September 1995

Vol. LXII

"Meet me in San Francisco"



"Argyle Marathon" by Curtis Martin @ Photopia Images 1993

he 1995 Congress of Neurological Surgeons Annual Meeting will be held in San Francisco, California from October 14-19, 1995. San Francisco is among the premier destinations in the world, and the weather in mid-October is inevitably perfect with warm, sunny days and cool, pleasant nights. Headquarters for the meeting is the San Francisco Hilton, which is located approximately six blocks from the Moscone Convention Center, where the Scientific Sessions will be held. The Honored Guest this year is Dr. John Jane, who will be discussing a variety of topics, including surgery for craniofacial disorders, lumbar spine surgery and cranio-orbital surgical approaches. The Decade of the Brain Medalist this year is Dr. Zach Hall, who is

currently Director of the National Institutes of Health. An exciting Scientific Program is planned with many new and unique features, as described below. Complementing the Scientific Program will be a terrific social program for members and spouses. On Sunday, the Opening Reception will be held at the new San Francisco Museum of Modern Art. The CNS will be among the first groups to hold a function in this spectacular facility which has received international accolades for its architecture and art collection. During the Opening Reception, members will be free to tour the facility independently or by guided tour, or otherwise socialize in the lobby with old friends. A busy Auxiliary Program is planned during Monday through

Wednesday with numerous tours to take advantage of the huge variety that San Francisco and its environs have to offer. This year, the traditional Annual Banquet on Wednesday will not be held. In its place, there will be a wine tasting featuring several premier vintners from Napa Valley. This event early in the evening will allow CNS members and spouses to gather prior to dining at one of San Francisco's many fine restaurants.

There are several exciting new features for the Scientific Program this year. First, the traditional CNS format of Luncheon Seminars will be re-instituted. The program has been designed so that time will be available for viewing exhibits and posters at the mid-morning and mid-afternoon breaks. As in the past, Luncheon Seminars will provide an opportunity for small group interactions with lectures and moderators in the congenial setting of lunch, enabling ample time for questions and discussion. Second, computers will play a new and

#### 1995 MEETING CHANGES

- A return to traditional CNS format Luncheon Seminars
- Joint Session with Pediatricians
- Opening Reception at the new San Francisco Museum of Modern Art
- Real-time Internet broadcast of General Scientific Sessions

important role in this meeting. Each of the General Scientific Sessions will be broadcast via the Internet to selected sites around the world. Appropriate experts at each of these sites will then participate via Internet connections in real time with the panel discussions at the end of the session. In addition, a new Practical Course on Computer Applications in Neurosurgery and a Special Course on Computers in Neurosurgery will be offered for the first time this year. The third unique aspect of this program will be the interaction with the American Academy of Pediatricians who are concurrently meeting in the other half of the Moscone Center. On Tuesday, a Joint Session with the pediatricians will be held relating to craniofacial disorders and spinal dysraphism, and will enable some interaction between the groups. Finally, the IRIS audience interactive participation system will again be used this year in all the General Scientific Sessions.

Practical Courses are scheduled for Sunday. In addition to traditionally popular courses in skull base, aneurysm, spinal instrumentation and critical care, new and improved courses this year are being offered for carotid endarterectomy, pain control, management aspects of neurosurgical practice, intraoperative functional mapping, percutaneous spinal surgery, and computers in neurosurgery. The Practical Courses always fill early, so be sure to return your registration as soon as possible.

The Scientific Program begins on Monday with a General Scientific Session describing innovations in cranial approaches and exposures. After the Luncheon Seminars, the afternoon session will include a Special Course on "Developing a Comprehensive Stroke Center", and Joint Section Meetings for Trauma and Tumors. On Tuesday, the combined symposium with the pediatricians will include talks on craniofacial disorders and spinal dysraphism. In addition, Dr. Hall will present his Decade of the Brain Presentation and the Presidential Address will be given Tuesday morning. On Tuesday, afternoon, a Special Course relating to "Computer Applications in Neurosurgery" will again use the Internet connection to demonstrate how we all will be communicating in the future for patient care, education and fun. Also on Tuesday afternoon, the Joint Sections on Cerebrovascular Disease and Pediatrics will meet. On Wednesday morning, the General Scientific Session deals with lumbar disc disease, and the Wednesday afternoon sessions include a Special Course on "Management Guidelines for Severe Injury" as well as Joint Section meetings for Spine, Stereotactic Surgery and Pain. The final session Thursday morning will be a fascinating presentation regarding "Innovations in Minimalism in Neurosurgery", which will highlight the new technical advances which enable surgical procedures to be performed with little or no invasiveness.

Please mark your calendars and plan to attend the 1995 CNS Annual Meeting in San Francisco on October 14-19, 1995. The combination of San Francisco and an exciting and innovative Scientific Program should make the meeting enjoyable for both you and your spouse. Please return your registration early to ensure that you can secure a place in the courses and seminars that you want to attend. We look forward to seeing you in San Francisco this fall!

## John A. Jane, M.D., Ph.D., Honored Guest



e are especially proud to feature Dr. John Jane as this year's honored guest. John Anthony Jane was born on September 21, 1931 in Chicago, Illinois. He grew up on the south and west side of Chicago. He graduated from the College of University of Chicago with B.A.; cum laude in 1951. He then attended the University of Chicago School of Medicine

receiving his Doctor of Medicine in 1956. He did his Internship at the Royal Victoria Hospital at McGill University and returned to begin his neurosurgical residency at the University of Chicago Clinics in 1957 with Dr. Sean Mullan. In 1958 he was a Fellow in Neurophysiology at Montreal Neurological Institute. In 1959, he was a Senior Fellow in Neuropathology and in 1960 a Demonstrator in Neuropathology, both at McGill University in Montreal. In 1961 he was the Research Assistant in Neuropathology to Mr. Wylie McKissock at St. George's Hospital and The National Hospital at Queen Square in London, England. In 1962 he was the Research Associate with the Department of Psychology at Duke University with Irving T. Diamond. He then completed his Neurosurgical residency in 1963-1964 at the University of Illinois Research and Educational Hospitals and the Illinois Neuropsychiatric Institute with Oscar Sugar and Erick Oldberg. The year 1965 found Dr. Jane as Assistant Professor of Neurosurgery at Case Western Reserve University. In 1967, Dr. Jane completed and was awarded a Ph.D. from the University of Chicago, Division of Biological Sciences, Section of Biopsychology. After four years at Case Western Reserve, Dr. Jane assumed his position as the David D. Weaver Professor and Chairman of the Department of Neurosurgery, University of Virginia School of Medicine in Charlottesville, Virginia, in 1969.

