

othing endures but change," observed the Greek philosopher Heracleitus in the sixth century B.C. British satirist Jonathan Swift put the idea this way in 1707: "There is nothing in this world constant but inconstancy."

To say that the situation hasn't changed in the 26 centuries (or three centuries) since those nearly identical aphorisms were penned is in a way a double redundancy. But tautology be damned—change is without question a constant in our lives these days, and nowhere is that more true than in medicine and science.

Even 22 years ago, the Russian-born science fiction writer Isaac Asimov noted that "It is change, continuing change, inevitable change, that is the dominant factor in society today. No sensible decision can be made any longer without taking into account not only the world as it is, but the world as it will be."

That must mean, then, that the decisions being made these days at Dartmouth Medical School and Dartmouth-Hitchcock Medical Center are sensible ones, for things are surely changing here and there's an air of excitement about the place. The faculty is growing. The facilities are being expanded. Funded research took an unprecedented 38% leap in the last fiscal year. New departments and research centers are being formed, in disciplines like the neurosciences and immunotherapy—the latter a concept so new that putting "immunotherapy center" into the Web search engine Google produces only 16 hits (compared with over 15,000 for "neuroscience center"). Even some recent economy-related belttightening is being faced in a positive and collaborative manner.

But at the same time, there's grumbling evident in some corners of the institution: The place is getting too big. It's losing its roots. Things just *aren't* the way they used to be. Such feelings are likewise an immutable fact of life. The 19th-century Russian novelist Fyodor Dostoyevsky wrote that change is "what people fear most."

It's usually the uncertainty that is part and parcel of great change—whether in individual lives, in institutions, in societies, or in the world—that engenders nervousness and resistance. We humans are creatures of habit. It can be very hard to leave the comfort of a well-worn path and strike out

on a newly blazed, much less an unmapped, trail.

Indeed, "change is not made without inconvenience, even from worse to better," opined a 16th-century British theologian named Richard Hooker. Yet change is "the only thing that has brought progress," said 20th-century American inventor (and philanthropist) Charles Kettering. Kettering, whose legacy includes over 200 patents (and an eponymous foundation), noted that change has particular relevance to science: "Research is a high-hat word that scares a lot of people," he wrote. "It needn't. It is rather simple. Essentially, research is nothing but a state of mind—a friendly, welcoming attitude toward change."

And humanitarians as well as scientists understand that fact; American poet Kathleen Norris pointed out that "disconnecting from change does not recapture the past. It loses the future."

hange is obviously a subject to which aphorists have devoted a lot of thought over the ages. It's also a subject that has been much on our minds at Dartmouth Medicine lately—for the issue that you hold in your hands includes one of the biggest changes in our nearly 27 years of publication: It is the first ever printed in full color throughout!

This is something we've wanted to do for some time, but the cost has been prohibitive. What finally allowed us to take the step was not a budget increase, but leaps and bounds in printing and photographic technology. We are delighted that the magazine's appearance will now better reflect the vividness of the stories and the excitement of the news that we have to share in its pages.

We also made a far more subtle change in the last issue—just a tweaking, really—in the titles for a few of our one-page essay sections. What used to be "Faculty Matters" is now "Grand Rounds"; what was "Student Perspective" is "Student Notebook"; and "From the Dean" is now "For the Record."

But there's one thing we have no intention of changing or even tweaking, and that's our commitment to trying to pique your interest regarding the scientific curiosity and the humanitarian spirit that make this place so special. Do let us know what you think of our new look. And we always welcome hearing how you think we're doing generally.

Dana Cook Grossman

DARTMOUTH MEDICINE

EDITOR Dana Cook Grossman

ASSOCIATE EDITOR Laura Stephenson Carter

EDITORIAL ASSISTANT Matthew C. Wiencke

CONTRIBUTING EDITORS Sandy Adams Barbra Alan

CONTRIBUTING WRITERS
Katharine Fisher Britton
Megan McAndrew Cooper
Robert E. Gosselin, Ph.D., M.D.
Louise Kennedy
Katrina Mitchell
Richard A. Parker, M.D.
Timothy Rooney, M.D.
Roger P. Smith, Ph.D.
Alan Smithee
Catherine Tudish

PHOTOGRAPHERS/ILLUSTRATORS

Mark Austin-Washburn Suzanne DeJohn Bert Dodson Flying Squirrel Graphics Jon Gilbert Fox Alexios N. Monopolis Joseph Mehling Katrina Mitchell Tony Rinaldo Kate Siepmann Amanda Weatherman

DESIGN CONSULTANT Kate Siepmann

EDITORIAL BOARD Joan Crane Barthold, M.D., '85 Robert D. Becher '05 James L. Bernat, M.D., HS '73-77 Lin A. Brown, M.D., HS '79-85 Mahlon B. Hoagland, M.D. Bethany A. Lovejoy '04 Malcolm W. Mackenzie, M.D., '90 Joseph E. Melton, Ph.D., '82 Maureen S. Micek, M.D., '90 H. Worth Parker, M.D., HS '75-83 Drew Remignanti, M.D., DC '75 John H. Sanders, Jr., M.D. Stephen H. Taylor Heinz Valtin, M.D. Hali Wickner Charles R. Wira, Ph.D., '70

EDITORIAL OFFICES

Mailing address: Dartmouth Medicine, One Medical Center Drive (HB 7070), Lebanon, NH 03756

Office location: DMS Publications, 21 Lafayette Street, #303, Lebanon, NH 03766

Phone: 603/653-0772 Fax: 603/653-0775

E-mail: dartmed@dartmouth.edu

2 Dartmouth Medicine Spring 2003