

NEWSLETTER

CONGRESS OF NEUROLOGICAL SURGEONS

Volume XXVI

January, 1977

Number 1

26TH ANNUAL MEETING REPORT

The 26th Annual Meeting of the Congress of Neurological Surgeons was held at the Fairmont Hotel in New Orleans, Louisiana on October 25 through October 29, 1976. The theme of the meeting was "Controversies in Neurosurgery". Dr. Lyle French, the Honored Guest, spoke on the Surgical Treatment of Arteriovenous Malformation and some personal experiences with Peripheral Nerve Repair.

The Annual Meeting Committee consisted of Robert Wilkins, General Chairman, George Ojemann, Scientific Program Chairman, Fletcher Lee, Exhibits Chairman, Joseph Rich, Host Chairman, Joseph Maroon, Public Relations Chairman, Stewart Dunsker, Registration Chairman, Robert Grossman, Resident's Registration Chairman, and Mark O'Brien, Sergeant-at-Arms. All did an outstanding job and are to be commended for their efforts. Local Arrangements Committee was chaired by Dr. and Mrs. David Kline.



Dr. Lyle French, Honored Guest, addresses the 26th Annual Meeting of the Congress of Neurological Surgeons in New Orleans.



Dr. Robert Ojemann (left), outgoing president, congratulates Dr. Bruce Sorensen, incoming president.

BRUCE SORENSEN ELECTED PRESIDENT

At the 26th Annual Meeting in New Orleans, Dr. Bruce Sorensen of Salt Lake City, Utah, was elected to the presidency succeeding Dr. Robert Ojemann of Boston, Massachusetts. Other newly elected officers include Dr. Albert Rhoton, President-elect and William Buchheit, Vice President. Dr. Fletcher Lee continues as Treasurer while Dr. David Kelly remains in the office of Secretary.

Newly elected members of the Executive Committee for three year terms are Dr. Julian Hoff and Dr. Edward Laws. Other members of the Executive Committee are: Dr. Robert Ojemann (Past President), Dr. David Kline, Dr. S. J. Peerless, Dr. Donald Stewart, Dr. John Tew, Dr. Edwin Amyes (ex officio), Dr. George Tindall (ex officio) and Dr. Robert Wilkins (ex officio).

The new officers of the Auxiliary are: Suzanne Sorensen, President, Joyce Rhoton, President-elect, Sally Kelly, Vice President, Helen Buchheit, Secretary, and Jane Lee, Treasurer.

CONGRESS OF NEUROLOGICAL SURGEONS
TWENTY-SIXTH ANNUAL BUSINESS MEETING

Fairmont Hotel October 28, 1976 New Orleans, La.

The meeting was called to order at 4:45 p.m. by President Robert G. Ojemann. The minutes of the 1975 meeting were read by the Secretary, Dr. David L. Kelly, Jr.

Dr. Kelly then presented the Annual Report of the Executive Committee.

The report of the Treasurer was presented by Dr. Fletcher Lee. This report has been submitted in writing to the Executive Committee and has been made a part of the permanent record. Dr. Lee presented a series of slides summarizing the financial position of the Congress. It was recommended that the dues be increased to \$60.00 for members in the United States, Canada, Mexico, and Puerto Rico and remain \$15.00 for International members. A motion was made and seconded to accept this recommendation. The motion was approved.

Dr. Sydney Peerless gave a report of the Bylaws Committee. A motion was made to approve the proposed changes in the Bylaws. The motion was seconded and all approved.

Dr. James Robertson, Chairman of the Nominating Committee, proposed the following slate of nominees:

President-elect Albert L. Rhoton, Jr.
Vice President William A. Buchheit

Executive Committee (Terms of three years each)
Edward R. Laws
Julian T. Hoff

There being no other nominations, it was moved and seconded that the slate of nominees be accepted. The motion was unanimously approved.

The Certificates of Service were presented to Dr. James T. Robertson and Dr. Jim L. Story.

