

THE REST OF YOUR LIFE

A Joyful Return to Dancing

Finding time for renewal is no easy task for full-time physician Dr. Shaun J. Gillis, a married mother of three children, aged 9, 6, and 3.

That's why she looks forward to her 2-hour dance rehearsals every Thursday night, which she began 3 years ago as an outlet for exercise and stress release.

Dancing "is almost like yoga for my mind or meditation—it's a chance to step away from what I do every day, all day," said 39-year-old Dr. Gillis, who practices ob.gyn. in Bozeman, Mont. "I'm not mom, and I'm not the doctor. I'm just dancing, minding what my feet are doing. It's relaxing mentally, a chance to step away."

A Montana native, Dr. Gillis starting dancing competitively as a freshman in high school and went on to join the dance company at Montana State University in Bozeman, where she specialized in lyrical and tap dancing. Her dancing days were put on hold when she enrolled in medical school at the University of Washington, Seattle. "It was very sad," she recalled. "With medical school and residency, I was too busy."

When she relocated back to Bozeman she joined Tanya's Dance Company in Belgrade, Mont. (www.tanyasdance.com) on referral from a friend and picked up dancing again after a 10-year break. Returning to dance "was very comfortable," she said. "Once I started moving, I realized I could do this again after taking a long break. I've also had some really



Dr. Shaun J. Gillis, who had to give up dancing for 10 years, works on her clogging: "It's all about the footwork."

great teachers who have been encouraging and positive."

Tap dancing "has become my new favorite. But I also like lyrical dance; it's more expressionistic," said Dr. Gillis. She's also adept at clogging, which she described as "an American version of Irish folk dancing. It's all about the footwork. There is not a lot of arm movement or upper body motion, but the steps are quite different from Irish folk dancing."

She said she admires the work of the Alvin Ailey American Dance Theater, a New York City-based company that tours extensively.

Tanya's Dance Company, whose members range in age from 18 to their early 50s,

competes with other dance groups in Montana during March and April and stages a local performance in June. Right before the curtain went up at last year's performance someone's child yelled out "Go, Mom," which caused the dancers to erupt with laughter, she recalled.

In the spring of 2007, Dr. Gillis and her teammates received the honor of having the No. 1

tap routine in a statewide competition. Such events represent a chance "to take an individual talent and turn it into a team sport because we compete as a team," she said. "The judges score you on costumes, makeup, and hair—so everything needs to be very uniform."

She said she enjoys such camaraderie with other women from all walks of life. "I interact with people that I would never interact with on a daily basis," she said. "Nobody else in my group is a physician or in the medical profession."

Dr. Gillis initially worried what her patients would think about their doctor performing dance routines in public, but she is over that now, and explained that

many of her patients showered her with support and encouragement. In fact, some members of the dance team are her patients. "This is a small town, so it happens," she said.

Her goal is to keep building her skills and to keep dancing as long as she is physically able. "There are some incredibly difficult tap moves that I watch my teacher do and I'm just in awe," she said. "I'm constantly striving to see if I can get my feet to move like that or learn a complicated series of steps. It's challenging."

Dr. Gillis noted that it saddens her to think she went 10 years without dancing, "because it was such a joy to get back into. Being a physician you have to maintain balance and things that you enjoy outside of medicine." ■

By Doug Brunk, San Diego Bureau

E-MAIL US YOUR STORIES

Do you trade in your lab coat on the weekends for two-wheeled transportation and leather? Is the highlight of your year bike week at the beach? Have you ever had the misfortune of suffering from road rash? Whether you enjoy taking leisurely rides on a cruiser or prefer the speed of a crotch rocket, we want to hear your stories. Send an e-mail to d.brunk@elsevier.com.

PhRMA Guidelines Ban Free Trinkets, Allow 'Modest' Meals

BY MARY ELLEN SCHNEIDER
New York Bureau

The free pens and mugs adorned with the names of commonly prescribed drugs are soon to be a thing of the past, thanks to a new set of voluntary guidelines from the Pharmaceutical Research and Manufacturers of America.

However, the real impact of the guidelines is still up for debate.

The voluntary guidelines, which will go into effect in January, were released this summer as pressure mounted from Congress and the academic medical community for industry to rein in its marketing practices.

The new guidelines update the 2002 PhRMA Code on Interactions with Healthcare Professionals.

"Although our member companies have long been committed to responsible marketing of the life-enhancing and life-saving medicines they develop, we have heard the voices of policy-makers, health care professionals, and

others telling us we can do better," Billy Tauzin, PhRMA president and CEO, said in a statement.

Among the changes outlined in the new guidelines is a prohibition on even "modest" gifts to physicians if they lack educational value. For example, the ubiquitous pens and mugs given out by pharmaceutical representatives are no longer acceptable under PhRMA's new code of conduct. However, gifts valued at \$100 or less that are used primarily for patient or health care professional education, such as an anatomical model, are still allowed on an occasional basis.

The guidelines also prohibit sales representatives and their immediate managers from taking physicians out for dinner, even if they have an educational presentation to make. However, they can still provide "modest" meals, such as pizza, in the office or at the hospital if they stay to provide their educational session there. The voluntary guidelines also prohibit companies from providing any type of entertainment or recreational items such as tickets,

sports equipment, or trips, even if the item is inexpensive.

In terms of continuing medical education (CME), the guidelines call on pharmaceutical companies to separate their CME grant-making functions from their sales and marketing activities.

Subsidies to attend CME meetings should not be given directly to physicians, according to the guidelines. Instead, any funds should be given directly to the CME provider who can use the money to reduce fees for all attendees. Companies are also not allowed to provide meals directly at CME events.

The guidelines continue to allow pharmaceutical companies to provide scholarships to medical students and others in training so they can attend educational conferences, as long as the recipients are chosen by the academic or training institution.

The guidelines also call for greater transparency among physicians who work as industry consultants. Physicians who serve as company consultants or speakers and also serve on committees that set formularies or

clinical practice guidelines should disclose their industry relationships, according to the PhRMA guidelines.

The changes were praised by some in the medical community as progress on the part of the pharmaceutical industry to respond to criticisms and police itself.

"It's a big step forward," said Dr. David Korn, chief scientific officer for the Association of American Medical Colleges, which recently released its own report on industry funding of medical education.

Although the PhRMA guidelines don't go as far as some academic medical institution policies, they are significant because they appear to have the full backing of the industry, Dr. Korn said. It shows that the pharmaceutical industry has heard the concerns of the public and has deemed some interactions to be unacceptable.

"What we're talking about really is a culture change," he concluded.

In the AAMC report, released in June, the organization calls on

medical schools and teaching hospitals to prohibit the acceptance of any gifts from industry. The AAMC also instructs academic medical institutions to set up a central CME office to coordinate the distribution of industry funds, and strongly discourages participation by faculty in industry-sponsored speakers bureaus.

Time will tell whether the guidelines will result in any real changes, said Dr. Howard Brody, director of the Institute for the Medical Humanities at the University of Texas Medical Branch in Galveston.

Ultimately, it's up to the medical profession to make these changes, he said. Every single drug sale representative in the country would be looking for a new job if physicians refused to see them, Dr. Brody said.

All physicians should start thinking about how to get educated about new treatments without meeting with sales representatives, as well as foregoing samples and saying no to free lunches provided by pharmaceutical companies, he said. ■