



# New England Surgical Society Newsletter

Volume 3, Number 2

Summer 2001

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## FROM THE PRESIDENT



H. David Crombie, M.D.

have changed the program to end at eleven o'clock at the conclusion of the Mixer Lecture. This year's Mixer Lecturer will be Dr. Glenn Steele, currently an associate member of the society who left New England to become Dean of the University of Chicago School of Medicine, and earlier this year became CEO of the Geisinger Health System.

For those with an interest in the history of surgery and the traditions of the New England Surgical Society, we are expecting to distribute at this year's annual meeting a special NESS booklet containing six state surgical histories, five of which appeared in the April, 2001 *Archives of Surgery*. In addition, the cover will reproduce the pictures of our eighteen founders of 1916 along with their bios, the listing of officers and meeting locations, and pertinent commentaries and editorials that have appeared in the *Archives*. All of this is the brainchild of Dr. Organ, *Archives* editor, whose original prompting led to the writing of the state surgical histories a year ago. The booklet promises to be a lasting memento of the traditions of the society.

In recent years comment has been made about the unexpected absence of

(continued inside)

Planning progresses apace for the eighty-second annual meeting of the New England Surgical Society in Providence, Rhode Island, September 21-23, 2001. Dr. Victor Pricolo and the Program Committee have reviewed the submitted abstracts for the scientific meeting and nineteen excellent abstracts on a variety of subjects of interest to surgeons have been selected for presentation. The format from Friday afternoon to Sunday morning will be generally similar to past meetings with a panel on Surgical Education (at all levels) scheduled for Saturday morning. With the diminishing attendance observed on Sunday morning in recent years, the Program Committee and the Executive Committee

*...we are expecting to distribute at this year's annual meeting a special NESS booklet containing six state surgical histories...*

**2001 Annual Meeting**

**September 21-23, 2001**

**Westin Hotel / Providence, Rhode Island**

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## 8<sup>th</sup> Annual Surgical Resident/Fellow Research Presentation Day

Steven Schwartzberg, MD

On May 18, 2001, the 8<sup>th</sup> Annual Surgical Resident/Fellow Research Presentation Day was held at New England Medical Center. Opening remarks were made by Thomas F O'Donnell, MD, President and CEO of New England Medical Center and William Mackey, MD, Chairman of the Department of Surgery at New England Medical Center. The program was designed to include both basic science and clinical presentations and featured 19 abstracts from surgical programs all over New England, and as far away as South Carolina. General, vascular, cardiac, orthopedic, pediatric and neurosurgery were represented.

This year's Visiting Professor Lecture given by David Rattner, MD entitled "Academic Surgery – Why Bother?" was well received and prompted many thoughtful comments by the residents and fellows.

The quality of the program was outstanding and provided a challenge for the judges (Raymond Connolly, PhD, NEMC; John Welch, MD, Hartford Hospital; John Russell, MD, New Britain; Nicholas Coe, MD, Baystate Medical Center; David Crombie, MD, Hartford Hospital and current NESS President; and David Rattner, MD, Massachusetts General Hospital) to determine the winners.

The judging for the awards focuses heavily on the excellence of the oral and visual presentation, as well as the quality of the science. Presenting work at the New England Surgical Resident and Fellow Research Presentation Day gives the participant an opportunity to prepare for larger forums. Each resident will receive a "feedback sheet" from the judges highlighting the strengths and weaknesses of their presentation. These presentation skills will benefit the participants in the future regardless of career choice.

### **OUTSTANDING BASIC SCIENCE PRESENTATION**

**Antonia Stephen, MD**

Massachusetts General Hospital  
*Engineered Tissue Using Transfected  
Cells Inhibit Tumor Growth*

Plaque and \$1000 to be used for travel to the Clinical  
Congress of the ACS, presented by  
Janice Rothschild, MD, Treasurer of the Massachusetts  
Chapter of the American College of Surgeons

### **THIRD PLACE PRESENTATION**

**Deepa Soni, MD**

Children's Hospital/Brigham & Women's Hospital  
*Extensive Axon Regeneration in the  
Adult Rat Spinal Cord After Injury*

Certificate and \$250 from the Maine Chapter of the  
American College of Surgeons presented by  
Steven Schwartzberg, MD, Program Coordinator

### **OUTSTANDING CLINICAL SCIENCE PRESENTATION**

**Bernard Benedetto, MD**

Baystate Medical Center  
*Use of Cryopreserved Cadaver Vein Allograft  
for Hemodialysis precludes Renal  
Transplantation due to Allosensitization*

Plaque and \$1000 presented by  
H. David Crombie, MD  
President of the New England Surgical Society

### **HONORABLE MENTION PRESENTATION**

**Jason Johnson, MD**

Spartenberg Regional Medical Center, South Carolina  
*Type II Error in Randomized Control Trial  
with Negative Results. Are Methods Improving*

