

Message From The President



nvigorated by the great scientific and social program at the 1996 CNS Meeting in Montreal, the CNS now turns its attention to important issues facing neurosurgery for the coming year. Some issues will likely

reach a favorable resolution — the amended complaint from the Pedicle Screw Litigation Plaintiff's Liaison Committee no longer includes the Congress of Neurological Surgeons. Other issues, most notable the Medicare Practice Expense legislation, may have an immense negative impact upon neurosurgeons.

The Congress of Neurosurgical Surgeons is actively working with the AANS to address these and other important issues. The Joint Officers of the AANS and CNS regularly meet to coordinate these efforts in an effective and cost-efficient manner. Duplicate initiatives between the two organizations have been largely eliminated, and the resulting joint programs are focused responses to better serve the needs of the neurosurgical community. For example, the Joint AANS/CNS Washington Committee directs initiatives related to public policy, including reimbursement, liability, research, legislation and relationships with other public and professional organizations. The AANS/CNS Joint Council of State Neurosurgical Societies addresses critical socioeconomic and workplace issues impacting neurosurgeons, providing timely input to both organization on priority issues. The AANS/CNS Joint

Sections provide the component infrastructure by which subspecialty issues are coordinated and implemented. Neurosurgery://On-Call (http://www.aans.org/), a joint initiative of the AANS and CNS, is moving forward under the leadership of William Friedman to provide an electronic forum for neurosurgeons of the future. The reformulated AANS/CNS Joint Committee on Quality Assessment is addressing important issues related to outcomes, guidelines and regulation of devices under the direction of Robert Florin and Steve Haines. A new joint AANS/CNS Task Force on Public Relations chaired by Edward Laws is designing a program through which neurosurgeons can effectively promote their critical role in patient care.

In summary, the coming year will undoubtedly be important for neurosurgeons in the changing arena of health care delivery and public policy. As always, the Congress of Neurological Surgeons remains dedicated to the mission of education, which is the cornerstone of our profession. In addition, the CNS is priding effective leadership and efficient allocation of resources to represent the needs of practicing neurosurgeons. The success of the programs depends in large part upon the input and volunteer efforts of the CNS membership. I look forward to working with you on these important issues in the coming year.

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CNS Welcomes You

he Congress of Neurological Surgeons welcomes you to the great city of New Orleans for its annual meeting, which takes place from September 27th to October 2nd. The New Orleans Hilton Hotel will serve as the meeting headquarters, providing a spectacular setting on the River, being linked to the Convention Center via the famous Riverwalk. Numerous social events and exciting tours will be available making this a wonderful opportunity to have your family also attend the meeting. The Scientific Program Chairman, Dr. Mark Hadley, has assembled an outstanding scientific program with the help of his planning committee. The open scientific sessions will feature a look into the next century and how one's practice perspective will be changed by integrated global information systems. To this end, several plenary session talks will be available to the subscriber on the Internet through Neurosurgery on Call (NOC). Point- Counterpoint discussions on current and future controversies in Neurosurgery will feature experts to provide up to the minute opinions on some of the more controversial issues. The scientific program will also highlight "Brain Attack" and provide the latest management guidelines, thus emphasizing the critical role neurosurgeons should assume in caring for the acute stroke patient. Finally, the integrated approach to brain and spinal cord-injured patients will be outlined with a comprehensive panel of experts.

Special Courses will emphasize the integrated concepts of telecommunications in the present and future practice of the neurosurgeon and provide the paradigms to implement these important pathways to deliver the most advanced care for our patients. Advances in functional imaging in terms of its practical use for current patient

care will also be emphasized. Of course, the very peoplar fractical Courses will again provide the meeting attendants with an interactive format to refresh and sharpen their operative skills and clinical perspective.

Overall, we expect to provide an extremely exciting scientific program, complemented with a social setting in one of the world's greatest cities. We'll look forward to seeing you and yours in New Orleans this coming fall.

PROFILE OF PAST CNS PRESIDENTS:

Stephen J. Haines, M.D. 1995-1996 CNS President

Stephen J. Haines, M.D., of Eden, Prairie, Minnesota, has been an active member of the CNS since 1982, serving in such top leadership positions as Vice President and as a member of the Executive Committee.

Dr. Haines received his bachelor's degree from Dartmouth College, Hanover, New Hampshire, in 1971 and earned his medical degree from the University of Vermont College of Medicine. He completed an internship in surgery at the University of Minnesota Health Sciences Center, served as a resident in neurological surgery at the University of Pittsburgh School of Medicine, and completed a fellowship in Clinical Trials at the University Department of Clinical Neurology, Oxford University.

He currently serves as Head of the Division of Pediatric Neurosurgery, Department of Neurosurgery at the University of Minnesota. He also holds academic appointments as Professor of Neurosurgery, Otolaryngology and Pediatrics at the University of Minnesota.

Dr. Haines has played an active role in a variety of professional organizations, holding such positions as President of the Minnesota Society for Neurological Sciences, Vice President of the International Society for the Pediatric Skull Base, President of the Minnesota Chapter of the American College of Surgeons, Chairman of the Scientific Committee of the Neurosurgical Society of America, and Chairman of the Research and Protocol Committee of the North American Skull Base Society.

In addition to maintaining an active neurosurgical practice, Dr. Haines is a distinguished researcher and author. As principal investigator, his research projects delved into such topics as experimental surgical incision of brain stem 1996 Honored Guest



Peter Joseph Jannetta, MD, Dsc(hon), FACS, was born in Philadelphia, Pennsylvania, and grew up in Haddonfield, New Jersey, and York, Pennsylvania. He attended the University of Pennsylvania, where he received both the AB and MD degrees. Achievement came early; he was a high school all-American swimmer and was president of his class at the University of Pennsylvania.

Dr. Jannetta trained first in general surgery at the University of Pennsylvania, but he saw the light and, after 3 years as an NIH Fellow in neurophysiology, undertook training in neurological surgery at UCLA, which he completed in 1966. His first academic appointment in neurological surgery was as Associate Professor and Chief of the Division of Neurological Surgery at Louisiana State University. In 1971, he became Professor and Chief of the Division of Neurological Surgery at the University of Pittsburgh. This division became a department in 1973. He held the Francis Sargent Cheever distinguished professorship at the University of Pittsburgh from 1976 to 1978. In 1989, Washington and Jefferson College granted him the degree of Doctor of Science, honoris causa. In 1992, he was honored as the first Walter Dandy Professor of Neurological Surgery at the University of Pittsburgh.

Dr. Jannetta is a prolific contributor to scientific literature; he has given invited lectures and has been visiting professor at institutions throughout the world. His seminal contributions in the understanding and treatment of vascular compression syndromes of the brainstem and cranial nerves are internationally known. At the University of Pittsburgh he has created one of the most outstanding schools of neurological surgery in the world. He has fostered an environment of creativity that has produced several of the major advances in neurosurgery in the past two decades. Five of the 17 Van Wagenen Fellows named since 1980 have trained under Dr. Jannetta.

Dr. Jannetta is a musician at heart, schooled on the piano but mastering the tenor banjo—skills honed in the jazz clubs of New Orleans. He has an eclectic interest in the arts and is currently applying some of his surgical skills to sculpting in plaster. He is the proud father of six children: two physicians, two international business executives, an historian, and an actor. Hs wife, Diana, is an art collector and critic.

