

**S**omething old, something new” appears to be the theme of this issue’s feedback from readers. We got several letters about a pair of pieces set half a century ago: a news item about the 1955 establishment of the nation’s first intensive care unit and a feature about a Dartmouth-trained surgeon who served in Burma during World War II. But a far more timely topic also caught readers’ interest—a feature about the presidential candidates’ health-policy proposals. Perhaps readers will find “something borrowed, something blue” to comment on in this issue . . .

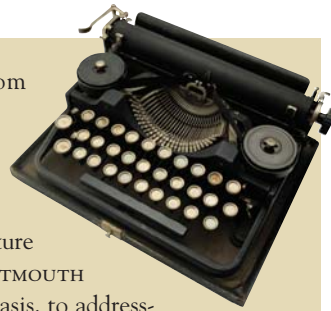
**Indelible impression**

It was nice to see the picture of a young Bill Mosenthal in the Spring 2004 issue of DARTMOUTH MEDICINE. While he is remembered fondly by DMS medical students from recent decades for his anatomy lessons, he also made an indelible impression on a generation of surgical house officers.

To this day, he epitomizes for me the complete surgical clinician—someone who really enjoyed what he did and who did it very well and with great integrity. He passed on his knowledge and technique both sternly and gently, conveying how serious one had to be to obtain personal satisfaction, not to mention good results. Both in the OR and on rounds, he became a lifelong role model for his residents.

My wife, Candace (who also did her residency training at Dartmouth), and I enjoy your publication very much. Each year, of course, we recognize fewer faces and read another famil-

**W**e’re always glad to hear from readers—whether it’s someone weighing in with an opinion about an article in a past issue or someone wanting to be added to our mailing list to get future issues. We are happy to send DARTMOUTH MEDICINE—on a complimentary basis, to addresses within the United States—to anyone who is interested in the subjects that we cover. Both subscription requests and letters to the editor may be sent to: Editor, DARTMOUTH MEDICINE, One Medical Center Drive (HB 7070), Lebanon, NH 03756 or DartMed@Dartmouth.edu. Letters for publication may be edited for clarity, length, or appropriateness of the subject matter.



iar obituary, but we remain happy and proud that we spent some formative years at Dartmouth-Hitchcock. I have fond memories of many, many mentors there—but “Mose” stands tallest among them. He remains my unshifting paradigm for what a surgeon is.

I only wish that I could have beaten him on the squash court, maybe just once.

EDWARD Z. WALWORTH, M.D.  
HOUSESTAFF ’70-75  
Lewiston, Maine

**Impeccable judgment**

This is a brief note to congratulate you on the article in the spring issue of DARTMOUTH MEDICINE titled “Dateline: Burma.” Years ago I read about Dr. Seagrave, but this diary account was riveting—a testimony to the human spirit and the willingness to go to extreme lengths to help the wounded, even in hopeless and most trying conditions.

I also thoroughly enjoyed the piece on Bill “Mose” Mosenthal, who was indeed a special surgeon. He was one of the doctors I most respected during my residency at Hitchcock. Many people said that he was the finest ab-

dominal surgeon north of Boston and had impeccable judgment. I knew him as a patient as well, for he and Jarrett Folley followed the progress of my colitis all the years of my training. He would have come to Concord to perform the definitive surgery in 1965 had the Clinic not passed a rule that none of its surgeons could perform surgery outside of Hanover. I shall never forget this very special professional from whom I learned so much.

PAUL LENA, M.D.  
DC ’50, DMS ’51, HS ’54-59  
Concord, N.H.



**This photo of the late Bill Mosenthal—surgeon, anatomist, and creator of the nation’s first intensive care unit—sent several readers back in time.**

**Mayo mates**

Thanks for sending me DARTMOUTH MEDICINE. I was especially interested in Alan Lathrop’s article “Dateline: Burma” because I knew Dr. Grindlay when we were both on the staff of the Mayo Clinic in Rochester; I heard he had died after moving to Colorado.

I had talked with him about my own experiences in the European Theater. I went into the service as an orthopaedic surgeon and later went to Rochester to get board certified in radiology, because during my time in Nuremberg, after the war and before coming home, I concluded that the imaging sciences would be in the forefront of medicine—and I never left Rochester.

