

Grant income goes up by four more percentage points

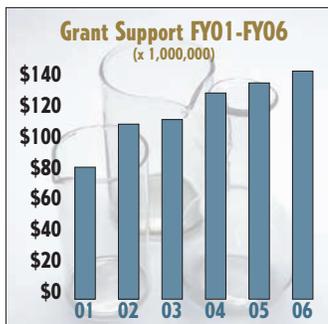
Funding for grants and contracts at DMS grew 4% in FY06, to \$137,269,833. Overall, external support has increased by 70% since 2001.

These gains are considerable, since federal research funding has stagnated in recent years. In fact, the budget of the National Institutes of Health (NIH)—the largest source of funding for DMS and many other medical schools—decreased slightly from fiscal year 2005 to 2006.

Pot: Yet despite the smaller federal pot, DMS still drew \$91.6 million from the NIH and other Health and Human Services agencies. Funds also came from the state of New Hampshire (\$12.9 million), other government entities (\$9.9 million), foundations (\$8.1 million), and corporations (\$6.8 million).

The Departments of Medicine, Ob-Gyn, Physiology, and Psychiatry all saw increases of \$1 million or more over their FY05 totals. Several departments held steady in FY06, and only a handful saw significant decreases.

JENNIFER DURGIN



MEDIA MENTIONS: DMS

Among the people and programs coming in for prominent media coverage in recent months was a DMS epidemiologist who wrote an editorial to accompany a large Harvard-led study showing that women who regularly take aspirin reduce their risk of dying from any cause. “The dissenting editorial, by **John Baron** of Dartmouth Medical School,” noted the *Atlanta-Journal Constitution*, “was based in large part on results . . . from the Women’s Health Study, which followed almost 40,000 women for 11 years and found” no such benefit. The *Baltimore Sun*, the *Orlando Sentinel*, *U.S. News & World Report*, Reuters, and BBC News also made mention of Baron’s editorial. “Which of these mega-studies is right?” Reuters quoted Baron as asking. “Both somehow? Neither?”



An editorial drew another faculty member into the press, too. In an article about lung cancer screening, the *New York Times* consulted “Dr. **William Black**, a radiologist at Dartmouth, who wrote an editorial accompanying” a recent Cornell study showing that screening with CT scans for lung cancer improves survival rates. “The flaw” in that study, Black pointed out, was the “assumption that every untreated lung cancer was ultimately fatal.” But, he explained on National Public Radio’s *Morning Edition*, “we do know from autopsy studies that we can find a lot of small cancers . . . [that] do not appear to have been related to the patient’s death. . . . If you were to find such a small cancer with CT screening and treat it, you might falsely assume that you’ve prevented a death.”



DMS’s **James Sargent** told the *Voice of America* that although “research findings are strong and consistent, many people are skeptical when they hear that movies might contribute to adolescent smoking.” And the *Philadelphia Inquirer* said: “Research from James Sargent, who has been studying this subject for years, seems to indicate that the more children are exposed to movie smokers, the higher the likelihood they’ll start smoking as teens.”

In a piece about the trend among some parents to forgo vaccinating their children, a *Chicago Sun-Times* writer talked with “Dr. **Henry Bernstein** of the Children’s Hospital at Dartmouth.” Bernstein, “a member of the American Academy of Pediatrics’ Committee on Infectious Diseases, . . . believes that vaccines were ‘the No. 1 public health breakthrough of the last century.’” Of a now-discredited study linking autism to a mercury-based preservative in some vaccines, he said, “It’s pretty discouraging when something like that can lead so many people not to vaccinate their children.”



“For those wondering what the future holds” regarding health-care transparency, “it’s worth visiting the website of Dartmouth-Hitchcock Medical Center in Lebanon, N.H. (www.dartmouth-hitchcock.org), part of the system that includes Dartmouth Medical School.” That’s according to *USA Today*, which highlighted the Quality Reports and payment estimator features of the DHMC website and quoted “**Melanie Mastanduno**, the hospital’s director of quality measurement,” as saying, “Fundamentally, we believe we’re in a partnership with patients . . . Only if they have information can they make good decisions about their health care.”



The *Wall Street Journal* reported on three screening tests for strokes, aneurysms, and other arterial problems that got “a big endorsement” from the Society for Vascular Surgery. The tests range from free to more than \$1,000, the *Journal* noted, “so how can people be sure they are getting accurate tests at a fair price? . . . Dartmouth Medical School vascular surgeon **Robert Zwolak**, a leader in the effort to get these screening tests widely embraced, . . . suggests that patients start by looking into screening programs made available free by vascular medical groups and listed at www.vascularweb.org.” The *Arizona Republic* also quoted Zwolak, “who is