Dr. Jannetta's charismatic personality and wide-ranging skills have brought him recognition outside the field of neurosurgery. In 1995 and 1996, he was Secretary of Health for the Commonwealth of Pennsylvania. He was selected as Man of the Year in the Sciences by Vectors/Pittsburgh in 1990, and also was elected to membership in the Horatio Alger Association during that year.

Peter Jannetta is a unique, innovative, and charismatic neurosurgeon and educator. The Congress of Neurological Surgeons was privileged to have him as its 1996 Honored Guest.

hemorrhage and conventional vs. percutaneous discectomy. He is a coinvestigator in the ongoing NIH NINCDS North American Symptomatic Carotid Endarterectomy Trial. Dr. Haines also is the author of more than 100 scientific journal articles and presentations, and coauthor of two books. He currently serves on the Editorial Boards of the journals Neurosurgery, Child's Nervous System, Concepts in Neurosurgery, and Critical Review in Neurosurgery.

CALL FOR CONCEPTS AND INNOVATIONS CONTRIBUTIONS FOR NEUROSURGERY

The Concepts and Innovations section has been conceived to establish a new dimension in journalistic presentation. Because of individual variations in the creative mind and the ability to effectively carry ideas through to fruition, many concepts or novel ideas are left "on the shelf" or are unheard because, for one reason or another, individuals do not have the capability to

see them through to absolute or practically developed completion.

This section of the journal will offer a forum for all those who wish to present new concepts or ideas related to neurosurgery and neuroscience, as applied to neurological disorders, and will offer the opportunity for the logical and substantive presentation of ideas and novel issues without absolute confirmation within clinical or laboratory sectors. New concepts with potential application to all foci of practice will be welcomed.

WITH APPRECIATION

The CNS and *Neurosurgery* express their gratitude to Codman/Johnson & Johnson for sponsoring journal subscriptions for first-year neurosurgical residents. Their thoughtfulness will undoubtedly have lasting impact on the careers of those individuals.

The members of the Joint Section For Cerebrovascular Surgery express their gratitude to Codman/Johnson & Johnson and Zeiss for sponsoring the banquet and entertainment for the Sec-

NEUROSURGERY ELECTRONIC MAIL ADDRESS

Neurosurgery is pleased to offer an electronic mail address for communication with the Editorial Office. This account will be checked frequently and may be used for any correspondence, including reviews. The address is: neurosurgery-journal@hsc.usc.edu

ond Annual Meeting at the Disneyland Hotel in Anaheim, California.

STATEMENT

To clarify the issue of subspecialty boards in neurosurgery, the Joint Officers of the AANS and CNS issued the following statement:

"The American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) encourage and endorse Board certification for all neurosurgeons. The AANS and CNS recognize the American Board of Medical Specialties as the organization that ensures quality in the Board Certification process. Certification is secured through examination by the American Board of Neurological Surgery (the recognized agent of the American Board of Medical Specialties), the Royal College of Surgeons of Canada, or the Mexican Board of Neurological Surgery. It represents recognition of satisfactory completion of a prescribed curriculum of education and training in neurosurgery, including but not limited to the diagnosis and surgical treatment of disorders of the spine, the central and peripheral nervous system, the internal and external vascular supply to these structures, the cranial vault, and the neuroendocrine system in the adult and pediatric populations. The American Board of Neurological Surgery, the American Board of Medical Specialties, the Royal College of Surgeons of Canada, and the Mexican Board of Neurological Surgery do not certify any subspecialty in neurosurgery."

1997 ANNUAL MEETING OF THE CONGRESS OF NEUROLOGICAL SURGEONS

Earnest N. Morial Convention Center New Orleans, Louisiana September 27–October 2

Mitchel S. Berger, Meeting Chairman Mark N. Hadlev, Program Chairman Frank Culicchia, Local Arrangements Chairma**n**

CONGRESS OF NEUROLOGICAL SURGEONS

The following are the planned sites and dates for future annual meetings of the Congress of Neurological Surgeons:

1997 New Orleans, LA;

September 27–October 2
1998 Seattle, WA: October 3–8

1998 Seattle, WA; October 3–8 1999 Boston, MA; October 23–28

2000 San Antonio, TX;

September 23–28

ACADEMY ANNOUNCES OFFICERS

The members of the Executive Committee of the American Academy of Neurological Surgeons for 1997 are as follows:

Julian T. Hoff, M.D., President George Ojemann, M D., Vice President

Roberto C. Heros, M.D., Secretary David Piepgras, M.D., Treasurer Edward Connolly, M.D.,

President Elect

John M. Tew, M.D., Past President Richard Morawetz, M.D.,

Member at Large

Byron C. Pevehouse, M.D., Historian

New Member Applications

Yuii Handa

The following individuals have applied for membership to the Congress of Neurological Surgeons. Please submit any questions or commentary regarding applicants to Paul C. McCormick, M.D., Chairman of the Membership Committee, Congress of Neurological Surgeons, Neurological Institute, 710 West 168th Street, New York, NY 10032. Tel: (212) 305-7976 Fax: (212) 305-2026.

Osama Abdelaziz Kazunori Arita

Osama Abdelaziz Kazunori Arita Jens Astrup Deepak Awasthi Philip Azordegan Allan Belzberg Charles Bill Robert Bray, Jr. Michael Buchfelder Mokbel Chedid Alberto Chuchuca Manuel Cunha e Sa Benedicte Dahlerup Keith Davies Alonso DeSousa Jose Augus dos Santos Scott Dulebohn John Ebeling Michael R. Egnor Nasser El-Ghandou Mario Jose Goes Ziya L. Gokaslan Rammy Gold William Gormley Paul Grabb Ahmed Halaka

Hong-Yun Huang Yukio Ikeda Kenji Kanamaru Joachim K. Krauss Yoshichika Kubo Douglas Laske Benjamin Lecompte Sang-Ho Lee Leon Levi Shiyoji Mabuchi Vicente Maranhao Paul Marcotte James Market Cameron McDougall Albert Meric Michael Molleston Sait Naderi

Todd Nida Mohammed Nuruzzaman Magdy Osman Fereidoon Parsioon David Petruska Craig Rabb Mark Roy Richard Hall Schmidt John Schneider Roberto Silveria George C. Stephenson Rafael Tamargo Edward Von Der Schmidt, III Eric J. Woodard Philip Yazbak Kong-Woo Yoon Ahmad Zakeri Ali Zirh

THINK FIRST UPDATE

The year 1996 marked the 10th anniversary of the THINK FIRST Foundation's National Brain and Spinal Cord Injury Prevention Program, founded by E. Fletcher Eyster, M.D., and Clark Watts, M.D. Since inception of the program 4.1 million people have heard this invaluable injury prevention message.

