

Common Struggles of a Medical Student

If you are an S1 (and only a med student will know what this means), then there are just some things that no one else will understand about your life, and how could they? Who else could learn to get comfortable being alone in an anatomy lab with nothing but dead bodies to talk to?



YOU BEGIN TO SPEAK IN A FOREIGN TONGUE.

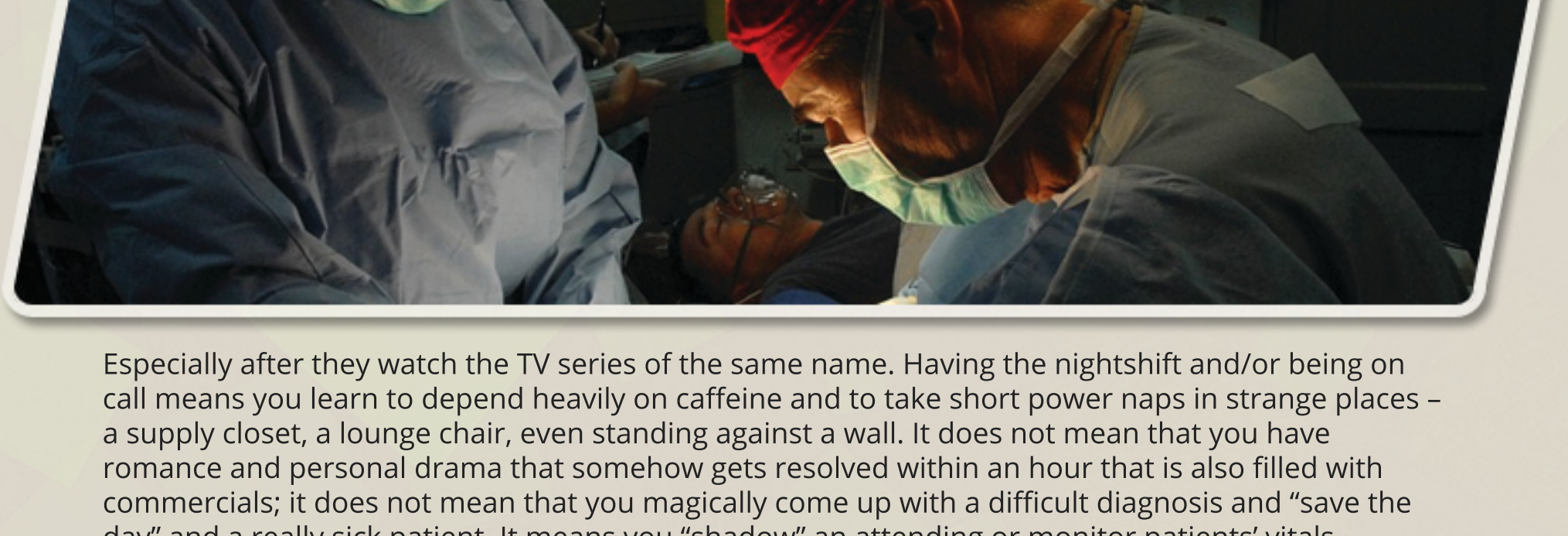
A lot of your language seems to be related to Latin or Greek, but odd words are spilling forth from your mouth – words like integumentary, lingual artery, and glossopharyngeal nerve. And a lot of your words begin with things like “histo,” “lapar,” “hemat” and so on. People may not understand why you have a book on Latin and Greek etymology on your kitchen table, but it is one that you commonly use. Studying Greek and Latin roots, prefixes and suffixes lets you learn and remember medical terminology.

PEOPLE YOU WENT TO UNDERGRAD SCHOOL WITH ARE GETTING MARRIED AND HAVING KIDS, AND YOU’RE STILL LIVING THE “SINGLE LIFE”

Though it isn't their common definition of a single life. Your “singleness” is not comprised of being a “player” in romance and fun; it is having almost no social life for long periods. And you're really happy every time one of your friends has a healthy, normal baby, especially after you begin to study all of the birth defects and genetic issues that exist. In fact, there are times when you wonder if you want to take the chance of having kids at all.



PEOPLE WHO ARE LEADING “NORMAL” LIVES MAY NOT UNDERSTAND WHAT THE “NIGHTSHIFT” REALLY MEANS.



Especially after they watch the TV series of the same name. Having the nightshift and/or being on call means you learn to depend heavily on caffeine and to take short power naps in strange places – a supply closet, a lounge chair, even standing against a wall. It does not mean that you have romance and personal drama that somehow gets resolved within an hour that is also filled with commercials; it does not mean that you magically come up with a difficult diagnosis and “save the day” and a really sick patient. It means you “shadow” an attending or monitor patients’ vitals.



YOU TAKE ODD JOBS TO PAY THE BILLS THAT YOUR LOANS ARE NOT COVERING.

You hire yourself out as a pet or house sitter while people with normal lives take vacations. You mow lawns, and everyone thinks you are enjoying sun and fun from the tan you now “sport;” you tutor high school biology students while worried parents are wringing their hands over their kids’ grades. You don't particularly like these jobs, but the alternative is eviction or Ramen noodles for the next four years.

HYPOCHONDRIA IS A PERMANENT CONDITION.

People who develop “symptoms” get on Web.MD and read about all of the things that their symptoms could mean, and sometimes they rush to their doctors only to find that there is really nothing seriously wrong. These are amateurs compared to medical students. Imagine being in Pathology class every day and studying every disease known to man and its symptoms. Med students have “symptoms” on a daily basis and don't need WebMD. They have their pathology texts to give it to them “straight.” This is what professional “hypochondria” is – developing new symptoms every single day!



