

**KING OF GORE:** Best-selling horror writer Stephen King gets the gore right. For 35 years he has relied on a physician's assistant trained at Dartmouth, says *Wired* magazine, for such details as what bone dust smells like and how to cauterize a wound using a blowtorch.



FACTS & FIGURES

**A clean sweep**

1.8 million

Square feet of cleanable space at DHMC

162

Full-time equivalent (FTE) staff who keep that space clean

337,376

Total hours annually that they spend cleaning

11,097

Square feet per day cleaned by each FTE  
(that's an area equal to 4.4 average-sized U.S. houses)



1,531

Tons of trash (non-recyclable, non-hazardous waste) generated in 2008

1,020

Tons of recyclable waste generated in 2008

341

Tons of hazardous waste and "sharps" generated in 2008

\$150,000

Approximate cost (not including labor) of disposing of the trash

\$50,000

Approximate net revenue from the recycling program

\$234,000

Approximate cost of disposing of hazardous waste and "sharps"

SOURCE: DARTMOUTH-HITCHCOCK MEDICAL CENTER

**Putting some numbers into the kids-food equation**

In today's ad-saturated world, what does it take to get youngsters to eat healthy food, avoid sugary drinks, and exercise regularly? At least as much thought as money on the part of schools, parents, and local businesses, judging from the work of the Community Health Research Program (CHRP) at Dartmouth's Hood Center for Children and Families.

As part of a five-year study of environmental and family influences on overweight adolescents, CHRP researchers led by Madeline Dalton, Ph.D., visited school cafeterias; quizzed kids, their parents, and school officials; and scouted close-to-campus food options in two dozen New Hampshire and Vermont communities—most of them small towns. In April of 2009, they issued a 38-page report of their findings and distributed it to secondary schools and public-health organizations throughout the states.

**Surprise:** Did anything surprise the researchers? "In rural areas, where most kids do not walk or bike to school, creating daily opportunities for physical activity on the school grounds immediately before or after school may be a more effective strategy than focusing on active travel initiatives, which are more relevant to urban areas," says CHRP's Meghan Longacre, Ph.D.

"Further, convenience stores represent the vast proportion of all food outlets in rural towns—

compared to urban areas, [where] most food outlets are restaurants." So, she adds, "improving the healthfulness of the community food environment should target different types of outlets, depending on town size."

On the subject of *student size*, 28.9% of the more than 1,600 8th- to 12th-graders surveyed reported being overweight—as defined by the body-mass index (BMI) standard of the Centers for Disease Control and Prevention. In a 2007 survey, the national average was 28.8%.

There has been "a threefold increase in overweight among children and adolescents over the past 30 years," according to the report. About 18% of 6- to 19-year-olds are now obese, and another third are overweight. As a result, the report points out, the life expectancy of today's children may be less than that of their parents.

The researchers observed a range of approaches to addressing the in-school "food environment"—some communities and schools do it more systematically than others.

"New Hampshire is one of only nine states nationwide with a statewide action plan to promote healthy eating and active living, called the HEAL Initiative," Longacre says. "Our research team is currently partnering with HEAL to develop a statewide collaboration that would enable communities to use evidence-based tools, re-

For a **WEB EXTRA** with a link to the full Hood Center report described below, see [dartmed.dartmouth.edu/w09/we07](http://dartmed.dartmouth.edu/w09/we07).



search, and resources to identify and address the factors in their local environments that are most influential in promoting healthy eating and active living.”

**Meals:** More than 90% of the schools studied offer free or reduced-price meals through the federal school lunch program. Of the 31 schools whose food-service directors and cafeteria managers returned surveys, all offer at least one fresh fruit and one fresh or steamed vegetable a day. And 20% of the schools reported offering no fried foods of any kind, though an equal number offer a fried entrée and a fried à la carte item daily.

Another factor is in-school snack bars; 12 of the surveyed schools have snack bars, and 83% of them sell cookies and chips. In addition, 31 of the 32 schools visited by Hood researchers have on-campus vending machines; 90% sell sweetened beverages, 58% chips or popcorn, 39% candy or chocolate, and 35% Pop-Tarts, doughnuts, or muffins.

Longacre says the CHRP report has caught the attention of public-health groups. “They have been excited about the prospect of being able to use our research results to inform their programmatic efforts.”

So today, New Hampshire and Vermont. Tomorrow, the world? “Our first round of peer-reviewed manuscripts from this study are under review now,” Longacre says. “Once our study results are published, I expect that our distribution will become more national than regional.”

DAVID CORRIVEAU

## CLINICAL OBSERVATION

In this section, we highlight the human side of clinical academic medicine, putting a few questions to a physician at DMS-DHMC.

**Athos Rassias, M.D.**

**Associate Professor of Anesthesiology**

*Rassias specializes in critical care medicine and adult cardiac anesthesia. He has been on the Dartmouth faculty since 1994 and is a DMS '89.*

**What is your most memorable accomplishment?**

Thanks to this magazine, if you type my name into Google, the second thing that pops up is that I came in third in a look-like-your-dog contest. I'm very proud of that, but it's more of a fact than an accomplishment. I have been running our fellowship in critical-care medicine for about a decade. The process of helping someone set goals, work to achieve them, and then move on is rewarding. To play a small part in helping talented people is a satisfying accomplishment.

**Are there misconceptions people have about your field?**

There are many misconceptions about anesthesiology. It's a difficult specialty to define for those not involved in it. Nobody knows what we really do! Critical-care medicine is also an area about which there are many misconceptions. Part of this stems from the fact that every hospital has different models for care. As



I heard recently at a conference, “If you've seen one ICU, then you've seen one ICU.”

**Before you were 12, what did you think you wanted to be?**

When I was much younger than that, around four, I would respond to that question by stating that I wanted to be a dog. When I was 12, I likely had no idea what I wanted to be, or that I had to be anything. I was interested in just about everything at school. I was certainly drawn to the sciences, but literature captivated me, too.

**What is the greatest frustration in your work? And the greatest joy?**

I become frustrated when the forest is ignored for the sake of the trees. I derive satisfaction when the system works—which it almost always does. Caring for a critically ill patient involves a multitude of problems and issues. Managing these issues necessitates having a team that works well together. It's rewarding and fun to watch and participate in this process.

**Who are your heroes, fictional or real?**

I draw inspiration from many individuals but especially from my wife, my children, and my parents. Honesty, integrity, and competency are the characteristics central to a personal hero for me.

**What do you think makes for a successful physician?**

Using the trust that a patient has in you as the central aspect of your decision-making process. It's as simple as that.

**What's your favorite nonwork activity?**

Over the last few years I have devoted a lot of time to cycling. I fancy that one of these days I will become a top-notch cyclist, hitting the Pyrenees like a climbing specialist and then moving on to win the sprints as well. In some ways, parts of this dream are not unreasonable, as I would love to have my children spend time growing up in a foreign country, as I did in France when I was a child.

**What about you would surprise most people?**

That I love to bake bread. I derive a huge sense of accomplishment from this simple activity. And I love it when others enjoy my products. My favorite loaf is a French country bread, *pain de campagne*. There is a seemingly infinite variety to this one loaf.

**Hollywood is doing a movie of your life. Who plays you?**

John Travolta. Oddly enough, I've had two patients tell me recently that I look like him. However, one of them added quickly, “But not the young Travolta, the older one.” I wasn't sure what to make of that, but it did make me smile.

