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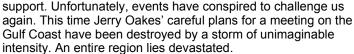
Editor: Ann-Christine Duhaime, MD

From the Chair

Impressive Scientific Program Is Meeting's Main Attraction New Orlando Venue Hosts Pediatric Annual Meeting Nov. 29-Dec. 2 · Annual Meeting

## Rick Abbott, MD

I feel a sense of irony as I sit down to write my first note to you. Four short years ago I was trying to put a meeting back together after events had torn at New York City's soul. I cannot tell you what it meant to me when Tom Luerssen, in his chairman's message, asked you to consider attending that year's meeting in New York. He listed many reasons, but at the core was his belief that New York needed our support. You responded with record attendance. I will always remain indebted to you for your



Golf/Spa Resort Preserves Meeting, Offers Ample Amenities Again, the Executive Committee met by phone within days of the event. While the question lay before us as to the viability of this year's meeting, we all felt it important to try. Because of rapid work on the part of Jen Wolff and her associates at our Chicago headquarters, a venue was found close enough to allow much of the planned program to be preserved. So now, much as Tom did four years ago, I ask you to consider supporting our organization by attending what promises to be a very exciting meeting.

I have seen Dr. Oakes' proposed scientific program, and it is an exciting one. Seventy-eight platform presentations have been invited, representing one of the largest collections of juried papers on pediatric neurosurgery that will be presented this year anywhere in the world. We will hear about the work of Ben Warf, MD, in Uganda, and our Raimondi lecturer will speak of exploring the Antarctic. We will have the evenings to renew our friendships and

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coffee breaks to see the latest in technologies. Our families will be housed in a new golf resort with a spa just five minutes from Disney World, all for just \$169 per night.

### Pediatric Section's Agenda Articulated

I also look forward to this meeting as the inauguration of my tenure as your chair. I see several challenges before the Pediatric Section:

- We have many young, talented members who want to actively participate in the business of the organization. At present we have no mechanism for leadership development. I have asked our committee chairs to work with me on rectifying this.
- Many in our organization have either participated in educational endeavors outside of North America or have expressed a desire to do so. Meanwhile, over the past several years courses in Central and South America have been sponsored by the European Society for Pediatric Neurosurgery. I feel that the Pediatric Section should consider supporting, on some level, the education of neurosurgeons in pediatric neurosurgery throughout the Americas, North, Central and South.
- Several academic services around the country have been unable to fill junior faculty positions with fellowship-trained pediatric neurosurgeons. The section will need to consider working with other organizations to foster the interest of trainees in the field of pediatric neurosurgery and encourage their enrollment in certified pediatric neurosurgery fellowships.

I am blessed in having a strong Executive Committee, and I am anxious to work with its members to address these issues and others that you may feel important. I look forward to greeting you in Orlando and to the next two years as your chair.

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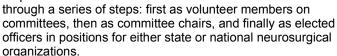


Editor: Ann-Christine Duhaime, MD

From the Former Chair

# Andrew Parent, MD

According to an old adage, the first third of a surgical career is spent learning how to operate, the second third is spent learning when to operate, and the last third is spent determining when not to operate. Following that train of thought, I have been contemplating how a good portion of my past two years has been subsumed by administrative responsibilities as the chair of our section. It occurred to me that those of us who have taken on administrative responsibilities have in a sense matriculated



Traditionally, neurosurgery has chosen its leadership based on recommendation from nominating committees that have deliberated on the submitted names of nominees. The nominating committees have selected nominees using various criteria such as past experience, work ethic, knowledge of the organization, leadership capabilities, and diversity. Diversity must be considered both in terms of gender and a geographical balance of leadership (i.e., not favoring one particular part of the country over another).

