President’s Message: Who WINS in the Transformation of America’s Largest Service Industry?

Since its earliest origin, medicine and surgery has been viewed by those of us entering the field as well as beneficiaries of our services as being more a calling than a service in the true economic sense of the word. Though, interestingly, the word service does indeed mean to “examine, repair, overhaul…” In times past, physicians, like our secular colleagues, have been respected, revered and held to high ethical and moral standards. It has been expected, even demanded, that physicians give the utmost of themselves, even to the detriment of themselves and their families.

The focus of public commentary on the financial success of (some) physicians has negatively transformed the perception that our care of the unwell is selfless and competent and deserving of recompense. Many economic factors continue to nibble away at the fees for our services, while many of these same factors continue to increase our cost of doing business. It is not rocket science to understand that at some point each and every one of us—whether in academics, research or private practice—are going to suffer in ways that disallow us to continue to practice our profession in the way that we aspire and is expected. Because of these pressures, many of us are looking at ways to diversify or to focus our practice so that we may provide the services we are qualified for and yet remain financially viable. Diversification means different things for different practitioners. Many invest in outpatient surgery centers, learn new techniques that may overlap that of our competitors, even become hospitalists, confining their practice to neurosurgical trauma.

Many neurosurgeons, particularly those recently finishing training, have decided to focus in a specific area of practice. Dr. Ausman speaks in Neurosurgery News about Regina Herzlinger’s book in which she talks about ‘focused factories’ in medicine. This is the concept in which a physician/surgeon does one thing very well and in high volume. The theory is that this will improve outcomes, decrease complications and overall costs. This is certainly one strategy many practice and we see that reinforced in fact in the postgraduate training of residents who go on to specialize in spinal, pediatric, cerebrovascular/ endovascular and epilepsy surgery.

Many private practitioners, who historically provided an expanded scope of practice are now limiting that scope because of referral base, preference, experience or economics. Even new and sometimes untried technology, thought to promote advances in our field, in some cases cause practitioners to decline cases today they were comfortable with only yesterday.

As we in WINS continue to support young women aspiring to become and working in all facets of Neurosurgery we must be mindful of the myriad of challenges that face each and every one of us. We likely should encourage our young colleagues to forge relationships not only with neurosurgical mentors, but also with people in the technological industries, leaders in business and philanthropic organizations who can help promote research and education. We must look ahead and prepare one another to be successful not only in the art of Neurosurgery but the business of medicine. We must be united so that everyone, practitioner and patient, wins during and following the transformation of our nation’s largest service industry.

Editor: Kimberly A. Page, M.D., F.A.C.S.   •   www.neurosurgerywins.org
Women in Neurosurgery

Women and the Joints Sections: Getting Involved

Joint Sections are authorized subsections of the AANS and CNS “embracing” specific subspecialty disciplines within neurological surgery. There are currently eight sections: Cerebrovascular, Functional/Stereotactic, History, Pain, Pediatrics, Tumor, Spine and Peripheral nerves, and Neurotrauma and Critical Care. The latter two are the largest, each having well over 1000 members.

While women comprise approximately 5% of all neurosurgeons in the USA, approximately the same proportion are members of the Joint Sections. The largest percentages (approximately 8%) of women belong to the History and Pediatrics Sections. Tumors are third, with approximately 6% female members. Given these proportions, it is not surprising that few women have achieved elected leadership positions in their Sections. At present, only two women are serving as Section officers and only two have served as Chair.

Joan Venes, M.D. was a formative member of the American Society of Pediatric Neurosurgery. The AANS/CNS Section of Pediatric Neurological Surgery was established in 1972, and is the oldest of the Joint Sections. Dr. Venes recalls that the “Pediatric Section was small enough to hold its meeting, rather informal, in a classroom. It was relatively easy to know the leadership and just about every member of the Section.” The Pediatric Section provided for Dr. Venes a venue to “improve the care of children with neurosurgical conditions and to foster research through the exchange of ideas.” Her involvement led to the position of Section Chair from 1981-1983, the first woman to hold such a post.