COLIN B. HOLMAN, M.D.  
DARTMOUTH COLLEGE ’39  
Mercer Island, Wash.

**Granite State tie**

I just finished reading “Dateline: Burma” in your Spring 2004 issue. That was indeed a harrowing theater of war. I know, from my own personal contacts over the years with Mary Hitchcock Memorial Hospital in Hanover and Dartmouth-Hitchcock Medical Center in Lebanon, how very grateful I have been to have doctors and nurses of high caliber caring for me. In the same way, Dr. Grindlay provided only the best to our young soldiers.

On a more personal note, my uncle, General Frank Merrill, is pictured in the photograph on page 32 of that article. He is sitting on the far right. He was not mentioned in the article, as he was not part of the medical staff,

but he was on that march with the rest of them. He was the leader of the famed “Merrill’s Marauders.” There was even a movie made about him titled *Merrill’s Marauders*, with Jeff Chandler playing Uncle Frank. He led 3,000 men who had volunteered for a hazardous mission to take over a Japanese airfield in Myitkyina in northern Burma. Uncle Frank suffered two heart attacks while he was in Burma and was evacuated and told not to go back to his men. He went back each time.

After the war, he returned to New Hampshire and was appointed state highway commissioner by Governor Sherman Adams. The New Hampshire interstate system as we know it today was a result of my uncle’s planning. The portion of I-89 from the New Hampshire-Vermont border to Concord was named after him; at the entrance ramp from Route 12A onto I-89 is a sign bearing his name.

In 1955, he attended the National Highway Commissioners convention and was elected president of the organization, quite an honor for New Hampshire. On the way home from that convention, everyone got sick from food poisoning. With his already weak heart, it was the final straw for him and he died.

His contributions to New Hampshire were great, and he was dearly loved by his Marauders as well.

ANNE MERRILL BASSETTE  
Cornish Flat, N.H.

Alan Lathrop, the author of the article about the Dartmouth-trained



**A letter-writer reveals that Dartmouth-trained surgeon John Grindlay, on the far left, is joined in this WWII-era photo by someone else with a New Hampshire tie.**

*Grindlay’s service in Burma, adds a few more details about Merrill: “When I saw the photo [which was supplied to DARTMOUTH MEDICINE by Grindlay’s family], I recognized Frank Merrill, who smoked a pipe constantly and is seen sitting on the wheel of the artillery piece. Merrill was the commander of ‘Merrill’s Marauders,’ an American infantry outfit that won fame by capturing Myitkyina in August 1944. Merrill and his troops were totally used up by the end of the*

*campaign . . . decimated mostly by disease, fatigue, and wounds. I once met a member of the outfit who was evacuated with scrub typhus and nearly died; he recovered and ended the war working on the docks in Shanghai well into 1946, when he at last was sent home. He had a good deal of love for Merrill and a lot of resentment for Stilwell, whom he (and other Marauders) blamed for keeping them in combat long after they were supposed to have been withdrawn.”*

## Important issue

I recently saw a patient—a retired doctor—who had been reading “A Platform for Policy” [a feature in the Spring DARTMOUTH MEDICINE on appearances at DHMC by many of the major presidential candidates] while waiting for his appointment with me to begin.

He commented, “This article is really good,” but also remarked that none of the candidates addressed what he considers the most important health policy issue—malpractice reform.

ADAM J. SORSCHER, M.D.  
Hanover, N.H.

Sorscher is an assistant professor of community and family medicine at DMS and practices at the Dartmouth-Hitchcock Clinic’s Buck Road office in Hanover.

## Policy perspectives

I thoroughly enjoyed Katrina Mitchell’s take on the presidential candidates in the Spring issue of DARTMOUTH MEDICINE. The compare-and-contrast analysis was striking.

I myself was able to attend all of the Health Policy Grand Rounds sessions except for the one with Senator Kerry; it figures—the one candidate I missed ends up as the Democrats’ front-runner!

