



United Way closing in on goal

The United Way campaign is winding up with contributions nearing the university's goal of \$97,500.

"As of this morning's mail (Oct. 10) we had close to \$81,000," Janet Sanfilippo, co-chairperson of the university-wide campaign, said.

Pacesetters, those who give \$60 or more, have contributed about 80 percent of the total so far, she said.

"If all of the pacesetters from last year who haven't yet contributed this year would go ahead and do so, we would go over our goal by a significant amount," Sanfilippo said.

The official end of the campaign is Oct. 31, but Sanfilippo said she hoped the university could report back to United Way campaign headquarters for all of Durham that Duke had met its goal before that deadline.

"I think there is a good chance we'll even go over the year's goal," she said.

Service aids physicians 'on periphery'

By John Becton

Suppose you are a physician somewhere in North Carolina with a need to consult with a specialist at Duke on an emergency case late at night, and previously you have had little contact with anyone at Duke. Where do you begin?

Since June of this year, in this and other situations, you could begin — and end — with a single call to one of two Physician Referral Service WATS lines. WATS stands for Wide Area Telecommunications Service.

Planning and developing the service started about a year and a half ago, because of a concern for "a very large service area of physicians practicing on the periphery of Duke who need to gain access to the resources here," according to Peter A. Saitta, administrative assistant to the assistant vice president for health affairs-administration.

The planning involved a significant number of people in the medical center and resulted in a system that has proven successful.

Special handling

Emphasizing that the two Physician Referral Service WATS lines are not meant to replace any other system whereby a referring physician utilizes Duke's medical resources, Saitta explained that during the day, calls are handled directly in the Private Diagnostic Clinics (PDCs).

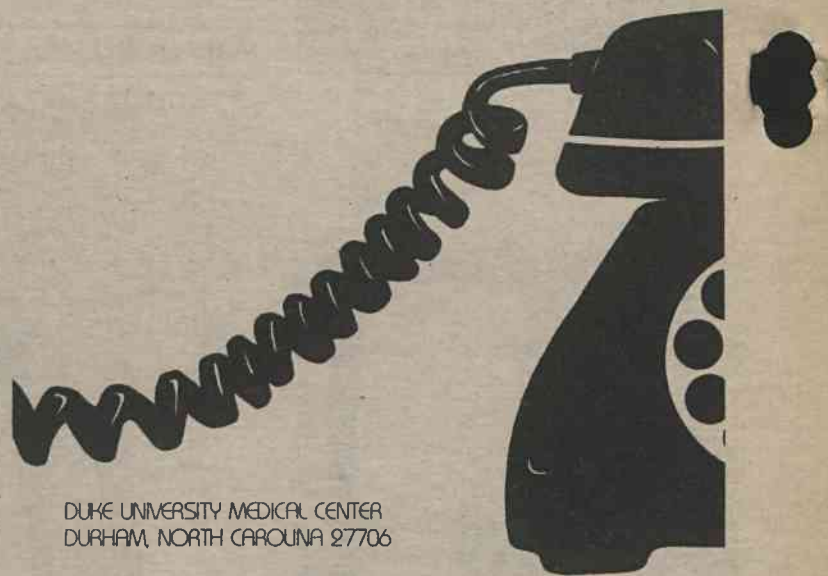
"There are people in each division of the PDC charged with responding to referral calls," Saitta said. "In the daytime, a call to either the medical division number or the surgical division number goes directly to someone who knows what is going on, has direct contact with the doctors and can schedule appointments or admissions."

After hours

After regular business hours, the medical line becomes the emergency line for medical and surgical cases, and the surgical line becomes the routine referral line.

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PHYSICIAN REFERRAL MANUAL



DUKE UNIVERSITY MEDICAL CENTER
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Avoid running into misery by using common sense

By Bob Wilson
Duke News Service

America's millions of "running wounded" could avoid a lot of misery by getting off on the right foot with some simple common sense, Duke track coach Al Buehler says.

