
SURGICAL

A just-published book by an award-winning journalist looks in intimate detail at the work of Dr. Hardy Hendren, a 1950 graduate of Dartmouth Medical School. These excerpts from the book explore the miracle of pediatric surgery and the mind of "a surgeon's surgeon: one of the world's best" — to use the words of C. Everett Koop.

By G. Wayne Miller

As a colleague pays tribute to him — going so far as to call him a hero, and not gratuitously — Hardy Hendren sits in a crowded auditorium in Boston, across town from Children's Hospital. In a moment, Hendren will receive a medal. He will deliver a lecture no one else in the world could give. He will get a standing ovation. And when he's done, fellow surgeons will line up to shake his hand.

Hendren is an average-size man. His arms are muscular, his grip strong. His nails are clipped and clean, never anything but clean, but his fingers give no further clues to his profession or the prominence he has in it. His hair is thinning and graying. His skin is less wrinkled than that of most men his age; for this, he can thank a career spent indoors. Hendren's eyes are grandfatherly today, benevolent, for he is among admirers and friends. When he's angry — and nothing angers him more than lies or stupidity — his eyes sear.

Hendren's nickname is Hardly Human, a name he finds amusing. Some consider it a slur, a reference to his bedside manner, which would not be mistaken for Marcus Welby's. Others wonder if it isn't an allusion to his memory, which allows him to recall names, middle initials, and the most minute details of even

This article is excerpted from The Work of Human Hands, by G. Wayne Miller. Copyright 1993 by G. Wayne Miller. Reprinted by permission of Random House, Inc. Miller is a staff writer for the Providence (R.I.) Journal-Bulletin. The book, which came out in mid-February, is subtitled "Hardy Hendren and Surgical Wonder at Children's Hospital." It was based on a six-part Journal-Bulletin series that won the Distinguished Writing Award of the American Society of Newspaper Editors.

run-of-the-mill operations he performed when Eisenhower was president. Not everyone who's encountered Hendren considers that steel-trap memory of his a blessing.

A more probable explanation for Hendren's nickname is his OR stamina. Well into his sixties, Hendren can go 24 or more hours on the most complicated reconstructive operation, stopping only once or twice to empty his bladder and eat a hot dog or microwaved popcorn or some other food similarly rich in carbohydrates.

The introduction complete, Hendren comes forward, smiling while the Orvar Swenson Medal, a bronze medallion, is placed around his neck. When the applause subsides, Hendren takes the podium.

"I would like to talk on the subject of cloaca, which, as you know, is a congenital persistence of an early embryological stage where everything empties into a single chamber," Hendren says. "Cloaca in Greek is the word for sewer.

"This is the second cloaca that I had occasion to see, many years ago, in 1955," Hendren begins, as the first slide flashes onto the screen. Not so long ago, rectal abnormalities imposed a life sentence as a freak — if the victim somehow managed to survive.

The basic problem, understood more than a century ago, was that instead of having three openings on their bottoms — anus, vagina, and urethra —

Intent on the work at hand: Eminently at home in a surgical milieu, Hardy Hendren has been chief of surgery at Boston Children's Hospital since 1982.

WONDER



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When Hendren returned to Dartmouth to resume his undergraduate education, he and his bride, Eleanor, lived at Wigwam Circle. Their apartment was a single room with two chairs, table, hot plate, sink, and a sofa that converted into a bed.

cloaca babies have only one, the urogenital sinus or, simply, the cloaca. From there, the variations are stunning for such a rare defect — approximately one in 50,000 live births is a cloaca baby. Cloaca babies may have a single vagina or two vaginas or no vagina. There may or may not be ovaries and Fallopian tubes, which may or may not connect to a vagina — if there is a vagina. Cloaca babies may have two kidneys or one kidney. Their ureters may be properly connected to the bladder, but frequently they are not. The bladder may be properly formed — or so deformed as to have no functional value whatsoever. The rectum may communicate with the vagina or the bladder by an abnormal passage called a fistula. Or it may end blindly before reaching the bottom.