He is especially proud of having been involved in the training of Harold Young, Donald Becker and Martin Weiss while at Case Western Reserve and subsequently in the training of seven department chairmen and nine Professors of Neurosurgery. He has been a Director of the American Board of Neurological Surgeons for the past six years. He is the immediate Past President of the Society of Neurological Surgeons, the oldest society of neurosurgeons. He is to be the honored guest of the Congress of Neurological Surgeons. He is currently Editor of the Journal of Neurosurgery.

He is married to the former Miss Noella Fortier of Montreal, Quebec, Canada. The Janes have four grown children (three daughters and one son) and three grandsons.

# The IRIS System: A "Real Time" Interaction

he annual meeting organizers of the Congress of Neurological Surgeons have experimented with the use of an interactive audience participation system during the scientific sessions of the 1993 and 1994 Annual Meetings. There are plans to implement a similar interaction system during the scientific sessions of the upcoming 1995 Annual Meeting.

The use of the IRIS system during our meetings is worthy of several comments. The concept of audience participation allowing "real time" interaction with topic presenters is fascinating and represents a potentially powerful and useful tool to sample contemporary opinions, practice patterns, even biases, of active neurological surgeons. While the "answers" derived are by no means binding or even necessarily "correct," they do represent what the

responding audience "knows" (or think they know) about a given topic. At its best, this "point-in-time" polling technique could be used to assess important information about current neurological practice, training, continuing education, medico

### A potential polling technique which could sample neurosurgical opinions, practice patterns, and biases

legal issues, etc., potentially representing the concerns and mentality of mainstream neurosurgery. It also might be used to test or assess our knowledge about specific topics to better direct our future training and education. Interpretation of this carefully collected data might be used to improve the ability of the CNS leadership to meet our specialty's specific needs and concerns, organize our annual meetings, improve the way neurosurgeons are trained and are offered continuing medical education. The "validity" and, therefore, usefulness of the answers obtained is directly related to the quality of the questions posed, the ease of providing an accurate number response to those questions (proper question design) and the number of respondents willing to participate (please participate!)

Please use the IRIS audience interaction system stations during this year's annual meeting in San Francisco. It is fun, interesting, confidential and has tremendous potential with respect to real time information transfer.

Mark N. Hadley, M.D.

# Dr. Ralph G. Dacey, Jr.

1995 CNS President

alph G. Dacey, Jr., Chairman of Neurological Surgery and Co-Chairman of the Department of Neurology and Neurological Surgery, graduated from Harvard University in 1970. He received his M.D. from the University of Virginia in 1974. Dr. Dacey came to Washington University from the University of North Carolina at Chapel Hill, where he had been Professor and Chief of the Division of Neurological Surgery since 1987. In addition to his School of Medicine post, Dr. Dacey serves as Neurosurgeon-in-Chief at Barnes Hospital and is on the staff at St. Louis Children's and Jewish Hospitals.

He completed a medicine residency at Strong Memorial Hospital in Rochester, New York, and subsequently completed his neurosurgery residency at the University of Virginia. His training also included a year as a postdoctoral fellow in physiology at the University of Virginia as an American College of Surgeons Schering Dr. Dacey with wife; Corinne and two children; Ralph III and Elizabeth

Scholar. He was a faculty member at the University of Virginia, and at the University of Washington in Seattle before joining the University of North Carolina faculty.

Dacey's major clinical interest is in the treatment of cerebral aneurysms, arteriovenous malformations, and basal skull tumors. His research focuses on cerebral arterioles and cellular changes that occur with age and hypertension. His work has been funded through a five-year grant from the National Institutes of Health.

Dr. Dacey has served on the Executive Committee of the Congress of Neurological Surgeons since 1988, as Treasurer from 1990-1993, President-elect in 1994, and President in 1995. He is a member of numerous other national professional organizations including the American College of Surgeons, the American Heart Association, the American Association of

Neurological Surgeons, the Society of Neurological Surgeons, and the Academy of Neurological Surgery.

Dr. Dacey is married to Corinne Mears Dacey and they have two children, Ralph III and Elizabeth.

In addition to his accomplished academic life, Ralph is a remarkable sailor, golfer and coaches his son's ice hockey team. He has contributed countless hours to the Congress and organized Neurosurgery with wit and wisdom. The Congress of Neurological Surgeons acknowledges Dr. Dacey's distinguished service to this organization.



# THINK FIRST Foundation Collaborates with **National Organizations**

or the past year and a half the THINK FIRST Foundation has been involved with a newly created organization; the National Organizations for Youth Safety (NOYS). This organization, developed by the Department of Transportation, National Highway Traffic Safety Administration (NHTSA) brings together over 30 national organizations who deal with youth safety issues. National organizations include Mothers Against Drunk Driving (MADD), American Academy of Pediatrics, National Parents and Teachers Association (PTA), and Emergency Medical Services for Children (EMSC). The mission of this organization is a broad-based network of organizations, government agencies, and businesses working together to provide safety and injury prevention initiatives for America's youth. THINK FIRST is represented by Susan Morton, THINK FIRST Program Development Coordinator.

One initiative has been to develop a national project for all participating organizations to get involved in while keeping the collaboration juices flowing. The national project for 1995 "Strides for Safety", was a five-mile walk to state capitols around the nation. Over 30 national and state organizations participated in the walk on April 8th. This national project supported NHTSA's youth quarter of Campaign Safe & Sober by pledging to secure the future for friends and family by buckling up, staying sober, and riding only with sober drivers. For the first year of this project, the walk was quite successful and will continue to be the national project for 1996.

Since THINK FIRST's involvement with NOYS, the opportunities to collaborate with individual participating national organizations have been outstanding and prosperous. One collaborative project involved the Emergency Medical Services for Children (EMSC) and the Emergency Nurses Association (ENA). With the help of EMSC, the THINK FIRST Foundation was able to provide a state wide training in the THINK



FIRST high school injury prevention curriculum to the New Jersey ENA through the New Jersey Department of Health. This training developed over 15 new THINK FIRST programs in the state of New Jersey.

Getting involved with NOYS has opened doors for NOYS members to participate in the Annual THINK FIRST Coordinators' Workshop held in conjunction with The American Association of Neurological Surgeons Annual Meeting. This year, several national organization's representatives were speakers at the annual workshop in Orlando, Florida. Participating speakers included MADD's National President, Ms. Beckie Brown; EMSC's Ms. Bryna Helfer, NHTSA's Associate Administrator, Mr. Michael Brownlee, and NHTSA's Ms. Beth Poris.

