

Editorial

Benediction

In this edition, I am delighted to inform you that we are publishing articles not only from these islands but also from the United States, Austria and Germany. Two articles consider those who decide to undertake medical undergraduate training in Europe. The first, our Review Paper by Professor John Mayberry, details the data on students from Ireland and the UK who did precisely that between 1990-2005. The second, written by Dr Rhiannon Killingbeck, tells us what it's like to enroll abroad in a foreign English language medical degree course and specifically, what it is like to study, live, work and play there. As Rhiannon observes, some of these venerable European academic institutions have been in existence for over 600 years and have an impressive medical and scientific pedigree. The distance, culture shifts and language barriers are not inconsiderable, and as she also wryly comments, 'there won't be anyone there to hold your hand.'

People from these islands have, of course, been travelling to Europe for centuries, often leaving their mark, sometimes literally. In the ninth century, an Irish Benedictine monk was hard at work in his cell in Reichenau Abbey, which is located on an Island in Lake Constance on the borders between Germany, Austria and Switzerland. He was working on a manuscript now known as *The Reichenau Primer*. This was written using a medieval script system called 'Insular Script', a cartographic technique that had its genesis in Ireland and travelled eastward with the Irish missionaries who founded many of the European monasteries. This technique is also associated with Insular Art and such illuminated manuscripts as the *The Book of Kells*.

The monk's only companion in that lonely cell was his cat, Pangur Bán. In the manuscript's margin, he wrote a poem, comparing Pangur's feline activities to his own scholarly pursuits. The original text is in medieval Gaelic but the first lines (from a translation by Robin Flower) begin:

I and Pangur Bán my cat,
'Tis a like task we are at:
Hunting mice is his delight,
Hunting words I sit all night.

The primer, now housed at Saint Paul's Abbey library in Lavanttal, Carinthia may be viewed on line (http://en.wikipedia.org/wiki/File:Reichenauer_Schulheft_1v_2r_k11.jpg), Extraordinarily, the poem *Pangur Bán* is still easily recognisable in the lower left hand side of the page.

The patron saint of Europe, Saint Benedict of Nursia (480 -547 AD) is that long forgotten monk's patron. Benedict, incidentally, is also the patron saint of students and of renal disease. Now honoured by the Catholic, Eastern Orthodox, Lutheran and Anglican Churches, Benedict began life as a wealthy Roman but converted to Christianity, adopting a frugal and austere hermitic existence. Invited to become Abbot of a neighbouring monastery,

his regime quickly proved too strict and the monks attempted to kill him (by poisoning his kidneys -hence his association with renal disease!), but following a series of miraculous divine interventions he escaped to resume his hermit's life.

Benedict eventually founded twelve monasteries including the great Benedictine monastery at Monte Cassino. His opus magnum, *The Rule of St. Benedict*, was distributed by Charlemagne throughout Europe. Considered balanced, reasonable and moderate, it served as a template not just for Europe's religious but also in the secular milieu as it embodied the ideas of a written constitution and emphasised the centrality of the rule of law.

CURIOSITAS AND BOOK CASE

I am pleased to announce two new sections to the Journal. The first, snappily entitled 'Curiositas' will be a cornucopia of brief medical vignettes, and we hope that both undergraduates and postgraduate readers will submit topics to it. The section editor is Dr Gerry Gormley (curiositas@ums.ac.uk). The printed version of *Curiositas* is, forgive the luddite term, merely a shop window into a larger on line resource. The idea here is that the interested reader can explore the *Curiositas* topics in more depth, and as the project grows, eventually interact with the subject matter -CME being a desirable first step.

The second is Book Case. Although we already have an excellent Book Reviews section under the expert stewardship of Professor Roy Spence, I thought it might be interesting to invite experts and luminaries to suggest favourite books that could be of general interest to this journal's wide and discerning readership. No experts or luminaries being to hand at short notice, I have compiled the first list myself, so forgive me inflicting my literary tastes on you all. *Mea maxima culpa*.

So from these islands, centuries ago, missionaries and educators travelled into every corner of the world. One medieval monk and his cat left a mark for generations to enjoy. Others from these Islands continue to travel into the centre of St. Benedict's Europe to educate and to be educated. So, we conclude with *Pangur Bán* and the poetry of his Benedictine cellmate, whose writings, from the heart of Europe, still speak to students of all ages, across the ages.

Practice every day has made
Pangur perfect in his trade;
I get wisdom day and night
Turning darkness into light.

Please do keep sending me your good papers.

Barry Kelly
Honorary Editor

Recognising Fabry Disease

A rare, X-linked, progressive genetic lysosomal storage disease

The wide ranging symptoms mean that patients can present to many different specialities before a diagnosis is made

Patients may present with one or more of the following signs and symptoms:

Early Onset

- Neuropathic pain, particularly at the extremities
- Sweating abnormalities
- IBS-type symptoms
- Lethargy and fatigue
- Progressive hearing loss
- Ocular changes
- Angiokeratoma
- Proteinuria

Later Onset

- Renal failure
- Heart abnormalities (LVH)
- History of T.I.A. or "mini stroke"
- Early stroke

Does your patient...

- Have multiple unexplained symptoms?
- Have a family history of early onset renal or cardiac disease or early stroke?
- Take regular powerful painkillers?
- Have any family members who have died before the age of 60 from kidney failure, heart attack or stroke?

If **YES** to any of the above...

Think Fabry



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