

Chapter 16

Tooth-pullin' Time

Winter 1958



I heard dogs barking frantically at the front door..., a snow-covered Indian stumbled inside, leaving his dog team yapping on the hospital porch. All I could make out as he mumbled through frozen lips was "Help...doctor...tooth."

"Please Dr. Gaede — I'm brave." The somber Indian boy begged me both with his eyes and words. Nearby, a group of his friends flaunted the holes in their mouths, prior habitats for decayed teeth. "I'm tough," the thin, small teenager pleaded softly.

My anesthetic supplies were depleted and I knew his tooth could wait until my next visit to Kaltag, a Koyukon Athabaskan village 200 miles down the Yukon River.¹ All the same, I was keenly aware that this boy's request had surfaced not out of medical necessity, but out of a recently assumed social need. As I toyed with the forceps, the silver metal took on a new shape. I was holding in my hands the key to his acceptance. How could he go home, the only boy that evening without the trophy-wound to prove his manhood among his peers?

The boy's request had prompted laughter in the crowded schoolroom-turned-office, where a baby cried, two preschoolers played tag with a husky pup, and several of the older men chronically coughed. Then there was silence, as 20 to 30 villagers listened for my reply. The school teacher, who assisted me by holding a flashlight, did not assist me with this decision; she just looked at me, without saying a word. I felt caught in the middle, holding an uncomfortable power. Whatever I did, this young man would leave with pain — of either

¹ Kaltag, at the base of the Nulato Hills, sits on a 35-foot bluff above the river. Located on an old portage trail, summer and winter camps moved through the area as wild game migrated. It was a major transportation route for gold prospectors, as well. At one time, it was used as a cemetery for surrounding villages.



Village of Kaltag.

social rejection or physical wound.

Pausing a moment to reflect on my dilemma, I mentally paddled back to the fork in the river that had propelled me into this deep water.



The last Public Health dentist had made his rounds two years ago, at Tanana and along the Yukon. Since that time, all those in need of dental care either had to fly to Fairbanks or remain in pain. Both arrangements were less than ideal.

I should not have been surprised when Mary Ann,² my soft-spoken but spunky new director of nurses, urged me to consider this crucial field of village medicine, then took a step further and, one day, presented me with my first dental patient.

“Doctor, there is an elderly Native man in the waiting room. He has several large cavities and is in excruciating pain. Can’t you help him?”

“Well, Mary Ann, I really would like to help, but I do not have any dental experience, much less dental equipment.”

Reluctantly, she relayed the message to the old man and sent him home with medication.

I thought my logic would silence her plea. Instead, it triggered a search, and, like a group of kids on a treasure hunt, she and others on the hospital staff

² Mary Ann Burroughs.

spread out, searching the attic, basement, and old supply closets.

“Oh, Dr. Gaede, we found a whole drawer of dental instruments and something like a dental chair!” Mary Ann returned to my office with delight. “And, by the way, here are several books on dentistry.”

I’d wanted to be a bush pilot and a bush doctor, not a bush dentist. Nevertheless, my patients’ need pushed me through the classroom doors to “Bush Dentistry 101.”

Fortunately, the medical terminology, anatomical descriptions, and techniques were easy to understand. My three years of giving major anesthetics made the dental blocks relatively simple. I presented myself with honors when I ended my studies.

A few days later, I made the announcement. “All right, Mary Ann, I’m ready. Prepare my first victim — I mean patient.”

Putting on an air of confidence and experience, I walked up the stairs to the second floor of the hospital and into the recently designated “dentist office.” It was a small office without windows and contained several white cupboards. Sam, the Native man in distress, sat straight up in the black, cracked-vinyl dentist chair. He had been living on aspirin and hope that I would treat him. Immediately, he opened his mouth, pointing deep inside and groaning. My overhead light sought out the offending molar. Yes, I could understand his discomfort. So far, so good. I asked Sam to close his mouth for a moment.

“Sam, I’m going to give you something so you won’t feel me pulling your tooth.”

Without a sound, he endured the pokes of the needle. As we both waited for the dental block to take effect, I asked him about his family and his trap lines. Apparently the winter had favored him with full traps.

Then, gripping the forceps, I slowly loosened his tooth. A strong yank sent the bloody culprit flying out across the room. Mary Ann, Sam, and I smiled at one another in triumph.

