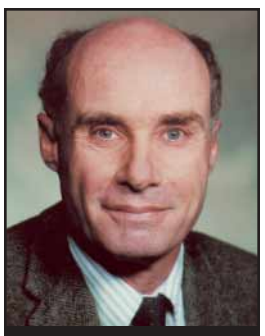

BY WILLIAM G. WILKOFF, M.D.

LETTERS FROM MAINE

Tribute to a Tongue Depressor

Those of us practicing primary care pediatrics often refer to ourselves as "being in the trenches" or working on the "front lines." But if one extends this battleground metaphor much further, it's clear that we are very poorly armed warriors indeed. The only standard-issue item we carry that could be construed as a weapon is a thin wooden stick only 6 inches long. It doesn't even have a sharp point. Despite its anemic appearance, a skilled practitioner can use it to pry open clenched teeth and reveal the deep recesses of the human body where lesser mortals fear to venture.

However, the longer I practice pediatrics the less I find that I need to use a tongue depressor as a pry bar. I suspect that my body language skills have improved so that more children are willing to open their mouths and utter a proper "aaahh." Occasionally, I may need to use a throat stick to coax a tongue or buccal surface out of the way, but for the most part these little strips of birch just accumulate in my shirt pocket and eventually find their way into my sock drawer at home.

They seldom spend more than a few days slumbering in this miniature lumber yard in my bedroom, because tongue depressors have become my first choice for a wide variety of home projects. I use them to mix acrylic paints for my bird carvings, to blend body filler for my old World War II jeep restoration, to shim cranky kitchen drawers, and to scrape the mud off my work boots. Throat sticks are my default choice when my fingers can't do the job alone.

I have become so dependent on tongue depressors that I'm sure when I retire I will continue to make weekly trips back to the office to restock my sock drawer. Obviously, I'll pretend that I'm visiting to renew old acquaintances, but when I leave you can be sure that my pockets will be bulging with a few fistfuls of fresh throat sticks.

Of course, I could always drive up the road a couple of hours to Guilford, Maine, and buy direct from the Puritan Medical Products Company factory. Each year they produce approximately 268,000,000 tongue depressors, which is estimated to be about two-thirds of the American market and would fill quite a few sock drawers. The process requires about 1,400 cords of wood or 778,000 board feet of lumber.

I'm partial to our local Maine product. No wrapping, no flavoring, no logos. Just northern birch milled and sanded by solid men and women who don't need plastic bibs or instructions on a paper placemat when they eat "lobstah."

But, for the foreseeable future, I'll still be getting my tongue depressors out of the drawers in my exam rooms. I also will continue to write phone numbers on them when I can't find a scrap of paper, and from time to time I will inadvertently insert one of these wooden mnemonics into a child's mouth and then cluelessly toss it into the trash.

Now that everyone from plumbers to drug dealers is carrying beepers and cell phones, a tongue depressor in my shirt pocket remains the only clear badge that identifies me as a physician. And, much to Marilyn's chagrin, I continue to wear one proudly at dinner parties, gallery openings, and concerts. Hey, you never know when you'll need to scrape something smelly off your shoes. ■

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LETTERS

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