Two decades later, Ann-Christine Duhaime, M.D. was elected as Treasurer for the Pediatric Section and is currently serving as Secretary until 2007. For her, Section involvement was part of a natural course for pediatric neurosurgeons most are members. According to Dr. Duhaime, “leadership tends to follow as jobs to be done come up, and volunteering to do them and showing interest in the specialty and Section activities is generally the way most people get started.”

The AANS/CNS Section on Disorders of Spine and Peripheral Nerve, or Spine Section, was chaired by Carole A. Miller, M.D. from 1991 to 1992 who also helped to establish the Section in 1978 with Dr. Stuart Dunsker. The Section’s establishment came out of the need to keep spinal surgery an important part of neurosurgical practice, as orthopedics was gaining a significant stronghold in the field. Their success can be measured by the Section’s strong membership and successful annual conferences. Dr. Miller said of her Section involvement, “it has been very personally and professionally rewarding and I am very humbled by the opportunities presented to me.”

A newly elected officer, Shelly Timmons M.D. Ph. D., will begin her two-year term as Secretary/Treasurer of the AANS/CNS Section on Neurotrauma and Critical Care, in April 2006. For this Section, she has also served as Membership and Education Committee Chairs. Her involvement began by being invited to attend the Executive Committee as a guest by one of the past Chairs, Dr. Ross Bullock, whom she had met through her involvement in the American Brain Injury Consortium, a group that organizes multi-centered research trials. The executive committee of each Section coordinates its needs, programs, and goals on behalf of their members.

According to Dr. Timmons, the Joint Sections play three important roles: “One is assisting members to speak with one voice on issues that relate to the Section’s clinical focus.” She cites as an example the Trauma Section’s involvement in guiding the Coding Committee in implementing new codes for decompressive craniectomy with corresponding relative value units (RVU’s). Another example is the position statement on neurosurgery emergency coverage. Secondly, the Sections provide “education and professional development through the programs sponsored at the major meetings and other activities,” Dr. Timmons said. “Third, the sponsorship of research awards both encourages scientific endeavor and addition of new knowledge to the field.” She has been involved in a number of educational initiatives in the Trauma Section, from which she has derived a great deal of satisfaction and a sense of accomplishment. “This has been one of the most rewarding aspects of my career, primarily because of the opportunity to regularly interact with like-minded individuals with similar intellectual interests.”

Other women have served in the leadership of the Sections in non-elected positions, such as Membership Chair, and other committee positions. Such involvement may lead to an elected post in the future, including the posts of Member-at-Large for which there is no clear data as to how many women have already been elected to this position. According to Dr. Duhaime, however, the time commitment can be significant and work is usually done on time outside of the requirements of a physician’s home institution. Dr. Venes states, “I suspect that many women, like men, are not willing to compromise their ‘quality of life’ by the extra hours required.” However, neurosurgeons who feel strongly about their subspecialty disciplines derive a sense of community and intellectual stimulation from Section involvement. “I was determined to be the best pediatric neurosurgeon I could be and the ability... continued on page 7
Tools, Trials, Teamwork & Tears: 
Brain Tumor Surgeons, Lifestyle & Research
Presented by Susan C. Pannullo, M.D.
Director of Neuro-Oncology, Department of Neurological Surgery
Assistant Professor of Neurological Surgery, New York Presbyterian Hospital/Weill Cornell Medical College

A presentation by Linda Liau, M.D., Ph.D.
UCLA Department of Neurosurgery

In vitro model and in vivo model for the study of clival chordomas
A poster presented by Aymara Triana, M.D.
Visiting fellow at the Mount Sinai Medical Center, NY & recipient of the Louise Eisenhardt Resident Travel Scholarship

Tuesday, April 25, 2006 • 5:30 to 7:30 p.m.
Sierra H Ballroom • San Francisco Marriott

WINS gratefully acknowledges MGI Pharma for their generous support of tonight’s event.

Congratulations!