Remarkably, more than 80 years passed (the formal inception of neurosurgery as a specialty was in 1920) before an academic neurosurgical department selected the first female chair in 2004. Coincidentally, she is a pediatric neurosurgeon. Six percent of all AANS members are female (280 of 4,497), and 7.6 percent of pediatric neurosurgeons belonging to the Pediatric Section are female (24 of 314). These two statistics are startling when contrasted with the fact that over 50 percent of current medical students are female. It is imperative that our program chairs carefully consider and develop criteria that will foster recruitment of female candidates into neurosurgical academic programs and

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professional organizations.

It is also important to balance carefully the leadership of our organization between academic and private practice. In the past, we have tended to draw national leadership from the academic arena. With increasing frequency, however, we are seeing well-qualified individuals in private practice rise to positions of leadership, and indeed this is very good for our national organization if it is to represent organized neurosurgery in a balanced and equitable fashion.

This will be my last message to the Pediatric Section as your former chairman. I have greatly enjoyed the opportunity to serve you, and I will always be thankful for this unique honor that you bestowed upon me. This position has afforded me opportunities to meet pediatric neurosurgeons throughout the United States who are in various phases of their careers, and consequently I have become privy to myriad perspectives regarding our subspecialty. I have endeavored to recruit new and younger members to the organization and to appoint them to committees. I firmly believe that we have excellent individuals who will continue to lead this organization in the future. We are certainly in excellent hands with the incoming chairman, Rick Abbott. His international stature and leadership will provide a steady hand in directing the future of pediatric neurosurgery.

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Editor: Ann-Christine Duhaime, MD

2005 Pediatric Section Annual Meeting in Orlando, Fla.

The 2005 AANS/CNS Section on Pediatric Neurological Surgery Annual Meeting, Nov. 29 through Dec. 2, will be held at the Omni Orlando Resort at Champions Gate. As you know, the original site at the Grand Hotel Marriott Resort in Point Clear, Ala., sustained severe damage from Hurricane Katrina.

Although the dates and venue for our meeting have changed, the Hydrocephalus Workshop organizing committee has worked hard to ensure a scientific meeting of the highest quality at a relaxing venue. The Omni Orlando Resort at Champions Gate, just south of Walt Disney World, is a premier luxury golf resort with all the amenities for a successful meeting. This venue promises to help us accomplish the objectives of our meeting and allow us to socialize with our families in a most enjoyable location, as well.

Orlando will serve up the hospitality that will make this a very memorable experience for you and your family. We have requested special room rates for the weekends preceding and following the meeting so that attendees and their families can take advantage of the weather and local attractions. Typical weather for this time of the year is 55-75 degrees—perfect for most outdoor activities.

For more information and registration, click here

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Editor: Ann-Christine Duhaime, MD

2005 Fellow Learns Epilepsy Management, Encounters Pediatric CV Cases

Louis Crevier, MD

In a July 2005 letter to Michael Scott, MD, who administers the Pediatric Section's fellowship program, Louis Crevier, MD, relates his positive experience as 2005 traveling fellow.

The AANS/CNS Resident Traveling Fellowship in Pediatric Neurosurgery is a nice opportunity for a resident to spend some time at a well-recognized North American institution. Having done elective rotations at the Hospital for Sick Children in Toronto and The Montreal Children's Hospital, I can appreciate the value of working at or visiting other centers. It provides residents with different ways to approach similar conditions and gives then a broader perspective of the diagnostic and therapeutic options available.

The fellowship allowed me to become more familiar with state-of-theart equipment and neurosurgical procedures in the setting of an internationally recognized academic pediatric neurosurgery department. I was particularly interested to learn the management of epilepsy and pediatric cerebrovascular cases, two areas that are not well covered by the program where I am currently training. Without this award, it would have been difficult for me to live such an experience.

Moreover, this fellowship may help residents confirm their interest in pediatric neurosurgery and help establish their career objectives. If the residents are considering applying for fellowship at the visited institution, it allows them to meet the staff neurosurgeons, residents, and allied healthcare team. It also helps the residents to get to know the hospital and the city. For the surgeons, it represents a great opportunity to meet a potential fellowship applicant.

