

## PRESIDENTIAL ADDRESS

### The Congress of Neurological Surgeons: Past, Present, and Future

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Many millenniums ago some members of the *Homo sapiens* species learned that it was possible to open the skulls of other members. The instruments were crude, and the mortality was high. However, this was not the dawn of neurological surgery. The instruments consisted of clubs, rocks, and stone hatchets; and the motives were to kill or maim rather than to preserve life or improve function. Some *Homo sapiens* seeking a better knowledge of God became priests, and many of these priests also became judges and physicians, as they considered that law and medicine, quite as much as theology, were of divine origin (4). These priest-physicians sought spiritual healing, but also realized that it was only proper to utilize the advances of science in helping their fellow men. One of these advances was trephination of the skull. Historians report that trephination of the skull was frequently performed 10,000 years ago in Western Europe and in Bohemia (4). It is likely that these operations were carried out with the idea of helping the patient, thus representing the dawn of neurological surgery. It is probable that some physicians became quite skillful in trepanning, and even likely that thousands of years ago there were physicians who specialized in neurological surgery. We know that there was considerable specialization in Egypt. The Egyptians recorded the word "brain" for the first time almost 5,000 years ago (4). Egyptian writings describe internists, ophthalmologists, gastroenterologists, and head physicians. The proctologists apparently enjoyed great esteem, being referred to as "the shepherds of the anus" (4).

█ The Greeks made great advances in neurological surgery. Hippocrates trephined for skull fractures, epilepsy, blindness, and headaches (10). Interestingly, he recognized the entity—epidural hematoma.

During the Middle Ages there was considerable deterioration in the art of surgery. Physicians retreated and barbers advanced, annexing the declining art of surgery. However, with the Renaissance in Europe, there arose in the College de St. Come a group of educated surgeons who, after studying medicine and philosophy, took a 2-year course in surgery (10). Wishing to distinguish themselves from the barber surgeons who wore short robes, these educated surgeons wore long robes. We can thus see that the battle between the maxi and the mini was not started by women, but rather by men hundreds of years ago. It is fortunate in more ways than one that the

"Surgeons of the Long Robes" eventually replaced the surgeons of the short robes, as male knees though functional are not objects of beauty.

Modern neurological surgery is based upon the validity of the principle of cerebral localization, demonstrated experimentally by Fritsch and Hitzig (3) and also by Ferrier (2). However, the medical profession was somewhat reluctant to accept brain surgery, and this reluctance is illustrated in an editorial appearing in *Lancet* November 10, 1883: "It is somewhat humiliating that so great an increase in one branch of diagnosis should be of little practical avail for therapeutic purposes. If Dr. Ferrier's suggestion met with much practical response, it is to be feared that cerebral localization will soon have more deaths to answer for than lives to boast of" (9).

Neurologists early recognized the advantages of specialty societies, and the New York Neurological Society was founded in 1872; by 1874 it had 48 active members. The American Neurological Association was founded in 1874, and the London Neurological Society was founded in 1886 (9). It was almost 50 years after the neurologists formed their first specialty society that the neurological surgeons established the Society of Neurological Surgeons in March 1920, founded by 11 neurosurgeons meeting in Boston. The number of neurosurgeons increased, and many of these younger neurosurgeons keenly felt the need for professional contact with their neurosurgical colleagues in order to increase their knowledge and keep up with the rapid advances in neurological surgery.

