



PRESIDENT
H. Hunt Batjer, M.D.
Chicago, Illinois



PRESIDENT-ELECT
Daniel Louis Barrow, M.D.
Atlanta, GA



VICE PRESIDENT
Paul C. McCormick, M.D.
New York, NY



SECRETARY
Mark N. Hadley, M.D.
Birmingham, AL



TREASURER
Stephen M. Papadopoulos, M.D.
Ann Arbor, Michigan

NEWSLETTER EDITOR
Michael L. Levy, M.D.
Los Angeles, California
Phone: 213.669.2169
Fax: 213.668.1870
e-mail: mlevy@hsc.usc.edu

Contents

President's Message	12
Olivecrona Lecture	1
Annual Meeting Report	3
CNS Membership	3

MEMBERSHIP SERVICES

Status Changes/Information
Dues Info/Address Changes/Publications
Membership Applications/Information
Resident/Membership Information
Placement Information
Annual Meeting Information

Call: 1-888-CNS-5577 or e-mail: cnssec@ix.netcom.com

Should you wish to correspond with the leadership of the CNS, following are e-mail addresses for your use regarding any issues that you wish to discuss with the Executive Committee directly.

President - CNSP@cns-home.org
Vice President - CNSVP@cns-home.org
Secretary - CNSS@cns-home.org
Treasurer - CNST@cns-home.org
Leadership Dev. - CNSLDC@cns-home.org
Membership Chairman - CNSMC@cns-home.org

Congress of Neurological Surgeons Newsletter

1998 • Vol 74

Stephen M. Papadopoulos, M.D.
CNS Treasurer's Office
UMMC/Taubman Health Care Center, 2128/0338
1500 E. Medical Center Drive
Ann Arbor, MI 48109-0338

BULK RATE
U.S. POSTAGE
PAID
Pasadena, CA
Permit No. 422



Dedicated to Neurosurgical Education



I am honored to be elected to serve as President of the Congress of the Neurological Surgeons, the forty-ninth year of our life. The CNS has enjoyed growth and scope of influence during the past two decades. The talent and energy of our young neurosurgeons has developed an agenda for our founding members. As neurosurgical education



have been the president of the Congress of Neurological Surgeons in the past two decades. The talent and energy of our young neurosurgeons has developed an agenda for our founding members. As neurosurgical education

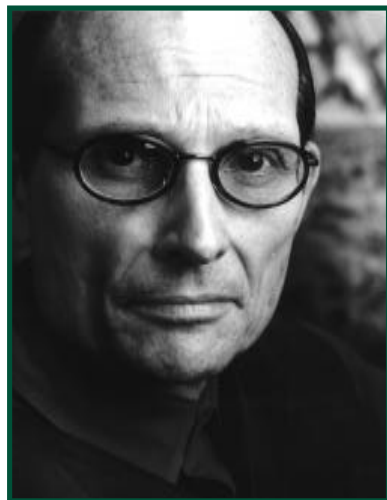


aspects of medical professional life and practice. The CNS and AANS have evolved a partnership in service of our conjoined membership which in my opinion gives the practicing neurosurgeon the ideal representation possible. The bylaws of the CNS preclude election of office after the forty-sixth birthday. Thus, a group of elected neurosurgical leaders with close to twenty years of neurosurgical practice on the line, serve with their cohorts from the AANS in all shared initiatives of the two organizations, including joint projects and the Joint Officers initiatives. The generational separation between the leadership of both organizations allows the membership to be served by committed individuals, at least half of whom have enormous investment in the outcome of the deliberations and decisions being made currently. This paradigm reminds me of the difference between sympathy and empathy. Sympathy is something discussed over breakfast and empathy keeps you up at night. Rest assured that your CNS leadership is empathetic about the future of neurosurgical practice, and indeed about the future of health care in the United States and throughout the world. For those of us working in the United States, our most complex challenge is to somehow weather the storm of our current healthcare evolution while remaining focused on the long-term goal. We must ensure that the level of healthcare delivered in our system progresses so that our public is achieving earlier and more complete recovery from brain and spinal injury, more complete recovery and prophylaxis against stroke, and longer and better survival with primary and secondary brain tumors.