“You’ll feel a lot better now. Are any of the others giving you trouble?” I tried to be casual.



Practicing dentistry.

He shook his head in a vigorous "no."

My career as bush dentist was successfully launched.

As fate would have it, my fame spread up and down the Yukon River. One morning, as I was making hospital rounds, I heard dogs barking frantically at the front door. Before I could reach the door, a snow-covered Indian stumbled inside, leaving his dog team yapping on the

hospital porch. A thick wolverine ruff obscured his face. All I could make out, as he mumbled through frozen lips, was "Help...doctor...tooth."

Five minutes later, the thawed-out middle-aged Indian man explained that a severe toothache had caused him to mush from Rampart, 80 miles upriver, to find a doctor. I removed the offending molar and then, at his request, extracted two more teeth — as a preventive measure.

"Don't want to come back. Too cold and long," he told me. Pulling his ruff around his now-smiling face, he shook my hand, thanked me profusely, and disappeared out the door.

It's always good when a patient leaves smiling.



Naomi and Ruth both smiled at my stories, but they were less enthusiastic about being the subjects of these accounts themselves. Since they were early grade-schoolers, it was time for their front teeth to make way

for permanent teeth. Both were a bit squeamish about this process and wouldn't wiggle their teeth loose, much less tie a sting to their tooth — and then to a door knob, with the intent of yanking it out. However, they agreed to have me pull their baby teeth.

I took them up to the dental office at the hospital. Regardless of which was the actual patient, they'd come together. I'd cotton-swab on topical anesthetic and we'd talk a bit while it took effect. When it was time for the forceps, whoever was in the chair would squeeze her eyes closed and hold her breath until the split-second ordeal was over. The non-patient would sidle up near the chair to watch, as the tooth was rolled around on a square of gauze. Delicately, it would be carried home to be placed under a pillow at bedtime for the Tooth Fairy to bring a shiny dime.

I didn't think anything of this normal process until I removed Ruth's lower incisors. I expected that, within weeks, I'd see slivers of white gleam from her gums, but nothing appeared. There were no permanent teeth beneath the surface. This was a case where x-rays would have been useful and preventative.

Although I never had the benefits of a dental x-ray machine, I *did* acquire skills to clean out cavities and put in fillings.



"Doctor?" the boy's insistent question drew me back to the present. The sea of faces watched expectantly, and I felt the pressure of going ahead and making a decision.

Wishing for the wisdom of Solomon, I reluctantly agreed to torture the boy at his request. Immediately, the villagers edged close around us, some with words of empathy, others shaking their heads in doubt. The drama before them was most likely the best entertainment available in the village.

Adroitly, the village schoolteacher focused her flashlight, as I took hold of, and slightly loosened, the tooth. The room was silent. The boy winced.

"Remember, I don't have any medicine to keep this from hurting. You can still change your mind."

He shook his head, his eyes wide with anticipation. I loosened the tooth some more. Then, with a steady tug, the tooth departed from its socket.

The spectators cheered! The boy held his jaw. The other teenage boys rushed around him. He blinked hard and then a triumphant smile slowly crept across his face. Acceptance rights were his. I took the special tooth and placed it in a plastic container. Later I'd add it to my pint jar of other trophies.³

The boy tugged at my sleeve. "Thanks, doctor."



I couldn't keep up with the dental demands in the village, which *were* extensive. My primary job was that of medical officer. Administration, deliveries, accidents, monitoring tuberculosis symptoms, and trying to provide medical assistance to the villages consumed my days, and sometimes nights. The day-school teachers, missionaries, and innkeepers in these villages did their best to fill the gaps through a "clinic" held via two-way-radio.

"Allakaket (Alla KAK it), this is Tanana radio. Do you read?"

"Tanana radio, this is Allakaket. I read you loud and clear."

"Come in Allakaket."

"I've had people with terrible toothaches. Could you arrange a trip here for a day and teach me how to extract teeth?"

The voice was that of Dorothy, the nurse, who was also the wife of the Episcopal minister.⁴ I'd met her during another field trip. She'd emanated courage and dedication, and I observed the Natives' respect for her.

Allakaket was a small village, 100 miles south of Tanana, on the Koyukuk River. During a lull in my

³ On one village field trip, my predecessor, Dr. Jean Persons, was reported to have accumulated 267 teeth in a bucket, where she, too, had been cajoled into practicing dentistry. These experiences did not incline her, or me, to switch fields of practice.