Female Neurosurgeons Who Obtained ABNS Certification In 2005

Dr. Aviva Abosch
Dr. Lynn Bartl
Dr. Kimberly D. Bingaman
Dr. Susan Durham

Dr. Mina Foroohar
Dr. Aruna Ganju
Dr. Judith L. Gorlick
Dr. Amy B. Heimberger

Dr. Patricia B. Raksin
Dr. MariaElaina Sumas
Dr. Susan Tuli, F.R.C.S.C.
Dr. Julie York
This course, directed by two former WINS Presidents, is designed to reveal essential rules, written and unwritten, that direct neurosurgeons negotiations with hospitals for resources and to support program development.

The panelists include Sean Grady who has successfully leveraged Neurosurgery-driven hospital profits to negotiate substantial support for salaries for his department’s neurosurgeon and Dr. John Popp, who will discuss how to develop philanthropy as an important revenue source for program development. Peggy Vosburgh will reveal the hospital CEO’s point of view of the value of a neurosurgeon. Dr. Zusman will present a template from her successful negotiations for additional resources for program development - the business case, and Dr. Benzil will provide critical elements in evaluating profitability of neurosurgery as assessed by hospitals.

We look forward to seeing you there!
**WINS Highlights**

**San Francisco**

**Monday, April 24**

**Breakfast Seminars 7:30 AM – 9:30 AM**

**BS105** Complication and Outcome Assessment of Lumbar Interbody Fusion

* Moderator: Michael G. Fehlings, M.D., Ph.D., F.R.C.
* **Panelists:** Christopher Pearson Ames, M.D.; Catherine J. Gallo, M.D.; Anthony A. Salerni, M.D.; Kenneth S. Yonamura, M.D.

**PC106** Current Surgical Alternatives and Complications in the Treatment of Parkinson's Disease

* Moderator: Philip A. Starr, M.D., Ph.D.
* **Panelists:** Kelly Douglas Foote, M.D.; Kathryn Lois Holloway, M.D.; Jill Louise Ostrem, M.D.

**PC111** Spinal Cord Tumors: Neurosurgical Approaches and Risk Avoidance

* Moderator: Paul C. McCormick, M.D.
* **Panelists:** Jacques Brotchi, M.D., Ph.D.; Cynthia Chin, M.D.; Barth A. Green, M.D., F.A.C.S.; George I. Jallo, M.D.

**PC113** Syringomyelia: Pathophysiology and Treatment Approaches

* Moderator: Edward H. Oldfield, M.D.
* **Panelists:** Ulrich Batzdorf, M.D.; Ghassan K. Bejani, M.D.; Karii Muraszko, M.D.; Marcus Stoodley, M.D., Ph.D.

**PC116** State-of-the-Art Treatments for Low-Grade Gliomas

* Moderator: Joseph M. Piepmeier, M.D.
* **Panelists:** Mitchell S. Berger, M.D., F.A.C.S.; Peter McL. Black, M.D., Ph.D.; Linda M. Liau, M.D., Ph.D.

**PC119** Cerebral Trauma: State-of-the-Art Treatment

* Moderator: Alex B. Valadka, M.D.
* **Panelists:** M. Ross Bullock, M.D., Ph.D.; Austin R. Colohan, M.D., F.A.C.S.; Geoffrey T. Manley, M.D., Ph.D.; Jamie S. Ullman, M.D.

**Tuesday, April 25**

**Breakfast Seminars 7:30 AM – 9:30 AM**

**BS206** International Opportunities in Neurosurgery

* Moderator: Daniel F. Kelly
* **Panelists:** Marwyn Bagan, M.D., M.P.H.; Sanjay K. Gupta, M.D.; Armando M.T. Rocha, M.D.; Gail L. Rosseau, M.D.

**BS209** Pediatric Head Injury: Avoid Common Pitfalls

* Moderator: Thomas G. Luersson, M.D.

**BS213** Contemporary Treatments in Cervical Spondylotic Myelopathy

* Moderator: Robert F. Heary, M.D.
* **Panelists:** Emily D. Friedman, M.D.; Hiroshi Nagakawa, M.D.

**BS216** Management of Spinal Column Tumors

* Moderator: Ziya Gokaslan, M.D., F.A.C.S.
* **Panelists:** Deborah L. Benzil, M.D.; Mark H. Bilsky, M.D.; Laurence D. Rhines, M.D.; Peter C. Gertzen, M.D., M.P.H.