In one respect, cloaca was like other formidable surgical problems: it would not be solved by a single brilliant stroke. The solution would be evolutionary, with dozens of surgeons contributing over a period of many years. Although it took Hendren to put the final pieces in place, progress had been made before him. Surgeons mastered the colostomy, which gave life, at least to babies with less severe cloacal anomalies. They refined the technique of making a functional anus and became progressively better at repairing bladders, urethras, and ureters. But not until the 1960s did the increments add up to a base of knowledge and technique broad enough to support the vision of a young surgeon who'd trained at both Children's Hospital and the Massachusetts General.

Hendren has, by far, the largest series of cloacal patients in the world. By summer 1992, his list had 113 children and adults from 25 states and 12 foreign nations.

As Hendren advances his slides, across the screen flash case histories of babies, toddlers, and teenagers, each an incomplete child whose parents brought her to Hendren with the same hopes and prayers the religious carry to Lourdes. Some are virgin cases, presented shortly after birth with the hope that Hendren could heal them. Those are the lucky ones. The less fortunate have been on long, expensive, and ultimately unsuccessful surgical odysseys to other hospitals, to other so-called experts. They have come to Hendren wearing diapers and bags, they and their families aware that in the eyes of the world they are freaks.

Hardy Hendren could not remember a time, not even in the farthest reaches of his midwestern childhood, when he'd seriously wanted to be anything but a surgeon. Surgeons helped people. Surgeons were their own bosses. Surgeons always had work, which meant a great deal to a child of the Great Depression. Surgeons had an extraordinary grasp of anatomy, an

endlessly interesting subject. They were intrigued by the harmony of organs and systems that make the creature work.

In Kansas City, Mo., his hometown, Hendren had lived near Loose Park, site of a minor engagement of the Civil War. There was a pond in Loose Park, lily padded and home to frogs. One day when he was in the fourth grade, Hendren caught a tadpole.

I wonder what it looks like inside? he thought as he held it, wriggling, in his hand. *Why not cut it open and see?* With his pocketknife, Hendren did. *There's the blood. That part beating there must be the heart. Look at the veins.* Never mind that when he went home for lunch, his mother had cooked macaroni, creating an unfortunate association with tadpole intestines that kept pasta off his plate for decades. Something else that would last had been created too.

After grammar school, Hendren went one year to Kansas City's Southwest High School, then to Woodberry Forest in Virginia. After a semester at Dartmouth College, the Navy took him. He was 17. America's mounting successes slowed pilot training, and war's end gave candidates a free ticket out, but Hendren had set a goal: he wanted his wings. He had to get them. In October 1946, after repeated landings on an aircraft carrier, he did. He was a naval aviator.

It was called Wigwam Circle. It was 104 units of housing, arranged in rows that resembled the spokes of a wagon wheel. It was prefabricated and cramped, roughly 200 square feet per unit, smaller than a garage. It was heated by kerosene space heaters that you filled, at a nickel a gallon, from barrels outside the front door. Once used to house workers in a wartime shipyard in Maine, Wigwam Circle had been transported to Hanover, where Dartmouth was being flooded with veterans coming back to campus with their new spouses. The war was over. Building futures and starting families were the orders of the day.

In early 1947, when Hardy Hendren returned to Dartmouth to resume his undergraduate education, he and his bride, Eleanor, lived at Wigwam Circle. Their apartment was a single room with two chairs, table, hot plate, sink, and a sofa that converted into a bed.

Economically, the newlyweds were struggling. Hardy had the GI Bill, but that was only \$90 a month. What would be their salvation would be the Calvinist ethic. *We'll just have to work harder*, Hardy thought. *We'll do whatever we have to.* Hardy got a job in the medical library, checking out books for 65 cents an hour. On reunion weekend, he worked as a dormitory clerk. Eleanor went to a mill-end store, bought fabric at fire sale prices, and turned out drapes, which she