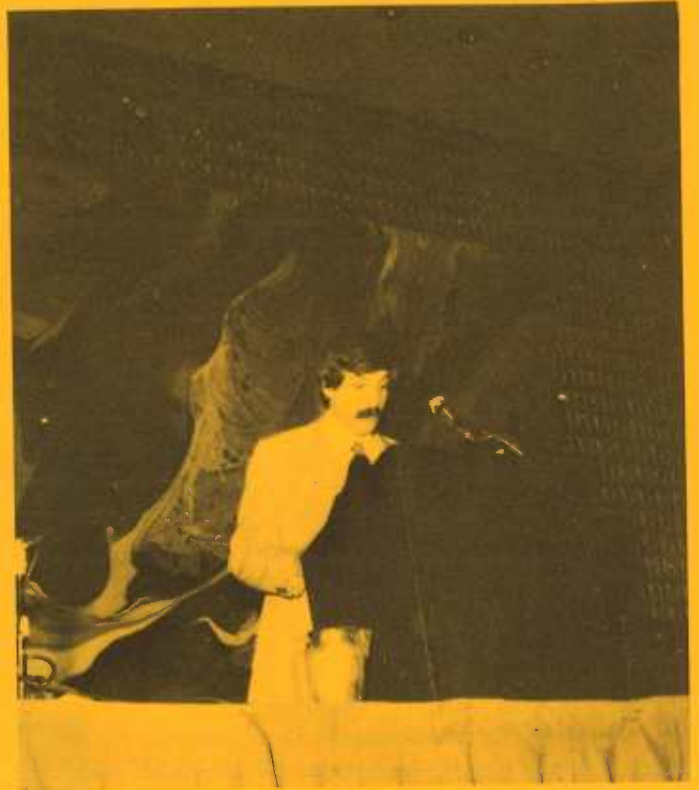
Dr. Ojemann called for new business. There was a recommendation that in view of the fact that the American Neurological Nurse's Journal was in financial difficulty, that the Journal Management Committee investigate the possibility of helping them.

A motion for adjournment was heard, seconded, and all approved.

Respectfully submitted,

David L. Kelly, Jr., M.D.
Secretary

DR. PHILIP H. GUTIN WINS
THIRD ANNUAL RESIDENT AWARD



The 3rd Annual Resident Award was won by Dr. Philip H. Gutin for his paper entitled "DNA Damage and Repair in the Intracerebral Rat Gliosarcoma 9L Treated with Chemotherapy and Irradiation".

Dr. Gutin is currently a clinical associate at the National Cancer Institute, Baltimore Cancer Research Center, Baltimore, Maryland.

NEWSLETTER

Published Quarterly by the Congress of Neurological Surgeons

President

Bruce Sorensen, M.D., Salt Lake City, Utah

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Secretary

David L. Kelly, M.D., Winston-Salem, N.C.

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J. Fletcher Lee, M.D., San Antonio, Texas

PRESIDENTIAL ADDRESS "MOVING AHEAD"

Robert G. Ojemann, M.D.

In October, 1975, the Congress of Neurological Surgeons (CNS) marked its 25th year with a memorable silver anniversary celebration. We honored our founders and looked back on our accomplishments with pride. Many of these accomplishments have been reviewed in previous presidential addresses.

This year, the 26th Annual Meeting marks the beginning of our second quarter century. While we have much of which to be proud, we should not sit back and rest on our laurels. We are in a period of change and we must not only adapt to change but do our best to influence these changes in a constructive and positive manner. We must remain strong and undertake new programs and policies which are needed to improve and strengthen our profession. I would like to present to you the direction I believe this organization should take to achieve this goal.

Eleven years ago, the Congress agreed that the American Association of Neurological Surgeons (AANS) would be the spokesman for neurosurgery. This was a definite step in developing neurosurgery into a group with significant influence on outside activities affecting the future of the profession. The need for a spokesman has never been more important than it is at the present time. Over the past few years an increasingly effective working relationship has developed between the two organizations in a number of areas with joint meetings of the officers and formation and funding of several joint committees. Duplication of activities is being eliminated. Major policies are decided together after joint discussions. I would like to acknowledge the efforts of Dr. Richard DeSaussure, the immediate past-president and Dr. Lester Mount, the current president of the AANS in improving this relationship. It has been a real pleasure to work with these two fine individuals.

Maintaining this working relationship should be one of our goals. Recently, some individuals and an editorial in *Surgical Neurology* have proposed that these two large groups be combined into one single organization. (1) I am opposed to this. The two societies serve as a check and balance on each other. In particular, the Congress offers the opportunity for younger members of the profession to become involved in organizational activities. Continuing the education of the younger neurosurgeon is one of its prime interests with special attention being paid to the neurosurgical residents. In addition, the two societies serve as a format where different ideas, points of view and programs can be presented. This forum should not be lost. Therefore, I submit to you that the Congress remain a separate entity and that we continue to improve on the close working relationship with the AANS.

Several years ago there was a proposal for a central office with an executive secretary which would serve to co-ordinate and take over many of the functions of the two societies. This proposal is now being restudied. I believe it is reasonable to carefully reassess this suggestion particularly in regard to the education programs. However, there is a real danger in committing our organization to such an activity if it significantly reduces the involvement of the members of the Congress in the activities of the Society. It appears to me that at the present time, such could be the case and the cost of such an undertaking could be excessive, not only from the monetary standpoint but also from the standpoint of the loss of individual involvement.