The most important aspect of involving the THINK FIRST Foundation with NOYS and other collaborative efforts has been the tremendous national awareness brought to this outstanding organization. Many participating national organizations provide grants and funding for injury prevention programs. Since heightening the awareness of THINK FIRST, this has helped provide better opportunity to receive local funding for the local THINK FIRST programs, better opportunity to collaborate locally, and has strengthened spreading the THINK FIRST brain and spinal cord injury prevention message to more and more young adults and children every day.

#### Giannotta Heads National Campaign

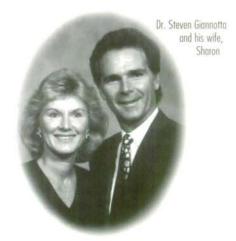
Dr. Steven Giannotta, has been selected to chair the THINK FIRST Annual Fund Campaign. Founded by the American Association of Neurological Surgeons and Congress of Neurological Surgeons, THINK FIRST is the nation's premier injury prevention program presented throughout the United States by the THINK FIRST network of over 200 local chapters.

Dr. Giannotta is in practice at the University of Southern California School of Medicine in Los Angeles. He and his wife,

Sharon, have been active with the THINK FIRST program as sponsoring neurosurgeon and local coordinator respectively. Last year, his local program reached 1,600 students. All THINK FIRST programs reached over 740,000 students during the last school year.

Through his involvement with a local chapter, Dr. Giannotta has seen, first hand, the benefits of THINK FIRST's injury prevention message to students. There are numerous testimonies from students regarding positive safety behavior changes as the result of receiving the THINK FIRST message to use your mind to protect your body.

Dr. Giannotta urges all neurosurgeons to support the Annual Fund Campaign and join him and other neurosurgeons who have already contributed through the campaign. Neurosurgeons attending the CNS annual meeting may receive additional information about THINK



FIRST or make a donation by visiting the THINK FIRST booth located in the exhibit hall. THINK FIRST materials, including injury prevention information and THINK FIRST apparel, will be available at the meeting.

Neurosurgeons not attending the meeting but wishing to participate in the 1995 Annual Fund Campaign may do so by sending their tax-deductible donations to:

THINK FIRST 1-800-THINK56 Department N PO Box 4260 Carol Stream, IL 60197-4260

Donations can also be made by calling the THINK FIRST office at: 1-800-THINK56 THINK FIRST accepts VISA and MasterCard for both mail and telephone donations.



#### Patient Access to Specialty Care

Perhaps one of the most significant issues facing neurosurgeons and their patients today is the impact that managed care is having on the individual's ability to select the physician of his or her choice. To help assure patients retain this right, the CNS and AANS have joined the Patient Access to Specialty Care Coalition. This Coalition consists of nearly 100 physician, patient and consumer organizations. The goal is to assure patient access to specialty care from the physician of choice. The coalition has concluded that one way to achieve this goal is to require all health plans to have a point-of-service feature permitting enrollees to seek medically necessary out-ofnetwork treatment and services. This feature will enable patients to see the neurosurgeon of their choice, regardless if he or she is on the panel of providers listed by the health plan.

Last year, the Coalition was successful in getting this point-of-service feature incorporated in several of the major health care reform bills. This year, however, the focus has shifted away from health care reform to Medicare reform. The Congressional budget committees have suggested that large savings can be achieved by expanding Medicare managed care, particularly closed-panel HMOs. While the Republicans have stated that they will not force senior citizens into managed care, several legislative proposals would do precisely this by enacting disincentives for selecting fee-for-service plans. For example, the House Budget Committee

proposal would charge an additional premium if Medicare enrollees select fee-forservice Medicare.

The final outcome will not be determined until late fall when the budget reconciliation process is completed. The CNS and AANS will be actively working to assure that Medicare patients will continue to have the ability to select the physician of their choice. The Washington Committee strongly urges you to contact your Member of Congress in support of the Coalition's position. For further information about the Coalition and its position, please contact Katie Orrico, 725 15th Street, N.W., Suite 800, Washington, D.C. 20005; (202) 628-2072.

#### **Medical Procedure Process Patents**

The CNS and AANS recently participated in a Congressional and Media briefing on the issue of medical procedure process patents. The briefing was sponsored by the Medical Procedure Patent Coalition, of which the AANS and CNS are members, organized to seek legislation eliminating the ability of physicians to patent medical and surgical procedures unaffiliated with a patentable drug or device.

Over the past several years, the U.S. Patent and Trademark Office has issued numerous medical process patents. Until recently, however, no physician had attempted to collect royalties. Today there are several patent infringement lawsuits pending in the courts whereby physician patent holders are suing their colleagues to collect royalties on their patented surgical techniques. For example, in 1992, one physician obtained a patent on a method of incision for cataract surgery which is said to eliminate the need for stitches. He is now seeking to enforce his patent by collecting royalties from those using the procedures. Up to 2,000 surgeons using the procedure could be subject to suits.

To rectify this situation, Congressmen Greg Ganske (R-IA) and Ron Wyden (D-OR) have introduced H.R. 1127, the "Medical Procedures Innovation and Affordability Act". In his statement, Dr. Ganske (a plastic surgeon) noted that "advances in medical procedures are the product of collaborative efforts and built upon the work of others. The patent system should not reward an enterprising doctor who claims it as his own." The Washington Committee urges all neurosurgeons to write to their Member of Congress in support of H.R. 1127. The House Judiciary Committee will be holding hearings on this issue in October. For further information on the legislation, please contact Katie O. Orrico.

#### Other Washington Committee Activities

The Washington Committee continues to work closely with key members of Congress to pass medical liability reform legislation...The AANS and CNS recently joined the Science Coalition, organized to preserve federal funds for biomedical research. The AANS and CNS are refining the position on neurosurgical manpower and will meet with White House and Congressional staff on the issue in the near future. The Washington Committee is actively participating in the Medicare fiveyear review of the relative values process. Organized neurosurgery will also be represented on several panels convened by the Health Care Financing Administration (HCFA) to develop relative values for practice expenses. The Washington Committee is working with Congressman Pet Stark's (D-CA) office to amend the so-called "Stark II" physician self-referral law.

Katie O. Orrico

### "MY FAVORITE TOOL"

Charles G. Drake, M.D.

"Where's my little thing? God, it's sometimes like waiting for the second coming to get my little thing!" Charlie Drake's gruff voice echoed through the operating room as he alternately peered through his loupes or the old operating microscope at the large tense basilar bifurcation aneurysm. It was September 1974, and Charlie was about to clip his 200th aneurysm of the posterior circulation. I was a visitor to the new neurosurgical unit at the University Hospital in London, Ontario, to discuss my future and to watch the master at work.