⁴ The wife of Rev. Randall P. Mendelsohn. (*A Century of Faith: 1985 – 1995, pp. 113-117.*)



Village of Allakaket.

schedule, and an opening in the weather, I flew down to train her. On the south side of the river, eight new cabins neatly lined the bank. On the north side, older cabins rambled along the bank. Athabascan Indians lived on the south side and Kobuk Eskimos on the north, which was actually called Alatna.⁵

Dorothy met me at the airstrip, and we talked over general medical concerns as we walked to her clinic. When we opened the door, several elderly Athabascan sat up straight in anticipation. This dental lesson would be an immediate hands-on practicum. Class came to order. I reviewed the basics of dentistry, and Dorothy watched intently, as I extracted two posterior molars.

“Now it’s your turn.”

She was willing and confident. With a minimum of coaching, she did an anes-



Mendelsohn family.

⁵ Traditionally, Native groups did not mix, due to a lack of distrust from early encounters, territory disputes, and myths about the cruelty of the other Native group.

thetic block and proceeded to select the correct forceps.

"Remember, you take a strong grip and loosen the tooth by rocking it, before you try to pull it."

Dorothy was an outdoorsy woman, who probably did her share of chopping wood, wrestling moose quarters to be cut and packaged, and shoveling snow. Her strength showed as she applied the forceps to the tooth and tightened her grip.

Crunch! The tooth shattered.

Wildly, she looked at me. Tears filled her eyes and she hugged the tired looking man whose mouth still gaped open. Fortunately, the anesthesia numbed his pain, but Dorothy's own ache from concern spilled over.

"What did I do wrong?" her voice broke.

"Don't worry. You just crushed the tooth. It must have had a weak shell. Maybe it is good this happened."

Her shocked expression didn't look like there was any good happening.

I explained. "Now you can find out how to take care of this kind of complication. You'll have to remove the root, piece by piece."

Little beads of perspiration glistened on her forehead. She ran her fingers through her short bangs and took a deep breath. Carefully, she cleaned the debris and swabbed the socket.

Her first patient got up, mumbled his appreciation through numb lips, and seemed satisfied. His experience and the dentist-intern's trauma didn't seem to faze the two waiting patients, and she logged additional dental hours.

After awhile, even though she never complained, Dorothy looked exhausted. I suggested she make herself a cup of hot tea and we'd sort through the dental instruments to decide which ones she could keep for her newly acquired dental practice. The warm beverage and much needed break restored her spirits.

"Thank you, Dr. Gaede, for teaching me how to help my people," she said, as she squeezed my arm.

"Her people," on *both* sides of the river, were fortunate to have this strong, tender-hearted woman. She'd do anything for them.



Prescription for Adventure: Bush Pilot Doctor

Sometimes, I wondered what happened to the boy at Kaltag. Maybe his story was told, embellished, and retold until he became a legend in the village. On the other hand, perhaps he became a dentist himself. Regardless, he'd bravely withstood enormous pain at the expense of his pride. I just remember that at that moment, I looked at him, shook his slight hand, and said, "No problem, son."

He'd gotten up and walked shyly among his admirers, who patted his arm and inspected his mouth.

I'd cleared my throat and started gathering my instruments. "No problem at all..." But, the truth was, I really didn't like to inflict pain on any of my patients. I much preferred pain-free environments.

Huslia, Alaska

May 5, 1959

Dear Doctor Gaedy,

Is there eny tenetist over there right now. I sure would
Like to get too front tooth in. I get lots tooth missing
Every Sinch I was kide.. . .
Very truly Yours

A Century of Faith: 1895 – 1995, p. 115

Excerpt by Dorothy Mendelsohn

The radio was most important to us because at 4:00 p.m. four days each week the doctor at the Tanana hospital (Dr. Elmer Gaede in 1957-1959) would make a round-robin call to all villages within his jurisdiction to inquire and offer advice about medical problems. His contact and concern were most reassuring when he came in loud and clear; when his voice became distorted or did not come through due to poor signal conditions, it was devastating. The same held true for attempts to make plane contacts in emergency situations. We were very dependent on that outside link and were often cut off from it. Those were the times our isolation was the hardest.