance policies to be made available at $3.00 per $1,000, and for subscriptions at reduced rates to such publications as the "Canadian Medical Association Journal", the "New England Journal of Medicine" and "Modern Medicine of Canada". Of course, C.A.M.S.I. has its own journal to which any of its members may contribute articles for the quarterly publications. But the C.A.M.S.I. Journal seems to be hiding its light under a bushel, for it appears to be non-existent on this campus. Have you seen any copies? If not, did you ever ask why not?

These are the facts about C.A.M.S.I. that most medical students have acquired but there are many more. Did you know that those dull didactic lectures can come to life in the films that C.A.M.S.I. offers? These films are supplied by the National Medical Film Library and various drug, pharmaceutical and surgical supply houses, so there is a great variety available. Any cost incurred is paid by C.A.M.S.I. In 1957, Dalhousie was the medical school which made the most use of this opportunity. But this year—well, now you students know about it there is no excuse. All it entails is seeing that your Film Officer requests suitable films for the year and makes arrangements for showing them.

Of interest to those further along towards their chosen career, are the C.A.M.S.I. projects of increased interne remuneration, Preceptorship
and Foreign Interne Exchange. If you have managed to get beyond First Year and these terms are still strange to you, there is no excuse. Your first knowledge of them should not have to come from the Journal. In case you didn’t know, there happens to be a Medical Society at Dalhousie at whose meetings C.A.M.S.I. and Medical projects and activities are discussed before being sponsored and undertaken on the Medical Campus. As this year saw the inauguration of Preceptorship and Foreign Interne Exchange at Dalhousie University, this issue attempts to present a comprehensive view of the organization and function of these schemes. But what has happened to our project of increased remuneration for internes? As we are working towards our M.D’s, so also do we have to work to gain what we desire. It is up to each and every year to make a concentrated effort for the benefit of the whole. If a lack of interest and effort is shown by the students how can we expect other parties to realize and meet our needs. Surely some of you must be interested in the plight of the overworked and underpaid interne—you must be, for some day you, yourself, will be in his place.

Other C.A.M.S.I. facilities are also available to us. The Summer Employment Programme makes a list of jobs available to medical students in the summer, which is brought up-to-date each year and sent to the medical schools. A little-known fact is the allocation of $75.00 to the Medical Society which is to be used to provide speakers for a Student Forum. For those of you who prefer to study from previous examination papers, C.A.M.S.I. has made funds available for the mimeographing of the examinations given in all classes for the past three years. However, they did not also offer to undertake the collection, organization, typing and actual mimeographing of these papers. That, they felt we were capable of doing ourselves. So far we do not seem to have been very successful in this respect.

If C.A.M.S.I. is helping us in all these various ways, why then are we at Dalhousie so ignorant of and apathetic about the organization, that one of Dalhousie’s C.A.M.S.I. projects for last year was to firmly establish C.A.M.S.I. on the Campus? You must admit that you are really being offered more than $2.00 worth, so why not take advantage of it—support the projects, use the facilities and show an interest. C.A.M.S.I. representatives Mike MacKinnon and Jim Holland are more than willing to take your opinions and ideas to a national level.

E. M.
Smith Kline & French has for many years been engaged in a continuous program of psychopharmacological research. Many hundreds of compounds have been tested by our laboratory scientists, in a ceaseless effort to improve upon existing drugs and to discover new ones. During the past decade our procedures for the pharmacological screening of neuroleptic agents have become highly refined; only a compound which exhibits characteristics marking it as a distinct therapeutic or pharmaceutical advance can survive this stringent process of elimination.

The latest product of our research in this area is ‘Stelazine’ (trifluoperazine, S.K.F.), a promising tranquilizer and antiemetic which has so far been clinically proved in over 10,000 patients. Its chemical formula is 10-[3-(1-methyl-4-piperazinyl) propyl]-2-trifluoromethylphenothiazine.

‘Stelazine’ appears to be the safest and most potent of the known phenothiazine derivatives, a growing group of compounds recently developed to aid the victims of mental illness.

- In doses of 2 to 4 mg. per day, ‘Stelazine’ has proved highly effective in the treatment of mild to moderate mental and emotional disorders, as well as for the control of nausea and vomiting from a wide variety of causes.

- With psychotic patients, clinicians have found ‘Stelazine’ to be of outstanding value, in a dosage range of from 5 to 20 mg. a day. It has produced remarkable improvement in many withdrawn, apathetic schizophrenics, and has often helped patients who have been refractory to previous therapies.

\[ \text{Stelazine*} \]

\[ \text{A FURTHER ADVANCE IN PSYCHOPHARMACOLOGY} \]