We’ve got mail

By Dana Cook Grossman

In most issues, I use this page to share something I think you, our readers, would find interesting or moving or amusing but that just didn’t fit anywhere else in the magazine. I’m turning the tables this time, though: I’m going to use it to share your thoughts—what a few readers find interesting or moving or amusing (or, in a few cases, provoking) about Dartmouth Medicine.

One of the reasons I love publishing is that I love getting mail—electronic and paper. I receive about 75 e-mails a day (not counting spam), and I can’t imagine living without the efficiency of instant communication, sans stamps. I also treasure the kind of mail you slit rather than click open. Happily, hardly a day goes by that my snail mail doesn’t contain a couple of envelopes that aren’t just ink-jetted by a junk-mailer—they may contain subscription requests, or article suggestions, or even classic “letters to the editor.”

And lately my mailbox has been overflowing, albeit with postcards rather than envelopes. About 1,000 copies of our Fall issue—copies going to readers who have requested a subscription, rather than those who receive the magazine automatically—are sent out with a postcard attached to the cover that the recipients had to return if they wanted to stay on our mailing list.

We do this periodically to be sure that we’re still sending the magazine to a good address and that the recipient is still interested in it. We’ve always been pleased by the response—especially considering that we can’t afford to pay for business reply postage, so readers have to ante up for a stamp if they want to keep getting DM. The last time we did one of these “resubscription” mailings, we got an impressive 33% of the cards back.

So I’m thrilled by the fact that this time over 52% of the cards were returned! When you consider that about 20% of Americans move every year, and it’s been four years since we last did a “resubscription” mailing, that figure is downright astonishing. And I’m downright touched by what people had to say about the magazine. Here’s a sample:

“It contains fascinating topics, portraying all of the joys and sorrows [of] real-life drama—life and death situations that tug at my heartstrings and bring tears to my eyes.” Meredith, N.H.

“DM is the only magazine I read in its entirety. I then pass it on to my family, and it finally ends up in some . . . hospital waiting room.” Portland, Ore.

“I love DM!! I read [it] from cover to cover and share it with family, friends, and colleagues!” Antrim, N.H.


“It is one of the best coming to our home and helps keep this geezer doc up-to-date.” Gilford, N.H.

“It has transformed the way I think about doctors, hospitals, and medical care.” Newbury, N.H.

“I absolutely love it—read it from cover to cover!” Sarasota, Fla.

“We enjoy [it] immensely—not too technical, but doesn’t talk down to us!” Tenants Harbor, Maine.

“I love it. It is intelligently put together, full of valuable information, and helps me be a better, more educated citizen of the world.” Randolph, Vt.

“You do an excellent job of distilling interesting subjects down to their crucial cores. Great writing and editing. Thanks!” Palo Alto, Calif.

I was especially touched by two responses. One reader took the time to share her input in rhymed couplets: “I look forward to each issue / though sometimes I need a tissue . . . Each and every article is first-rate / Even the pages with ads are great.” And one pasted a gold foil seal on her card and wrote: “The magazine is one of my most interesting reads . . . A gold star to the DM staff.”

But don’t worry. As much as we enjoy all the nice comments, we’re not going to let them go to our heads. We also appreciate constructive and even critical comments. It’s hearing from readers that really value. There’s nothing worse than no response. We’d rather provoke you than bore you—otherwise we’re just wasting trees.

One respondent, for example, urged us to “please add a little more humor.” Another encouraged us to “spare no one—patients, doctors, and drug companies.” One wishes we covered nurses more often. One isn’t fond of “long first-person articles” (although another “particularly like[s] articles written by patients and/or their families”).

Okay, so maybe we can’t please everyone. But we’ll continue to do our darnedest not to bore you—and to be amusing a little more often! In return, I hope you’ll keep filling up my mailbox. ■