The officers for this year's CNS Executive Committee include myself as President, Dr. Paul McCormick as Vice President, Dr. Stephen Papadopoulos as Treasurer, Dr. Mark Hadley as Secretary, Dr. Daniel Barrow as President-Elect, and Dr. William Friedman as Past President. We are joined by a large group of at-large and ex officio members who represent the interests of grass roots neurosurgical practice as well as each subspecialty field within neurosurgery. Coming off an enormously successful meeting in Seattle in which over 5,000 members and guests attended, we have great momentum to accomplish a busy agenda for the 1998-1999 year.

Of sentinel importance to all neurosurgeons worldwide is neurosurgical reimbursement. This issue has certainly captured the attention of all North subspecialty under siege on a variety of fronts. Our Washington Committee, under

Continued on page 2



Editor of Neurosurgery to give Olivecrona Lecture

Michael L. J. Apuzzo, the Edwin M. Todd/Trent H. Wells, Jr. Professor of Neurological Surgery, Radiation Oncology, Biology and Physics at the University of Southern California School of Medicine has been selected as the 1998 Olivecrona Lecturer at the Karolinska Hospital in Stockholm, Sweden.

The prestigious Lecture was established in 1976 by the Karolinska Institute to commemorate Sweden's Herbert Olivecrona, one of the principle figures in the emergence of modern neurosurgery and to honor an internationally outstanding neurosurgeon who has made unusual contributions to the field.

Previous honorees have included, among others, Charles G. Drake (Canada), M. Gazi Yasargil (Switzerland), Lindsay Symon (England), Bernard Pertuiset (France), Charles B. Wilson (U.S.A.) Madjid Samii (Germany), Keiji Sano (Japan), William H. Sweet (U.S.A.), Kenichiro Sugita (Japan).

Apuzzo's lecture entitled "Surgery of Masses Affecting the Third Ventricular Chamber" will deal with past, contemporary and avant garde methodology related to the surgery of tumors deep within the human cerebrum and will be delivered in conjunction with a day long conference at the Karolinska Institute Hospitals and Clinics on December 4, 1998.

the leadership of Dr. Arthur Day and Katie Orrico, has been aggressively fighting each aspect of the attack on neurosurgical reimbursement by the Health Care Financing Agency (HCFA). As you have recently been informed, the CNS, AANS, and nine other specialty societies have jointly filed suit against the government for the issue surrounding the base-year controversy. By using 1998 as the base year for the calculated phase in of decreased reimbursement, the "down payment" to primary care practitioners by neurosurgeons would be increased by tens of millions of dollars. This "gift that keeps on giving" was clearly not the intent of the Congress. The practice expense issue continues to evolve, and while we have achieved some relief from the initially proposed reimbursement figures, major damage has certainly been inflicted by currently utilized methodology.

In addition, over the past week it has become clear that HCFA is attaching neurosurgeons through the malpractice component as well. Recently published in the Federal Register was evidence that the overall proportion of Medicare reimbursement attributed to malpractice expense has been decreased substantially. While we were all hoping that once the resource based-methodology incorporated malpractice expense, neurosurgical reimbursement would increase by roughly five percent; even this small gain is now being threatened. It is my feeling that these battles must be fought on all fronts and our membership is being served by the best leadership possible in this regard. On the other hand, if one steps back and views this dynamic from afar, it is clear that organized neurosurgery, as well as procedural medicine in general, are engaging their efforts to simply decrease the rate of loss. While this is a vital effort, we must begin to change the focus to valuation of subspecialty care in the marketplace. Through the cost containment initiative sponsored by AANS Past President Edward Laws, neurosurgery will over time be an even greater value for the public. We must develop a strategy that establishes a floor on reimbursement and begins a negotiated growth for the future. How can we get control of our destinies and those of our patients?

Dr. Peter Black communicated with the neurosurgical leadership over the past year regarding the enormous opportunities that neurosurgery could realize regarding the increased NIH research allocation. The Society of Neurological Surgeons has created a task force under the direction of Dr. Julian Hoff to address this key issue. Dr. Ralph Dacey has been designated as the liaison to the Joint Officers as this important process unfolds. We should have substantial recommendations from this working group by the spring of 1999.