On October 10, 1931, Drs. Temple Fay, Eustace Semmes, Glen Spurling, and W. E. Van Wagenen met in Washington, D.C., to plan a new society (1). Dr. Fay suggested the name "Harvey Cushing Society" after Dr. Cushing expressed his approval of the formation of the new group and invited them to hold their first meeting at his clinic in Boston. Thirty charter members were chosen for the Harvey Cushing Society, and the first meeting was held in Boston on May 6, 1932. At the beginning the purpose of the society was the promotion and advancement of the various fields of organic neurology, including neurological surgery, neurology, neuroanatomy, neuroophthalmology, neuropathology, and roentgenology. It was felt that a small group was desirable in order to allow an exchange of ideas, so membership was limited to 35. It is of interest that, when he welcomed this society to his clinic, Dr. Cushing remarked that in another 10 years another neurosurgical group would be formed which would look upon the Harvey Cushing Society as senile and antiquated. At the time of the 1937 meeting of the Harvey Cushing Society in Philadelphia, there was much discussion about the size of the society, and the suggestion was made that active members be retired after 7 years but be allowed to attend meetings and to dine as senior members. Dr. John Fulton, who was then President of the Harvey Cushing Society, did not favor the suggestion, and it was never adopted (1).

Dr. Cushing's suggestion that another neurological society would be established in 10 years proved to be somewhat conservative, as in 1938 in Memphis, Tennessee, seven frustrated young neurosurgeons, who were not then elected to membership in the Harvey Cushing Society, organized the American Academy of Neurological Surgery (5). The Academy vowed to keep the doors of the new organization open to newcomers, but the need for close fellowship and education caused this group eventually to restrict membership. There again developed a group of frustrated young neurosurgeons who did not belong to any pre-existing national neurosurgical societies. It was inevitable that another national neurosurgical organization would be founded, and this took place in June 1948, when the Neurosurgical Society of America was founded in Chicago. This group also chose a restricted membership as a way to facilitate the exchange of knowledge. The Harvey Cushing Society had expanded into a neurosurgical organization of national scope, and by 1949 there were 188 members in this society. However, young neurosurgeons who had recently completed their formal training still felt the frustration of not being able to join a national neurosurgical society.

In September 1950, several neurosurgeons met at Sea Island, Georgia, and discussed the possibility of forming a new national neurosurgical society. In February 1951, at the meeting of the Southern Neurosurgical Society in New Orleans, these young neurosurgeons again discussed the desirability of forming a new national neurosurgical society. Just after the Interurban Neurosurgical Society meeting in Chicago, nine neurological surgeons met in a room at the Palmer House in Chicago on February 24, 1951, to discuss in more detail the formation of the new society. This meeting was attended by Drs. Floyd S. Barringer, Bland W. Cannon, James R. Gay, Louis J. Gogela, Nathaniel R. Hollister, Wilber A. Muehlig, David B. Roth, Elmer C. Schultz, and Emil P. Thelan. Dr. Cannon was appointed chairman pro tem, and Dr. Gay was appointed secretary pro tem. This group decided to hold an organizational meeting on May 10, 1951, just after the examinations of the American Board of Neurological Surgery. Letters were sent out to approximately 50 neurosurgeons inviting their suggestions about the formation of a new neurosurgical society. This letter explained that the proposed new neurosurgical group had no intention of competing with the existing neurosurgical societies. On May 10, 1951, 22 young neurosurgeons met at the Jefferson Hotel in St. Louis, Missouri, to found this new neurosurgical society. The name "Congress of Neurological Surgeons" was selected, and the initial draft of a constitution was discussed. The basic concepts embodied in the constitution were that there was to be no limitation of membership and that the membership was to be international in scope. The Congress would be an association of neurosurgeons to study and discuss the principles of neurological surgery, to study



developments in scientific fields allied to neurosurgery, and also to honor living leaders in the field of neurological surgery. Dr. Elmer C. Schultz was elected president, Dr. Carrol A. Brown was elected vice-president, and Dr. Bland W. Cannon was elected secretary. It was decided that the first scientific meeting would be held in Memphis, Tennessee. Committees were appointed, and the enthusiastic members of the Congress worked hard and long to ensure the success of their first annual meeting. The 11 members of the Steering Committee were asked to donate \$50 each to the Congress, to provide funds to meet expenses until the time of the first annual meeting. The Congress will forever owe a debt of gratitude to these men for subsidizing the Congress at such a critical period in its history. The dues of the Congress were set at \$25 a year, and we are proud of the fact that in spite of almost 20 years of inflation the dues have not been increased. We have been able to keep the dues the same only because so many of our members have given a great deal of time to the activities of the Congress.