In 1995 the THINK FIRST Programs were surveyed to determine their level of activity and other pertinent program information. In the survey 175 local programs reported 6,039 presentations which reached 717,815 people. Programs were presented in high schools (49%), middle schools (25%), elementary schools (15%) and other settings, i.e., service clubs, military, and health fairs (10%). Thirty-two percent of the presentations were conducted in urban regions, 48% in suburban regions, and 20% in rural areas. Seventy-seven percent of the presentations were in individual classroom settings while 23% were in assembly settings. Topics of discussion included spinal cord injury (72%) and traumatic brain injury (28%). Guest speakers included 657 individuals who spoke on behalf of their THINK FIRST program, all of whom sustained prior injuries related to vehicular incidents (57%), water incidents (15%), violence (11%), sports and recreational incidents (7%), bicycle incidents (3%), or other sources, i.e., falls, pedestrian incidents, etc. (7%).

The local programs are the "back bone" of the Foundation. THINK FIRST applauds all of the local coordinators and sponsoring neurosurgeons for their dedication and commitment to this injury prevention effort.

THINK FIRST Foundation Elects New Officers

The THINK FIRST Foundation is pleased to announce the election of four new officers and two new members to the board of directors. Thomas G. Saul, M.D. became chairman of the board in October 1996 for a two-year term. Other new officers of the Executive Committee are Edward S. Connolly, M.D. (Vice Chairman), Donald B. Tobin, J.D. (Secretary), and Jeffrey M. Lobosky, M.D. (Medical Director). Mr. Tobin and Ms. Fran Inman were also unanimously elected to the Board of Directors for a three-year term. Mr. Tobin is a Patent & Trademark Counsel for The Gillette Company and Ms. Inman is CEO of Inman & Associates, a marketing firm in Newport Beach, California. The THINK FIRST Foundation welcomes the new officers and extends its appreciation to past officer James Yunker, Ed.D. for his dedicated and diligent service to the Foundation.

Roy W. Black and E. Fletcher Eyster, M.D. announced their decision to retire from the board as cochairmen during the Foundation's Board of Directors meeting held April 29, 1996. During The American Association of Neurological Surgeons Annual Meeting in Minneapolis, Minnesota they were named Chairmen Emeritus of the THINK FIRST Foundation, given their tireless efforts and leadership contributions to the Foundation. Black and Eyster are original board members and have not only contributed their professional guidance, but have spent endless personal hours supporting and nurturing the Foundation's efforts.

Frederick H. Grubbe has been chosen to serve as the Foundation's first Chief Executive Officer. Serving with Dr. Saul on the selection committee were Foundation board members Michael J. Caron, M.D., Charles N. Dunn, Jr., Fran Inman, and Jeffrey M. Lobosky, M.D. A national executive search was conducted by Smith Beers Yunker and Company, an international consultancy with offices in Cincinnati, Ohio, and Mersevside, England. Of his appointment, Mr. Grubbe said, "I believe the Foundation's mission is noble and important. I could not be more thrilled with the opportunity before me to further that mission." He recalls his first exposure to the aftermath of debilitating injury when, in high school, a family friend was injured playing hockey and remains paralyzed today. His professional experience further sensitized him to the tragedy of brain and spinal cord injury. Mr. Grubbe brings solid administrative and management skills to the post as well as a strong personal affinity for issues of safety and prevention. Early in his career, Mr. Grubbe served as assistant director of public services for the College of American Pathologists. In 1986, he organized a tour of the Rehabilitation Institute of Chicago for then-Vice President and Mrs. George Bush. Later, in 1988, he served as deputy regional political director for the Bush/Quayle campaign. In 1991, as deputy administrator of the National Highway Traffic Safety Administration, he supervised an award-winning national public service program to encourage the use of seat belts. In 1992, President Bush appointed Mr. Grubbe to serve as deputy director of the United States Office of Consumer Affairs. Before accepting the position with THINK FIRST, Mr. Grubbe was Director of Special Projects for the Million Dollar Round Table in Park Ridge, Illinois. Mr. Grubbe and his wife, Mary Duke, live in Arlington Heights, Illinois. Their son, Will, is almost two years old, and a second child is expected in July.

Making the announcement, chairman of the board Thomas G. Saul, M.D., said, "I believe the fact that we have named our first CEO speaks to where the Foundation is in its evolution. We have reached a point where we need strong central leadership in our National Office to oversee the day-today business that is necessary to complement the work of our many volunteers. This is an important step toward the future. Mr. Grubbe demonstrates a very good understanding and emotional feel for our mission and brings with him an excellent background in safety through his work with the United States Department of Transportation. It is also important to have someone in this position who feels strongly about the program and has the ability to lead others in a way that makes them believers in what we are doing. Mr. Grubbe was chosen by unanimous vote of the selection committee from among more than 200 high caliber applicants. I think we made an excellent choice."

Popular Rock Band R.E.M. Makes Generous Gift to Prevention Program

During a worldwide tour of the famous rock band, R.E.M., drummer Bill Berry collapsed on stage at a concert in Lucerne, Switzerland. Through this dramatic and unfortunate event, band members became supporters of the THINK FIRST Foundation.

An R.E.M. employee, Brooke Johnson, immediately called Florida neurosurgeon, Gaston J. Acosta-Rua, M.D., who had trained in Zurich and was able to recommend Nic deTribolet, M.D., Chief of Neurosurgery, University Hospital, Geneva and Lucerne. Berry's collapse was the result of a subarachnoid hemorrhage and during surgery deTribolet discovered two cerebral aneurysms, both of which were repaired. Berry fully recovered in only a few months. R.E.M. then continued its world tour through completion in November 1995. Out of gratitude for Dr. Acosta-Rua's help in securing the services of Dr. deTribolet, R.E.M. made a gift of \$7,500 in his honor to the THINK FIRST Foundation. Dr. Acosta-Rua is a founding member of the national Board of Directors of the Foundation and a former vice chair of the Board. When asked what the band members could do to show their appreciation, Dr. Acosta-Rua suggested they might consider an investment in the THINK FIRST program.



Academy Selects Academy Award Winner

John S. Yu, M.D., of the Department of Neurosurgery at Massachusetts General Hospital, Boston, Massachusetts, was selected by the American Academy of Neurological Surgery as its 1996 Academy Award winner. Dr. Yu received the award for his presentation, "Drug Regulated Apoptotic Death in a Rat Glioma Model Mediated by a Novel Retroviral Vector." Dr. Yu received the award at the Annual Meeting of the Academy held in September at the Greenbrier.

Joseph F. Megyesi, M.D., of the Division of Neurosurgery, McKenzie Health Sciences Center, Edmonton, Alberta, Canada, was selected as runner up for the Academy Award, which is sponsored each year by the American Academy of Neurological Surgery to recognize clinical or laboratory research by neurosurgical residents in training in North America.

CNS Clinical Fellowship Awards

1995 CNS Clinical Fellowship Award Winner:

Jason A. Brodkey M.D., completed a fellowship in Toronto evaluating movement disorders and pain mechanisms and treatment.

1996 CNS Clinical Fellowship Award Winners:

A. Bruce Pollock, M.D., who trained at the University of Pittsburg completed a fellowship at the University of Toronto under the preceptorship of Ronald R. Trasker initiating prospective clinical trials using novel microelectrode recording techniques of the thalamus and pallidum durng functional neurosurgical procedures.

