I N V E S T I G A T O R

In this section, we highlight the human side of biomedical investigation, putting a few questions to a researcher at DMS-DHMC.

Barbara Conradt, Ph.D.
Associate Professor of Genetics

Conradt studies apoptosis, or programmed cell death. She is particularly interested in how apoptosis is regulated and how mitochondria contribute to the process. She uses the roundworm Caenorhabditis elegans as a model system in her research.

How did you decide to become a scientist?
I grew up in the countryside and have always been curious about nature, especially animals. After high school, I worked on farms in the UK and Germany for a year, and I actually started to study agriculture. After a couple of years at college, I discovered the basic biological sciences and decided to switch over to molecular and cellular biology. But I had many other interests as well, such as art and sports.

What are the greatest frustration and the greatest joy in your work?
In science, those often go hand in hand. What can give me a lot of frustration is when we get data that just don’t make sense according to our expectations. Through discussions and additional experiments, puzzling data suddenly can make sense. And quite often, they actually reveal new, undiscovered aspects of the processes we are studying. That can give me great joy.

Would you change anything about your career?
My career path could have been straighter, but I don’t think I would want to miss the detours because, after all, they have made me into the person and scientist I am now.

If you weren’t a scientist, what would want to be?
Now that I know what it means to be a scientist, I don’t think there’s anything I’d rather be. However, if for whatever reason I can no longer be a scientist, I’ll open a café with a gallery or bookstore.

What advice would you offer to someone new in your field?
Bring with you a lot of motivation, energy, time, and patience and don’t stop having fun.

Who were your scientific mentors?
I was very lucky and had wonderful mentors in college and graduate school and while I was a postdoc. But I also want to add my parents to the list because they taught me very early on how to see and observe.

What’s your favorite nonwork activity?
Going for walks and playing the cello. I play classical music: Bach, Breval, and Romberg. And because I am still learning, I have mainly been playing solos or duets with my teacher. Eventually it would be fun to play with a group.

What about you would surprise most people?
I am a certified ski instructor, I started to surf a couple of years ago, and I am expecting my first child in March.

If you invented a time machine, where would you go?
I wouldn’t really want to go back in time because women have probably never enjoyed as much freedom and independence as they do nowadays. But I would want to go forward in time, maybe 30 or 40 years. I would want to see what life will look like and how the work of biomedical scientists will have changed the world.

What do you eat for breakfast?
I have been eating oatmeal with fresh fruit for years, and I still enjoy it every morning!

What three people would you like to have over for dinner?
The scientist Barbara McClintock, the painter Georgia O’Keeffe, and the writer Christa Wolf.

Who are your heroes in real life?
My heroes are my brother, who is a two-time cancer survivor, and my mother.

I N S I G H T

Putting students’ clinical learning to the test nationally

The Class of 2006 has posted the best-ever mean score for a DMS class on a national test of clinical knowledge. According to a report from the National Board of Medical Examiners, it is also the highest DMS has been above the national mean since results have been tracked.

The test is part of Step II of the national boards, which each class takes during its fourth year. A total of about 17,000 students took the test last year, and the 56 DMS ’06s had a mean score of 229—well above the national mean of 221.

Score: Yet it’s not the score but the learning behind it that pleases Dr. David Nierenberg, senior associate dean for medical education. “I don’t want to oversell this,” he says. “It’s only one of three parts of the boards, only one of 15 things we look at. But with all of that, this is really impressive.”

Every way this exam could be looked at was impressive for DMS. In terms of the test’s core clinical areas—psychiatry, obstetrics, medicine, surgery, and pediatrics, plus the 12 organ system areas—many results were “dramatically above the national average,” says Nierenberg.

Step II is an important way station for students, but not the only one, on their journey to becoming licensed physicians. The national boards begin with Step I after they complete their second year. Step II is composed of