By August 30, 1951, the Congress had 69 members and was already an international organization with active members in the United States, Canada, Mexico, Chile, and Cuba.

The first annual meeting of the Congress was held at the Hotel Peabody in Memphis, Tennessee, from Thursday, November 15, to Saturday, November 17, 1951. At this time there were 121 members. The legal adviser, Mr. Dunlap Cannon, Jr., prepared the charter for the Congress, and the Congress was incorporated in the State of Tennessee on November 15, 1951. The first paper on the scientific program was "Diagnosis of Brain Tumor with Plain Roentgenograms of the Skull" by Dr. Earnest Harvey Wood. This meeting was attended by 63 members, 17 guests, and 9 guest speakers. A review of the schedule of fees for this meeting reveals the extent of inflation which has taken place since 1951. Luncheon tickets sold for \$2.50 per person, and banquet tickets were \$5.

A ladies' auxiliary was organized at this meeting in Memphis, and the Auxiliary of the Congress of Neurological Surgeons has continued to play an important role in the Congress. The Auxiliary has been to the Congress what our wives have been to us.

The founders of the Congress felt strongly that the scientific program at the annual meeting should consist of papers presented by invited experts, who were noted not only for their research ability but also for their ability to teach. Although the major portion of the programs has been clinically oriented, some consideration also has been given to the basic neurological sciences. The Seminars in Fundamental Neurological Surgery, which have enjoyed considerable popularity, have been conducted immediately prior to the main scientific program within recent years, demonstrating the interest which the Congress members have in the fundamental neurological

sciences. It is recognized that most of the members of the Congress are practicing neurological surgeons, and the scientific program committees through the years have organized excellent programs filled with information that a neurosurgeon can use to improve his practice.

Although it is not my purpose to review the history of this organization in detail, I would nevertheless like to touch on a few historical highlights:

The Executive Committee authorized publication of the Congress Newsletter in February 1952, and Dr. Roy Tyrer was appointed its first editor.

Professor Herbert Olivecrona was the first honored guest of the Congress at the second annual meeting of the Congress, held at the Palmer House, Chicago, in November 1952.

In November 1953, the Executive Committee authorized publication of *Clinical Neurosurgery*. Dr. Raymond K. Thompson was the first editor-in-chief.

Following the 1953 meeting in New Orleans there was a Post-Convention Tour to Cuba, under the direction of Dr. Jorge Picaza.

The Congress seal was officially adopted in November 1954.

In June 1956, the Executive Committee authorized the chairman of the Survey Committee, Dr. John R. Russell, to publish a *Directory of Neurological Surgeons in the United States*. Published annually, this directory has been of great help to U.S. neurological surgeons.

In 1966 and 1967 the Congress published its first *World Directory of Neurological Surgeons* with Dr. George Ablin as Editor. In 1969 and in 1970 he also edited the second edition. This Directory demonstrates the international interest of the Congress, and we all owe a debt of gratitude to George.

In 1962 the Congress published *Disability and the Law* which was edited by Dr. George C. Manning. In 1966, the Socio-Economic Committee of the Congress under the Chairmanship of Dr. Edward Bishop, published the *Tabulation of Results of National Neurosurgical Fee Survey*. This has probably become the most widely used neurosurgical book ever published. The Utilization Guidelines Committee of 1968 under the chairmanship of Dr. Walter S. Lockhart, Jr. prepared a manual, *Neurosurgical Hospital Utilization Guidelines*, which was published by the Congress in 1969. This book probably will be used extensively by neurosurgeons in the future.

The Congress always has been very interested in neurosurgical residents, and in May 1958, the Executive Committee authorized the expenditure of Congress funds to provide free lodging for residents attending the meeting. Residents are now invited to present papers during the Member Participation Program. Resident luncheon tickets have been graciously donated by several of our major commercial exhibitors; thus, residents have been able to attend Congress meetings for much less than the usual cost of such a major meeting.

