

argues that medical students serving their hospital residencies often see the human patient as “an icon” for the true object of attention, the electronic medical record—the “iPatient,” in his term. “The iPatient’s blood counts and emanations are tracked and trended like a Dow Jones Index, and pop-up flags remind caregivers to feed or bleed. iPatiens are handily discussed . . . while the real patients keep the beds warm.”

Carsick?

Unfit to drive

Like many innovations, the automobile gave rise to conflicting health claims, Brian Ladd recounts in *Autophobia: Love and Hate in the Automotive Age* (University of Chicago Press). “At the end of the journey,” British philosopher C. E. M. Joad wrote of the motorist in 1927, “he descends cold and irritable, with a sick headache born of rush and racks. He clamors for tea or dinner, but, lacking both bodily exercise and mental stimulus, he eats without appetite, and only continues to eat because at a motoring hotel there is nothing else to do. It is at such places that the modern fat man is made.” Not so, argued New York City health commissioner Royal S. Copeland in 1922: “Most of us get enough exercise in the walking necessary, even to the most confined life, to keep the leg muscles fairly fit. It is from the waist upward that flabbiness usually sets in. The slight but purposeful effort demanded

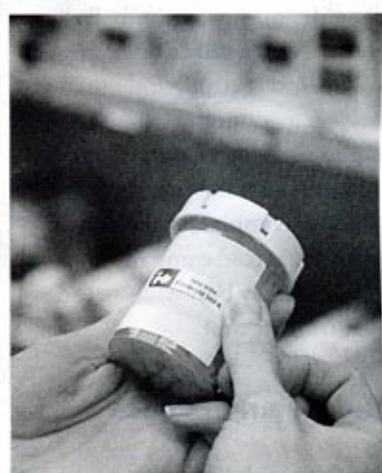
in swinging the steering wheel reacts exactly where we need it most. Frankly I believe that steering a motor car is actually better exercise than walking, because it does react on the parts of the body least used in the ordinary man’s routine existence.” For today’s rampant obesity, blame power steering.

Whose Terms?

The name says it all

A well-known exercise in moral reasoning asks whether it would be ethical to kill a hefty man by pushing him onto the tracks to stop a train or trolley before it crashed into a group of people. Eric Uhlmann of Northwestern University and three fellow researchers asked 88 students if they would cause one such death in order to save a busload of musicians. Half of the students were told that they could push Tyrone Payton onto the rails; the others were given the chance to push Chip Ellsworth III. Self-described liberals proved more likely to sacrifice white-sounding Chip than black-sounding Tyrone. Conservatives were just as likely to throw either fellow. The authors suggest in an as yet unpublished paper that “antipathy toward antiblack prejudice played a greater role in influencing liberals’ judgments compared to conservatives. . . . Our Chip-Tyrone manipulation presented liberals with choices likely to alert their implicit sensitivities to issues of racial inequality.” Affirmative action on wheels, or under them.

Names matter in other realms,



Hnegripitrom, anyone?

too. In *Psychological Science* (February), Hyunjin Song and Norbert Schwarz report on an experiment in which subjects were given lists of 16 made-up food additives and asked to rank them by perceived peril. The additives’ names, 12 letters apiece, ranged from relatively straightforward (Magnalroxate) to nearly unpronounceable (Hnegripitrom). Participants deemed the hard-to-pronounce additives riskier than the others. The researchers derive a lesson: Names that are tough to pronounce may help awaken consumers to the dangers of products, “possibly motivating them to pay closer attention to warnings and instructions.” Maybe it’s time to rename cigarettes Hnegripitrom.

Yes, Problem

Lost language

“No problem” seems to be replacing “You’re welcome” as the response to “Thank you.” “People complain about that all the time,” says Peggy Post, great-grand-