John Wong, M.D., who trained at the University of Alberta, Edmonton, completed a Neurovascular fellowship at Yale University under the preceptorship of Issam A. Awad evaluating the histopathology of cavernous malformations

CNS Clinical Fellowships

The Congress of Neurological Surgeons offers its resident members two clinical fellows awards per year. The fellowships provide financial assistance to neurosurgical residents and recent graduates to facilitate the acquisition of clinical skills and knowledge. These awards may be used to cover travel and housing expenses for a 3- to 6-month elective rotation at an institution that is outside the primary training program. Such a rotation might provide in-depth experience in a particular subspecialty.

Eligibility: All CNS resident members who have completed at least 3 years of training in an approved neurosurgical training program are eligible. Awards made during the final year of training may be used also during the first 12 months after completing residency training. Application forms are available from the resident membership office, on request by mail or fax. The deadline for receipt of applications for the 1997 CNS Clinical Fellowship Awards (to begin July 1, 1997) is January 15, 1997. Contact: Curtis A. Dickman, M.D., Chairman, CNS Resident Committee. 602/406-3957; Fax: 602/264-2417.

CNS Subspecialty Fellowship Directory

Are you interested in listings of neurosurgical subspecialty fellowship positions offered in both the United States and Canada? The CNS provides this list free of charge to its members. To obtain a fellowship directory please contact: Curtis A. Dickman, M.D., Chairman, CNS Resident Committee, 2910 N. 3rd Avenue, Phoenix, AZ 85013. Tel: (602) 406-3957. Fax: (602) 264-2417.

CNS Placement Service

Are you looking for a job position or a new associate for your practice? The CNS Placement Service provides a free confidential service to its members to aid in selecting a position or a partner. Both academic and private practice opportunities are available.

For further information please contact: Cameron G. McDougall, M.D., Chairman, CNS Placement Committee, 2910 North 3rd Avenue, Phoenix, AZ 85013. Tel: (602) 406-3957, Fax: (602) 264-2417.

Valuable Gifts to Archives

The Archives Committee is pleased to announce two valuable gifts to the Archives of the Congress. Dr. A. Norman Gothkelch recently donated a special edition of Volume 1 of Clinical Neurosurgery to the Congress Archives. This leather-bound edition is inscribed in gold print "With appreciation, to SIR GEOFFREY JEFFERSON, Congress of Neurological Surgeons." This book was presented to Sir Geoffrey Jefferson after he was the Honored Guest in 1953 at the Third Annual Meeting of the Congress in New Orleans, Louisiana. Dr. Raymond K. Thompson was Editor-in-Chief for this volume.

Dr. Guthkelch stated that Sir Jefferson's sons gave the volume to his favorite pupil, Dr. James Hardman, after Sir Jefferson's death in January, 1961. Mr. Hardman had become Sheffield's first indigenous neurosurgeon in 1939, and was as keen a bibliophile as Sir Jefferson and Harvey Cush-When Mr. Hardman died his books were put up for auction. Fortunately for the Congress, Dr. Guthkelch purchased this volume and has now donated it to the Congress. Inside the book is a handwritten note "Presented to James Hardman, Esq., FRCS by Michael and Anthony Jefferson as a memento of their father, 29/1/61.

Dr. Bruce F. Sorensen, Past President of the Congress, donated a bound Volume 1, Number 1, C July/August 1977 of Neurosurgery to the Congress Archives. On the inside cover is written: "Dick M. Hoover—We're off on another Congress venture. I hope this succeeds as the others have. Bob Wilkins." Past President, Robert H. Wilkins, was the first Editor of Neurosurgery. All the Officers of the Congress at that time, many members of the Executive Committee, many members of the Editorial Board, and Special Feature Editors have autographed this copy.

John M. Thompson M.D., Historian and Chairman of the Archives Committee



WORLD FEDERATION OF NEUROSUR-GICAL SOCIETIES AWARD FOR PEDI-ATRIC NEUROSURGERY

The World Federation of Neurosurgical Societies, through the support of Pudenz Schulte and Galen Gryphon, will provide an award of \$1,500 for the best paper on pediatric neurosurgery presented at the forthcoming World Congress of Neurosurgery to be held in Amsterdam, July 6–11, 1997. The individual applying for this award must be under the age of 35 years at the time of the meeting in Amsterdam. The papers should be double spaced and sent to:

Professor Harold J. Hoffman, Chairman of the Scientific Committee on Pediatric Neurosurgery of the World Federation of Neurosurgical Societies, The Hospital for Sick Children, 555 University Avenue, Toronto, Ontario, M5G 1X8, Canada.

WORLD FEDERATION OF NEUROSURGICAL SOCIETIES MEETING

The World Federation of Neurosurgical Societies announced that Sydney, Australia will be the site of their XIIth International Congress, to be held in 2001.

WORLD DIRECTORY OF NEUROLOGICAL SURGEONS, 7TH EDITION

The CNS is pleased to announce the availability of the 7th Edition of the World Directory of Neurological Surgeons (the world, exclusive of the U.S. and Canada). This volume, published in late 1993, contains listings for 14,600 neurosurgeons and includes demographic reviews of their distribution in 129 countries. The purchase price of the Directory (including handling and shipping) is US\$60.00. Checks should be made payable to The Congress of Neurological Surgeons and mailed to the address listed below.

Mailing labels for the listings contained in the *Directory* are also available for purchase by neurological surgeons, neurosurgical organizations, program and

meeting arrangers, and carefully selected commercial use. The Directory is protected by copyright, and it is implicit, therefore, that recipients of the Directory and the labels must observe this copyright and not reproduce the lists for any purpose. This is a condition to which they agree in accepting delivery. Requests and/or inquiries can be sent to the following address: George Ablin, M.D., World Directory of Neurological Surgeons, 2828 H Street, Bakersfield, CA 93301.

INTERNATIONAL SOCIETY FOR THE HISTORY OF THE NEUROSCIENCES, INC.

The International Society for the History of the Neurosciences, Inc., was founded by a group of neurohistorians at a meeting in Montreal, Canada, in May 1995. Its mission is to promote the history of the neurosciences by improving communication and education among neurohistorians, and to improve the quality and quantity of work in the field. We hope to attract participants from all of the clinical and experimental neurosciences, as well as professional historians and others with related interests. There will be annual meetings (usually in the spring), which will be held in alternate years in North America and on another continent (usually Europe). The Society's official publication is the Journal of the History of the Neurosciences, whose founder and continuing editor is F. Clifford Rose, M.D., of the Neurological Centre, London, England.

The founding officers of the Society include: President Stanley Finger, Ph.D. (Psychology/Neural Science, Washington University, St Louis, MO); President Elect, Peter Koehler, M.D. (Neurology, De Wever Hospital, Heerlen, The Netherlands); Duane Haines, Ph.D., Secretary (address below); and Treasurer, Samuel Greenblatt, M.D. (Neurosurgery, Brown University, Pawtucket, RI). Annual dues of US\$95.00 include a subscription to the Journal, published by Swets & Zeitlinger of Lisse, The Netherlands. For informa-

tion and membership application forms, please contact: Duane Haines, Secretary ISHN, Department of Anatomy, University of Mississippi Medical Center, 2500 North State Street, Jackson, MS 39216-4505. Tel: (601) 984-1640,Fax: (601) 984-1655; e-mail: dehaines@fiona.usmed.edu.