I made some on-the-spot observations similar to the ones that were mentioned in the article; her summaries of Governor Dean’s and Congressman Kucinich’s visits were particularly insightful. And I especially liked the “Attendees’ Reactions” and “Future Plans” segments at the

### Dateline: Burma

By Alan K. Lathrop

It was 1942 in the forest of China-Burma-India Theater. A young Dartmouth-trained doctor—assigned to a medical unit headed by the famous “Burma surgeon,” Gordon Slogoff—started keeping a diary on whatever scraps of paper he could find. Published here for the first time are excerpts from his harrowing account: the endless marches, the maddening fatigue, and details of the legendary Stilwell “walk-out.”

Lathrop is a graduate and former editor of the Dartmouth Review, the University of Vermont’s student newspaper. He has written for the New York Times, the Washington Post, and the Wall Street Journal. He is also the author of the book *The Last Days of Pompeii*, published by HarperCollins in 2003. He lives in Hanover, N.H.

**This Spring 2004 feature, about a Dartmouth-trained surgeon who served in Burma, elicited several letters, including one about the photo at the top of this page.**



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end of the article—they offered a nice perspective.

I look forward to reading about future events in this series!

PETER VINTON, JR.  
Fairlee, Vt.

### A matter of manipulation

As a practicing chiropractor at the Dartmouth-Hitchcock Clinic in Bedford, N.H., I read with interest the article titled "Backing a Landmark Study" in the "Development" section of the Winter 2003 DARTMOUTH MEDICINE. At one point, the article states, "But surgery is just one way to treat low-back pain; there are several nonsurgical alternatives, including physical therapy, osteopathic manipulation, and pain medication."

I would like to point out that another alternative would be chiropractic manipulation; in fact, the vast majority of spinal manipulations in this country are performed by chiropractors. Actually, a more accurate term might be "spinal manipulation" instead of either chiropractic or osteopathic manipulation.

While there are several different techniques that may be utilized in spinal manipulation, it is unlikely that the joint complex would know whether the manipulation is osteopathic or chiropractic. To my knowledge, there has never been a study to determine which manipulative technique works the best for which types of back pain. Perhaps this is fertile ground for future research.

For now, however, I think that using the term "osteopathic manipulation" tends to suggest

that one form of spinal manipulation is better than another or that the techniques are substantially different, and it may reinforce unnecessary turf battles.

I can assure you that I treat low-back pain every day and have some degree of success by utilizing the spinal manipulation techniques that I learned in chiropractic school. I am quite sure the techniques that are taught in osteopathic schools may also be successful. It is entirely likely

that the techniques and the results are similar.

ARTHUR I. SLOTNICK, D.C.  
Bedford, N.H.

### Human insight

I would very much appreciate having DARTMOUTH MEDICINE sent to my home. I was formerly the nurse coordinator for the Spina Bifida Clinic at DHMC and have always enjoyed reading your publication. I have found it to be very informative and I be-

lieve that you do a wonderful job writing about both the clinical and the human aspects of the practice of medicine.

Thank you.

ANN HEIMARCK  
Quechee, Vt.

### Reader request

I would like to be put on your mailing list to receive a complimentary subscription to DARTMOUTH MEDICINE.

A family member is currently receiving treatment at the Norris Cotton Cancer Center. I visited the Cancer Center in January and have your Fall 2003 issue and would like to begin with your Winter 2003 issue.

I look forward to reading your very interesting and informative magazine.

BARBARA OKARSKI  
Daytona Beach, Fla.

### Internal organ

Sitting in the waiting rooms at DHMC this past winter, I became addicted to your delightful magazine. I never would have believed that a house organ could be this interesting.

Now that my doctors' appointments are over, I'm hoping that you will put me on your mailing list so I can continue reading DARTMOUTH MEDICINE.

Many thanks.

PHYLLIS WOOD  
South Woodstock, Vt.



There was snow on the ground when Dartmouth hosted most of the leading presidential candidates at a series called Health Policy Grand Rounds. It's summer now, but—as two letters here indicate—the series is still sparking discussion.

We're happy to add to our mailing list anyone interested in the subjects we cover—that's an addiction that even a medical magazine doesn't mind promoting! See the box on page 29 for details. ■