Charlie's "little thing" was an old, bent probe... a fine, smooth, pear-shaped knob on one end and a flat spatula on the other. Probably an ancient urologist's discarded bougie. Not the beautifully crafted,

precise microsurgical tool we have come to know and depend upon. But in the hands of a master craftsman, what marvelous maneuvers this rusty little devise could perform. Tip the aneurysm ever so gently out of the inter-peduncular space, separate the perforators off the back wall of the sac, inspect the P1 origin on the opposite side... pure magic.

One other instrument was also favored "The thing that John (Girvin) likes", (a Penfield number 4) and in time, he came to use "Skip's little thing", (a Rhoton number 6). Our OR setups were simple, spartan, and even bleak. Visitors were bemused and some like Sugita, astonished. Even so, for nearly 40 years, several thousand aneurysms, more than 500 AVMs and many acoustics, Charlie's "little thing" served his patients well.

S.J. Peerless, M.D., FRCSC Editor, Emily Friedman, M.D.

### INTERNATIONAL COMMITTEE REPORT

Two projects of the International Committee of the Congress of Neurological Surgeons are highlighted:

#### 1. The International Fellowship Program

#### 2. The Zimbabwe Neurosurgery Project

The CNS International Fellowship Program was begun to assist neurosurgeons (who are about to complete, or who have recently completed, their primary neurosurgical training) in obtaining specialized fellowship experience at a major neurosurgical center in North America. The Fellowship runs three to six months, with

Zimbabwe currently has six neurosurgeons for 11 million people, with only two CT scanners and one operating microscope for the entire country. Recently a five-year neurosurgical training program was begun by Professor Levy at the University of Zimbabwe in Harare.

Using the combined resources of the Congress of Neurological Surgeons (CNS), the Foundation for International Education in Neurosurgery (FIENS), and the World Federation of Neurosurgical Societies (WFNS), the Project has three major components:

Neurosurgeon	Country	Sponsor	Institute	Dates
E. Spagnulo	Uruguay	I. Awad	Yale Univ. New Haven, CT	8/15/94- 11/15/94
E. Asdurian	Albania	B. Stein R. Solomon	Columbia Univ. New York, NY	9/1/94- 3/1/95
F. Lacko	The Slovak Republic	P. Hitchon	Univ of Iowa Iowa City, IA	3/1/95- 6/1/95
S. Ghosh	India	R. Ratcheson	Case Western Cleveland, OH	7/1/95- 12/31/95

one Fellow being sponsored at a time. The Fellows sponsored through the end of 1995 are listed in the table below.

The Zimbabwe Neurosurgery Project, through the efforts of Dr. Nozipo Maraire (a neurosurgery resident at Yale University Medical Center), is a plan to assist neurosurgery in that South African nation.

1. Visiting Neurosurgeons: Visiting neurosurgeons from established academic centers worldwide will spend four to six weeks at the University of Zimbabwe Neurosurgery Program. This would include both Professorships for senior visiting neurosurgeons and Fellowships for neurosurgeons who are about to complete, or who have recently completed, their residency training. The visiting neurosurgeons will assist in the neurosurgery training program in Zimbabwe.

- 2. Educational Assistance: This can take several forms: (1) fellowships for Zimbabwean neurosurgeons to extend their neurosurgical expertise through visits to established neurosurgical centers in North American, Europe, Asia, etc.; (2) courses presented in Zimbabwe by visiting neurosurgeons and neuroscientists; (3) provision of neurosurgical education materials such as books, journals, videotapes, and computer resources; (4) assistance in establishing research programs, particularly regarding the most common neurosurgical disorders in Zimbabwe (e.g. editorial assistance for publications through Neurosurgery and the CNS International Development Subcommittee).
- 3. Medical Technology: Through the combined efforts of the CNS International Development Subcommittee, the WFNS Materials Subcommittee, Medisend, and pharmaceutical and equipment manufacturers, neurosurgical equipment (e.g. craniotome, microscope, CT/MRI, stereotaxy) as well as supplies (e.g. shunts, aneurysm clips) can be directed to the neurosurgeons in Zimbabwe.

An update on these projects, as well as other activities of the International Committee, will be included in the next Newsletter.

Russell Andrews, M.D.

#### MEMBERSHIP COMMITTEE

The following applications are complete and will be under consideration by the Membership Committee and the Executive Committee.

Comments should be sent to:

Mark H. Camel, M.D., Chairman, Membership Committee Congress of Neurological Surgeons 27 Bridge Street • Stamford, CT 06905 203-324-8953

Steven R. Abram \*Essam Al-Shail Rex E. Arendall II Paul M. Arnold Philip A. Azordegan Nevan G. Baldwin Martin M. Bednar

Sana U. Bhatti Alfred P. Bowles Brian P. Brocker Martin J. Buckingham David A. Cech \*Tito A.P. Cepeda \*A. Chandramouli

\*Shanmugan Chandrasekaran Edwin M. Chang Brian Edward Dalton \*Mark A. Davies \*Chandrashekhar E. Deopujari Allen D. Efron Brian C. Fitzpatrick Marvin E. Friedlander Thomas M. Fullagar \*Nestor D. Guzman Mary L. Hlavin James W. Holsapple \*Kazuhiro Hongo

\*John Nai-Keung Hsiang \*Seung-Koh Huh Matthew K. Hummell \*Kinzo Iwata Robert R. Johnson, II \*Jin-Myung Jung Barry J. Kaplan \*Shiro Kashiwagi Richard LeBlanc \*Chiang Foo Lee Mark G. Luciano Robert L. MacDonald Bruce M. McCormack Stauros Malterzos

Matthew A. Howard, III

Peter L. Mayer Aaron Mohanty Jay Moore Michael F. Moran John C Mullan William G. Obana \*Nezih Oktar Richard C. Ostrup \*Basant Pant \*Rizi Parvaresh Daniel L. Peterson \*Bhaskara M. Rao Lawrence Rapp Gregory Ricca Steven N. Roper

Allan G. Rosenfield Arnold G. Salotto \*Kumaravelu Selvakumar Clifford T. Solomon \*Krishnamurthy Sridhar James L. Stone \*G. Thiagarajan Alan R. Turtz Beverly C. Walters Benjamin C. Warf Jon D. Weingart Joel W. Winer \*Fumio Yamaguchi \*Chie Yamanaka \* International Members

# SURFING THE NET

#### The Basics

The World Wide Web refers to a unique of publishing text, images and sounds on the Internet. It allows a user to navigate the Internet with a mouse, eschewing the memorization of tedious and complicated commands and protocols, by using the Web, a user can bring to their computer screen an electronic document that is stored on a computer anywhere in the world. That document will likely contain text and images and will also contain an Internet cross-referencing system known as "Links". By clicking on that link with a mouse, the user can then view a document on a related subject. These documents are constructed using HyperText Markup Language or HTML (see below).