FOUNDATION FOR INTERNATIONAL EDUCATION IN NEUROSURGERY UPDATE AND REQUEST FOR VOLUNTEERS

The Foundation for International Education in Neurosurgery (FIENS) continues to develop activities that are primarily designed to foster education in developing areas of the world. These initiatives are coordinated with the activities of the World Federation of Neurosurgical Societies, which, through its Education Committee, has sponsored a number of regional educational programs for neurosurgeons in developing areas. The Foundation assists in providing faculty for these larger educational efforts. The major current activities of FIENS consist of programs in Africa. The Foundation has worked with neurosurgeons in Ghana in an attempt to help develop an indigenous neurosurgical training program there. This has involved sending senior level residents and faculty for varying periods of fume, usually 3 to 6 months for residents and 2 to 4 weeks for faculty support. FIENS has supported a program in Zimbabwe to provide neurosurgical assistance to the program already in place there, and it has supported an African trainee, who currently is a resident at Yale, in the initial steps to develop a neuroscience initiative for Southern Africa. She has been a liaison with the Panafrican Neurosurgical Association, which strongly supports this concept, and we anticipate rapid development. Another new project involves a Senior Neurosurgical Interchange with Peru under the guidance of Dr. Anselmo Pineda and the Peruvian American Neurosurgical Society. Opportunities exist for volunteer neurosurgeons to go to Peru and visit and work in a number of different medical centers around the country. FIENS maintains a roster of neurosurgeons interested in serving as volunteers. For volunteer experiences of at least 4 to 6 weeks, the Foundation will support the volunteer's air travel expenses. The host country is ordinarily able to underwrite most of the volunteer's expenses incurred at work. Further information and volunteer request forms can be obtained from: Office of the Secretary of the Foun-



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Congress of Neurological Surgeons Annual Meeting—September 27-October 2, 1997 New Orleans, Louisiana

MEMORANDUM

TO:

Neurosurgical Colleagues

FROM:

Vincent Traynelis, MD

1997 CNS Open Scientific Session Coordinator

SUBJECT:

CALL FOR ABSTRACTS

DEADLINE:

May 8, 1997

This is the Call for Abstracts for the 1997 Annual Meeting of the Congress of Neurological Surgeons to be held September 27 through October 2, 1997, in New Orleans, Louisiana.

The May 8 DEADLINE is critical. Abstracts received after this date will not be considered.

This year there are two options for submitting abstracts, either by mail or electronically, through **NEUROSURGERY:**//**DN-CALLTM**, the official Web site of The American Association of Neurological Surgeons and Congress of Neurological Surgeons.

Please follow all instructions carefully. Page 2 contains a scannable abstract form. The title, author(s), and contents of the abstract will need to be typed in this area. Please use a monospaced type font such as Courier. Font size must be 10 point or greater. Avoid typefaces with ambiguously similar characters. Type the actual abstract (double-spaced) on this form within the margin lines.

Pages 3 and 4 contain the abstract form that will be graded by the Scientific Program Committee. The same abstract as on page 2 should be retyped here (single-spaced) within the margin lines. This section includes presentation preference, subject area, and the space in which the title and contents of the abstract are to be typed. This year, abstracts may be presented at a concurrent session of the Joint Council of State Neurosurgical Societies (JCSNS). The complete names, degrees, and addresses of all authors are to be placed on page 4.

The abstract itself must include four parts: **Introduction** should clearly state the problem and purpose of the study; **Methods** should provide a description of what was actually done; **Results** should contain the findings of the study; **Discussion and Conclusions** should be based upon the findings and relate to stated purpose of the study and existing knowledge.

Please do not include charts or graphs in your abstract. Abstracts without statements about the number of experimental subjects and appropriate statistical analysis will be given low priority. When percentages are used, the absolute number from which they are derived should be included. Multiple abstracts on the same or similar topics from an author(s) or academic unit are discouraged.

Abstracts can also be submitted electronically, through **NEUROSURGERY**://**ON-CALL**TM. The online abstract form is available at www.neurosurgery.org on the *Hot Topics* page. Click on the Online Abstract Center link to access the form. The online form follows the same format as the form on page 3. The same deadline applies.

Papers for the 1997 CNS Annual Meeting, as in all past meetings, will be chosen on the basis of the abstracts received. Although the topic is of consequence, the quality of the abstract is the primary determinant of the decision by the Abstract Selection Committee.

Do not photocopy or fax these forms. For additional forms, please contact the CNS Annual Meeting Office at 847-692-9500. Mail your completed submission forms to: Vincent Traynelis, MD, CNS Annual Meeting Office, 22 S. Washington St., Park Ridge, IL 60068-4287, or submit your abstract electronically, through **NEUROSURGERY://DN-CALL™** at www.neurosurgery.org.



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1997 ABSTRACT FORM

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dation, Dr. David Fairholm, Division of Neurosurgery, Department of Surgery, Room 3100,910 W. 10th Avenue, Vancouver, BC, Canada V5Z 4E3.

INTERNATIONAL COMMITTEE REPORT

The International Committee of the CNS has made substantial progress over the past year. The Committee is currently chaired by Hunt Batjer, M.D., and our Secretary is Richard Perrin, M.D. At the Annual Meeting of the CNS in Montreal, a significant gift was made by the Elekta Corporation which enabled four neurosurgeons who would have been otherwise unable to attend the meeting to be present and participate. These surgeons were from Ghana, Peru, Nepal and Zimbabwe, respectively. The entire membership is indebted to Elekta for their generosity.

A major development through the CNS Executive Committee at the time of the Annual Meeting was the approval of the budget for the Zimbabwe Project. This collaborative effort is being undertaken by the CNS International Committee, FIENS, and the World Federation of Neurosurgical Societies (WFNS). This joint program will provide Zimbabwe with technological assistance, a flow of North American per-

sonnel, and substantial educational programs. Dr. Nozipo Maraire, who is currently a resident at the Yale University Department of Neurological Surgery, is coordinating this program. Dr. Richard Perrin will be making a site visit to Zimbabwe in late January. The CNS is indebted particularly to FEINS and WFNS for their active participation and support of this important program.

While Chairman of the CNS International Committee, Dr. Stephen Giannotta organized the Federation for International Neurosurgical Development (FIND). Dr. Dan Kelly of Los Angeles and Dr. Thomas Origitano of Chicago have been enormously successful in acquiring major donations of equipment and supplies for shipping to the key CNS targets (Zimbabwe, Ghana, Peru, and Nepal) through Dr. Martin Lazar's Medisend. I am aware of no activity in the recent past that demonstrates the volunteerism and altruism of American neurosurgery and our corporate sponsors in a more obvious way.

The CNS international fellowship continues to function extremely well under the direction of Dr. Herb Engelhard. International fellows continue to serve 3- to 6-

month periods at North American centers, and the fellowships are full through December 1997. Dr. Engelhard will be advertising for new applications in the next few months.

The CNS Bookstore, under the direction of Dr. Mike Horowitz at the University of Texas Southwestern Medical Center, is in the process of distributing a large number of complete sets of *Clinical Neurosurgery*. Any neurosurgeons or families of deceased neurosurgeons should contact Dr. Horowitz at (214) 648-4800 if you would like medical teaching materials to be distributed overseas.

