

NO BOOB: When the *Today Show* tackled “the issue of too much cancer screening,” health-care blogger Gary Schwitzer said, “thank goodness they had one of the best evidence-based minds on the set . . . Dartmouth’s Dr. Gil Welch.”



THEN & NOW

A reminder of the pace of change, and of timeless truths, from this magazine’s Summer 1989 issue:

Dr. Robert Markison, DMS ’74-5, wrote about the use of multimedia computing in medical education: “The creation of multimedia teaching materials involves the assembly of text, data, animation, and sound. . . . Multimedia computing is still a brand-new medium, just as ‘talkies’ were still new to the motion picture industry through the late 1920s.”



2006

Year this magazine launched multimedia “web-extras” in its online edition

>1,500

Average monthly visits to the most popular web-extra

2008

Year that DM’s web-extras won a national award

Physicians sink their teeth into dental care

Dr. Melanie Lawrence, a family physician in Bradford, Vt., is tired of seeing toddlers with teeth so decayed they need to be pulled. A few states over, in Maine, Dr. William Alto is “increasingly frustrated” that his patients often lack dental care because they can’t afford it or can’t get a dentist to see them.

Scope: Both Lawrence, an adjunct assistant professor at DMS, and Alto, a professor in the Maine-Dartmouth Family Medicine Residency, have taken action. The initiatives they’re helping to spearhead are not related. In fact, until recently, they were unaware of each other’s efforts. But both are aiming to improve the dental health of their patients, many of whom depend on Medicare or Medicaid or lack health insurance entirely. It’s a new wrinkle for physicians, who used to consider patients’ teeth to be beyond their scope.

Lawrence and her colleagues at Little Rivers Health Care are attacking the issue three ways:

- They revamped their well-child checkups to include a basic dental screening, thanks in part to the work of second-year DMS student Thomas Hoke.
- They’re working with three other health centers in northern Vermont and Ronald McDonald House Charities to staff a mobile dental unit that will travel around the region and serve children and young adults up to age 21. The van is scheduled to go into service this fall.
- They’re going to conduct an unusual pilot study in three ele-

mentary schools, where fourth-graders coach kindergartners in oral health. It’s funded by the Dartmouth Center for Clinical and Translational Science.

In the study, four fourth-grade classes will learn how to take care of their teeth by avoiding sugary foods and brushing and flossing correctly. Then two of the classes will prepare and give a presentation to kindergartners. (The other two classes will be controls, to test the effect of having the older kids work with younger ones.) They’ll use fake teeth to teach the kindergartners how to floss and brush and show a PowerPoint presentation about oral health.

Mouths: In addition, the older kids will help the kindergartners measure the plaque in their mouths by using disclosure tablets, chewable tablets that temporarily dye plaque red. And perhaps the best part for the fourth-graders will be dressing up in gloves and surgical masks.

“Any time you dress kids up in health-care paraphernalia, they get all excited and they think about what they are going to be when they grow up,” says Lawrence, a former day-care director. “We’re trying to hit a lot of things . . . role modeling a career [in health care] . . . a sense of social responsibility and teaching between students . . . and helping kids learn to take better care of their mouth.” Lawrence and her colleagues will also be training the elementary schools’



Under the watchful eye of Melanie Lawrence, center, fifth-grader Meghan Boardman, dressed up in doctor gear, checks out a kindergartener’s teeth.

nurses, teaching them how to screen for dental problems.

While Lawrence is tackling dental health by teaching youngsters, Alto and his colleagues in the Maine-Dartmouth Residency program are targeting doctors-in-training. The program, which is based in Fairfield and Augusta, Maine, may be the only one in the country that teaches physicians how to extract teeth and perform basic dental procedures, such as fluoride varnishes.

Maine-Dartmouth residents can also get an additional month of dental training at the Togus VA Medical Center in Augusta. That’s thanks in part to a collaboration with dentist James Schmidt, now the president of

the Maine Dental Association, who helped Alto build dental training into the residency.