Individual involvement is vitally important to the Congress. To this end the Executive Committee has worked to keep the Congress an organization which is truly run by its members. Only a small segment of the responsibility has been delegated to outside individuals and this has, to a great extent, been forced upon us by our size. So it is that the entire organization and day-to-day running of the Annual Meeting, except for

the commercial exhibits and the mechanics of registration, are done by Congress members be it planning of the scientific program or discussing organizational details with the hotel. These activities often involve a significant amount of time spent by Congress members but I feel this involvement is the means by which we remain strong and thus more influential.

Unfortunately, this involvement has often gone unrecognized. Identifying and keeping track of the many individuals who devote time to committee work and are interested in future involvement in the Congress presents a problem. They may work hard one year and be totally unrecognized and unutilized the next. In an attempt to overcome this problem, the president and president-elect have begun a file to keep track of the work of the committee chairman and to obtain from each of the chairman an indication of those individuals who have done a good job in the committee activities. Hopefully, this information will then be utilized in selecting the committees and will be passed on to the elected officers in subsequent years. If this mechanism is ineffective, then it is essential that other solutions be attempted. I hope that future officers and Executive Committee members continue to recognize the importance of this grass root involvement.

In 1974, Dr. George Tindall, in his Presidential Address, outlined a comprehensive program for the continuing education of the neurological surgeons. (2) Many of his suggestions have now been adopted. Within the past few months the joint Education Committee with the AANS has been finalized and subcommittees developed to cover all aspects of education as it relates to neurosurgery.

The problem of recertification requirements will need to be reviewed and a program developed to meet this need. The problems of certification and what it means have been discussed by Dr. Robert Chase of the National Board of Medical Examiners. He notes that "The profession cannot tolerate poor or inadequate or unnecessary care. It becomes its responsibility through organizations and institutions, to protect the public against incompetence. . . . The control of quality of care rendered the patient in the last analysis is the profession's public responsibility and obligation if it wishes to retain its status as a profession". (3)

The Congress must continue to re-evaluate the Annual Meeting as well as the programs of the Joint Education Committee to be certain they are meeting the needs for continuing education. We have responded to the suggestion of the membership by increasing the number of smaller teaching sessions, workshops and luncheon discussion groups and by adding panel discussions and How-I-Do-It sessions. The International Committee has been reorganized and their participation in the program has been increased. However, questions have been raised about the effectiveness of these programs in insuring quality care. We must find answers to these inquiries. It will take considerable work and imagination to develop methods to determine if the continuing education programs for the neurosurgeon are really achieving their goals.

How can our society influence the future directions that medicine and neurosurgery in particular are going to take? There are many outside pressures to which neurosurgery must react. Our rather perilous position can best be stated by a quote of Dr. William Holden in his address to the American College of Surgeons in April, 1976, in which he stated, "The socialization of the medical profession is rapidly becoming a reality through the enactment of federal regulations that effect the structure and function of medical education, the disposition of residency positions, the requirements for admission of a patient to the hospital, the length of hospital stay, the diagnostic therapeutic technologies that may be used for the patient, hospital and professional charges, and many more.

Unless voluntary medicine can integrate its efforts on behalf of public welfare, and unless it can deal with federal government in a non-political setting, rather than through a series of adversary and defensive confrontations, it can anticipate nothing less than public regulation of its daily activities". (4)

The Joint Socio-Economic Committee has made significant strides in meeting this challenge. This committee has awakened neurosurgery to many of the problems facing us in our daily practice. They initiated the formation and strengthening of many state neurosurgical societies. There must be a continuing effort to define the guide lines for this group. There is discussion as to how representation should be determined so the group is responsive to the needs and wishes of the entire neurosurgical community. But of utmost importance is the retaining of a functioning relationship with the two national organizations. The subcommittees must continue to work in an effective manner. Changing legislation must be monitored. Arrangements have been made for medicare to use the terminology and task assignment subcommittee as a resource. Medical-legal problems remain with us as do those of manpower, density and distribution. This last subcommittee must undertake the task of determining what advice should be given regarding the number of neurosurgeons which we should be training and how they can be most effectively utilized.

