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Snacc Newsletter

Society of Neurosurgical Anesthesia and Critical Care Newsletter

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President's Message

One of the great joys of these past several months for me has been to realize the tremendous amount of strength that exists within our Society, and the dedication that exists to further the knowledge and the foundation of excellence within our area of practice. Most recently this has been exhibited by the outstanding success of Euro-Neuro (Dr. Cathy DeDeyne (*EURO-NEURO@skynet.be*)), an interdisciplinary event with neuroanesthesiologists, neurologists, neurosurgeons, and neurobiologists contributing to the program. This event was certainly a tribute to the leadership skills of neuroanesthesiologists (many of whom are SNACC members) throughout the world. This was a wonderful event that required countless hours of organization and implementation. It clearly demonstrated neuroanesthesiologists as leaders in the area of clinical neurosciences. I applaud the Euro-Neuro organizing body and look forward to continued interactions between SNACC and Euro-Neuro in the coming years.

Neuroanesthesiologists have also demonstrated prominence in North America. For example, within the ASA, SNACC members play a prominent role. Dr. Cottrell currently is Vice President for Scientific Affairs. In addition, a number of our members are delegates or alternate delegates from their states to the ASA or are active members of important ASA committees (see list below). Therefore, as a group, we have significant power within the ASA legislative body. With this amount of power at both an international and national level, I believe that as an organized group we can certainly accomplish our mission. I am certainly aware that all SNACC members have very busy lives, however, I am hopeful that I can encourage each of you to give just a little more effort to further our specialty. I am not asking for anything that will directly benefit the Society. Rather, I request that each of you become a little more involved with the residents and students in your program, the neurosurgeons, the neuromonitoring professionals, hospital administrators, and nurses to express the true value of neurosurgical anesthesiology. I believe that all too often we understate the value of our skills, and thus, others may incorrectly perceive that our skills and knowledge have no real value. At a national level, I have taken steps to foster our relationship with the neurosurgeons via the AANS, and Dr. Brenda Fahy is fostering our relationship with neurointensivists in the Society of Critical Care Medicine. Your comments and suggestions on this

topic are welcome (jkirsch@jhmi.edu).

Just five years ago the ASA was predicting a decreased need for anesthesiologists in the United States and there was a tremendous drop-off of interest among graduating medical students in our specialty (fewer than 200 graduates matching in anesthesiology). With a lot of hard work, and renewed enthusiasm in the specialty, we have turned this around. This year, 802 graduates matched to anesthesiology in the United States. I had the opportunity to meet a significant number of these applicants in my role as residency director at Hopkins, and the quality was simply unbelievable. I believe that if each one of us in the Society takes a few extra minutes during our day to work with residents and medical students and act as a mentor and provide encouragement, it will pay off with an increased interest for fellowship training and research in neurosurgical anesthesia and critical care.

I believe that it is crucial that we act quickly. Dr. Jerry Reeves (Duke University) has recently reported in his yearly survey of anesthesiology fellowship training in the United States, that interest for special training in neurosurgical anesthesia has dropped-off significantly for senior residents, as well as fellows. I have also witnessed this decrease in fellowship training in neurocritical care. Because this decrease is greater than that observed for adult ICU, pain management, pediatric and cardiac anesthesiology, some have suggested that the drop-off is due to the lack of a process for accreditation of training programs within our subspecialty. My opinion is that we should legitimize our subspecialty with the ACGME and develop standards for training. I see that the benefits of this process (such as provision of GME dollars to support fellows training in neuroanesthesia and critical care; allowing easier access of international medical graduates to this training in the United States because of ECFMG guidelines) outweigh the disadvantages (such as not allowing fellows to bill as attendings during the training period). Others have suggested that our decreased role in the area of neuromonitoring has also played a role. In this regard I have begun discussion with the American Society of Neurophysiological Monitoring (<http://www.ASNM.org/>) in hopes of strengthening our mission of improving education and quality of care in this area. I have already had several positive interactions with the President of ASNM, Dr. Marc Bloom, who is also a long-time, loyal SNACC member. I am sure that this interaction is a step in the right direction to improve the educational foundation for neuroanesthesiologists in the area of neuromonitoring. Although I do not believe that neuroanesthesiologists will, or should, have a controlling role in neuromonitoring, I do believe that more significant interaction between the neuroanesthesiologist and the neuromonitoring team in the areas of clinical care, research, and education is necessary. I also do not believe that we should limit our interaction to that of electrophysiologic monitoring, but rather, I would encourage renewed, active interest in the areas of cerebral oximetry, TCD monitoring, and with the use of parachymal probes. I am hopeful there will be increased interest in this area of our practice after the exciting presentations about these topic at our Annual Meeting in October. If you have specific concerns, comments, or suggestions about these issues please contact me by e-mail (jkirsch@jhmi.edu).

Our Society has made much progress over the past year. As I am sure most of you are aware, Dr. Ira Rampil, web-master and director of the committee on electronic communication has significantly upgraded our website (<http://anesthesia.ucsf.edu/snaccweb/>). Dr. Rampil has planned a number of additional upgrades to the site, including a web-based discussion group, access to more comprehensive neuro-related reference material with Sulpicio G. Soriano, M.D. (SORIANO@A1.TCH.Harvard.edu), and a new SNACC bibliography with Dr. Karen Domino (kdomino@u.washington.edu). Also, now present on the website is an updated table of the fellowship opportunities in our specialty. This table was put together by Dr. Maryann Cheng. Thanks to the hard work of our Task Force on Industry Relations (Christopher.Breder@

pharma.com) and several other motivated members of our society, the financial basis of the website and Society has grown substantially during the past year.

