



Most working Americans retire sometime during their 60s. But if you're a professional ballet dancer, retirement comes much earlier-at an average age of 35, thanks to years of wear and tear ultimately pushing your body to its limit.

What happens next?

For Leanne Duge, the end of a career in ballet marked the beginning of a path to medical school at SKMC. Duge, who started dancing as a kindergartener in her hometown outside Cleveland, Ohio, pursued more rigorous training as she got older, even spending summers away to attend various intensive programs around the country. Three of those summers were spent in Seattle at the school attached to the Pacific Northwest Ballet—where Duge would eventually join the professional division ("the minor leagues of dancing," she explains) and later become a full-time company member.

Nothing made Duge happier than performing, especially in challenging ballets like Swan Lake, her all-time favorite. "We're talking about three-plus hours when you're onstage nearly the entire time. While dancing as swans, there are 24 of us all moving as one, creating beautiful formations and shapes," she says. "It's so powerful—there is nothing like being a part of that."

As most longtime dancers do, Duge experienced a series of injuries that became so debilitating she had to seek medical attention—something many dancers avoid whenever possible. "It's a cultural thing, pushing through pain in fear of a doctor telling you to take time off from dancing, which is your livelihood," she says. But as she got to know her physicians and physical therapists, she became impressed with their knowledge of the human body and how to optimize its performance. "I was struck by the close relationships healthcare professionals had with their patients and the trust that must be present in order for such delicate information to be exchanged. I also admired how they helped others during difficult times. This was when the medical school seed was planted."

After five years as a professional company member, Duge hung up her pointe shoes and began taking classes at a community college, then transferred into a neurobiology program at the University of Washington. Her next stop: Jefferson.



Dancers know that if they're hurt, a doctor is going to tell them to stop dancing, which is not what they want to hear. I think I could find common ground between a doctor's agenda and a dancer's agenda.



Now beginning her second year at SKMC, Duge has not yet settled on a specialty, although physical medicine and rehabilitation is certainly on the list. She's considering a career working with dancers, whose aversion to professional care and frequent lack of health insurance make them a medically underserved population. "I would love to help manage their aches and pains without surgery whenever possible and promote a wellness aspect to their care. Dancers know that if they're hurt, a doctor is going to tell them to stop dancing, which is not what they want to hear. I think I could find common ground between a doctor's agenda and a dancer's agenda."

Although she doesn't practice ballet anymore, Duge keeps moving as a Zumba instructor, teaching a weekly class on campus. She first started teaching Zumba, a dance fitness program, while living in Seattle and last winter approached the leaders of Active Minds, a mental health advocacy group at Jefferson, about offering a free class to students and anyone else who might be interested.

"There's a great freedom to it, choosing my own songs, choreographing my own movements, making things as technical as I want," she says. "Zumba is a far cry from ballet but integrates the intensity of a cardiovascular workout with the passion of dance. I love sharing that feeling with others."

-KAREN L. BROOKS