Certificate and \$100 from the Connecticut Chapter of the  
American College of Surgeons presented by  
Steven Schwartzberg, MD, Program Coordinator

### **SECOND PLACE PRESENTATION**

**Tracy Grikscheit, MD**

Massachusetts General Hospital  
*Tissue Engineered Colon Characteristics  
and Comparison to Native Colon*

Plaque and \$500 presented by  
H. David Crombie, MD  
President of the New England Surgical Society

*Watch Your Mail for Details on the*

**9<sup>th</sup> Annual Surgical Resident/Fellow  
Research Presentation Day**

Tentatively scheduled for  
**Friday May 17, 2002.**

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## Looking Back: THE NESS 25 YEARS AGO

H. David Crombie, M.D.

The autumn of 1976 marked 60 years since the first meeting of the New England Surgical Society in Boston. On the national scene, we were proudly celebrating our bicentennial which gave our surgical historians the opportunity to remind us that it was on the occasion of our centennial, one hundred years earlier, that Joseph Lister had come to America to convince a skeptical surgical community of the merits of his principles of antisepsis.

Dr. Emerson Drake entitled his presidential address to the New England Surgical Society, "Our Economic Morass", but indicated that it could be captioned, "Surgery and the Health Care Dollar". At the centennial of his hospital, Maine Medical Center in Portland, he reflected on the increase in surgical procedures over the century of its operation from 85 to 12,000 annually, and on the alarming cost of providing that surgical care. He noted that surgical residencies had enlarged to train more surgeons than were needed to provide adequate surgical care. "With the increase in the number of surgeons there has been a corresponding increase in the number and complexity of operative procedures, the number of surgical beds occupied, the number of laboratory tests performed, and in the costs incurred in providing medication."

He advocated in favor of the recommendations of the SOSSUS study of specialty manpower needs for the future, in support of the inclusion of cost awareness in the education

of surgical residents as they order for patients, and the shift of more surgical care into the ambulatory setting. With the cost of malpractice insurance at a national level of about \$1.5 billion, he begged for a return to the "original concept of liability as applying solely to purposeful wrongdoing or for grossly negligent performance." He concluded by alerting surgeons to be judicious and ethically sound in applying new and expensive technologies to the care of patients nearing the end of life, sometimes without knowledge of, or in defiance of, those patients' wishes. Some prescient presidential thoughts indeed.

When one reads the twenty-two papers from the scientific meeting of 1976 that were published in the *American Journal of Surgery* the following April, more presidential thoughts surface which should serve as inspiration to members assessing the value of submissions to this society's meetings. One past president and eight presidents-to-be of NESS were among the authors: Marshall Bartlett (1967), Fiorindo

Simeone (1983), John Braasch (1985), Joseph Murray (1987), James Foster (1989), John Burke (1990), Andrew Warshaw (1994), Blake Cady (1996), and Leslie Ottinger (1998). Their various subjects paralleled in currency and cogency the important surgical issues of the day discussed at the American Surgical Association. We must hope to measure up to those high standards of a quarter century ago in each of our annual meetings.

***Dr. Emerson Drake entitled his presidential address to the New England Surgical Society, "Our Economic Morass", but indicated that it could be captioned, "Surgery and the Health Care Dollar".***

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**ATTENTION NESS MEMBERS: If you have local news which you would like to share with the NESS membership in this section of the Newsletter, please contact your State Representative.**

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## FROM THE PRESIDENT

(continued from page one)

some of the new members at their induction into the Society at the business meeting on Saturday morning. The plan for the Providence meeting will include a continental breakfast/President's Reception for new members at 7:00 a.m. preceding the 7:30 business meeting. The six state representatives to the executive committee (and all interested others) are advised to alert new members about this important obligation. The list of those to be inducted may be found in the preceding issue of the newsletter.

After attending the excellent Surgical Resident/Fellow Research Presentation Day in Boston on Friday, May 18, 2001, I call to the attention of the membership the date of the next presentation day-May 17, 2002. Dr. Steven Schwaitzberg, one of the new members this year, ably serves as organizer, planner, host and moderator for the day as well as advisor to

all the participants. His summary appears in this newsletter. The Society supports the day's activities through the charitable foundation and prizes are awarded on behalf of NESS to the best scientific and clinical presentations respectively. Other sponsors are the American College of Surgeons state chapters from Maine, Massachusetts and Connecticut, the Kiwanis Pediatric Trauma Institute and the Department of Surgery at NEMC/Tufts University School of Medicine. It is a very enjoyable day and one that demonstrates science, sociability, scholarship, skill of presentation, mentoring and peer respect. It can also serve as a potential source of abstracts for our annual meetings. I hope many will set the date aside for attendance at the meeting in Boston next Spring.

