We'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.

NC-17 for nicotine

In 1972, if my memory serves me, the annual report of the U.S. Surgeon General drew attention to the impact that visible media, such as television and motion pictures, have on our children. Certainly the work of Drs. James Sargent and Madeline Dalton, as reported in your Fall issue, bring to this matter further clarity, at least as regards smoking. Their work is excellent.

One of my colleagues, now the director of public health in Los Angeles, has suggested that any motion picture in which an actor or actress is shown smoking should receive an automatic rating of R. Personally, I'd favor an automatic NC-17.

MERLIN K. DUVAL, M.D.
DMS '44
Phoenix, Ariz.

DuVal, now retired, was the founding dean of the College of Medicine at the University of Arizona. His interest in the subject of this letter is rooted in his subsequent service, from 1971 to 1973, as the assistant secretary for health in the U.S. Department of Health, Education, and Welfare—a time of significant growth in the nation’s understanding about the dangers of smoking.

Tanzer tribute

That was a nice tribute to Dr. Tanzer in the Fall 2003 issue. I was on the housestaff in the mid-1950s and had the pleasure of working occasionally with Dr. Tanzer. I was intrigued to learn that he did his first ear reconstruction in 1957.

The bad news is that in the 1960s, I delivered a girl with severe facial deformities, including rudimentary external ears. The good news is that I knew Dr. Tanzer. I referred her to Hanover, and she underwent many procedures under his care. A recent communication tells me that she is 40-something, not disfigured, and full of self-confidence, humor, and optimism. “She is a lovely, cultured woman in a satisfactory, long-term relationship,” says a friend. Were she and I lucky, or what?

JEROME NOLAN, M.D.
HOUSESTAFF ’52-54
Wilmington, N.C.

Divine skill

I read with great pleasure and interest William Morain’s essay about longtime Dartmouth plastic surgeon Radford Tanzer, M.D.

During my ophthalmology residency at Yale, I spent four months on the plastic surgery service with the section head, Thomas Krizek, M.D. One day we were discussing the reconstruction of the ear, and Dr. Krizek said: “Only God, and Radford Tanzer, can make an ear!”

JOHN D. BULLOCK, M.D.
DMS ’66
Lyme, N.H.

Bullock, the retired chair of ophthalmology at Wright State University in Ohio, was a classmate of Morain’s at Harvard Medical School, where Bullock completed his M.D. after graduating from DMS’s preclinical program.

Reflections on heart and brain

With a summer residence in Canaan, N.H., built by my great-grandfather (H.S. Baketel, M.D., DMS Class of 1897), I have many times proudly brought houseguests on tours of the new Dartmouth-Hitchcock Medical Center. Each time, I have felt fortunate to pick up a copy of DARTMOUTH MEDICINE, and I am routinely amazed as I read about all the remarkable work taking place there.

The article by former Olympian John Morton in the Fall issue was not only first-rate but inspirational, especially to the many athletes who are at once frightened and perplexed upon learning that despite a lifetime of healthy exercise, they, too, are vulnerable to heart disease. But John conveys the good news that early diagnosis can mean effective treatment and a resumption of beloved pastimes. At age 52, I organize a men’s “cardiac” hockey league; this summer alone,
three of our skaters were diagnosed with coronary occlusions. John’s message is an optimistic one, certain to give “heart” to my convalescing linemates.

I would also like to comment on the announcement in the Fall issue of William Mosenthal’s retirement from DMS. Anyone privileged enough to have met this man must be unequivocally dazzled by his lifetime of accomplishments. But those who have never met him would be equally impressed with his human side. Seven years ago, Dr. Mosenthal shared an hour of his valuable time with my son, who at the time was a somewhat precocious sixth-grader who professed a strong interest in “the brain.” Introduced by Jehanna Peerzada, DMS ’97, Dr. Mosenthal spent an hour with us in the neuro-anatomy lab. Stooping to my son’s height while delicately picking away epithelial tissue from a human brain, he explained the structures in ways that fascinated son and father alike. It is not an exaggeration to say that we were in no small measure changed forever.

JEFFREY T. LEONARDS, PH.D.
Farmington, Maine

We regret having to inform readers that Dr. Mosenthal, a much-loved professor of surgery and of anatomy, died on November 26. His impact on generations of patients and students—not to mention sixth-graders—will survive him, among other ways, in the form of an endowed fund bearing his name to benefit the anatomy department. The legacy of Leonard’s great-grandfather lives on at DMS, too, hard to know their patients as people. Caring relationships are so often vital to successful medical outcomes, and they provide the added bonus of greater job satisfaction for doctors. Thanks for reminding us of these truths.

MARJORIE BELL
Bakersfield, Calif.