Cavities: One goal of giving young doctors some dental training, Alto explains, is simply to get them interested in looking in the mouth for oral cancers and lesions, as well as cavities and other problems with the teeth. Research has shown that poor oral health may be linked to broader health issues, such as cardiovascular problems and premature labor, and may also be associated with diabetes, osteoporosis, eating disorders, and several other illnesses.

In March 2009, the *New York Times* profiled the Maine-Dartmouth dental initiative, noting that “Maine has one dentist for every 2,300 people. . . . Nationally there is one dentist for every 1,600 people.”

Dentists are also in short supply in northern New Hampshire and northern Vermont. Most of the dentists in her area, says Lawrence, already have full practices. And since Medicare and Medicaid reimbursements for dental care are “not high,” finding a dentist who will see a patient covered by those programs can be tough.

Bite: “Part of what makes this so urgent for me,” says Lawrence, “is that every year at least two children in my practice under the age of five have two or more teeth extracted under general anesthesia.” She’s hoping the various efforts of her practice—and other initiatives like the one in Maine—will take a bite out of those numbers.

JENNIFER DURGIN

CLINICAL OBSERVATION

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

Margit Berman, Ph.D.

Assistant Professor of Psychiatry

Berman, whose doctorate is in counseling and social psychology, is codirector of the Mood Disorders Service and also specializes in eating disorders. She joined the Dartmouth faculty in 2008.

How did you become interested in your field?

I went into psychology because I find people fascinating. My undergraduate degree was in English literature, so I like to think that I’ve had a chance to try and understand people through the lenses of both art and science. Psychiatry departments need psychologists because we offer expertise in tests, measurements, and other scientific methods to understand and improve human behavior.

What about you would surprise most people?

Anyone who looks at me can tell I’m no athlete, so maybe people would be surprised to learn that once in a while I like to try a physically adventurous sport. I’ve tried sea kayaking, rock climbing, dog sledding, and flying trapeze. I even went hang gliding—when I was four months pregnant! It was a lot of fun, but I’m sure your physician would suggest trying it at a less delicate time.



What’s your favorite nonwork activity?

Being with my six-year-old son, by far! We spend a lot of time pretending to be lions, wolves, cheetahs—he likes big, carnivorous animals.

What three people would you like to have over for dinner?

If we’re talking about famous people, living or dead, then the playwright Tony Kushner, the poet Sharon Olds, and the food writer M.F.K.

Fisher. In addition to admiring all three as artists, I think the conversation would be positively electric. Really, though, I’d be happiest with my husband, my son, and my late grandfather. My grandfather was a wise and wonderful retired cardiologist who died when my son was just a year old, so my meals with all three were far too few and precious.

What is a talent you wish you had?

I wish I was skilled in working with my hands. I enjoy making art and crafts a great deal, but I wouldn’t mind having a lot more talent!

What quality do you most admire and most despise?

So many qualities are admirable, it’s a nearly impossible question. I admire skillfulness in virtually any endeavor, enthusiasm, equanimity, fairness. I do admire honesty and transparency, especially in leaders and people in positions of power. And I suppose its reverse—duplicity, particularly for self-interested or malicious ends—would be the quality I find most difficult to tolerate when I run across it.

What’s the funniest thing that has ever happened to you?

When I’m funny, unfortunately it usually isn’t intentional. I’m delighted that no one who is reading this ever witnessed the only remotely amusing things that have ever happened to me.

What advice would you offer to someone who is contemplating going into your field?

Lots of people want to be psychologists, but many of them don’t need to become a psychologist to do the kind of work they dream of doing. People who want to be therapists, for example, might do just as well getting a master’s degree in clinical social work, rather than spending six years on a doctorate in psychology. On the other hand, if you want to help people through scientific research, testing, or measurement, psychology is going to be perfect for you. So my advice is to clarify what you want out of a career in psychology, find people who are doing that, and ask *them* for advice. That’s probably good advice for getting into any career!