About a year ago it became apparent that we needed more direct communication with the events occurring in Washington. The AMA section of Neurological Surgery has been active. It is important that we support this organization in its overall efforts for American medicine. We should also support the American College of Surgeons as it speaks for the surgical specialties. However, it is apparent that if we, as a specialty, want to have input into the legislative process and influence the implementation of legislation, we must give accurate, responsible testimony at every opportunity and develop relationships with responsible governmental organizations. Therefore, a Washington Committee for Neurosurgery was formed and funded jointly with the AANS. During the first ten months of its existence, this committee has become a viable entity. Areas where there should be neurosurgical involvement have been identified. Presentations have been made by neurosurgeons regarding national health insurance, emergency medical service legislation, physician re-imburement, the NIH budget and the Commission for the Protection of Human Subjects of Biomedical Research. There has been input into the President's Council on Wage and Price Stability, the Commission for the Control of Epilepsy and the Privacy Protection Study Commission. Some of the testimony already given has had a direct positive influence on legislation. The resources of the National Advisory Committee on Socio-Economics should be utilized to help deal with specific socio-economic problems as they arise, developing new subcommittees if necessary. There will also be areas where the other joint AANS-CNS committees will need to have input. The tremendous volume of information reviewed by the Washington Committee, the presentations that are given and the decisions on issues made by the leadership of the AANS and CNS need to be communicated promptly to the neurosurgical community. It is planned to publish this information regularly in the Newsletters of the CNS and AANS.

What issues does the neurosurgical community face for the coming year? There will be various National Health Insurance bills. Medicare and Medicaid procedures must be reviewed. There will need to be a review of the National Health Planning Resources Act. This legislation has far reaching ramifications on how medicine will be delivered in this country. The problem of delivery of primary care will be a foremost issue. Is the

time coming when a patient with a head injury, subarachnoid hemorrhage or acute back problem will no longer have the choice to be cared for initially by a neurosurgeon? Will the primary care specialist be entrusted with important decisions regarding the management of these patients? What about the training of the primary care physician when neurosurgery is excluded from many medical school curriculums? We must make the point that primary care is, to a great extent, disease related.

There will be questions about biomedical research. We should be making recommendations regarding the budget for the National Institute of Neurologic and Communicative Disorders and Stroke with careful cost justification. How much money should be placed in basic research, in targetted research, in research on the delivery of primary care? We must be ready to support a reasonable point of view on this subject but also to insist on adequate funding for neurosurgical research programs. We need to maintain and increase our representation on the committees making these important decisions.

Another area of concern is that related to the problems of the implants that we as neurosurgeons utilize. A joint AANS-CNS committee on Materials and Devices has been active. They developed an effective input into the House version of the Medical Devices Bill and had considerable influence on the compromise bill finally enacted. The Committee also has direct representation on the FDA advisory panel on neurologic devices. Developing standards for various materials and devices remains an important function to which this committee must devote considerable effort. But the job is just beginning. It will be important now for the Committee to monitor the implementation of this legislation to be certain that the intent of the bill is followed and that the neurosurgical community is not unduly restricted in its use of implanted devices.

And now, I would like to discuss with you a step which I feel will do much to strengthen the Congress. Many of you in practice have become more active in the organization with involvement in the committees which I have been discussing. But still, few scientific papers are submitted for the open scientific sessions from what has been termed "the grass roots". Last year our honored guest, Dr. William Sweet, gave a very thoughtful paper entitled, "The Difference Between Zero and One". His point was that the first time a new and valid thought or observation is conceived or made is a critical time. He said, "I hope you will wish to look thoughtfully at individual, novel events in your experience, analyze them carefully, and decide whether or not they contain the kernel of a new concept". He also summarized a basic problem for all of us when he stated that, "The uncertainties and colossal number of variables inherent in the biological field make all of us working in the domain reluctant to publish interpretation of a single observation, much less to construct an hypothesis unsupported by many observations. Indeed, if the observation is strikingly unusual, we tend not to publish that much but to wait hopefully for a similar event before we commit ourselves in print". (5)

Earlier this year, Dr. Arthur Kornberg, in an article entitled "Research, The Lifeline of Medicine" asked, "How well is (the practitioner) serving in advancing knowledge? This is the practitioner who must rely on his own hands and wits to treat patients, to earn his living, and support his malpractice insurance policy. Isn't he doing enough to keep abreast of new developments in medical practice? Is it reasonable to expect him to advance knowledge, too? I believe it is". (6) The point from both of these communications is that an observation by an individual physician may well be the basis for a new idea, concept, or innovative procedure. You should take time to

record and analyze your findings, and prepare the information for publication.

The members of the Congress have recently received volume 23 of *Clinical Neurosurgery*. This yearly volume has become an outstanding reference book containing the invited scientific papers and the Honored Guest presentations at each Annual Meeting. But there has not been room to include many of the other fine presentations made at the workshops, special programs and open scientific sessions.

For several years many of the officers and Executive Committee members of the Congress have felt that the organization needed a publication for these scientific presentations as well as other scientific material and information related to the activities of the group. Toward this end thought was given to formation of a journal for the Congress. An agreement to make *Surgical Neurology* the official journal of the Congress could not be worked out. A committee under the leadership of Dr. Bernard Patrick has extensively evaluated the situation and presented their recommendations to the Executive Committee. What could another journal offer? A place for publication of the presentations made at the open scientific sessions and workshops of the Annual Meeting. A forum for current articles on matters related to socio-economics and materials and devices. Publication of abstracts from other major neurosurgical society meetings so that they would have a wide distribution. Inclusion of abstracts from international journals and of articles in associated areas. A section devoted to bringing to the attention of neurosurgeons the advances in other fields which might relate to the problems we encounter. A summary in each issue of a residency training program. A special section for the Congress members to publish their observations made during daily clinical practice.

