

## LIFELINE

## Peter Csermely



*Peter Csermely is the Professor of Biochemistry at Semmelweis University, Budapest, Hungary, Chief Scientist of Biorex Co, Hungary, and*

*the Secretary of Cell Stress Society International. His research is on stress proteins. He has set up an initiative to provide research opportunities for 3500 gifted high school students annually. He has published three books and many research papers (a total citation of more than 1000).*

**Who were your most influential teachers, and why?** My high school students, who always give me the best questions on science.

**Which research event has had most effect on your work, and why?** When my mentor, Ron Kahn warned me that some dirt on my autoradiography was actually a discovery.

**What would be your advice to a newly qualified doctor?** Always observe the whole person and never forget: a smile can be more efficient than a medicine.

**What is the best piece of advice you have received, and from whom?** Medawar taught me that everyone can be good in science: only endurance, high standards, playfulness, and a tight control of fluttering thoughts are important.

**What are your favourite books, and why?** The diaries of my late father, and my mother's poems: it is never too late to learn who am I.

**What is your favourite country?** Hungary—everything is possible.

**What is your greatest regret?** I am still not able to control a western lifestyle with eastern philosophy.

**What do you think is the most exciting field of science at the moment?** None alone, but any of them synthesised with others.

**What is your greatest fear?** That science becomes even more fragmented and competitive: young students are lost in information and do not even recognise the need for a more general view.

**What part of your work gives you the most pleasure?** Whenever I have a new scientific idea, I feel a happiness of an unprecedented intensity, a touch of God.

## Jabs &amp; Jibes



## Me and T'iu

**M**igraine during transatlantic flights poses many challenges. Access to the toilet becomes crucial. The associated in-flight vomiting is a truly miserable experience. Use

of sickness-bags needs skill, and is not willingly undertaken in public. Other passengers get upset by the migraineur's haggard appearance, groaning, and retching. Disclosure is problematic. Will other people understand or be sympathetic? The best hope is a knowledgeable flight attendant; he or she can only offer towels and aspirin, but such action legitimises the "illness". Otherwise, the migraineur might be regarded as drunk; I was once admonished (while weak and ketotic) to stay off the liquor!

Migraine regularly pre-empts our plans. With dark humour and self-mockery, we describe suddenly being reduced to a blind, groaning harpy during important events. We don't talk much about the exhausted "mornings after" or our resentment about days stolen from our lives. We negotiate with migraine. Situations of high expectation or responsibility are irresistible to the condition. I dread weekend call; inevitably, sleep disruptions precipitate symptoms by Saturday, Sunday is a struggle to make good clinical decisions, and Monday is invariably unproductive. Migraineurs are cautious about big events, even inviting a migraine "early" to clear important days. Migraine knows these tricks and mocks attempts to gain control.

The ancient Sumerians had a migraine demon named T'iu. T'iu's invocation has splendid language: "headache flashing like lightning in the desert, it cleaveth like a straw he who respecteth not the gods". My image of T'iu is a mocking gargoyle clamped on the victim's neck or shoulder, talons driven through the migraineur's eye. Patients might describe migraine as a dark presence, not always active. For

one of my patients, migraine is a beautiful but terrible serpent coiled inside her temple—when it stirs, she perceives its power and iridescent scales. If she is respectful, the attack does not develop,

but once aroused, the serpent seizes the orbit and thrashes the head with muscular contractions. This may all be highly Freudian, but migraineurs can relate!

We migraineurs also relate to an ancient description: "these patients fear the light and wish to die" (from 150 AD). Although the depths of a migraine are not spiritual, we have prayed, negotiated, and at times expected to die

during an attack. Even stoical St Paul saw migraine as a lesson in humility. St Hildegard (when not making her reputation as a mystic from her migraine hallucinations) believed that migraine affected only one side of the head because nobody could possibly survive such pain bilaterally.

The migraineur's perspective on life is conditioned by distressing, recurrent, unpredictable symptoms. For some, migraine is a nuisance, whereas others use it to manipulate people and situations. We object to being branded as "migraine types", especially if psychological labels are attached to an already nasty physical process. After a lot of professional and personal experience, I have negotiated my current balance, but expect to change treatments as the migraine evolves and I age. I was born with a biochemical vulnerability and expect to live with it, including on my regular transatlantic flights. So, if between London and Dallas you see a small lady in dark glasses who looks progressively more distressed and haggard, please be nice, ignore the noises, give her the aisle seat, ask for oxygen, and clear the route to the toilet. She has to spend the flight in the clutches of T'iu—unless you have some crocodile dung for the exorcism in your hand luggage!

Anne Walling