**Scholarship Presentation**

* **Tuesday, April 25**

The Louise Eisenhardt Scholarship will be presented to Aymara Triana, M.D. during the plenary session.
Women at the Top of State Neurosurgical Organizations!

WINS recognizes Ann Stroink, President of the Illinois State Neurosurgical Society; Shenandoah Robinson as President-Elect of the Ohio State Neurosurgical Society; Beverly Walters as President of the Rhode Island State Neurosurgical Society and Shelley Timmons as President of the Tennessee State Neurosurgical Society. Eight percent of the United States’ neurosurgical societies have women at the top of their state organizations!

Wednesday, April 26

**Breakfast Seminars 7:30AM–9:30AM**

**BS303 Lumbar Spine Fusion: Indications, Patient Selection and Current Techniques**

*Moderator: Joan Frances O’Shea, M.D.*


**BS305 Cavernous Malformations: Current Controversies in Management**

*Moderator: Daniel Rigamonti, M.D.*

*Panelists: Murat Gunel, M.D.; Kazuhiro Hongo, M.D.; Michael T. Lawton, M.D.; Gabriele Schackert, M.D.; R. Michael Scott, M.D.*

**BS306 Functional Mapping of the Cerebral Cortex: Advantages and Limitations**

*Moderator: Isabelle Germano, M.D., F.A.C.S.*

*Panelists: Mitchell S. Berger, M.D., F.A.C.S.; Hughes Duffau, M.D.; Johannes Schramm, M.D.*

**BS307 Chiari Malformations: Diagnosis, Treatments and Failures**

*Moderator: Nicholas M. Barbaro, M.D.*

*Panelists: Nalin Gupta, M.D., Ph.D.; Bermanas J. Iskandar, M.D.; Karin M. Muraszko, M.D.*

**BS309 Treatment of Complex Regional Pain Syndrome and Hyperhidrosis**

*Moderator: Samuel J. Hassenbusch, M.D., Ph.D.*

*Panelists: Zelma HT Hiss, M.D., Ph.D.; Robert M. Levy, M.D., Ph.D.; Vincente Vanaclocha, M.D.*

Thursday, April 27

**Breakfast Seminars 7:30AM–9:30AM**

**BS402 Cerebrovascular Neurosurgery Meet the Experts**

*Moderator: Robert E. Harbaugh, M.D., F.A.C.S.*

*Panelists: Yoko Kato, M.D.; Robert H. Rossenwasser, M.D., F.A.C.S.; B. Gregory Thompson, Jr., M.D.*

Upcoming Feature

Celia Sandys Presents

**Winston Churchill: In His Own Words**

A WINS special lecture presented in conjunction with the CNS Annual Meeting: Transcendent Leadership

*When: October 12, 2006, Morning Plenary Session, CNS Annual Meeting*

*Where: Sheraton Towers, Headquarters Hotel, Chicago, Illinois*

*What: Celia Sandys, noted historian and granddaughter of Winston Churchill, will describe the qualities that made Churchill one of the greatest leaders of the 20th century. His legacy remains an inspiration for our times as well. Using audio recordings, Sandys will present, “The Leadership of Winston Churchill: In His Own Words.”*
I’ve experienced in a different way working with residents as training program faculty. How to prepare for an interview, determine the type of practice to pursue, balance a personal life with a professional career -- these are among the issues important to residents standing on the brink of the neurosurgical profession. I certainly am in good company -- and the residents are in good hands - with my mentor colleagues, all of whom represent a remarkable depth and breadth of neurosurgical experience, and among whom are current and past leaders of the AANS.

Inherent in the concept of mentorship is that the relationship develops with some degree of choice. The program matches each participating resident with a neurosurgeon mentor based upon the criteria that the resident deems most important. Residents rank criteria important to them, such as the type of neurosurgical practice -- private, academic, military -- geographic location and subspecialty, by completing and submitting a brief form.