After careful review of the situation by the Executive Committee, it was concluded that a high quality publication could be developed. An agreement has been made with the Williams & Wilkins Co. to begin publication of a new journal entitled *Neurosurgery*. The first issue will appear in July, 1977. Dr. Robert Wilkins has agreed to edit this publication and organization of the editorial board is already well under way. More details will be sent to the membership in the coming months.

I have tried to impart to you something of the dynamic spirit which is present in our organization and would, in closing, like to once again stress that we must move ahead. Let us remain a viable organization; one which recognizes the importance of the involvement of the young neurosurgeon. Let us not allow ourselves to remain on the sidelines but let us get into "scoring position" so our relatively small specialty can exert positive influence in areas where it may prove beneficial in advancing knowledge and achieving the best possible care for our patients.

REFERENCES—PRESIDENTIAL ADDRESS

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2. Tindall, G. T. Presidential Address: Continuing Education for the Neurosurgeon. *Clinical Neurosurgery*, 22:1-15, 1975.
3. Chase, R. A. Proliferation of Certification in Medical Specialties. Productive or Counterproductive. *New England Journal of Medicine*, 294:497-499, 1976.
4. Holden, W. A. The Federal Government and the Surgical Profession. *Bulletin of the Am. Coll. of Surg.*, 61:7-13, 1976.
5. Sweet, W. H. The Difference Between Zero and One. *Clinical Neurosurgery*, 23:32-51, 1976.
6. Kornberg, A. Research, The Lifeline of Medicine. *New Eng. J. of Med.*, 294:1212-1216, 1976.

1976 EXHIBIT AWARD WINNERS

First Place:

G. Robert Nugent, M.D.—"The Radiofrequency Treatment of Trigeminal Neuralgia."

Second Place:

Dwight Parkinson, M.D., W. McEwan, M.D., J. Legault, A. F. Holloway, Ph.D., R. J. Walton—"A Multipoise Head Holder for Intra-Operative Serial Angiography."

Third Place:

M. Dujovny, M.D., C. O. Osgood, M.D., R. K. Laha, M.D., Samuel DeCastro, M.D., G. Solis, M.D.—"Scanning Electromicroscopic (SEM) Evaluation of Early Endothelial Damage."

VOLUNTEER NEUROLOGICAL SURGEONS NEEDED ABROAD

MEDICO, A Service of CARE, requires volunteer neurological surgeons for limited tours of duty in conjunction with the teaching and service programs in Afghanistan and Indonesia. Volunteers pay their own travel and maintenance expenses which may be tax deductible. Wives are welcome.

Any interested candidates may obtain information on voluntary tours from

MEDICO

2007 Eye St., NW

Washington, DC 20006

Phone: (202) 223-2277

or interested candidates may contact William H. Mosberg, Jr., M.D., Representative of the Congress of Neurological Surgeons to CARE MEDICO. Dr. Mosberg may be contacted at Neurosurgical Associates, P.A., 803 Cathedral Street, Baltimore, MD 21201; telephone, (301) 752-4836.

CONGRESS OF NEUROLOGICAL SURGEONS

Report of the Executive Committee

Twenty-Sixth Annual Meeting

Fairmont Hotel

October 28, 1976

New Orleans, La.

The Executive Committee has met four times since the last Annual Meeting. The basic format of the Annual Meeting, which has been quite successful for the Congress, was continued for this year's meeting with some new additions. Two simultaneous Open Scientific Sessions were presented and the International Committee sponsored a workshop. Also repeated "How I Do It" Sessions were held for the first time. The number of luncheon discussion groups and workshops have been increased. The second Annual Scientific program for the Auxiliary was held at this year's meeting.

Due to continued rising costs, the registration for members was increased to \$65.00 and non-member to \$85.00. A detailed evaluation of the 1975 program was made by Dr. Kenneth Smith, based on a questionnaire filled out by those attending last year's meeting. The 1975 meeting was overwhelmingly approved by the attendants. Some of the criticisms have been rectified. Luncheon Discussion Groups and Workshops continue to be appreciated by the majority of the attendants. Dr. William A. Buchheit is responsible for the evaluation of the 1976 Annual Meeting. The membership is encouraged to fill out the evaluation page in the program book.