The Web is viewed using a "web-browser": a specific software application that is installed on the user's computer. Popular web-browers (known generically as clients) include Mosaic, Netscape, and Web-Surf. The browser contacts another computer over the internet to retrieve the HTML document. The contacted computer presents it to the browser using a "web-server" program. This is an example of basic "client-server" relationship, fundamental to the functioning of the Internet. This relationship uses the Hyper-Text Transfer Protocol (HTTP) to transfer the documents over the Internet.

The Preliminary Program for the 1995 meeting will be available on the Internet on the Neurosurgery Home page.

#### URL's and a Typical Session on the Web

When a user wishes to "surf" the Web,

the first step taken is to open the web-browser. In most cases, this is done by clicking on the icon for the browser and entering a "URL" (Universal Resource Locator). A URL is the means by which the web-browser will locate the file on the Internet and is usually written in the form: http://hostcomputer.site. domain/directory/file (e.g. http://sunsite. unc. edu/Neuro/Neuro.html). Most web-browsers have a bookmark or "hotlist" section that stores frequently visited URL's for easy access.

For example, there is a case known as "MB" on the UNC website describing a six-year old with a low grade glioma in the premotor cortex. If a user wanted to read about that case, the URL for the UNC site (http://sunsite.une.edu/Neuro/uncns/home.h tml) would be entered. The site is constructed with a case presentation section that is a link to the area containing that case. Once that case is located, the case history and all of the pertinent scans will be displayed on the user's screen. If the user wanted to store the case to their computer, they would use their web browser to perform that function.

#### Neurosurgical Sites on the Web

Several aeademic neurosurgical departments also host websites (see table). Most offer information on the department's faculty and housestaff, including their research and clinical interests. They also include reports of interesting cases, and educational material. Examples include case discussions of functional neurosurgery (NYU), material on neurogenetics and neurosurgical history (MGH) and an on-line resident's handbook (UNC).

#### **Getting Started**

For those with a direct Internet connec-

tion, using the web is as easy as obtaining a web-browser. These can usually be obtained by "FTP" (File Transfer Protocol) over the farernet itself or through computer and network offices at academic centers or private organizations. When choosing a webbrowser, one should be found that is "Formscompliant" and capable of interpreting HTML 3.0. A forms compliant browser will allow the user to enter text through the web browser to be sent over the Internet, HTML 3.0 (also known as HTML plus) is the latest version of HTML and enables the creation of documents that are more complex. This includes the construction of tables, mathematical formulas and the presentation of specific color schemes, unique to a website.

For those accessing the Internet through a modem, the internet provider should be able to establish a "SLIP" or "PPP" connection. This will require at least a 14,400 baud modem and will cost a bit more. However, it will allow for the transfer of images and full use of the web over a modem.

1: To subscribe to the Neurosurgery e-mail list, send the following message to listserv@unc.edu (place the message only on the first line and leave the subject line blank): subscribe neurosurgery first name last name (e.g. subscriber neurosurgery Harvey Cushing)

2: The coordinators of the Neurosurgery Internet project are: Richard Toselli, M.D. (toselli.nsurgery@mhs.unc.edu) or, David McKalip, M.D. ar (dmmckali@email.unc.edu) Division of Neurosurgery, CB #7060, 148 Burnett-Womack Clinical Sciences Building, The University of North Carolina at Chapel Hill, Chapel Hill, NC 27599 PH: 919-966-1374, FAX: 919-966-6627.

David McKalip, M.D.

### Neurosurgical Organizations on the World Wide Web and their URL's (Summer, 1995)

http://www.neus.ccf.org/ Department of Neurological Surgery Cleveland Clinic Foundation

http://cpmcnet.columbia.edu/dept/cerebro Cerebrovascular Center of the Neurological Institute Columbia University

http://www.dote.hu/dote/dept/neusurg.htm Department of Neurosurgery, Medical University of Debrecen, Hungary

http://hel.uns.tju.edu:80/neuro/ The Neuroimplant Program Jefferson Medical College http://neurosurgery.mgh.harvard.edu/ The MGH Neurosurgery Homepages

http://mcns10.med.nyu.edu/ NYU Neurosurgery

http://pc013.neurosurg.nemc.org/ Tufts Neurosurgery

http://neurosun.medsch.ucla.edu/ Division of Neurosurgery UCLA

http://www.uic.edu/depts/mcns UIC Neurosurgery University of Illinois Chicago http://sunsite.unc.edu/Neuro/uncns/home.html// Division of Neurosurgery Homepage University of North Carolina at Chapel Hill

http://www.neuronet.pitt.edu/ NeuroNet University of Pittsburgh

http://www.usc.edu/hsc/neurosurgery/ USC Neurosurgery

http://bmes.mc.vanderbilt.edu/neursurg.htm Vanderbilt Neurosurgery

http://navajo.neuro.virginia.edu/ Neurosurgical Visualization Laboratory Home Page Virginia Neurological Institute

### Residents' Corner

#### **Annual Meeting**

The 1995 Annual Meeting will be held in San Francisco, California. Surfing the Net? Check out the Bay Area Online Homepage located at (http://emerson.net-media.com:80/IMS/bao/ba\_online.html). It lists over 1200 restaurants, and 138 interesting places to visit including histori-

cal sites, museums, and others. Be warned, this city can steal your heart.

In addition to a great location, this years' planning committees have put together an outstanding scientific program. Dr. John Jane, Professor and Chairman of Neurosurgery at the University of Virginia is this year's honored guest. Dr. Jane has contributed extensively to our knowledge of the pathophysiology and management of head trauma and congenital cranial deformities.

In addition to his three special lectures during the general scientific sessions, Dr. Jane will address the Annual Resident Luncheon.

Registration for the Annual Meeting, Opening Reception and Annual Resident Luncheon are free to Resident Members of the CNS. The costs of Luncheon Seminars and many other activities at the meeting are also substantially reduced for Resident Members. Start making your plans to attend now.

# **CNS Clinical Fellowships**

Interested in applying for the CNS Clinical Fellowship? Two Clinical Fellowships are awarded each year to Resident Members of the CNS. These fellowship grants, up to a maximum of \$10,000 dollars each, are intended to support clinical rotations for three to six month periods during or immediately after residency training. The grants provide an opportunity for advanced clinical training throughout the world. They are not intended to supplement formal postgraduate fellowships. Awards are available to all active resident members of the CNS who have completed at least three years of Neurosurgical Training.

Applications for the 1996 CNS Clinical Fellowship Award will be accepted until January 15, 1996.

