

MEDIA MENTIONS: DMS & DHMC IN THE NEWS

Among the people and programs coming in for prominent media coverage in recent months was a Dartmouth surgeon who participated in the first paired kidney donation arranged as part of a national pilot program. “We all realize that the shortage of donors is only getting worse,” [said] Dr. **David Axelrod**, section chief of transplantation surgery at Dartmouth-Hitchcock in the



Boston Globe. Paired donations have in the past happened only on an ad hoc basis. The pilot, run by the United Network for Organ Sharing, established a national database to maximize the chance of making matches whereby a person donates a kidney to a stranger, and a friend or family member of that person receives a compatible organ in return. The national network, Axelrod told the Associated Press, “will supplement the many existing regional alliances that mix and match patients and donors.”

Time magazine recently sounded the alarm about the dangers of thirdhand smoke—“harmful compounds in tobacco residue that get embedded in clothing, hair, furniture and almost any other exposed surface.”



Among the experts quoted was a member of the DMS faculty. “We don’t know how bad it is, but there is enough evidence that it sets alarm bells off for people who pay attention to the health of all kids,” says Dr. **Susanne Tanski**, a pediatrician at Dartmouth Medical School and coauthor of one of the first papers, published last year in *Pediatrics*, to explore the concept of thirdhand smoke.”

Wired magazine recently gave a design makeover to the reports for three common lab tests. To create patient-friendly and effective reports, the magazine “consulted

with Drs. **Lisa Schwartz** and **Steven Woloshin**, physicians at the Dartmouth Institute for Health Policy and Clinical Practice and experts in communicating data to patients, to make sure the right information gets onto the forms and the irrelevant stuff stays off.” *Wired* called the makeovers “proof of concept” in “refutation of the argument that ordinary people can’t handle their health.”

In covering a horrifying story about schoolchildren who discovered a burning body, the *Detroit Free Press* turned to the DMS psychiatrist who heads the VA’s National



Center for Post Traumatic Stress Disorder. “The most important steps to take are for people to be aware of how this may affect kids, to provide a supportive environment, to provide safety and to remove children from any reminders of violence or death through violent means,” Dr. **Matthew Friedman**, the center’s executive director and a professor at Dartmouth Medical School,” told the *Free Press*.

Bloomberg.com recently quoted a Dartmouth orthopaedic surgeon in a story on an ineffective but popular form of back surgery. “It’s amazing how much evidence there is that fusions don’t work, yet surgeons do them anyway,” said Dr. **Sohail Mirza**, a spine surgeon who chairs the Department of Orthopaedics at Dartmouth Medical School in Hanover, N.H. “The only one who isn’t benefiting from the equation is the patient.” Mirza was also tapped for expert commentary by the



Milwaukee Journal Sentinel, regarding a study which showed that doctors who have financial ties to a product’s manufacturer had better success with the product than did those without any financial ties. “People may be looking at the success of the

[spine surgery product] in a different way if they knew these relationships existed,” Mirza was quoted as saying in the *Journal Sentinel*.



When *Newsweek* took on the issue of digital versus film mammograms—and whether Medicare should be paying for the newer, more expensive digital technology—the magazine cited Dartmouth research.



“In 2008, a paper in *Annals of Internal Medicine* found that digital mammography is not cost effective compared with film: that is, it does not save any more lives per dollar spent,” the article noted. “Over time, film mammography is going to cease to exist,” says lead author Dr. **Anna Tosteson** of Dartmouth Medical School. “But here is one thing that’s certain: there is no evidence that one should pay a premium for digital mammography.”

An ABC News report about soul singer Aretha Franklin’s battle with pancreatic cancer quoted a Dartmouth oncologist. “Just 10 percent to 20 percent of the 40,000 pancreatic cancers diagnosed each year are operable, . . . said Dr. **J. Marc Pipas**, director of GI oncology at the Nor-



ris Cotton Cancer Center at Dartmouth-Hitchcock Medical Center in Lebanon, N.H. Although the national standard of care has been to operate first on pancreatic tumors, then follow up with chemotherapy and radiation, Dartmouth and M.D. Anderson Cancer Center in Houston have been leaders in pretreating pancreatic tumors with radiation and chemotherapy to shrink them as much as possible to increase the odds of successful surgery. “An incomplete resection doesn’t help you live longer,” Pipas told ABC News.