This year Dr. Robert Wilkins has done an outstanding job in his capacity as Chairman of the Annual Meeting. Special recognition should also be given to Dr. George Ojemann for his overall planning of the Scientific Program, and the Chairmen of the Committees which make up the Annual Meeting Committee. These gentlemen have done an excellent job. The functions and activities of the Congress are carried out by a large number of members who give an extraordinary amount of time and energy to make this a leading organization in neurosurgery.

The Third Annual Resident Award, for the outstanding original paper submitted by a resident was presented at the General Scientific Session and will be published in Clinical Neurosurgery.

Dr. and Mrs. David Kline and Dr. and Mrs. Mike Carey are to be congratulated for their efforts in the elaborate local arrangements for both the Annual Meeting and the Supplementary Session. We are all indebted to them for their efforts on our behalf to make our stay enjoyable.

Registration for this year's meeting was managed by Williams & Wilkins Company, pursuant to our agreement of the last two years. Dr. Stewart Dunsker, Congress Registration Chairman has supervised the activities and has done a thorough job to minimize problems. This arrangement thus far has been satisfactory but will continue to be reviewed on a yearly

basis. The registration figures for this year's meeting are:

789 Members	23 Press TV Radio
474 Members' Wives	53 Guest Speakers
235 Non-member	32 Guest Speakers' Wives
141 Non-member Wives'	Wives
149 Residents	162 Exhibitors
36 Residents' Wives	0 Miscellaneous

2094 TOTAL

This is a record attendance.

Dr. Fletcher Lee reports that there are 39 commercial exhibits and 28 scientific exhibits at this year's meeting. The Executive Committee has established an Exhibit Award which was announced at the Annual Meeting by the Exhibit Committee and presented by the President.

The Congress is indebted to the contributors at this year's meeting which have been listed on the insert in the program book.

The Membership Committee, chaired by Dr. Jim Story, recommended 156 applicants which were approved by the Executive Committee. Prior to the Annual Meeting the membership was as follows:

1755 TOTAL MEMBERSHIP
1677 ACTIVE Membership
35 SENIOR Membership
22 INACTIVE Membership
20 HONORARY Membership

The following changes have occurred since the last year's Annual Meeting:

124 New Members Accepted
11 Transferred to Senior Membership
3 Transferred to Inactive Membership

During the past year the Congress of Neurological Surgeons has been informed of the death of 9 members as follows:

Kenneth G. Jamieson
Noval Simms
John L. Polcyn
David E. Richards
Averall Stowell
James H. Mooney
Peter Lake
Edmund A. Smolik
A.R. Yusuf IBn-Tamas

At this point the membership is asked to stand for a moment of silent tribute to the deceased members.

The following meeting sites and dates have been selected for future meetings:

- 1977—October 10-14
San Francisco, California, Hilton Hotel
October 14-18
Carmel, California, Supplementary Scientific Session
- 1978—September 24-29
Washington, D.C.—Washington Hilton
September 29 - October 2
Supplementary Scientific Session—site undetermined
- 1979—October 7-12
Las Vegas, Nevada, Ceasar's Palace
October 12-15, Supplementary Scientific Session
Palm Springs, California, Canyon Hotel Raquet & Golf Resort
- 1980—October 12-17
Miami, Florida, Americana Hotel
October 17-21, Supplementary Scientific Session
Tarpon Springs, Florida, Innisbrook
- 1981—October 18-23
Los Angeles, California, Century Plaza
October 23-27, Supplementary Scientific Session
Carlsbad, California, La Costa Spa
- 1982—October 13-18
Montreal, Quebec, Canada, Queen Elizabeth Hotel
October 18-22
Supplementary Scientific Session—site undetermined

Plans are well underway for the 27th Annual Meeting to be held at the San Francisco Hilton in San Francisco. Dr. John Tew will be the meeting chairman and David G. Kline will be the Scientific Program Chairman.

The Executive Committee approved several changes in the by-laws which will be presented to the membership by Sydney Peerless.

Continuing Education for Neurosurgeons has been intensively discussed and major actions have been taken during this past year by the Executive Committee of the Congress. A Joint Education Committee with the AANS has been established. This Committee, with appropriate subcommittees, will supervise

continuing education in neurosurgery. An effort is being made to insure that the Joint Education Committee is the accrediting body for Continuing Education Programs in neurosurgery. The Chairman is Dr. Robert King of the AANS with Asst. Chairman, John Tew of the Congress. The Congress Executive Committee will enforce the by-laws regarding attendance at the Annual Meeting, Article III, Section 5 which states: Attendance at the regular Annual Meeting shall be a requirement of membership. Any active member who is absent from three consecutive annual meetings may be suspended unless he has furnished the Secretary with a satisfactory written explanation. Foreign members, other than Canadian, shall be required to attend one meeting out of ten." In addition, the Executive Committee will recommend that 150 hours of continuing medical education, per three-year period, as defined by the Joint Committee on Education of the CNS-AANS, shall be required for continuing membership in the Congress of Neurological Surgeons. At least 60 hours of the continuing education must be obtained in programs accredited, Category I, and co-sponsored or sponsored by the Joint education Committee in Neurosurgery. In addition the feasibility of establishing a Central Office for neurosurgery in Chicago is being investigated. A report will be forthcoming.