In summary, this traveling fellowship was for me an enjoyable learning experience that I would definitely recommend to any resident having a special interest in pediatric neurosurgery.

Louis Crevier, MD, is a sixth-year neurosurgery resident at McMaster

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University and Hamilton General Hospital, in Ontario, Canada.

### Awards Advance Pediatric Neurosurgery

The Pediatric Section offers two awards and two traveling fellowships intended to promote scholarship and enhance educational experience in pediatric neurosurgery.

### Hydrocephalus Award

This award is given for the best paper presented at the winter meeting of the AANS/CNS Section on Pediatric Neurological Surgery by a resident-in-training on the topic of hydrocephalus.

### Kenneth Shulman Award

This is an endowed award given in the name of Kenneth Shulman, MD. The award is for the best paper presented at the annual meeting of the AANS/CNS Section on Pediatric Neurological Surgery by a resident-in-training.

Traveling Fellowship (Domestic) Award in Pediatric Neurosurgery This fellowship is intended to cover the domestic travel and living expanses for up to one month for residents who wish to pursue additional experience in pediatric neurosurgery during their residency years. Two traveling fellowships for \$2,500 are given each year. For further information, contact michael.scott@childrens.harvard.edu.

Traveling Fellowship (International) Award in Pediatric Neurosurgery The fellowship is intended to cover the international travel and living expenses for up to one month for residents who wish to pursue additional experiences in pediatric neurosurgery during their residency years. One \$5,000 fellowship is given each year. For further information contact michael.scott@childrens.harvard.edu.

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Editor: Ann-Christine Duhaime, MD

Remembering Samuel R. Neff, MD

It is with great sorrow that St. Christopher's Hospital for Children in Philadelphia shared the news of the sudden and untimely death of Samuel Neff, MD. Dr. Neff was a brilliant pediatric and adult neurosurgeon who had been part of the St. Christopher's family since 1997. Dr. Neff had a background in physical sciences, electronics, high-level and assembly language programming, microprocessor systems, real-time systems, neurophysiology and biophysics. He earned his bachelor's degree in physics and astronomy at Haverford College and his medical degree from the University of Pennsylvania.



Samuel Neff, MD 1958-2005

Dr. Neff wrote or coauthored numerous peer-reviewed publications, · NREF Pediatric Fellowship book chapters and abstracts and was the founder and scientific director of Neuro Diagnostic Devices, the company that will manufacture his invention ShuntCheck, a noninvasive device for measuring cerebrospinal fluid flow through shunts. Dr. Neff was also working with a colleague to develop a battery-operated version · Calendar of Neurosurgical of another device he designed known as SCIPS, a permanently implantable, self-contained intracranial pressure sensor that allows noninvasive ICP monitoring.

Dr. Neff is survived by his wife Janine, and three sons Robert, Jonathan, and Daniel.

The Pediatric Section extends its deepest sympathy to Dr. Neff's family and to his colleagues at St. Christopher's Hospital for Children.

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Editor: Ann-Christine Duhaime, MD

NIH-Sponsored Hydrocephalus Workshop a Great Success Dory Krantz

The first-ever workshop sponsored by the National Institutes of Health to outline a national research agenda for hydrocephalus took · 2005 Fellow Gains place in Bethesda, Md., Sept. 20-30, 2005. Entitled "Hydrocephalus: Experience / Section Awards Myths, New Facts, Clear Directions," the workshop brought together 150 of the world's leading neurosurgeons, neurologists, basic science researchers, patient advocates, parents and program staff from five institutes and one office within the NIH to think about what we don't know and need to know about hydrocephalus. The program laid the groundwork for an ongoing multidisciplinary collaboration, just as we had hoped.

Every voice was important in this broad range of stakeholders wrestling with how we can significantly improve the lives of people affected by the chronic neurological condition of hydrocephalus. It is · Section Officers not often that brain surgeons and neuroscientists say "we don't know," and "the way we have been thinking isn't working." I share with you here the significance of what transpired during two and a half days of thinking together in Bethesda from my perspective as a patient advocate.