#### Postgraduate Subspecialty Fellowships

Interested in postgraduate subspecialty fellowship training. Remember most programs fill their positions two years in advance, so contact program directors early in your 3rd or 4th year of training. To help, the CNS has assembled a directory that provides a comprehensive listing of the clinical subspecialty fellowships available at Neurosurgical training

#### Awards for the 1995 CNS Clinical Fellowships were recently announced.

Our congratulations to both of this year's recipients. This year's recipients are:

#### JASON A. BRODKEY, MD

A 5th year resident at the University of Tennessee (\$10,000.00) who will use the fellowship to study the management of patients with chronic pain and movement disorders with Dr. Ron Takser at the University of Toronto.

#### FOTIOS D. VRIONIS, MD

A 4th year resident at Tufts-New England Medical Center (\$10,000.00) who will use the fellowship to study skull base surgery with Dr. Jon Robertson at the University of Tennessee.

programs in the United States and Canada. The updated 1995-1996 directory list 132 fellowships along with the information you need to apply. Copies of the CNS Subspecialty Fellowship Directory are available free to all CNS members through the Resident Membership Office.

#### Resident Membership

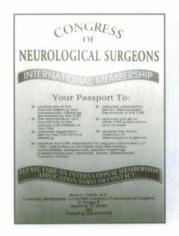
If you're not already a resident member of the CNS, it's easy to join. For a small, one-time fee of \$25, you receive all the benefits of Resident Membership including; special reduced subscription rates to NEUROSURGERY (the CNS's monthly scientific journal), free CLINICAL NEUROSURGERY (containing the papers presented at the general scientific sessions of each Annual Meeting), free CONCEPTS IN NEUROSURGERY, free registration at the Annual Meeting, free participation in

the Annual Honored Guest Luncheon, free Practice Placement Assistance, and eligibility for the CNS Clinical Fellowship Awards.

Resident Membership also gives you access to involvement in all CNS Committees. Want to get help with this years meeting? A good place to start is as a member of the Sergeant-at-Arms or Registration Committees. Interested? Write with your preferences and we will forward your letters to the appropriate committee chairman.

For further information on any of the above items, or an application for CNS Resident Membership, contact:

Joseph M. Zabramski, M.D., Chairman,
CNS Resident Membership Committee
Barrow Neurological Institute
350 West Thomas Road • Phoenix, Arizona 85013
Fax No. (602) 264-2417
email addr: jzabra@mha.chw.edu



# Help Spread the Word

The International Committee is currently campaigning to recruit more overseas based neurosurgeons as international members of the CNS. Greater participation by international members will enhance the profile of the CNS, improve education of neurosurgeons across the continents, and give new opportunities to exchange ideas and ultimately benefit all neurosurgeons and their patients.

We have designed an eye-catching poster that can be displayed at meetings overseas. Both poster and applications can be carried in a standard sized cylinder and either returned to us or disposed of at the end of the meeting. We are seeking the assistance of anyone attending an overseas meeting who would be willing to take a poster for display. The size and location of the meeting is inconsequential. Indeed, as most of the larger meetings will be well attended by CNS members, we particularly need help with the lower profile meetings. Those willing to help, please contact:

Charles Teo, M.D. ● 501-320-1448
Arkansas Children's Hospital ● Department of Neurosurgery
800 Marshall Street ● Little Rock, AR 72202



# 1996 VAN WAGENEN FELLOWSHIP APPLICATIONS

In July 1995, The AANS will be accepting applications for the 1996 Van Wagenen Fellowship. The Fellowship application is available to any neurosurgical resident in his/her last year of training who is a citizen of any North American country. The fellowship requirements include that this continued training take place outside of the North American continent for a period of not less than six months. Deadline for submission of applications is November 30, 1995.

Applications will be mailed to all neurosurgical residents whose residency training ends in 1996. Additional applications may be obtained via faxed request to: Chris Ann Philips, AANS Grants Coordinator, at (708) 692-2589.

# WOMEN IN NEUROSURGERY

The Spring Meeting of WINS was held on Tuesday, April 25, 1995, during the American Association of Neurological Surgeons meeting. The highlight of our meeting was our special lecture by Mr. Greg Schooler, who spoke on negotiating skills in contracts and career planning. The lecture was felt to be quite beneficial to all neurosurgeons and particularly to the

# 1996 YOUNG CLINICIAN INVESTIGATOR AWARD

The Research Foundation of the American Association of Neurological Surgeons (AANS) is accepting applications to grant support for young faculty who are pursuing careers as clinician investigators. Applicants must be neurosurgeons who are full-time faculty in teaching institutions and in the early years of their careers. The purpose of the Award is to fund pilot studies that could provide preliminary data that may be used to strengthen applicants for more permanent funding from the National Institutes of Health (NIH) or other sources.

The Award of \$40,000 will be provided for one year starting July 1, 1996.

Deadline for application submission is November 30, 1995. Notices of Award will be made in February 1996.

Applications will be sent to all program chairmen in July 1995. Additional applications may be obtained via faxed request to: Chris Ann Philips, AANS Grants Coordinator, at (708) 692-2589.

young members who attended the lecture who are just beginning to launch their careers and negotiate contracts.

Other points of interest, WINS Organization is now in the process of creating an annual research award in the form of a travel scholarship, which will be awarded to the individual who submits the best abstract in a yearly competition of research devoted to neurosurgery and/or women's health issues. The Research Award/Travel Scholarship has been in part to the generous contribution of Medtronics, Inc. WINS also had the

#### 1996 RESEARCH FELLOWSHIP

The Research Fellowship, funded by the Research Foundation of the American Association of Neurological Surgeons, is designed to provide research training for neurosurgeons who are preparing for academic careers as clinician investigators. Applicants must be MDs who have been accepted into, or who are in, an approved residency training program in neurological surgery.

The fellowship is awarded for two years beginning July 1, 1996 at \$35,000 per year.

Since one purpose of the Foundation is to encourage young neurosurgeons to develop skills as investigators, the lack of earlier experience in research programs will not necessarily be disadvantageous to an applicant.

Deadline for application submission is November 30, 1995. Notices of Award will be made in February 1996.

Applications will be sent to all program chairmen in July 1995. Additional applications may be obtained via faxed request to: Chris Ann Philips, AANS Grants Coordinator, at (708) 692-2589.

opportunity to participate in the presentation of the History of Women in Neurosurgery at the ANS and has been asked to present this at the American Medical Women Association.

Our upcoming Annual Meeting will be held on October 17th, during the Congress of Neurological Surgeons Annual Meeting in San Francisco. Our guest speaker will be Joan Cassell, Ph.D., who will speak on Leadership Skills for Women Surgeons and the Strengths of a Woman Surgeon.