CNS international membership continues to be a tremendous value, with markedly decreased meeting registration fees as well as decreased rates of *Neurosurgery*, which has become arguably the most outstanding neurosurgical journal in the world under Michael Apuzzo's editorship.

The CNS International Committee continues to work diligently to serve the world-wide neurosurgical community and all of our patients. We actively seek volunteers willing to assist us and solicit your ideas for new strategies that have not been considered or attempted as of this time.

NEUROSURGERY HOME PAGE AND NEUROSURGERY://ON-CALL

Neurosurgery's presence and scope on the World Wide Web is expanding.

Neurosurgery is now linked to Neurosurgery://On-Call (http://www.aans.org/),the joint venture developed by the Congress of Neurological Surgeons (CNS) and the American Association of Neurological Surgeons (AANS). Included among the monthly data presentations on Neurosurgery's home page are complete abstracts, announcements, a calendar of events, rapid communications, and selected other features from the journal. In addition, a monthly "featured article" is posted for interactive reader commentary to be directed to William Chandler, Neurosurgery's Internet Moderator. Commentaries related to the featured article and/or the associated reviewers' comments are encouraged and will be presented "on line" at the above listed home pages after editorial review.

Please direct ideas and concepts related to Web activities for *Neurosurgery* to Internet Moderator William Chandler (wchndlr@umich.edu) or to the Editor (http://www.wwilkins.com/neurosurgery/).

RAPID COMMUNICATIONS FORMAT FOR NEUROSURGERY

The Rapid Communications section is a forum for the quickest publication of the most important or novel clinical and experimental information. Submissions found suitable to receive the special treatment this format provides enjoy a turnaround of approximately 2 months from receipt to publication. These papers must be submitted camera ready on special forms, in a concise manner, strictly adhering to specific instructions. Reviewers will be asked to assess them expeditiously.

Please call the editorial office at (213) 224-2200 for information and to obtain the required forms and instructions. Only papers complying precisely with the presentation format will be reviewed. Assistance is available in setting up these important papers.

NEUROSURGEONS' LIBRARY

The Neurosurgeons' Library presents reviews of publications that are of interest to neurosurgeons. Although most reviews will be solicited by the book review editor and will focus on books provided for review by publishers, other media including video, audio, and computer software may be reviewed when appropriate. An occasional unsolicited review may be published when the editors think it is of unusual interest and merit. This will usually occur when the reviewer brings to the attention of the neurosurgical community a publication of interest that might not otherwise be noticed by neurosurgeons. Submissions should be sent to the following address: Robert H. Rosenwasser, M.D., Neurosensory Institute, Thomas Jefferson University, 834 Walnut St., Suite 650, Philadelphia, PA 19109.

REPORT OF HISTORIAN AND CHAIRMAN OF THE ARCHIVES COMMITTEE

Report of Historian and Chairman of the Archives Committee to the Business Meeting of the Congress of Neurological Surgeons in San Francisco, October 17, 1995.

This is the first and probably last report of the Archives committee to the annual business meeting of the CNS I requested this time as the re have been developments within the past year that could be best evaluated in the light of the history of the Congress. Two presidents of the AANS. have recommended in their presidential addresses that a common neurosurgical entity be established with a unified single chain of command. An excellent paper by Carl H. Hauber and Chris A. Philips appeared in the April, 1995 issue of Neurosurgery. These authors noted, "the somewhat ungainly parallel structure within which organized neurosurgery has continued to function." They noted that some neurosurgeons would propose merging the AANS and Congress into a single organization while others would propose an "umbrella organization."

I was not one of the founding members of the Congress but I have had the privilege of knowing and association with almost all of them. I first attended a meeting of the Congress in this city on 1958 and was so impressed with the quality of the meeting that I have attended every meeting of the Congress since. This is the 38th consecutive annual meeting that I have attended. I therefore feel that I know something about the history and philosophy of the Congress. I was a member of the Congress Executive Committee at the time that Frank H. Mayfield issued the "Mayfield Proclamation" in his presidential address to the Harvey Cushing Society in 1965. The decision to recognize the Cushing Society as the spokesman was not unanimous on a vote by the Executive Committee. I voted in favor of the resolution but I never would have voted "Yes" if I felt that such a vote would jeopardize the future independence of the Congress.

The Congress was organized by young neurosurgeons who deliberately established an international organization and carefully avoided; using the names "American" or "U.S." in the name of the organization. It was the first neurological organization that did not try to limit membership. It encouraged and subsidized neurosurgical residents to attend annual meetings. It encouraged all young neurosurgeons to volunteer for committees and then put the volunteers to work on committees. The philosophy then was not to hire anyone to do work that could be done "free" by volunteers and their families. The Congress Auxiliary was not only a social organization but provided much free labor to the Congress. I was Secretary for the Congress for the years 1965-1968 and during that time the secretary's office was in a room in my home and the secretary's office manager was my wife who did all the typing, filing and other organizational secretarial duties. She received no salary and the CNS paid no rent. My daughter, who has artistic ability, designed and did the artistic work for the honored Guest certificates and also designed and prepared

the covers of the annual meeting program books. That again was done for a small charge to the Congress including the cost of supplies. I was President of the Congress in 1969–1970 and am proud that the annual dues were still \$25. The dues had not changed in the first 20 years of the Congress. The Congress continues to be a relatively low cost organization with only a few paid employees.

Many neurosurgeons are now fearful that their incomes will tumble in the next few years. They naturally are looking for ways to cut expenses. However, merging the AANS and the Congress is not the way to cut organizational dues. I am certain that if the two associations were merged that the dues of the new single organization would be higher than the combined dues of the two separate organizations. The new dues would be over \$1,000 per year. The Congress pays half the costs of the Washington Committee, half the cost of the JCSNS and half the costs of the Joint Sections. If the two organizations were to merge the low cost volunteers would be lost and would be replaced with paid employees. There is a definite need for two major neurosurgical annual meetings in the U.S. and Canada each year. At least half the neurosurgeons must stay home and take care of patients. Two major meetings per year enables most neurosurgeons to attend one meeting per year. I feel that it is best to have these meetings planned by two different organizations. There is certainly the need for the Journal of Neurosurgery and Neurosurgery.

Much has been said and written supporting a unified voice for neurosurgery. At times decisions must be made quickly. However, with modern systems of communication it should be possible for the President of the AANS to reach the members of the Joint Officers with very little delay. There can be no doubt that a democracy is not the most efficient organization but it still is the best organization.

It is my opinion that there is more sense of security in having two separate major neurosurgical organizations. Mr. Carl H. Hauber has been a superb Executive Director of the AANS and he has assembled an excellent staff. However, he will not be there in another 25 years and there is some danger that another director might bog down the organization in bureaucracy and neurosurgeons could lose control of the organization. IF such an unlikely situation should arise the Executive Committee of the Congress could issue a proclamation that the Congress is the official spokesman of organized neurosurgery. Obviously such a proclamation would have to be backed by the membership.

I am a loyal member of the AANS and I still am an Active Member and pay active member dues in spite of the fact that I am in the age group where less expensive dues are possible. I plan to continue to be an active member in both the AANS and the CNS. I would not be in favor of the Congress absorbing the AANS and I am not in favor of the AANS absorbing the Congress.

