Among the people and programs coming in for prominent media coverage in recent months was DHMC’s director of palliative medicine. A New York Times feature on hospice care noted that Dartmouth’s Dr. Ira Byock, “a nationally recognized expert in palliative care, . . . says hospice should be viewed not as giving up all hope but about getting the care one needs. . . . Byock rejects the notion that the only point of hospice is to help people die.” Byock was also the subject of a profile in the Boston Globe’s Sunday magazine section, which said that he believes “the core of palliative care, ultimately, is not law or policy but the ongoing interaction with patients.” See page 9 in this issue for more about Byock’s impact at DHMC.

A feature in Smithsonian on facial reconstruction techniques in World War I quoted a Dartmouth expert who compared injuries from WWI to those seen in Iraq. “‘We’re used to thinking about losing an arm or an eye or an ear,’ says Dr. Joseph Rosen, a plastic surgeon at Dartmouth who works with soldiers injured in Iraq. . . . ‘When you lose all these things simultaneously—[and] the blast injuries take your arms with your face—that’s what makes these polytrauma injuries. They’re not the sum of their parts; they’re much worse.’” See page 54 in this issue for more on Rosen’s work.

Have you ever wondered if there’s anything to the proliferation of products, mostly hawked over the internet, that promise to help turn the last bit of untrammeled downtime (sleep) into an opportunity for self-improvement? The New York Times apparently has and recently explored “sleep-learning.” The sleep specialists they consulted were uniformly dubious. “Unlike the hypnotized brain, which is receptive to spoken suggestions, the sleeping brain is not so suggestible, said Dr. Michael Sateia, the head of the sleep disorders program at Dartmouth. ‘Generally,’ he explained, ‘sleep is considered to be a state of being relatively “offline,” as it were, with respect to extrasensory input.”

“A protein that signals the onset of the deadliest form of breast cancer has been isolated by a team of New Hampshire scientists,” reported Newsday. “‘These patients are at very high risk of recurrence,’ said James DiRenz, a Dartmouth assistant professor of pharmacology. . . . DiRenz said more work must be conducted to confirm the discovery” of the biomarker, known as nestin. Agence France Presse also covered the finding, noting that eventually, “if a noninvasive test could be devised to detect nestin, the protein could be used to screen for women at risk for this type of cancer.”

Growing concern nationwide about variation in the quality of colonoscopies was the subject of a recent article in the New York Times. “Last spring,” the article noted, a task force of representatives from two gastroenterology societies “recommended that doctors track their polyp-detection rate. . . . But most have not adopted the recommendation. Still, Dr. Douglas Robertson, a gastroenterologist at Dartmouth and the VA Medical Center in White River Junction, Vt., said it did not hurt to ask for a doctor’s detection rate. ‘If you are met with a total blank stare,’ Robertson said, ‘that tells you the doctor is really not clued in to quality issues and is not listening at national meetings.’”

A Dartmouth study comparing two methods of treating post-traumatic stress disorder (PTSD) in women received widespread media attention. “Women are nearly three times more prone [to PTSD] than men, and the incidence is particularly high among women who have served in the military,” reported Reuters. And NPR Morning Edition host Joe Shapiro noted that the study involved “a team of 50 therapists who treated nearly 300 women.” It compared general psychotherapy with prolonged exposure—which DMS’s Paula Schnurr, a researcher at the VA National Center for PTSD in White River Junction, Vt., described as focusing “repeatedly and vividly on a traumatic experience, . . . retelling it in a safe context [and] eventually

Worthy of note: Honors, awards, appointments, etc.

Allen Dietrich, M.D., a professor of community and family medicine, was named a member of the U.S. Preventive Services Task Force, the nation’s leading panel for preventive and primary care. He is also cochair of the John D. and Catherine T. MacArthur Foundation Initiative on Depression and Primary Care, a national program based at Dartmouth.

Richard Powell, M.D., a professor of surgery, was recently appointed as a member of the Bioengineering, Technology and Surgical Sciences Study Section of the National Institutes of Health’s Center for Scientific Review.

Diane Harper, M.D., a professor of community and family medicine, was the lead author of a paper that was chosen as runner-up for the best medical research paper of 2006 by a panel of Lancet editors and an international advisory board. The paper reported results of a cervical cancer vaccine trial.

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Narath Carlile, a second-year DMS student, received an American Medical Association Foundation 2007 Leadership Award, recognizing future leaders in organized medicine.

Jessica Morgan, James Town, and Kristen Yurkerwich, all second-year DMS students, accepted the Martin Luther King, Jr., Dartmouth Social Justice Award, in the student organization category, on behalf of the DMS Community Service Committee’s Mascoma Clinic project. See page 16 in this issue for more about the Mascoma Clinic.

Eight first- and second-year Dartmouth medical students—Omri Ayalon, Leslie Claracay, Nicholas Ellis, Umbareen Mahmood, Carolyn Presley, Rajesh Ramanathan, Katherine Ratzan, and Pablo Valdes—have been named DMS’s first Urban Health Scholars. The program, which is supported by a grant from the Harvard Pilgrim Health Care Foundation, is for students interested in caring for underserved patients in urban areas. It is modeled on DMS’s Rural Health Scholars Program, which is aimed at students interested in primary care in remote areas. The Urban Scholars will work during their clinical rotations and electives in neighborhood clinics, shelters, community centers, and other venues that serve vulnerable populations.

Joseph O’Donnell, M.D., DMS’s senior advising dean, is overseeing the program.

John Strohbehn, Ph.D., former provost of Dartmouth College, died on February 22 in Hanover, N.H. He was 70 years old. A member of the faculty at Dartmouth’s Thayer School of Engineering from 1963 to 1993, he also held an adjunct appointment at the Medical School and collaborated on biomedical engineering research with several DMS faculty. He was provost at Dartmouth from 1987 to 1993, and it is a mark of his impact on the institution that the Medical School named its top award for a graduating Ph.D. student in his honor. After leaving Dartmouth, Strohbehn was provost of Duke University from 1994 to 1999; he retired from Duke in 2003.

Dartmouth’s Norris Cotton Cancer Center and the American Cancer Society (ACS) recently announced an agreement to share information and resources and to collaborate on research, advocacy, and cancer awareness activities. One of only 39 National Cancer Institute-designated comprehensive cancer centers in the U.S., Norris Cotton is the first one in New England to enter into this kind of partnership with the ACS.