Meanwhile, I hope to see all of you in Providence in September.

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## FROM THE PRESIDENT-ELECT

### To Err Is Human



**Roger S. Foster, Jr., M.D.**

tradition of a written medical record in many hospitals and other standards were frequently lax) which has now moved out of the ACS and become the Joint Commission on Accreditation of Healthcare Organizations (JCAHO); the educational programs of the New England Surgical Society, the American College of Surgeons and numerous other surgical organizations.

The attention of the public and the U.S. Government towards issues of patient safety has been raised by the recent report of the Institute of Medicine (IOM), "To Err is Human: Building a Safer Health System." Many of the recommendations in the IOM report deserve support, but several of the recommendations could well be counterproductive.

The recommendation that Congress pass legislation extending peer review protections to any and *all* data collected by health care organizations for internal use or for sharing with other organizations is certainly appropriate. This recommendation is similar to the one that has come from the Medicare Payment Advisory Commission (MedPac) under the ra-

Surgeons have a long tradition of recognizing and addressing errors in judgement and errors in technique and deficiencies in the health care system that have the potential for leading to a poor outcome in surgical care. A few examples of surgical initiatives are: the widespread practice of weekly surgical Morbidity and Mortality conferences; the Hospital Standardization Program initiated by the American College of Surgeons in 1918 (at a time when there was no

tradition of a written medical record in many hospitals and other standards were frequently lax) which has now moved out of the ACS and become the Joint Commission on Accreditation of Healthcare Organizations (JCAHO); the educational programs of the New England Surgical Society, the American College of Surgeons and numerous other surgical organizations.

tionale that the reporting of "incidents of preventable errors in health care delivery is unlikely to become routine practice as long as providers fear that the information they disclose can be used against them in a punitive manner."

The recommendation that there be 50 mandatory reporting systems (one in each state) for adverse events that result in death or serious hardship is problematic. First the recommendation would lead to 50 different reporting systems and, second, it assumes that the data in this system would be subject to public disclosure.

A more appropriate model is that of the Aviation Safety Reporting System where reporting is voluntary, confidential and non-punitive. The goal is to improve our health care system by identifying, reporting, and analyzing errors whether or not they have led to an adverse outcome. Most errors are not due to carelessness, but to an inadequate process. Blaming an individual for the error does little to improve the process. The loop needs to be closed when errors are identified. Systems need to be modified to reduce the possibility of error. The aviation industry, with its computer simulations in training, its standardized practices, and its checklists, and double checks, is a model to be looked to. Our colleagues in Anesthesiology have improved the safety of general anesthesia through checklists and standards for improved monitoring and recording.

As surgeons, we need to continue to provide the leadership in our hospitals for non-punitive processes that identify and analyze errors and modify any systems that have contributed to an error or, since to err is human, have failed to provide the safety of a double check that would have prevented the error. Standardized care plans known to all caring for the patient and shared with the patient is one approach. Patient safety is an important area for research, for pilot projects and for demonstration projects, to identify useful and effective methods for reducing errors.



## Highlights of the EXECUTIVE COMMITTEE MEETING

June 27, 2001

Boston, Massachusetts

### Report of the President

Greater efforts will be made to welcome new members at the Annual Meeting. The President will write a letter to each new member emphasizing the importance of attending the meeting, while the State Representatives will personally contact them. A special breakfast will be held on Saturday morning with the Executive Committee.

### Report of the Secretary

There are currently 256 active members and 359 senior members. Thirteen active members will attain senior status this year. 27 members have missed the last 2 consecutive meetings and 8 have missed 3 consecutive meetings. Several individuals have passed away between January and May, 2001:

William E. Bloomer, M.D.  
Long Beach, California  
Richard D. Bush, M.D.  
Monument Beach, Massachusetts  
Malcolm M. Ellison, M.D.  
New London, Connecticut  
Thomas S. Risley, M.D.  
Beverly, Massachusetts  
Carter R. Rowe, M.D.  
Fredericksberg, Virginia

### Report of the Treasurer

Total assets of \$133,342 were reported in March 2001, compared to \$120,155 in the previous year. There was a net surplus of \$20,660, compared to \$39,371 one year ago. Contributions from Senior members for dues and assessments continued to increase.

The Charitable Foundation reported total assets of \$155,739.

### Report of the Recorder

The overall acceptance rate of manuscripts submitted to the *Archives of Surgery* was 75%. Once again, the Program Committee will critically review manuscripts in early August with the intent of increasing the acceptance rate.

### Report of the Representative to the ACS Board of Governors

Executive Director Thomas Russell, M.D. is reviewing all operations and has put a strategic planning process in place. A dues increase is undergoing consideration.

### Report of the Representative to the ACS Advisory Council for Surgery

Dr. Peter Deckers has requested that a replacement be selected to succeed him.