Lucy Love, M.D., President

#### NOTICE OF CENSURE

At its 1995 Winter Meeting, the Executive Committee of the CNS approved the recommendation of the Professional Conduct Committee that a Wisconsin neurosurgeon be given a letter of censure for unprofessional conduct in connection with his deposition and trial testimony in a medical malpractice case. The Executive Committee concluded that the neurosurgeon's testimony... that the occurrence of anterior perforation of the disc space and laceration of an iliac vessel is, in and of itself, a digression from normal neurosurgical practice and the

result of substandard medical care, failed to represent the broad spectrum of neurosurgical thought and practice in the matter at issue, required by the recognized professional standards. Furthermore, the testimony did not indicate that the opinions expressed were either the personal views of the witness, minority views within the profession, or even that differing viewpoints existed, which the Executive Committee found to be misleading and unprofessional.

The newsletter plans to begin an "On the Move" section for Neurosurgeons relocating and changing position. Please submit your changes to Linda Sternau via fax at: 305-547-5588.

The 1995 annual meeting will again feature "Breaking News" for significant clinical or research discoveries. Please contact Dr. Steven Papadopoulos, scientific meeting chairman via fax @ 313-936-9294.



### JOINT SECTION ON DISORDERS OF THE SPINE AND PERIPHERAL NERVES

At the February meeting, Simcha J. Weller, M.D., Harvard Medical School, was announced as the 1995 Mayfield Award winner by the Joint Section on Disorders of the Spine and Peripheral Nerves of the American Association of Neurological Surgeons and the Congress of Neurological Surgeons. The Joint Section Spine Fellowship recipient was John R. Hurlbert, M.D., University of Toronto.

Dr. Weller presented his work on Expression of the neuronal growth associated protein GAP-43 is unregulated following experimental spinal cord injury in the rat, and is augmented by local administration by interleukin-6. Dr. Hurlbert will continue his spine and

peripheral nerve related research during his post graduate fellowship year at Barrow Neurological Institute in Phoenix, Arizona.

For information regarding the 1996 Joint Section Spine Fellowship and Mayfield Awards, contact: Dennis G. Vollmer, M.D., 660 South Euclid, Washington University School of Medicine, Department of Neurosurgery, Box 8057, St. Louis, MO 63110. PH: (314) 362-3580. The Mayfield Award(s) consists of a \$500 honorarium, a plaque, travel, and lodging for the annual meeting of the Joint Section.

Gary L. Rea, M.D., Ph.D.

### JOINT SECTION ON TUMORS

There are three awards currently given by the Joint Section on Tumors at each section meeting. Two of them require special application: the Preuss Resident Research Award, which provides \$500 plus expenses to the resident who identifies himself or herself as such in the special abstract form required for the meeting; and the new Young Investigator which provides \$1,000 for a neurosurgeon attending six years or less from his or her residency. The form for this has gone out as part of the AANS meeting materials.

There are also two prizes which are selected by committees without application by the awardee. The Mahaley Award, now sponsored by the National Brain Tumor Foundation, provides \$500 to the best clinical paper given at the section meeting. The Farber Award, a substantial prize of \$15,000, is given to an established worker in neuro-oncology. These are selected by an AANS committee chaired by Charles Wilson, and are presented at the AANS meeting.

Peter M. Black, M.D., Ph.D.

### JOINT SECTION NEUROTRAUMA AND CRITICAL CARE

In conjunction with the 1995 CNS meeting in San Francisco, the JSNTCC will feature a symposium on "Limits of Salvagability". With the ever increasing limitations being imposed by healthcare reform, it is important to explore whether the current state of neurosurgical knowledge will allow for discrimination of those patients with limited chance of survival, in spite of aggressive interventions. Individual presentations will focus on closed head injury, gunshot wounds, and ethical/medicolegal implications.

Applications for the 1996 Brain Trauma Foundation Research Fellowship will also be available at the CNS meeting. This competitive fellowship will award \$50,000 for one year of clinical/basic research in the fields of neurotrauma and/or critical care. The fellowship is open

to any neurosurgical resident or neurosurgeon within two years of completing their training. Deadline for receipt of completed applications is December 15, 1995. Applications are currently available through the Brain Trauma Foundation at (212) 753-5003.

The Spinal Cord Injury Committee of the JSNTCC will meet in San Francisco to develop final plans for the "Multicenter, Randomized Trial of Early vs. Late Surgical Intervention force Decompression after Acute Spinal Cord Injury". A submission for funding from the NIH will be forthcoming. Any interested JSNTCC members are encouraged to attend.

Jack Wilberger, M.D.

### JOINT SECTION ON STEREOTACTIC & FUNCTIONAL NEUROSURGERY

The Joint Section on Stereotactic & Functional Neurosurgery convened in conjunction with the AANS meeting in Orlando. At that time, officers for the next two year term were elected: Dr. L. Dade Lunsford will serve as President, Dr. David Roberts as Vice President, and Dr. Philip Gildenberg as Secretary/Treasurer of the AANS Joint Section. In addition, the American Society of Stereotactic and Functional Neurosurgery held its quadrennial meeting at Marina Del Rey, California, under the leadership of Dr. Michael L.J. Apuzzo. More than 220 registrants attended this internationally important meeting. Presentations were made on molecular, image guided, and radiosurgical techniques.

The Joint Section will sponsor an annual Resident's Award paper at the meeting of the Joint Section in conjunction with the AANS. At both the CNS and the AANS meetings, a one hour symposia will be sponsored. In 1995, the Congress meeting will be held with a symposium entitled "MRI Stereotactic Surgery: The Good, The Bad and the Ugly". At the AANS meeting in 1996, a symposium on "Stereotactic Driven Surgical and Microscope Systems" will be presented.

The role of the Joint Section on Stereotactic & Functional Neurosurgery includes education, research, and evaluation of all forms of all image guided neurosurgery, including that involving stereotactic guiding devices, frameless stereotactic systems, functional neurosurgery, and radiosurgery.

L. Dade Lunsford, M.D.

### JOINT SECTION OF CEREBROVASCULAR SURGERY

#### Fall CNS Meeting Program:

The fall program for the Joint Section of Cerebrovascular Surgery will tackle the topic of cavernous malformations. With the advent of magnetic resonance (MR) imaging cavernous malformations have gone

from obscure, reportable lesions to one the most common vascular malformations seen in referral by the Neurosurgeon. Autopsy and screening studies with MR imaging have confirmed that these lesions affect approximately 0.4% of the population, or roughly 1 in every 250

individuals. Approximately 60% of patients seen in referral are symptomatic, with seizures being the most common presentation supratentorially while focal neurological deficits from mass effect predominate in the posterior fossa and brain stem. Recognition of the increasing clinical importance of these lesions has lead to extensive research and an explosion in our understanding of their biology, genetics, and natural history. The surgical management of these lesions, has also undergone significant evolution, particularly for those lesions involving the brain stem and deep subcortical white matter.