If the AANS and the CNS ever unite to form a single organization I would advise the younger neurosurgeons in the U.S. and Canada to form a new international neurosurgical society with the same philosophy as the founders of the Congress had in 1950. I am no longer a young neurosurgeon but I would join such a society.



Joint Section For Cerebrovascular Surgery

The preliminary plans are now in place for the special session of the Joint Section on Cerebrovascular Surgery for the 1997 CNS Meeting in New Orleans. The schedule includes talks by James Grotta (Controversies and Indications for the Surgical Treatment of Acute Intracerebral Hematoma), Joe Zabramski (Surgical Approaches to Intracerebral Hemorrhage: Stereotaxis, Craniotomy, and Thrombolytic Treatment), Neil Martin (ICU Management of Patients with Stroke and Intracerebral Hemorrhage along with Timing of Surgical Intervention), and Douglas Chyatte (Indications and Techniques for Decompressive Craniectomy for Thrombo-Embolic Stroke). A panel discussion with audience participation will immediately follow the open scientific session.

Joint Section For Stereotactic And Functional Neurosurgery

The Joint Section of Stereotactic And Functional Neurosurgery will offer a symposium entitled "Does microelectrode recording improve outcome following stereotactic pallidotomy?". No awards will be given at the annual CNS meeting. Featured speakers will also include L. Dade Lunsford, M.D., Andres Lozano, M.D., and Kim Burchiel, M.D. We are expecting a promising program and hope to see you there.

Joint Section For Cerebrovascular Surgery

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Joint Section On Tumors

In New Orleans we will be presenting our usual combination of selected papers and a program focusing on a number of contemporary topics moderated by Keith Black.

In addition we will select a resident submitting a paper as the winner of the Preuss Resident Award. This is a \$500 award plus all expenses to the meeting. We will also present the Mahaley Clinical Award to a more senior author of a more clinically oriented paper. The third award is the Young Investigator Award, sponsored by the American Brain Tumor Association, which is a \$1,000 award to the best investigative paper by an author within 6 years of completing neurosurgery training.

Joint Section On Neurotrauma And Critical Care Report

The Joint Section has received many positive comments about the guidelines for the Management of Severe Head Injuries". In cooperation with the Pediatric Neurosurgery Section, there will soon be available guidelines for the management of pediatric head injuries. Tom Luerssen has been appointed the Head of the Pediatric Neurotrauma Committee of the Joint Section. As well, there has been ongoing efforts to develop guidelines for the management of head injuries in athletes. Julian Bailes has been appointed Head of the Sports Medicine Committee of the Joint Section which is collaborating with several other groups including the American Academy of Neurology in this work.

Beginning in 1997, the Joint Section has a new resident research award which will be given annually either at the CNS or the MNS annual meetings. This award will be for the best resident neurotrauma or critical care research paper presented at one of the annual meetings.

At the CNS meeting in New Orleans, the Joint Section on Neurotrauma and Critical Care will be conducting a special presentation on "Early Resuscita-Measures in Neurotrauma Patients". There are a great many pharmacological and other therapies such as hypothermia which are showing great promise during the early resuscitative phase in the management of neurotrauma patients, both head injuries and spinal injuries. This presentation will stress some of the important practical measures which can be undertaken to protect the brain and spinal cord during the early critical phase of neurotrauma care.

Joint Section On Disorders Of The Spine And Peripheral Nerves

The 13th Annual Meeting of the AANS/CNS Joint Section on Disorders of the Spine and Peripheral Nerves will be held at the Fashion Island Marriott Resort in Newport Beach, California. The meeting took place from Wednesday, February 19 - Saturday, February 22, 1997

This years' Scientific Program includes 39 contributed oral presentations and a number of symposia and invited talks. Highlights included a symposium on Outcomes Research in Surgery. There was also a symposia on topics of Surgery of the Peripheral Nervous System Controversies in Spine Surgery, and Correction of Adult Spinal Deformity. There was an expanded Scientific Poster program. The hands-on and practical course section has also been enlarged This year a total of eight practical courses was offered and the maximum enrollment had been expanded as well.

The highest award offered by the AANS/CNS Joint Section on Disorders of the Spine and Peripheral Nerves is the Meritorious Service Award. This award is give to individuals deemed to have made outstanding contributions to Neurosurgery and who continue to contribute in an outgoing fashion. Dr. David Kline received the Meritorious Service Award from the Joint Section at this year's meeting. Dr. Kline gave a talk at the meeting during which he performed and narrated the physical examination of the upper and lower extremities with real time giant screen video display. Meeting participants of all levels of experience should have

benefited from this opportunity, to learn the subtleties and nuances of physical examination from this master surgeon.

A single Mayfield Award was given at this year's annual meeting. The winner of this award was Dr. Michael A. Morone. Dr. Morone delivered the Mayfield Award talk on the topic of Gene Expression During Experimental Postolateral Lumbar Spine Fusion.

Report Of The Joint Section On Pain

The goals and objectives of the AANS/CNS Joint Section on Pain are.

Goals

To assure the highest quality of medical care for the management of patients with pain problems.

To assure an appropriate socioeconomic and political climate conducive to the effective and efficient delivery of medical care to patients with pain problems.

Objectives

To stimulate and support research and education in pain medicine.

To provide a forum for the exchange of ideas in the field of pain medicine.

To assure and enhance the role of neurosurgeons in the area of pain evaluation and management.

To disseminate information regarding the role of neurosurgery in the practice of pain medicine.

To develop and assure sources of financial support and benefit coverage for the evaluation and management of patients with pain problems.

This section is dedicated to the educational and research activities of those physicians who treat and manage patients with complex and chronic pain problems providing pain patients with the most effective and efficient delivery of medical care available

With regard to these missions, we would offer the following report of the recent activities of tile Joint Section on Pain.

1. Education

Our first agenda item has been to foster the recognition that education in pain physiology, pharmacology and clinical management is a critical part of the education of all neurosurgery residents. The Joint Section on Pain has established a suggested curriculum for neurosurgery residents education

and forwarded it to the leadership of the AANS/CNS for further action I am pleased to say that at the recent Section Meeting of the Joint Officers of the AANS and CNS, held in Chicago on August 4, 1996, Dr. Charles Rich announced that under his sponsorship, the RRC for neurosurgery had reviewed and adopted our recommendations for the education of all neurosurgery residents in pain medicine. I believe that this will enrich the education of all neurosurgeons, allow us to better care for our patients and preserve the recognition that neurosurgeons are experts in pain management.

To promote the educational mission of the Section, we have also developed the concept of a Satellite Workshop on Neurosurgical Pain Management. The 1st workshop, conducted in Montreal immediately following the CNS meeting in Montreal was well-evaluated by the participants - all but one of the major lectures and all the major hands-on stations were rated at an average of 4.04.5 (on a 0-5 scale) and the individual comments were very positive. 100% of the respondents said they would recommend it to a friend. The participants included 61 post-residency neurosurgeons, 23 neurosurgical residents, and 4 others (R.N., P.A.).