The Congress was founded as an international neurosurgical society and its history in relation to international neurosurgery is impressive. In June 1963, Dr. Roy Tyrer made a trip to India and laid the groundwork for the participation of Congress volunteers in the neurosurgical programs in India. In July 1963, the Executive Committee authorized a plan to send volunteer neurosurgeons there to assist in teaching programs. Many Congress members have been volunteers, not only teaching neurosurgery, but also learning much neurosurgery from our Indian colleagues and contributing greatly to international understanding.

Dr. William Mosberg, who is the Congress representative on the Advisory Board of Care-Medico, has earned the esteem of his colleagues on this board. He has traveled the world and has visited every Care-Medico installation except the one in Honduras. On a recent trip to Indonesia, he noted that the Indonesian neurosurgeons have relatively few books or journals. As the result of Dr. Mosberg's report, the Congress has donated a complete set of *Clinical Neurosurgery* to the Indonesian neurosurgeons. These volumes will be kept at a library in Djakarta.

The Congress actively supported the formation of the Foundation for International Education in Neurological Surgery. The Congress is a member society of the World Federation of Neurological Societies and participates actively in its International Congresses.

The Congress was invited to have a representative on the American Board of Neurological Surgery and on the Board of Governors of The American College of Surgeons. Dr. Richard DeSaussure and Dr. John Shillito, Jr. were appointed, respectively.

I believe it has been demonstrated that the Congress has accomplished much in the past 20 years. It is only fitting that we also should look at the present. This anniversary meeting in St. Louis is the largest meeting in the history of the Congress, with a total registration of 1262, including 430 members, 103 guests, 207 residents, and 259 wives. Approximately 34 per cent of the total active membership is in attendance at this meeting. You have had an opportunity to see the many committees of the Congress in action.

The largest neurosurgical society in the world, the Congress of Neurological Surgeons now numbers 1260 members in all 50 states of the United States, 7 Canadian Provinces, and 28 other nations in every continent on the planet Earth except Antarctica. It can be truly stated the sun never sets on the Congress of Neurological Surgeons.

I feel at this point it is important to emphasize that the Congress is not competing with any other neurosurgical society. The Society of Neurological Surgeons is the senior neurosurgical society, and we have great admiration for the select group of neurosurgeons. As President of the Congress of



Neurological Surgeons, I was invited to attend the Golden Anniversary Meeting of the Society in Boston in April. This morning's panel discussion moderator, Dr. William H. Sweet, was the President of the Society of Neurological Surgeons for the Boston meeting. The scientific program was excellent, the social program was delightful, and the hospitality was warm. On behalf of the Congress, I would like to thank the Society for including us in its Golden Anniversary Meeting.

I also have had an opportunity to attend several meetings of the Neurosurgical Society of America as a guest. This Society, as well as the American Academy of Neurological Surgeons, also has high quality scientific programs and warm fellowship.

Some neurosurgeons believe that the Congress competes with the American Association of Neurological Surgeons, which many of us still fondly refer to as the Harvey Cushing Society. The Congress would have to be completely schizophrenic to compete, as most Congress members also belong to the American Association, *every* member of its Executive Committee is a member of the Association, and the President-elect of the Congress, Dr. Donald F. Dohn, is on the Association's Board of Directors. The Congress and the A.A.N.S. cooperate on many joint committees. The Congress does not compete; it tries only for excellence.

We have looked at the past, and we have looked at the present. It is now time to look to the future. For many of you, the future will start this evening. Approximately 50 participants in the Post-Convention Scientific Sessions will leave for a delightful resort on the Lake of the Ozarks. If you enjoy warm fellowship, intimate neurosurgical discussions, and an opportunity to spend more time with your wife, you owe it to yourself to plan to attend a Post-Convention Session in the future.