### Other Business

The Archives Committee, under the direction of Dr. Crombie, is looking at sites, such as the Countway Library in Boston, for storage of archival material.

Accreditation of the Annual Meeting Program by the ACS is being considered. This should be reliable and less expensive than the current process.

The possibility of listing members by specialty in the Annual Program Book was suggested. The idea of requesting a modified CV from all members every 5 years was proposed. These data could be stored on a CD.

The Charitable Foundation would like to provide support for discussions of ethical issues in surgery.

Joseph P. Meyer, M.D. was nominated to succeed Seth Resnicoff, M.D. as the New Hampshire State Representative; Thomas F. Tracy, Jr., M.D. was selected to replace Victor E. Pricolo as the Rhode Island Program Committee Representative.

## FUTURE MEETINGS of the NEW ENGLAND SURGICAL SOCIETY

**2002 Annual Meeting**  
**September 27-29**

The Balsams Resort  
Dixville Notch, New Hampshire

**2003 Annual Meeting**  
**September 17-21**

The Doubletree Islander  
Newport, Rhode Island

**2004 Annual Meeting**  
**September 30-October 3**

Hilton Montreal Bonaventure  
Montreal, Quebec, Canada

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**82<sup>nd</sup> Annual Meeting of the New England Surgical Society**

**September 21-23, 2001  
Westin Hotel, Providence, Rhode Island**



**REGISTER  
NOW**

**PRELIMINARY PROGRAM HIGHLIGHTS**

**SCIENTIFIC SESSIONS**

Late Outcomes After Laparoscopic Surgery for Gastroesophageal Reflux Disease  
Is an Esophageal Bougie Necessary for a Safe and Effective Laparoscopic Nissen Fundoplication?  
Association of Operative Technique and Incidence of Paraplegia in Repair of Blunt Traumatic Aortic Injury  
Abnormal Motility in Ulcerative Colitis:  
Role of Inflammatory Cytokines  
Blunt Lower Extremity Trauma and Popliteal Artery Injuries:  
Revisiting the Case for Selective Arteriography  
6533 Major Vascular Operations: Diabetes Is Not A Risk Factor In Postoperative Mortality and Cardiac Morbidity  
Portal Venous Gas Detected by CT: Is Surgery Imperative?  
Preoperative Staging of Rectal Cancer  
Using MRI with External Phase Arrayed Coils  
The Effect of Comorbid Illness on Mortality  
Outcomes in Cardiac Surgery  
Avoidable Complications in Surgical Patients  
Hepatic Radiofrequency Ablation  
Hand-assisted Laparoscopic Liver Surgery  
Adjuvant Therapy Improves Survival in Advanced Gall Bladder Carcinoma  
Pancreas After Kidney (PAK) Transplantation:  
The Current New England Experience  
Transoral Stapled Cricopharyngeal Myotomy for Zenker's Diverticulum  
The Use of Readily Available Equipment in a Simple Method for IntraOperative Monitoring of Recurrent Laryngeal Nerve Function During Thyroid Surgery:  
Initial Experience with 200 Cases  
The Vermont Colorectal Cancer Project: Self Portrait  
Role of Primary Breast Cancer Characteristics in Predicting Sentinel Lymph Node Positivity: A Multivariate Analysis  
Indium 111 Somatostatin Usage- A Novel Therapeutic Advance in the Treatment of Unresectable Neuroendocrine Tumors

**STATE CAUCUS MEETINGS**

**Friday - 5:30 p.m.**

**PANEL DISCUSSION**

**Saturday - 8:40 a.m.**

**Surgical Education: Old and New Challenges**

*MODERATOR: Victor E. Pricolo, M.D.*

*PANELISTS: Nicholas P. Coe, M.D., Springfield, MA*

*Kenneth W. Burchard, M.D., Lebanon, NH*

*Joseph F. Amaral, M.D., Providence, RI*

**NATHAN SMITH AWARD**

**Saturday - 11:00 a.m.**

**PRESIDENTIAL ADDRESS**

**Saturday - 11:10 a.m.**

**The Surgeon's Art**

*H. David Crombie, M.D., Hartford, Connecticut*

**SEVENTEENTH ANNUAL**

**SAMUEL JASON MIXTER LECTURE**

**Sunday - 10:00 a.m.**

*Biological and Medical Sciences: Unlimited Opportunity in a Time of Shrinking Clinical Margins*

*Glenn D. Steele, Jr., M.D., Chicago, Illinois*

**ANNUAL BUSINESS MEETING**

**Saturday - 7:30 a.m. and**

**Sunday - 7:30 a.m.**

**ANNUAL BANQUET**

**Saturday - 7:00 p.m.**

**Additional information, Registration and Hotel Reservation forms  
are included in this mailing or contact:**

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