The Newsletter was published three times in the past year. Dr. William Buchheit is to be commended for the continuing high quality of this publication.

The Congress continues its sponsorship of the Interurban Neurological Society. Their meeting in Chicago, February 7, 1976 was well received. This society continues under the leadership of Drs. A. Beaumont Johnson, L.A. Amador, Roland A. Manfredi, William H. Mosberg, Jr., and Matthew Presti. Dr. Bernard Patrick has been appointed as an ex-officio member of the Board.

Dr. Kenneth Smith has maintained the Resident's Registry to assist in filling neurosurgical residency vacancies and to help prospective trainees in finding residencies. He reports that there have been 22 inquiries from applicants and 10 from program directors—5 positions were filled through these contracts.

Dr. John Kalsbeck and Dr. Julian Youmans have maintained a placement registry under the auspices of the Congress.

Volume 23 of *Clinical Neurosurgery* published the proceedings of the Atlanta Meeting and was completed under the able supervision of Dr. Ellis Keener.

All back issues of *Clinical Neurosurgery* are available through the Congress Bookstore under the able

direction of Dr. Bernard Patrick.

The Congress Executive Committee in July, 1976, when efforts to reach an agreement with *Surgical Neurology* and Dr. Bucy failed, decided to publish our own journal. The title will be *Neurosurgery*. The editor will be Dr. Robert Wilkins. Publication agreements have been established with Williams & Wilkins. An Editorial Board is being selected to be comprised of well qualified members of the Congress. The first issue will be July of 1977. The Executive Committee believes that the journal will be well received and will be a distinctive publication under the direction of the Congress and Dr. Wilkins. Dr. Bernard Patrick and his committee are commended for their success.

The representatives of the Congress of Neurological Surgeons to the American Board of Neurological Surgery, the American Association of Neurological Surgeons, the American College of Surgeons, the AMA Section on Neurosurgery, and the World Federation of Neurological Surgeons have been actively representing the Congress during the past year. A list of these representatives can be found in the Program Book.

Several meetings have taken place between the officers of the AANS and the officers of the Congress relating to important national problems in Neurosurgery. The benefits of these meetings have been the better cooperation between the two national organizations, the formation and streamlining of joint committees, and the prevention of duplication of efforts. Plans have been made for future meetings.

The Materials and Devices Committee continues to be responsive and active under the leadership of Dr. Charles Burton. Many important legislative decisions have been affected by their efforts. A review of their activities is to be published in the *Journal of Neurosurgery*. President Ford signed into law the Medical Device Amendments of 1976. This marked the culmination of ten years of effort by members of the Congress to pass a medical device bill. The final version of the bill followed the basic recommendations made to U.S. Congress by the Materials and Devices Committee. They have established neurosurgical priority in all of the important standard areas, therefore, it seems unlikely that the FDA will contact neurosurgical standards for development to other organizations in the foreseeable future. In addition a mechanism for device failure and adverse results has been established under the direction of Dr. Ed. Laws. A method for review of standards has been established by the Congress Executive Committee.

The World Directory under Dr. George Ablin, and the U.S. and Canada Directory under Dr. Ted Roberts represents a tremendous effort on behalf of neurosurgery. Dr. Leverage Erickson has replaced Dr. Ted

CNS JOURNAL TO BE PUBLISHED

The Congress of Neurological Surgeons, Inc. is beginning a journal entitled *NEUROSURGERY* to be published by the Williams and Wilkins Company of Baltimore. The first issue will appear in July, 1977. Subsequent issues will be published every two months until the volume of material to be published is large enough to merit monthly issues.

The establishment of this journal is in keeping with the purpose of the Congress of Neurological Surgeons; namely, to maintain the high standards of neurosurgical practice, to promote the education of the younger neurosurgeons in this country and abroad, to disseminate scientific knowledge and encourage scientific research in neurosurgery and related fields, and to promote mutual fellowship among neurological surgeons.

The Editor, Robert H. Wilkins, M.D. will utilize the unique features of the Congress of Neurological Surgeons, including its grass-roots organization and relatively young membership, to give the new journal a personality of its own. The editorial staff has been selected with emphasis on expertise in some area of neurosurgery, youth and geographical location.