The Congress will celebrate its Golden Anniversary in the year 2000. According to the projected membership growth prepared by a recent Long Range Planning Committee, the Congress is expected to have 3,913 members at that time, and it is anticipated that we will have 2,175 neurological surgeons attending our scientific sessions. We will require almost 2,000 hotel rooms. I hope all of you will plan to attend our Golden Anniversary Meeting, and please make your reservations well in advance, as our estimate of 2,000 rooms might prove to be too conservative.

The residents attending the meeting today represent the future of the Congress, and, from what I have seen of the residents during this meeting, the Congress will be in excellent hands.

It would seem that a quotation from Sir William Osler would be appropriate at this time: "Superfluity of lecturing causes ischial bursitis" (7). Sir William Osler had a keen insight, and was not only a physician, but also a philosopher. I imagine that most of you have read Osler's *A Way of*

*Life* (6). You will recall that Sir William inscribed in his own copy of this book a poem from the Sanskrit—

The Salutation of the Dawn

Listen to the Exhortation of the Dawn!  
 Look to this Day!  
 For it is Life, the very Life of Life.  
 In its brief course lie all the  
 Varieties and Realities of your Existence:  
     The Bliss of Growth,  
     The Glory of Action,  
     The Splendour of Beauty;  
 For Yesterday is but a Dream,  
 And To-morrow is only a Vision,  
     But To-day well lived makes  
 Every Yesterday a Dream of Happiness,  
 And every To-morrow a Vision of Hope,  
 Look well, therefore, to this Day!  
 Such is the Salutation of the Dawn. (6)

Some would say that physicians should not be philosophers, but why shouldn't they when gravediggers and princes have been philosophers in the past. Most of you recall the scene in Act V of *Hamlet*, when Hamlet was in the cemetery with the gravediggers and examined the skull of Yorick, the court jester with whom as a boy Hamlet had played. You may recall Hamlet's words:

Imperious Caesar, dead and turned to clay,  
 Might stop a hole to keep the wind away.  
 O, that that earth which kept the world in awe  
 Should patch a wall t'expel the winter's flaw! (8)

Neurosurgeons too can be philosophers. How many of us have stood by an autopsy table to see the brain removed from one of our favorite patients. How many of us have looked into the base of the empty skull and have thought that this now is an empty tomb. I stated at the beginning of this address that opening skulls does not a neurosurgeon make. A neurosurgeon is one who uses the skills of barbering, carpentry, science, art, philosophy, and religion to help his fellow man who has a disease of the nervous system.

Young people today are looking for an ideal. They say that they want peace and love. Let us not be afraid to raise the banner of neurosurgery, for those who truly seek an active demonstration of love, a love for their fellow men, will find peace in neurological surgery.



Yesterday you had the privilege of hearing a brilliant paper, "Toward a Visual Prosthesis" presented by Mr. Walpole Lewin. You will recall that when the blind patient first used the visual prosthesis she exclaimed that she saw a star. Our Honored Guest, Dr. Barnes Woodhall, stated in his address "Neurosurgery of the Past" that the Congress reminded him of a song. Neurological surgery reminds me of a song for it seems that neurological surgeons, like Mr. Lewin's patient, also have seen a star. Wise men have seen and followed a star for thousands of years.

To dream the impossible dream, to fight the unbeatable foe,  
 To bear with unbearable sorrow,<sup>1</sup> to run where the brave dare not go.  
     To reach the unreachable star!  
     This is my quest, to follow that star,  
     No matter how hopeless, no matter how far:  
 To fight for the right without question or pause,  
 To be willing to march into hell for a heavenly cause!  
     And I know, if I'll only be true  
 To this glorious quest, that my heart will lie peaceful and calm,  
     When I'm laid to my rest,  
     And the world will be better for this:  
 That one man, scorned and covered with scars,  
     Still strove with his last ounce of courage,  
     To reach the unreachable stars. (11)\*

I am happy that I have had the privilege of being a neurological surgeon, and I thank my God that I have had the privilege of associating with people like you.

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