The Congress of Neurological Surgeons is currently investing nearly a quarter of a million dollars annually in the sponsorship of postgraduate fellowships. The CNS leadership over the past decade has recognized that fellowship training is an important avenue for accomplishing the organizational mission of the CNS as well as the important agenda for our specialty. We currently sponsor six fellowships: 1. Clinical Fellowship 2. International Fellowship 3. Fellowship for International Service 4. Fellowship in Endovascular Surgical Neuroradiology 5. Fellowship in Clinical Investigation 6. Fellowship in Public Policy The Clinical Fellowship is dedicated to giving a focused postgraduate experience in a specific clinical subspecialty to young neurosurgeons. The International Fellowship allows young practitioners from developing countries to have a three to twelve month experience in North American centers, hopefully allowing them to elevate the level of care in their region at home. The Fellowship for International Service allows individuals to travel overseas to serve for variable periods of time. This fellowship is currently being coordinated between Dr. Richard Perrin and the Foundation for International Education in Neurological Surgery (FIENS). The Endovascular Fellowship is designed to develop a cadre of highly skilled neurosurgeons in this important developing field. The Fellowship for Clinical Investigation is the brainchild of Dr. Stephen Haines and has as its goal the development of a cadre of neurosurgeons skilled in clinical research and outcomes research. The Fellowship for Public Policy is currently being developed and should accept its first fellow by the summer of 1999. This fellowship is designed to help develop a group of neurosurgeons who understand the dynamic of how health care policy is developed by the government. These individuals, who will work with Katie Orrico and be placed in various governmental agencies, could become an extraordinarily valuable resource for the specialty in years to come. Dr. Doug Kondziolka is coordinating all of the fellowship opportunities for the CNS.

Our Education Committee, under the direction of Dr. Vincent Traynelis, has a number of key agenda items of importance to the membership. A core curriculum for residency is being developed which will empower each training program to structure their didactic and clinical teaching in a more rational way. Expertise from all subspecialty areas of neurosurgery has been recruited and incorporated, and a final document is likely to be approved by spring of 1999. A parallel process through Joint Officers is developing curricula for each subspecialty fellowship offered in neurosurgery. The CNS education committee has also developed a "think tank" to develop innovative new strategies for teaching neurosurgery and

updating practitioners on important new developments. Dr. Traynelis's committee has also maintained full accreditation by the ACCME (Accreditation Council for Continuing Medical Education) so that the CNS can distribute Category I credits for its annual meeting.

The Publications Committee of the CNS is undergoing a major restructuring this year under the leadership of Dr. Warren Selman. Key initiatives include a new periodical dedicated to socioeconomic issues which is being developed in collaboration with the Council of State Neurosurgical Societies. Drs. James Beach and Lyl Leibrock have been working over the past twelve months to make this publication a reality. Mr. Tim Grayson from Lippincott Williams & Wilkins has been instrumental in developing our ideas in this regard and helping us achieve a proper editorial structure to ensure its success. We are hoping that this publication will reach the membership during the 1999 year. Other activities of the Publications Committee will focus on empowerment of the membership as they prepare for re-certification by the American Board of Neurological Surgery, as well as the potential new demands imposed by AMAP (American Medical Accreditation Program). These issues will be discussed in detail with the membership during the coming year.

The CNS Membership Committee, under Dr. Paul McCormick, has developed an extraordinarily efficient method of converting resident members to full active membership. Bylaws changes over the past year have allowed this process to become as painless as possible. It has been, and remains, the policy of the CNS Executive Committee to offer "bargain basement" prices to our membership for both dues as well as annual meeting registration fees. This philosophy of offering maximal value to the membership will continue into the future.

It should be noted by the membership that the leadership of the CNS, AANS, American Board of Neurological Surgery, Society of Neurological Surgery, and the Residency Review Committee for Neurosurgery have instituted an annual summit meeting. We met for the first time in the spring of 1998, and this meeting was extraordinarily beneficial as it allowed integration and coordination of initiatives being pushed by the various components of organized neurosurgery. Another such summit is being planned for the spring of 1999.