Many converts to the nation's latest physical fitness mania are trying to get in shape in only a few days after years of the soft life, and their bodies just won't stand for it, Buehler says.

The coach, who estimates he's probably seen more running injuries than most physicians, said in a interview that new runners should introduce their bodies to a regimen of gradual, stressful exercise.

Slowly and easily

And, Buehler added, the confusing matter of which running shoes to buy may have to be sorted out by some trial and error "because there's no 'best' shoe for everybody."

A manager of the U.S. track team at the 1972 Munich Olympics, Buehler advises

new runners to approach the sport "slowly and easily" to head off such potentially sidelining injuries as tendonitis.

Some experts have estimated that half of all runners will experience some kind of painful injury to the feet, legs or knees.

Buehler said anyone over 35 who's thinking about a personal running program ought to consult a physician for a checkup and probably take a stress test and electrocardiogram.

Begin on soft surfaces

He recommends that beginning runners confine themselves to soft surfaces like park fields and athletic trails, rather than striking out directly onto concrete and asphalt — both punishing to bones, muscles and tendons.

"The human body is like a rubber band," Buehler said. "It stretches so far, then it breaks. You have to give it time to recover from an overload of stress."

Buehler thinks many runners get too ambitious after discovering they can easily click off a mile or two. They then try for four or five miles, and suffer the consequences the next day in limps and pains.

Though Buehler doesn't recommend

brands of running shoes, he does tell those who ask him that his favorite style is the so-called training flat. These shoes, usually consisting of uppers of nylon and suede and soles of thick rubber, are light and provide vital arch support for most runners' feet.

When it comes to shoes, Buehler added, one thing is for certain: "Tennis shoes aren't made for running."

Buehler said the running shoe business, now one of the nation's growth industries, is "very competitive," but most of the progress in shoe design has come in colors and stripes.

In many cases, he noted, the shoes themselves are designed for special events: sprinting, hurdling, jumping or steeplechasing.

Good shoes fit like glove

Buehler said runners "have to be smart enough to see through the advertising smoke and select the brand that fits comfortably and protects the feet and legs."

A good pair of running shoes will feel like a glove on the feet, the coach said.

Buehler said once a runner finds a comfortable shoe that doesn't produce injuries, he or she should resist

temptation to try somebody else's new, improved model.

Training injuries frequently occur when runners switch from one brand to another, he said.

This happens, Buehler explained, because the body slowly adapts over a period of time to shoes that are gradually wearing down in the soles and heels.

Unexpected stress

When a different pair of shoes come into use, the biomechanical linkages of the feet and legs may suddenly be subjected to unexpected stress—and the result is often an injury.

There are times, however, when even an old and trusted pair of running shoes can cause trouble, according to Buehler. Shoes that functioned well over distances of three or four miles may not give enough shock protection over a 26-mile marathon route.

In that case, Buehler, said, there isn't much a runner can do except to seek more shock protection with a shoe preferably made by the same manufacturer.

Whenever shoes are changed, runners would be wise to start breaking in their new ones before the old ones fall apart, Buehler, suggested. This allows the body to adapt at its own good speed to the new shoes and could help avoid strains and other injuries.

Faculty Wives to meet

The Medical School Faculty Wives will meet Wed. (Oct. 18) at 10 a.m. in the home of Mary Parkerson, the organization's president.

A coffee will welcome new members and Dr. Suydam Osterhout, professor of microbiology and associate dean for admissions, will speak.

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Come and run

Never a place to miss an opportunity for a foot race, Duke will hold a Duke-atholon Tuesday (Oct. 17), as a part of National Jogging Week, Oct. 14-21.

Sponsored by the Department of Health, Physical Education and Recreation, the Duke-atholon will include 880-yard, 2-mile and 10,000-meter events for men, women and "veterans." The last group is defined as "over 40."

First and 2nd place awards will be given in each event.

The Duke-atholon will begin at 4 p.m. Tuesday, on the track in Wallace Wade Stadium. Participants must sign up in the Intramural Office, 105 Card Gymnasium, by Monday.