While Bell praises the program that Mitchell wrote about, it must be said that Mitchell has high praise for Bell—who was her high-school journalism adviser. Mitchell, a second-year DMS student, is a regular contributor to this magazine.

Timeless truths

Kathleen Mitchell’s recent article about DMS’s innovative Patient Partnership Program was inspirational. Not only is the program helping patients, it is obviously providing huge insights for students beyond the medical school basics. Unfortunately, this is an age in which patients and doctors are becoming increasingly divorced from one another.

Many years ago, a beloved aunt of mine (a retired first-grade teacher and an avid reader and baseball fan) came to live in an apartment that my father built on the back of our home. Luckily, her doctor (who had served in the Peace Corps) became interested in her as a person. He brought his wife and children over for visits and once even for a clarinet recital. His family must have lived on a strict budget, because he worked only part-time at his practice. This remarkable individual must have felt that his connection with patients was more important.

Thanks to the Dartmouth program, other young doctors will be coming along who will try
It, too, for the introduction to the region that it provided.

Constance E. Putnam
Concord, Mass.

Christie responds that he “knew [Putnam’s] dad well.” And he confirms that “the anecdote of Ralph Miller performing an autopsy in a tuxedo was not just legendary lore.” Putnam has a professional as well as a personal interest in northern New England medicine. A medical historian, she coauthored the definitive biography of Nathan Smith, DMS’s founder, and is the author of a full-scale history of DMS that is due out in spring 2004 from University Press of New England. See page 48 for her latest contribution to Dartmouth Medicine.

A story to share
As a retired MHMH employee, I always enjoy receiving Dartmouth Medicine. The Fall 2003 issue, especially the article “Students’ deafness presents a challenge but not a problem,” was of particular interest.

Our now-16-year-old granddaughter was born profoundly deaf, but thanks to modern medicine she is fortunate to have a cochlear implant. The article about Robert Nuss and Wendy Osterling will be truly inspiring to our granddaughter; we are grateful to be able to share your story with her.

James Rowse
Canaan, N.H.

Paper (and) money
I have been receiving two copies of Dartmouth Medicine magazine. Please save some paper and money and mail me only one.

Incidentally, would you not have as nice a magazine at less cost if you used non-glossy paper?

Priscilla Kschinka
Vero Beach, Fla.

We’re happy to eliminate duplicate mailings if readers let us know about them; unfortunately, it can’t be done automatically for the reason explained in the box above. As to paper—in fact, glossy paper is the less expensive option. That’s because paper mills produce much more glossy than matte stock, creating significant economies of scale.

Credit where it’s due
I’d like to point out—regarding the article on the PainFree Program in the Fall issue—that the PainFree team usually includes an anesthesiologist and a certified registered nurse anesthetist, and occasionally a resident in anesthesia, rather than two anesthesiologists.

Cathy Vinci, C.R.N.A.
Lebanon, N.H.

Vinci is a certified registered nurse anesthetist at DHMC. The list of personnel in our article was the program’s core group, though it wasn’t specified as such for the sake of brevity. We’re happy to acknowledge the contributions also made by C.R.N.A.’s to the PainFree team.

Discerning reader
A friend gives me some of his copies of Dartmouth Medicine when he has finished with them, and they are of great interest. My wife and I plan to move to Hanover in 2004. Would it be possible for us to have our own subscription? The Dartmouth medical community must be very special, from all I can discern.

Richard A. Norton, M.D.
Hingham, Mass.

Treated right
During the course of treatment my husband recently underwent at DHMC, we became familiar with your publication. We read it with interest and, his treatment being successful, we hope that we may not soon have occasion to return!

But we would like to continue reading Dartmouth Medicine, so please add us to your subscription list. Thank you.

Victoria Singer
East Burke, Vt.

Inside view
I recently had the great good fortune of being able to read a couple of back issues of Dartmouth Medicine and I loved them!

As an R.N., I enjoyed the pure medical aspects of it, and as a mother with a daughter thinking about medical school, it was great to read how things have changed over the years and how they remain the same.

I’d like to request a subscription. Thank you and congratulations on a wonderful magazine.

Anne Small
Church Hill, Tenn.

A family affair
Thank you for sending me the quarterly copies of your wonderful magazine. I have had surgery twice at DHMC, several family members have also been treated there, and I am an alumnus of Dartmouth College.

Would you please send copies to some other family members?

John Stockwell, DC ’49
Wolfeboro, N.H.

Voracious reader
Please add me to your list of subscribers! I enjoy your wonderfully written articles and devour every issue. Our local library carries your publication, but I’m reluctant to return them! My children have been regulars at DHMC for more than 20 years—I feel so fortunate to have you in my backyard.

Christina Theriault
Claremont, N.H.

We’re happy to add interested readers to our mailing list—see the box on page 25 for details.