A survey of residents who are participating in the program indicated great satisfaction with the process of enrolling in the program, receiving a mentor, and developing contact with the mentor. Nearly all of the respondents said that their mentors were helpful and available. They also said that e-mail communication provides an easy and suitable way for ongoing contact.

Initial feedback on the success of the AANS Resident Mentoring Program indicates that for neurosurgery the potential of mentoring finally has begun to be tapped.

“I have a new understanding and a better confidence in my decisions as a result of conversations with my mentor,” commented Brian Snyder, M.D.. Another resident highlighted the challenges of mentoring as an active rather than a passive process:

“Good idea!” noted Sudesh Ebenezer, M.D. “I think this program will be what an individual makes of it [and that] it has great potential.”

Deborah L. Benzil, M.D., is associate professor at New York Medical College, Valhalla, N.Y.

Women and the Joints Sections: Getting Involved

to exchange ideas and discuss advances, which the Section and Society presented, furthered that end,” said Dr. Venes.

The common denominator for all persons looking to climb the Section ladder is interest and reliability, helping to drive the mission of their respective organizations. A great deal can be gleaned from the success of women such as Drs. Miller, Venes, Duhaime, and Timmons. Dr. Miller summarizes the process: “Join, do research, present papers, go to the business meetings and be involved… if that is what you want.”

Jamie S. Ullman, M.D.
President-Elect
Women in Neurosurgery

Louise Eisenhardt Resident Travel Scholarship

The 2005 Louise Eisenhardt Resident Travel Scholarship will be awarded to Aymara Triana, M.D., Neurosurgical resident at the Mount Sinai Medical Center, at the upcoming American Association of Neurological Surgeons Spring Meeting, on Tuesday, April 25. Dr. Triana won the award for her poster, in vitro and in vivo model for the study of clival chordomas. She will receive her award during the Plenary Session of the meeting.

The Louise Eisenhardt Resident Travel Scholarship is granted once every year to a female resident with an abstract accepted at the American Association of Neurological Surgeons Annual Meeting. A stipend of up to $1,000 is given to cover travel expenses to the meeting.

A WINS selection committee, headed by Isabelle Germano, M.D., reviews the abstracts.

Sherry Apple Resident Travel Scholarship

The Sherry Apple Resident Travel Scholarship is granted once every year to a female resident with the most outstanding abstract accepted at the Congress of Neurological Surgeons Annual Meeting. A stipend of up to $1,000 is given to cover travel expenses to the meeting.

A selection committee, headed by Jamie Ullman, M.D., reviews the abstracts submitted to WINS for consideration. All eligible residents may submit their abstracts by e-mail (preferred), fax or snail mail to:

Dr. Jamie Ullman
Elmhurst Hospital
Department of Neurosurgery
79-01 Broadway
Elmhurst, NY 11343
(718) 334-2772 • Fax (718) 234-2765
e-mail: JamieU@aol.com

WINS would also like to thank MGI Pharma for their generous support of resident education and research.

Women in Neurosurgery

Mentoring in Neurosurgery on the Up-swing

continued from back page
Mentoring in Neurosurgery on the Up-swing

Mentoring has become an important focus in the field of medical education over the last decade. Within neurosurgery, attention to mentoring has lagged far behind until recently. During the five years of neurosurgical training, residents are greatly influenced by the academic environment in which they typically work and by their program directors. This traditional experience now can be augmented formally through the AANS Resident Mentoring Program.

“The job of the mentor is to complement what the resident’s program director already is doing,” said Samuel Hassenbusch, M.D., Ph.D., first chair of the AANS Resident Mentoring Program. “The resident benefits by receiving an additional relevant perspective on a career in neurosurgery.”

The AANS Resident Mentoring Program, launched in January 2005, already has attracted more than 100 participants, with mentors currently outnumbering residents nearly 2 to 1. Each seasoned neurosurgeon acts as an available and approachable mentor who engages the resident and guides his or her professional development over time. Mentors share their experience and expertise as astute listeners, observers and problem solvers with the goal of helping the residents attain the professional goals they have developed for themselves.

As a participating mentor myself, I relish the opportunity to help a resident navigate the career paths and pitfalls I once experienced and that continued on page 7