I am hopeful that the members will continue their interest in the Society and work with me to encourage appropriate growth in our subspecialty. I look forward to an exciting annual meeting in October and having the chance to discuss these and other issues with the membership at the business meeting.

The following is the listing of SNACC members with roles in the ASA.

Robert Allen, MD, President of South Dakota Society of Anesthesiologists. Delegate to the ASA House of Delegates. Alternate Delegate, District 15, South Dakota.

Susan Black, MD, ASA Committee for the Annual Meeting. ASA Scientific Affairs Committee.

Robert Bedford, MD, ASA Veterans and Military Affairs Committee.

Daniel J. Cole, MD, California Delegate to ASA House of Delegates.

Daniel F. Dedrick, MD, Massachusetts Delegate to ASA House of Delegates. ASA Committee on Medical Students and Residents - Ad Hoc.

Dennis D. Doblar, MD, PhD, ASA Practice Parameters Committee. ASA Subcommittee on Clinical Neurosciences.

Joseph P. Giffin, MD, Member House of Delegates. ASA Committee on Economics (Volunteered to represent Neuro subspecialty).

A. Greenberg, MD, Maryland Delegate to ASA House of Delegates.

Stephen Rupp, MD, Chair, ASA Neuromuscular Transmission Committee.

Deborah Rusy, MD, Wisconsin Alternate Delegate to the ASA House of Delegates.

Armin Schubert, MD, Ohio Alternate Delegate to the ASA House of Delegates. ASA Outreach Education Committee.

Barbara Van de Wiele, MD, Alternate Delegate to the California Society of Anesthesiologists.

SNACC Breakfast Program

The ASA breakfast symposium sponsored by SNACC will be held Wednesday morning October 18, 2000. Dr. Barbara Van de Wiele (University of California Los Angeles) will moderate an excellent panel which she has arranged. The panel will discuss Neuroanesthesia: A look to the future.

Panel members include Scott M. Eleff, M.D., (The Chicago Medical School, Chicago, Illinois) who will discuss Magnetic resonance imaging and the neurosciences-diagnostic, experimental and clinical applications and implications.

David S. Warner, M.D., (Duke University Medical Center Durham, North Carolina) will discuss Remifentanil and the neurosurgical patient. Finally, Adrian Gelb, M.D., Ch.B., (London Health Sciences Center London, Ontario) will discuss Anesthesia for carotid endarterectomy: Report from

the front lines.

Annual Meeting Program

The annual meeting of SNACC will be held Friday, October 13, 2000 before the ASA in San Francisco, California. As has been the recent custom, the meeting will be preceded the evening before (Thursday, October 12, 2000) with a dinner symposium. This year's symposium will be sponsored by Baxter Pharmaceutical and chaired by Pedro Amorin, M.D., from Portugal. The meeting will highlight the issues of neuroprotection and will include talks by Dean Kurth, M.D., (Children's Hospital of Philadelphia) and Bill Hoffman, M.D. (Chicago, Illinois). The discussion appears to be timely and of great interest.

The meeting program (shown below) promises to be an exciting mix of science and controversy with a special luncheon program that will be a joint meeting between our Society, the American Society of Critical Care Anesthesiologists, and the Society of Pediatric Anesthesiology.

Morning

7:30-7:35 Welcome and Introduction

Jeff Kirsch, M.D., President SNACC, Baltimore, MD.

7:35-8:20 Neuromonitoring: What is the Role of the Anesthesiologist?

Moderator: John C. Drummond, M.D., San Diego, CA.

Pro: Mark H. Zornow, M.D., Galveston, Texas.

Con: Michael E. Mahla, M.D., Gainesville, FL.

8:20-8:40 Young Investigator Award Poster Walkaround I

9:30-11:00 Oral Abstract Session

Moderator: Brenda G. Fahy, M.D., Baltimore, MD.

11:00-12:00 Business Meeting

Luncheon

12:00-1:30 *Combined SNACC/ASCCA/SPA Luncheon.*

* *Nitric Oxide as a Unique Signaling Molecule in the Cardiovascular System:* Louis J. Ignarro, Ph.D.

Afternoon

1:30-2:15 **CNS Ischemia/Injury Forum** Moderator: Cor J. Kalkman, M.D., Amsterdam, The Netherlands.

* *Clinical Trials Update* : David S. Warner, M.D., Durham, NC.

* *Gene Therapy* : Rona G. Giffard, Ph.D., M.D., Stanford, CA.

* *Anesthetics and Cerebral Ischemia* : Christian P. Werner, M.D., Munich, Germany.

2:15-3:45 Poster Walkaround II

3:45-4:30 Clinical Update: Avoiding the M & M Conference

Moderator: Sulpicio G. Soriano, M.D., Boston, MA.

* *The Unstable C-spine* : Mary K. Sturaitis, M.D., East Haven, CT.

* *Visual Loss After Spine Surgery* : Kathryn K. Lauer, M.D., Milwaukee, WI.

* *Nerve Injury* : Karen B. Domino, M.D., Seattle, WA.

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