### **Dispelling Myths**

There is a myth that has contributed to the stagnant state of research, diagnosis and treatment in hydrocephalus over the last 50 years. The myth is that surgical implantation of a shunt has solved the problem of hydrocephalus. It has not...at least not to the degree that we had hoped. The shunt has prevented premature death and allowed many children and adults to survive, and even thrive, which is a great accomplishment attributable to John Holter's invention of a surgically implantable shunt to drain fluid from the ventricles of the brain to another part of the body. The shunt has saved hundreds of thousands of lives.

And yet, the promise of a normal life has not been delivered. Parents of children with hydrocephalus who are alive and mobile because of this shunt still fear that their child may be the one who needs 50 surgeries before age 20. Every time their child has a headache or feels a little nauseated, they have to decide between a

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trip to the emergency room or staying up all night to wait and worry. If they make the wrong decision, their child could have a serious brain injury, or could die.

From those people who have had a shunt since childhood and are now in their 20s, 30s, 40s and 50s, we know that their quality of life is rarely like yours or mine. Many have difficulty organizing their thoughts and their lives and require some kind of support in activities of daily living. Holding a job is often difficult because of the cognitive and social challenges that develop in a brain that is repeatedly assaulted by surgery, excessive pressure and infection.

In summary, it is a myth that hydrocephalus is a solved problem in infants and children.

#### **New Facts**

The most important new fact is just how important multidisciplinary collaboration is to our understanding of hydrocephalus in all its manifestations. For example, we have much to learn from neurogeneticists who can help us find complex genetic predispositions and the neonatologists investigating the role of progenitor cells in the developing brain who might help us learn how and when to intervene without causing developmental delays. We have lessons to learn and knowledge to share with those studying glaucoma and syringomyelia, both of which deal with fluid dynamics in different locations of the body.

One of the most important functions that the NIH can serve, and did serve well in designing this workshop, is to bring people to the table from other disciplines that are not yet in scientific exploration of hydrocephalus. Our ability to collaborate with and learn from many disciplines has broad-reaching implications for human health and quality of life for all those touched by hydrocephalus and other chronic neurological conditions.

#### Clear Direction

The clear direction is toward collecting better data to qualify and quantify how many people are affected and document the results of current diagnosis and treatment. It is imperative that elegant studies are designed and carried out in order to develop fact-based guidelines for diagnosis and treatment of all of the different forms of hydrocephalus. We want more cross-disciplinary collaboration to further research into injury and recovery mechanisms in the brain and to develop a more holistic model of intracranial fluid dynamics that takes into account the pulsatile blood flow to the brain with every heartbeat and the drainage capacity of the lymphatic system.

A core group is working now on writing a white paper outlining the national research agenda for hydrocephalus. Our goal is to have a draft to NIH for its review by mid-November. It is expected to take one or two months to get clearance from NIH. Once it is cleared, we will work to get the white paper published in a peer-reviewed journal.

The Hydrocephalus Association is working with our membership to encourage the U.S. Congress to support this national research agenda.

If you are interested in joining this ongoing multidisciplinary research collaboration, please contact the Hydrocephalus Association at (415) 732-7040 or dory@hydroassoc.org.

Dory Krantz is executive director of the Hydrocephalus Association.

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**Editor: Ann-Christine Duhaime, MD** 

American Academy of Pediatrics Update Joseph Piatt, MD

The Section on Neurological Surgery of the American Academy of Pediatrics will hold its annual Business Meeting in Orlando on Thursday, Dec. 1, 2005. Held in conjunction with the AANS/CNS Section on Pediatric Neurological Surgery Annual Meeting, the SONS Business Meeting will begin before the start of Thursday's scientific session. Watch for details.

A full report of 2004-2005 SONS activities will be published in the January 2006 issue of the *Journal of Neurosurgery: Pediatrics*.