With this information as background, the program committee concluded that an update on cavernous malformations might well be useful to our membership. A special one hour program has been assembled and will feature Dr. Robert Ojemann as senior surgeon discussing operative indications and techniques. Dr. Ojemann's well recognized expertise in the surgical management of seizure disorders should be of particular interest with regards to these lesions. Dr. Issam Awad will address the biology of these lesions and Dr. Joseph Zabramski will review the advances in genetics and natural history. Case presentations and an open forum with the speakers will conclude this section of the program.

In addition to this update, the scientific program will include the presentation of 10 outstanding papers in the area of cerebrovascular research. Clinical and laboratory research projects are evenly represented and should make for an interesting session. The Joint Section Programs are open to all meeting registrants. Why not make plans to join us on Wednesday afternoon.

Joseph Zombromski, M.D.

#### About the San Antonio Meeting—San Antonio, Texas January 23-25, 1996, Marriott River Center

This represents the first scientific meeting of the Joint Section of Cerebrovascular Surgery of the AANS and the CNS, and would be dedicated to issues of professional and scientific interest to cerebrovascular surgeons. The meeting will immediately precede and share hotel venue with the International Stroke Conference of the American Heart Association. It is hoped that many neurosurgeons will stay to attend the Stroke Conference, increasing our representation and participation in that multi-disciplinary cerebrovascular scientific forum. Conversely, we are also hoping that colleagues from neurology, interventional neuroradiology, and others will also attend our meeting, most notably the Thursday morning session which will be dedicated to carotid surgery and brain ischemia. Separate registration categories will be provided for neurology colleagues who are attending the Stroke Conference, and who wish to attend this Thursday morning session.

Abstract forms will be mailed to neurosurgeons, and to specialists in vascular neurology and interventional neuroradiology, and will be enclosed in the summer issue of the Joint Section on Cerbrovascular Surgery Newsletter. Other abstract forms may be obtained by contacting the AANS meetings office (PH: 708-692-9500/FAX: 708-692-2589) or Dr. Awad's office, Chairman of the Organizing Committee (PH: 203-737-2096/FAX: 203-785-6916).

The abstract deadline is September 15, 1995. The Abstract Review Committee will include Drs. Christopher Ogilvy of the Massachusetts General Hospital and Gary Steinberg of Stanford University. Oral presentations will be selected according to the individual categories of the respective scientific sessions. Meritorious posters will be selected for presentation, and ample time will be provided for poster viewing and mingling with the exhibitors. Abstracts which have been submitted for consideration of presentation at the American Heart Association Stroke Conference (immediately following our meeting) may also be submitted for consideration of presentation at the Cerebrovascular Surgery Meeting. Those abstracts which are selected for oral or poster presentation at the Stroke Conference will not be further considered for presentation at the Stroke Conference will be reviewed for possible presentation at the Cerebrovascular Surgery meeting.

A number of invited presentations by leading specialists in the field have also been arranged. These will summarize the "current state of the art" and provide a broad survey of the literature and current controversies. These brief invited presentations will set the tone for the open abstract sessions on the respective topics? There will be luncheon discussion groups covering a number of topics, and which are held simultaneously on Wednesday, allowing ample time for interaction with selected consultants on focused topics.

The Organizing Committee of the 1996 Annual Meeting of the Joint Section on Cerebrovascular Surgery is extremely enthusiastic about hosting you in San Antonio, and looks forward to your active participation in this first dedicated meeting of our Section.

Please contact Laurie Behncke for a brief promotional paragraph about San Antonio, the Marriott River Center, and a photograph.)

#### **Membership Drive**

The membership drive is currently in its second year, having succeeded at increasing Joint Section membership by 25% in all categories. A particular effort was undertaken to ensure all neurosurgeons with special interest and expertise in cerebrovascular surgery are aware about our Section, its mission, and the benefits of membership. We have also reached out to colleagues in vascular neurology and interventional neuroradiology. There is currently representation from these groups on the Executive Council of the Joint Section on Cerebrovascular Surgery, and a broad inter-society liaison committee tackling professional and scientific issues crossing specialty lines.

Membership categories include Active, which is offered to neurosurgeons who are members of the AANS or CNS and who have demonstrated through their training, practice, or academic work a special interest and/or expertise in cerebrovascular surgery. Candidate membership is offered to resident members of either the AANS or CNS, and to those with candidate membership in either organization. Adjunct Associate membership is open to non-neurosurgeon colleagues with interest in cerebrovascular disease and who work closely with cerebrovascular surgeons, including neurologists, interventional neuroradiologists, and basic scientists.

The Membership Committee includes Issam Awad (Membership Chairman), Christopher Ogilvy, Gary Steinberg, Daniel Rigamonti, and Neil Martin. Each may be contacted for membership forms and information. Final processing of all applications is performed through the office of the Membership Chairman, may be contacted at: PH: 203-737-2096 or FAX: 203-785-6916.

Dr. Robert Rossenwasser has recently been invited to join the Executive Council of the Joint Section as an ex-officio member with the special charge of increasing membership among endovascular colleagues. Dr. Rossenwasser's efforts will greatly enhance our membership drive.

The Joint Section on Cerebrovascular Surgery is dedicated to promoting and ensuring the advancement of knowledge in the field of cerebrovascular surgery. It is the sole professional organization and learned society dedicated to this field of neurological surgery, and to the promotion of ideas, interests and information relevant to neurosurgeons engaged in this field. The Joint Section serves as a responsible body, representing this field and advising the Board of Directors of the AANS and the Executive Committee of the CME of activities, opportunities, problems and challenges in this area of neurological surgery. Membership in the Joint Section allows active participation in the scientific and professional forces shaping this subspecialty, and pro-active involvement in the response to ongoing challenges. Members participate in a number of scientific and CNS efforts, and in numerous special projects and task forces undertaken by the Joint Section. The dedicated Newsletter provides an open forum and an informational medium for all members. Neurological surgery needs the active involvement and leadership of all surgeons with interest in cerebrovascular surgery, and we call upon all of you to enhance membership in our Joint Section, and to participate in every facet of Joint Section activities. Issam Awad, M.D.

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William A. Friedman, M.D.
University of Florida • Health Science Center
P.O. Box 100265
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Dedicated to Neurosurgical Education John M. Thompson, MD 2000 BLOSSOM WAY SOUTH SAINT PETERSBURG, FL 33712-6014