It also appeared that there is a significant level of interest in this type of workshop in the general neurosurgical community. 10.8% of 3507 postresidency neurosurgeons returned postcards for more information after a first mailing last January and the first 50 post-residency slots in the Montreal workshop filled in 2 weeks after an "early-bird" announcement. We are now in the final stages of planning a Workshop in Denver in conjunction with the AANS meeting from April 10-11, 1997. A first mailing announcement has been sent to all U.S. neurosurgeons and neurosurgical residents and return postcard interest is very high-216 cards, almost 5% of the mailing. The program brochure and registration form should be mailed out to those returning postcards within the next 10 days.

The Joint Pain Section continues to provide hands-on Practical Courses on Augmentative Procedures for Pain Control, Ablative Procedures for Pain Control and Trigeminal Neuralgia, at both the CNS and AANS meetings

2. American Board of Pain Medicine

The Section on Pain has further been involved with supporting the development of the American Board of Pain Medicine (ABPM). As we all know, other specialties have been working to identify pain management as specific to their disciplines. The leadership of the Joint Section on Pain believe that pain medicine is a specialty in and of itself rather than a subspecialty- of any particular primary specialty. We believe that the formation of a multidisciplinary board supported by many specialties will neither impede neurosurgeons from performing neurosurgical pain alleviating procedures nor further fragment neurosurgery, but rather will improve access by neurosurgeons to pain patients. We have encouraged the support of the AANS and CNS for the formation of such a board.

3. Marketing

The Section on Pain has further been active in encouraging the staff of the AANS and CNS to include pain medicine and interventional pain management in the marketing plans for organized neurosurgery. Toward that aim, we have been requested to develop a marketing plan to include a pain fact sheet for distribution to patients and physicians concerning the role of neurosurgeons in pain management, developing a speaker's bureau of neurosurgical pain management experts willing to lecture on behalf of organized neurosurgery on topics of neurosurgical pain management and to develop a set of slides to aide practicing neurosurgeons in their education of patients and referring physicians. We further have been asked to aid in the development of the neurosurgery web site with respect to pain management. We would like to identify members of the section or enthusiastic residents with computer skills who can participate in the important project. Dr. Jeff Brown has volunteered to serve as our section liaison.

4. Publishing

Two important publication projects are currently in development by the Joint Section on Pain. Our continuing series of consensus conferences on the neurosurgical management of pain has resulted in the publication of the volume "Neurosurgical Management of Pain". This volume, edited by Dr. Richard North and Dr. Robert

Levy and published by Springer-Verlag, will be available at a discounted price to the members of the Joint Section on Pain. We have also been invited to develop an issue of the electronic portion of the Journal of Neurosurgery, Neurosurgical Topics, dealing with New Advances in Neurosurgical Pain Management. Manuscripts have been solicited and publication is expected in January 1997

5. Awards

The Joint Section continues to sponsor the annual William Sweet Award, given to the neurosurgical resident or junior faculty member (within five years of the completion of training) submitting the best scientific and/or clinical paper to the AANS meeting on the topic of Pain. The award carries an honorarium of \$1000, and the award-winning paper is presented during the Sectional session at the AANS meeting. The Joint Section is now pursuing additional funding for a Pain award to be presented at the annual CNS meeting.

Joint Section of Pediatric Neurosurgery of the AANS and CNS Meeting

The Joint Section of Pediatric Neurosurgery of the AANS and CNS will hold an afternoon meeting on Tuesday, September 30, 1997. There will be a panel discussion and presentation by experts on a timely topic followed by a presentation of selected papers. For the first time, following the Pediatric Section Meeting the section will host a cocktail party for all interested persons.

Make your plans to be in New Orleans this September. We look forward to seeing you there.

Highlights of the Scientific Program of the 1997 Congress of Neurological Surgeons' Annual Meeting

An international scientific symposium is to be held in New Orleans, Louisiana. Both international and national experts in the fields of neurological surgery and the neurosciences will be featured speakers during the Open Scientific Sessions. Highlighted will be adversarial discussions on Current Controversies in Neurological

Surgery in addition to Neurosurgery 200, a perspective of the future practice of neurosurgery in the next century. Stroke: Rapid Identification and Treatment, will be a comprehensive session looking at all aspects of stroke, its impact on health care, and the neurosurgeon's critical role in its early management and treatment. Highlights of the Special Courses include a course on Communications, Technology, and the practice of Neurosurgery, which will serve as an integrated overview of present and future telecommunications systems and their application. Neuroimaging and Neurological Surgery will also be offered, which is an update on the evolution in functional neuroimaging and its interface with the art and science of neurological surgery. Intraoperative Monitoring will be a review of the indications, uses, and "state of the art" applications of intraoperative monitoring as an adjunct to neurological surgery. Heroic Care and the Neurological patient will be a presentation and discussion of the moral, ethical, and practical considerations of the management of the severely impaired and/or injured neurosurgical patients, including older patients, with treatment suggestions.

A variety of "hands on," participantinteractive Practical Courses are offered to refresh neurosurgical operative skills and perspectives. Topics include intracranial and cranial skull base surgery, spinal reconstructive procedures, functional tumor surgery, intracranial vascular neurosurgery, and carotid endarterectomy. Other courses will cover intraoperative cranial and practice, an introduction to the Internet (Neurosurgery On Call), practice guidelines, medicolegal issues, and health care reform issues.

Daily 2-hour Luncheon Discussions will allow for small group symposia on focused topics by national and international experts, including "How I Do It" sessions by established leaders. "Expert Exchanges," which are panel round table discussions on varied or controversial treatment options will also be offered. Once again the "Consultant's Corner" will allow for a luncheon interaction with expert consultants, who will retrieve questions and concerns about neurosurgical cases from session participants.

The Honored Guest will be Dr. Nicolas T. Zervas, Professor and Chairman of

the Department of Neurological Surgery at the Massachusetts General Hospital. Dr. Zervas will address the General Scientific Sessions on topics of his experience and expertise: Gene Therapy for Brain Malignancies; Current Concepts Regarding Pituitary Tumors; and Current Approaches in the Treatment of Vasospasm.

Congress to Facilitate Electronic Abstract Submission for 1997 Annual Meeting

Por the first time ever, members of the CNS will be able to submit abstracts for open papers or poster presentations electronically via Neurosurgery://On Call.

"Abstracts competing for potential oral presentation at our annual meetings have traditionally been submitted by mail, often by express mail to meet the submission deadline. In years past, we have requested that the abstracts also be submitted on a diskette. This year we offer our members two options: the traditional mail submission (no diskette required), or bye e-mail or electronic submission," says Open Scientific Program Chairman, Vincent Taynelis. "This is a great service for our membership," notes Scientific Program Chairman, Mark Hadley. "It's an easy, fun, and contemporary way to prepare an abstract for submission. Believe me, If I can do it (as a relative Internet novice), anyone can."

CNS member Joel Mac Donald, M.D., working in conjunction with our annual meeting staff at the AANS office, has devised a simple and effective means to submit abstracts electronically for consideration for presentation at the 1997 CNS Annual Meeting in New Orleans utilizing Neurosurgery://On Call. One must simply long onto the Internet at www. neurosurgery.org and find the HOt Topics pages; then, click on the Online Abstract Center link to access the abstract form. The electronic abstract form is identical to the printed form distributed with this newsletter. With an electronic submission, paper forms, computer diskettes, and mail delivery fees become unnecessary, and mail delivery delays are obviated.

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