In addition to scientific papers relating to clinical and experimental neurosurgery, pertinent case reports, and sections for book review, neurosurgical news, and a calendar of events of interest to the neurosurgeon, *NEUROSURGERY* will contain solicited review articles on neurosurgical topics, as well as on topics from related fields, abstracts in English of recent neurosurgical articles originally published in other languages, abstracts of key papers from other disciplines of interest to neurosurgeons, abstracts from certain neurosurgical meetings, descriptive essays of domestic and foreign neurosurgical centers, and periodic reports of developments in government that directly affect neurosurgery. The main thrust of *NEUROSURGERY* will be scientific, but it will also contain other material of importance to neurosurgeons.

The new journal will be printed on glossy paper, 8½ x 11 inches in size, with two columns of printing per page. Each issue will contain 50 text pages, in addition to front and back advertisement sections. Yearly subscription rates are as follows:

DOMESTIC (U.S. and possessions, Canada & Mexico)		FOREIGN
\$18	In Training	—
\$22	CNS Member	\$22
\$30	Non-member	\$34
\$35	Institution	\$39

Manuscripts may now be submitted for consideration for publication. Information for contributors may be obtained from Robert H. Wilkins, M.D., Editor, *NEUROSURGERY*, Box 3807, Duke University Medical Center, Durham, N.C. 27710. Manuscripts for the July, 1977 issue must be in the hands of the Editor by February 1, 1977.

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Executive Committee Report—continued

Roberts as the Editor of U.S. and Canada Directory.

The International Committee has received new direction under Dr. Perry Black. In addition to the annual breakfast meeting, they had this year a luncheon workshop which was most successful. Dr. Black and his committee will continue to explore avenues by which the Congress can play an active part in International Neurosurgery and maintain its role as an international organization.

The Socio-Economic Committee functioning as a Joint Committee of the CNS and the AANS, has been extremely effective in many important areas in neurosurgery for the past year. Dr. Ed Amyes as Co-Chairman of this committee has served as an ex-officio member of the Executive Committee of the Congress and has contributed significantly in not only Socio-Economic affairs, but other important areas. We have benefited from his advice and recommendation. Dr. Donald Stewart as Assistant Co-Chairman will become the next Congress Co-Chairman of this committee.

A Washington Committee of Neurosurgery has been established in cooperation with the AANS. This committee is composed of Dr. Lou Finney, Chairman, Dr. Don Stewart, Treasurer, Dr. Russel Patterson and Dr. Charles Fager. Mr. Charles Plante has been of invaluable assistance with his contacts, knowledge, and advice. The Washington Committee of Neurosurgery has been instrumental in affecting legislation important to neurosurgery, scheduling testimony by neurosurgical experts before important congressional committees, and identifying important issues and proposed legislation for study. They will continue to call upon various members of the Socio-Economic Committee and other experts, in specific areas of neurosurgery and Socio-Economic affairs, for position papers. We feel this committee has performed beyond our expectations and has made significant contributions on our behalf.

A Committee on Issues has been established by the CNS and AANS which will consist of the Presidents, the President-Elects and Secretaries of the two societies, the 4 regional NAGSEC representatives, the Washington Committee and 3 members at large.

Signed by,

David L. Kelly, Jr., M.D.
Secretary

WORLD FEDERATION DUES

Notice to all members—DO NOT pay World Federation dues. The Congress of Neurological Surgeons has already paid them.

CONTINUING EDUCATION REQUIREMENTS

The Long Range Planning Committee recommended that the Executive Committee enforce the Bylaws, Article II, Section 5, which relates to attendance at regular meetings. This reads as follows: "Attendance at the regular Annual Meeting shall be a requirement of membership. Any active member who is absent for three consecutive Annual Meetings may be suspended, unless he has furnished the Secretary with a satisfactory written explanation. Foreign members, other than Canadian, shall be required to attend one meeting out of 10. Any member thus suspended or who has resigned for any cause may apply to the Membership Committee for reinstatement. The Committee shall recommend reinstatement or rejection to the Executive Committee."

THE BYLAW REVISION

Article 3, Section 5, should read:

150 hours of continuing medical education, per three-year period, as defined by the Joint Committee on Education of the CNS-AANS, shall be required for continuing membership in the Congress of Neurological Surgeons. At least 60 hours of the continuing education must be obtained in programs accredited, Category I, and co-sponsored or sponsored by the Joint Education Committee in Neurosurgery.

CALL FOR PAPERS, MOVIES, EXHIBITS

Enclosed with this issue of the Newsletter is the abstract form for Papers, Movies or Exhibits for the 27th Annual Meeting in San Francisco. Additional copies of this form may be requested from William A. Buchheit, M.D., Editor of the Newsletter.

PLEASE NOTE: DEADLINE FOR 2ND NEWSLETTER IS MARCH 15, 1977.