Pediatric neurosurgeons who wish to learn more about the work of the SONS in education, quality, and advocacy are encouraged to contact Joseph Piatt, chair, at <a href="mailto:Joseph.Piatt@tenethealth.com">Joseph.Piatt@tenethealth.com</a> or Hector James, secretary.

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**Editor: Ann-Christine Duhaime, MD** 

# **International Society of Pediatric Neurosurgery**

The 34th Annual Meeting of the International Society of Pediatric Neurosurgery will be held in Taipei, Taiwan, in 2006. More information can be obtained at <a href="https://www.ispneurosurgery.org">www.ispneurosurgery.org</a>. The Pediatric Section's liaison to the ISPN is <a href="https://www.ispneurosurgery.org">Cheryl Muszynski</a>.

For an application to the ISPN, click here.

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**Editor: Ann-Christine Duhaime, MD** 

Membership Update

# John Kestle, MD

The individuals who have applied for membership to the Pediatric Section for the winter meeting include Phillip Aldana, Richard Anderson, Benedicto Baronia, Ray Chaseling, John Grant, Ann Ritter, Edward Smith, Monica Wehby, and Alexander Zouros.

The Membership Committee will present a slate of candidates at the Executive Committee meeting and voting will take place at the Pediatric Section Business Meeting in Orlando.

<u>Click here</u>, for additional membership information.

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Neurotrauma Cerebrovascular

Pain Pediatric

Spine Stereotactic & Functional

Tumor

View Printer Friendly

Section: AANS/CNS Section on Pediatric Neurological Surgery



Editor: Ann-Christine Duhaime, MD

**Neurosurgery Softball Tournament Benefits Pediatric Brain Tumor Research** 

Jeffrey N. Bruce, MD, and Richard C.E. Anderson, MD

The 2005 Annual Neurosurgery Charity Softball Tournament was played on June 11 on the Great Lawn of Central Park in New York City. The event was hosted by Columbia University and sponsored by George Steinbrenner and Alex Rodriquez of the New York Yankees, with all proceeds benefiting pediatric brain tumor research.

Competing teams included the departments of neurosurgery from eight of the nation's top medical centers: Columbia, Harvard, Johns Hopkins, Cornell, NYU, Yale, Albert Einstein, and Mt. Sinai. In honor of one of the former chairman at Columbia and pioneers of neurosurgery, the championship trophy was named the J. Lawrence Pool Memorial Trophy; it will be housed at the winning institution. This year Columbia claimed the championship by beating Cornell 9-2 in the finals, while Albert Einstein defeated Harvard 10-6 to place third.

Organized by Ricardo J. Komotar, MD, a neurosurgery resident at Columbia University, this year's tournament raised nearly \$70,000 for the Columbia University Pediatric Brain Tumor Research Fund www.KidsBrainResearch.org. Columbia is set to defend its title in June of 2006.

2005 Neurosurgery Charity Softball Tournament Champions: **Columbia University** 

Fall 2005

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Upper Row, Left to Right: Saadi Ghatan, Donald Quest, Chris Mandigo, Ty Olson, Sean Lavine, Richard Anderson, William Mack, Allen Waziri, Guy McKhann, Jeffrey Bruce, J Mocco, Robert Goodman, Chris Winfree, Sander Connolly, Robert Solomon. Lower Row, Left to Right: Patrick Senatus, Todd Hankinson, Rick Komotar, Michael Kaiser, Alfred Ogden, Anthony D'Ambrosio, Michael Sisti.

# AANS CNS ABSTRACT CENTER CYBER MUSEUM

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Section: AANS/CNS Section on Pediatric Neurological Surgery

### **Purpose of the Pediatric Neurosurgery Section**

The objectives of the Section shall be to enhance and assure the advancement of the subspecialty of pediatric neurosurgery by:

- serving as a forum for the intimate exchange of ideas and information among a group of neurological surgeons whose interests are directed towards the infant and child.
- serving as a vehicle through which the Board of Directors of the AANS and the Executive Committee of the CNS can be apprised of the activities and the advances in the subspecialty of pediatric neurosurgery.
- serving as a resource for the Board of Directors of the AANS and the Executive Committee of the CNS for conducting special studies and proposing solutions to problems in pediatric neurosurgery when directed to do so.
- service as a section to assist the AANS and CNS to advance education, research, and patient care in the area of pediatric neurosurgery.