The CNS is clearly at a crossroads in terms of our mission and the style in which we want to accomplish that mission. Numerous decisions were made at the annual meeting in Seattle which will have substantial implications for the future of the organization. We have come to a full realization that if we plan to continue to deliver extraordinary value to the membership regarding dues, registration fees, free publications and courses, etc., we must begin to expand our revenue base from alternate sources.

We have engaged the services of Slack, Inc. to assist us in fund development for key educational initiatives, as well as for some aspects of organizational management. The Congress of Neurological Surgeons evolved as a "mom and pop" operation run largely by the officers and their spouses. Some degree of infrastructure is now required to coordinate a very complex organization with a multimillion dollar annual budget. We currently retain only two full time employees. Slack, Inc. will be engaged to ensure that all membership services are provided on a seamless basis.

In addition, I have charged the new chairman of the Strategic Planning Committee of the CNS, Dr. Dan Barrow, with the vital task of developing an organizational strategic plan. Dr. Barrow has assembled a small work group on which I will serve to more closely define our true mission, goals, and objectives for the intermediate term future. This important activity will assist the leadership of the CNS in making critical decisions over the next several years.

In many respects, the Congress of Neurological Surgeons as an organization, the end of the millennium, and our coming annual meeting in Boston, 1999, share many common themes. Dr. Duke Samson has been selected as the 1999 honored guest of the CNS, and an interesting quote from Dr. Samson has been chosen as the concept of the annual meeting. When confronted with an attack from the endovascular community that this new endovascular technology represented the beginning of the end of cerebrovascular surgery, Dr. Samson responded that it in fact represented "The End of the Beginning." This concept is very relevant to our specialty's major progress during the past century, which should be recognized and placed in perspective as we launch into a completely new world. The CNS as an organization had its birth in the mid-twentieth century, and indeed has come of age and will similarly refine its strategic plan and aggressively work for the benefit of our membership in the new millennium. While the recommendations of Dr. Barrow's committee are not in yet, one can be certain that the CNS will move forward as a dynamic and efficient organization accomplishing its mission with extraordinary volunteerism on the part of its officers and executive members who add great value to its membership.

I look forward to serving you over the coming year.

1998 Annual Meeting Report

The 1998 Congress of Neurological Surgeons Annual Meeting, held October 1 through October 8th in Seattle, Washington, was a terrific success. This was the largest Congress of Neurological Surgeons meeting ever with 5,143 total registrants. It was the largest annual medical registration with over 2,350 medical registrants. All aspects of the meeting were well received by the membership. The Practical Courses, expanded to both Saturday and Sunday for the second consecutive year, were very well attended. The General Scientific Sessions I, II, III, and IV, held on the mornings of Monday, October 5, Tuesday, October 6, Wednesday, October 7, and Thursday October 8, were presented to a standing-room-only crowd in the main auditorium. Dr. Issam Awad, Scientific Program Chairman for 1998, and his talented Committee members put together an exceptional scientific agenda. Luncheon Seminar sessions held from noon to 2:00 p.m. Monday through Wednesday, were well received. Over 80 contemporary topics in neurological surgery and neuroscience were presented during these sessions. Special Courses and Section scientific symposia dominated the afternoons Monday, Tuesday and Wednesday. Over 440 CNS members reached the podium to present their clinical and laboratory work.

On Thursday afternoon, 150 CNS Members traveled north to Blaine, Washington to the beautiful Inn at Semi-Ah-Moo for the Post Meeting Satellite Convention held there on Friday and



Saturday, October 9th and 10th. Lively discussions and multiple scientific presentations were made on all aspects of neurological surgery by members in attendance.

President William Friedman's choice of Dr. John Tew as the Honored Guest for the 1998 meeting was well appreciated and enjoyed by the membership. Dr. Tew spent a tremendous amount of time and effort in preparation for his many assignments. His presentations were insightful, contemporary, thought-provoking, and founded in scientific method and his years of experience as a neurosurgical care provider and a leader in the field of neurosurgery.