“NORMAL” PEOPLE CAN TELL YOU WHY THEY CHOSE THE CAREERS THEY DID.



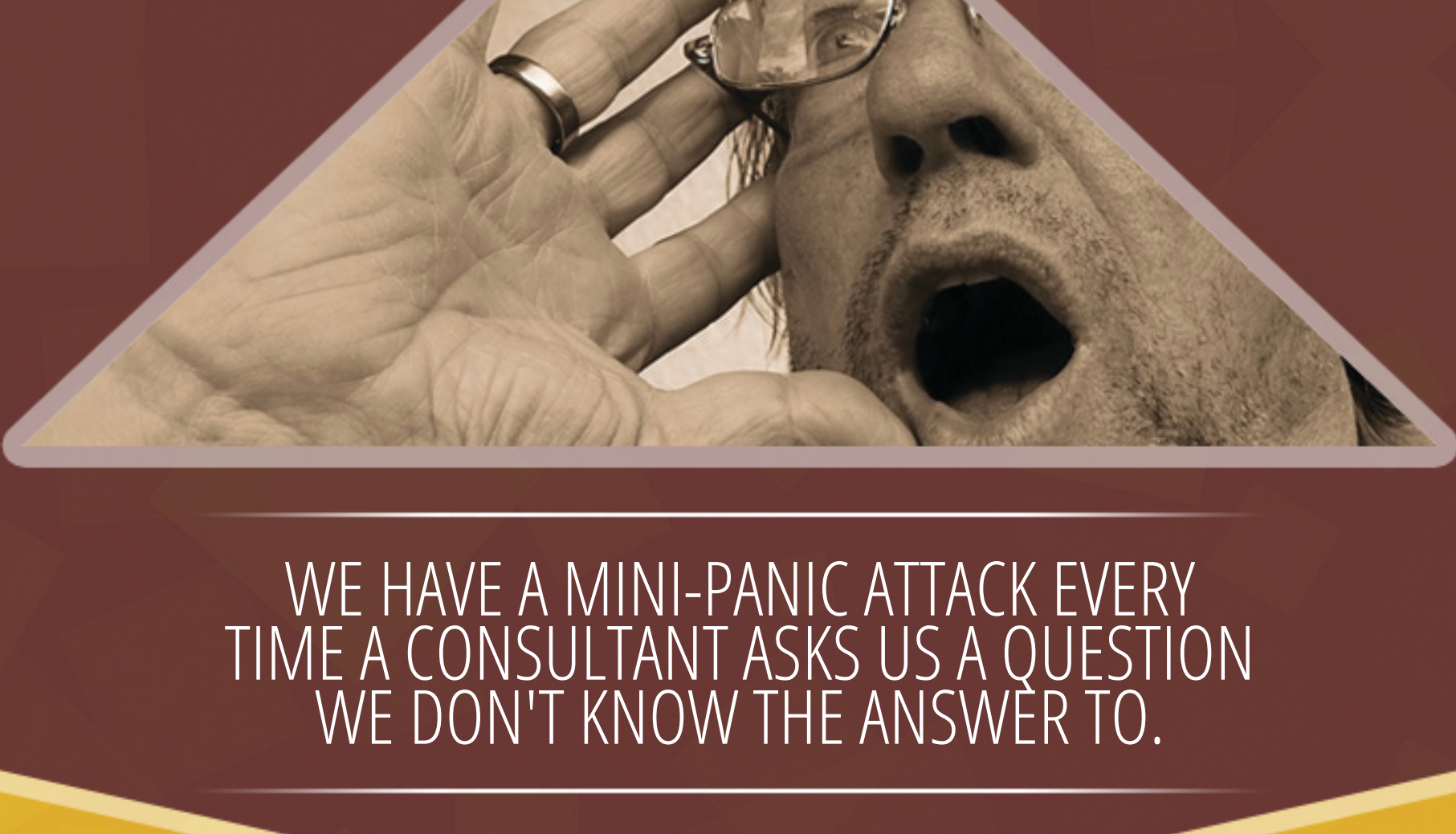
They are passionate about teaching children; they love programming and developing new apps; they love the challenges of accounting or engineering. You, on the other hand, spend time wondering why indeed you chose this profession. Here you are bleary-eyed in class, after an “all-nighter” at the hospital, knowing that your refrigerator is empty and wondering when you will find the time even to grocery shop; here you are in the anatomy lab looking at diseased livers and lungs. And you have pretty much figured out how much debt you will have when you finally do graduate and begin life as a pauper doing an internship and residency. But, somehow, the passion for medicine really does “trump” it all, and you move forward!

TALKING TO “LAY” PEOPLE JUST GOT A LOT HARDER.

When you find yourself in social situations, you tend to talk about your latest successful diagnosis of a disease only you can pronounce, while they are talking about politics or the latest movie they saw. Worse yet, they begin to list all of their symptoms and assume that you can be the “resident” diagnostician. You resist the urge to tell them that they obviously have cancer, even though you will later tell them that it was just a joke.



WE HAVE TO MEMORIZE SO MANY NEW WORDS IT FEELS LIKE OUR BRAINS ARE ABOUT TO EXPLODE.



WE HAVE A MINI-PANIC ATTACK EVERY TIME A CONSULTANT ASKS US A QUESTION WE DON'T KNOW THE ANSWER TO.

WE GET STRESSED OUT BY OUR NON-MEDIC FRIENDS GRADUATING, GETTING MARRIED, AND HAVING KIDS.



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<http://www.lifehack.org/articles/communication/12-things-only-medical-students-will-understand.html>
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