Founders Kenneth Shulman, MD, first Chairman Robert McLaurin, MD

#### **Officers**

# **Executive Committee Members at Large**

(Four members serving two year terms)

Bruce Kaufman, MD (2004)

Nalin Gupta, MD (2004)

Sarah Gaskill, MD (2003)

Michael Partington, MD (2003)

# Standing Committees

## **Nominating Committee:**

(3 members: Last three chairmen of the section)

Chairperson: Andrew Parent, M.D. (2005)

Harold L. Rekate, MD (1999)

Thomas G. Luerrsen, MD (2003)

# **Rules and Regulations Committee:**

(3 members serving 2 years)

Chairman: Cheryl A. Muszynski, MD (2002)

2 Committee Positions OPEN

Membership Committee: Sarah Gaskill, MD (2002)

(3 members serving 2 years)

Chair: John Kestle, MD (2004)

### **Program and Continuing Education Committee:**

(5 members: Chair and Vice Chair serve two years. Vice Chair assumes chair at next sequence. Other members are the Annual Meeting Chairman, and two Ex Officio members: the Section Chair and Secretary/Treasurer)

Chairman: Ann Marie Flannery, MD (2001)

Vice Chairman: Jerry Oakes, M.D., Annual Meeting Chairperson (2002)

Ex Officio Members:

Rick Abbot, MD and Alan Cohen, MD

## Representative to Referral Guidelines Committee:

Harold L. Rekate, MD (1997)

# Representatives to Practice Guidelines Committee:

Thomas G. Luerssen, MD (1996) John Kestle, MD (1996)

# **Future Annual Meeting Chairmen and Venues**

2006: Michael H. Handler, MD 2007: John Ragheb, MD Miami

Ad Hoc Committees

Traveling Fellowship: (3 members)

Chair: R. Michael Scott, MD

Ken Winston, MD Alan Cohen, MD

Two members selected by the committee chairman

Distinguished Service Award (Chaired by most recent Ex-Chairperson of the Section)

Chair: Andrew Parent, MD

## **NEUROSURGERY://ON-CALL® Web site:**

Chair: Douglas L. Brockmeyer, MD

Publications Committee: Chair: Sarah Gaskill, MD

# Representatives and Liaisons

### Liaison to the AANS Sections:

Rick Abbot, MD (2005)

# Liaison to the American Academy of Pediatrics:

Joseph H. Piatt, Jr. MD (1997)

# Liaison to the Joint Council of State Neurosurgical Societies:

Michael Heafner, MD (2000)

# Representatives to the Quality Assurance Committee:

Chairman: Tom Luerssen, M.D. (2001)

Sarah J. Gaskill, MD (1999) James Drake, MD (1999)

# Representative to the Washington Committee

Thomas G. Luerssen, MD (1996)

# Representative to Referral Guidelines Committee:

Harold L. Rekate, MD (1997)

# Representatives to Practice Guidelines Committee:

Thomas G. Luerssen, MD (1996) John Kestle, MD (1996)

# Liaison, International Society for Pediatric Neurosurgery:

Cheryl Muszynksi, MD

# **Devices and Technology Committee:**

Mark Proctor, MD

# Liaison to the Young Neurosurgeons:

Tom Steineke, MD

# Liaison to the Education and Practice Management Committee:

David Gruber, MD

# American Board of Pediatric Neurosurgery:

Michael Scott, MD

# Accreditation Council for Pediatric Neurosurgery (ACPNS):

Marion Walker, MD

# American Society for Pediatric Neurosurgery (ASPN):

Tom Luerssen, MD