In short, the 1998 Congress of Neurological Surgeons Annual meeting set a benchmark for excellence. This terrific meeting, attended by increasing numbers of CNS members, was a tribute to CNS membership and the many CNS Committee persons who assisted with development of the Annual Meeting format and the Scientific Program over the last several years.

CNS MEMBERSHIP

PRE-APPLICATIONS IN PROCESS

Abduno, Alfredo Jr. MD
 Akhmetov, Kyrum K. MD
 Arda, Mehmet N. MD
 Ayoubi, Samer MD
 Balanyan, Tovmas S. MD
 Baronia, Benedicto C. MD
 Brega, Kerry E. MD
 Caron, Jean-Louis MD
 Chaskis, Cristo MD
 Chicocine, Michael R. MD
 Chua, Richard Vincent MD
 Cockerill, David MD
 Connelley, Thomas MD
 Dailey, Andrew T. MD
 Dewan, Yashbir MD
 D'haens, Jean Henri MD
 Dirks, Peter Benjamin MD
 Donich, Dane John MD
 Ebrahimi, Shahrokh MD
 Ezz-eldin, Ashraf MD
 Gilman, Arthur Michael MD
 Giordano, Michael J. MD
 Conclaves, Victor MD
 Griffith, Wesley E. MD
 Guiot, Bernard H. MD
 Haque, MD M. MD
 Hejazi, Nedal MD
 Hernandez Pena, Roberto MD
 Hide, Thomas A. M.
 Hill, Michael MD
 Jha, Keashav M. MD
 Jung, Shin MD
 Katayama, Yoichi MD
 Kim, Daniel H. MD
 Kiss, Zelma MD
 Kneld, Robert MD
 Koh, Young-Cho MD
 Krivoschapkin, Alexi MD
 Lam, Cornelius H. MD
 Lee, Chae-Heuck MD
 Lee, Je-Hyuk MD
 Levin, Marc A. MD
 Mathem, Gary W. MD
 Mbark, Arjdar MD
 McGregor, John W. MD
 McKalia, David MD
 Mee, Edward MD
 Monasky, Mark MD
 Nachanakian, Antoine MD
 Noblett, Bradley MD
 Proctor, Mark R. MD
 Raabe, Andreas MD
 Rao, Sanjay C. MD
 Redding, Mark P. MD
 Reisner, Andrew MD
 Resnick, Daniel K. MD
 Reynaud, M.C. MD
 Sanders, Steven A. MD
 Shigemori, Monoru MD
 Son, Jun-Hyeok MD
 Sood, Sandeep MD
 Tudor, Mario MD
 Uzan, Mustafa MD
 Vesa, Ioan F. MD
 Waller, Amy RN (affiliate)

Congress of Neurological Surgeons Fellowships

Dedicated to Education... The mission of the Congress

The CNS announces six sponsored fellowships to assist established neurosurgeons or those still in training with their personal career goals. Designed for CNS members, these fellowships support diverse educational experiences on an international level.

- The CNS Clinical Fellowship - for support of subspecialty clinical training (2 per year)
- The CNS Clinical Investigation Fellowship - for support of training in the fields of clinical trial design, epidemiology, and related disciplines (1)
- The CNS Public Policy Fellowship - a one year experience working with the Washington Committee (1)
- The CNS Neuroendovascular Surgery Fellowship - for support of clinical training in endovascular surgery techniques (1)
- The CNS International Fellowship - to support training of neurosurgeons abroad at centers within North America (3-4)
- The CNS Traveling Fellowship - to support clinical and research experiences of North American neurosurgeons in other countries (1-2)

The Membership of the Congress of Neurological Surgeons wishes to express their regret and sorrow regarding the deaths of the following members:
 Christopher W. Norwood, M.D. of Knoxville, TN
 Robert H. Pudenz, M.D. of South Pasadena, CA
 Carroll Brown, M.D. of Bella Vista, Az
 James Mazingo, M.D. of Lakeland, FL
 Charles G. Drake, M.D. of London, Ontario

Please submit any questions or commentary to Paul C. McCormick, M.D., Chairman; Membership Committee, CNS, c/o Neurological Institute, 710 W 168 St. #406, New York, NY 10032 Fax 212-305-3629 E-mail pcm6@columbia.edu