



# New England Surgical Society Newsletter

Volume 6, Number 2

Summer 2004

## 2003-2004 Executive Committee

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Walter B. Goldfarb, M.D.

### President-Elect

A. Benedict Cosimi, M.D.

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## FROM THE PRESIDENT



Walter B. Goldfarb, M.D.

The business of the New England Surgical Society continues apace. The Executive Committee met twice in recent months -in January and again on June 9<sup>th</sup>. The Program Committee also had a mid-winter meeting to plan the "skeleton" of the Annual Meeting and again on June 9<sup>th</sup> to pick from blinded abstracts for one of three of the following options: a podium presentation for 10 minutes; a short (3 minute) presentation called "Quick Shots" (successful in its debut last year); or a poster presentation, an innovation this year.

The number of abstracts submitted was 65, many excellent. The Program Committee, under the leadership of Dr. Jim Hebert, is to be congratulated for its diligence and imagination. With the Quick Shots and poster presentations, we have expanded the number of people involved in the proceedings and thus "opened things up" to greater participation of the membership at the Annual Meeting of the Society.

*(continued on page 2)*

## Editor's Corner

Edward Z. Walworth, M.D.

Inevitably, at every meeting of the NESS Executive Committee, we are informed of the death of one or more members of the Society. If the late surgeon passed on at an advanced age, especially in an out-of-state retirement community far from his place of surgical practice, we are often left with a newspaper obituary as the only source of information about the departed.

Each year's annual meeting Program includes several memorial statements, some quite eloquent and personal, easily appreciated by readers who never knew that member and all the more valued by those who did. It is sad when we can only produce a few perfunctory paragraphs about an individual.

This organization relishes its fellowship and places value in the achievements and character of its members. For that reason, we are asking that upon becoming a Senior Member at age 60, each member furnish the Secretary with an up-to-date CV. Then at one's retirement, however much later (or earlier) that occurs, it would be ideal if each member would compose a page or two of reflections on his or her career. Call it a preliminary

*(continued on page 4)*

## We Need Your Help!

Getting obituaries of our deceased members is hard. We really need someone who knew the member to help us. If you knew any of the members listed on page 4 and would be willing to write a memorial statement, however brief, for the program book, please contact the NESS Secretary via the Administrative Office. Since our program books are archived at the Countway Medical Library, these obituaries become a permanent part of our heritage.

In addition, several excellent speakers should considerably enliven the program. Irving Kron, MD, Chairman of the Department of Surgery at the University of Virginia, will give the 20<sup>th</sup> Annual Mixter Lecture. Susan Briggs, M.D. of Boston is the recipient of this year's Nathan Smith Award and will address "Surgeon's Response to Disasters over the Years."

Julie Fenster, author of *Ether Day*, will give a gripping account of one of the great medical discoveries in history. This should be of particular interest to New England surgeons. Gert Brieger, MD, PhD, retired Director of the Institute of the History of Medicine at Johns Hopkins' School of Medicine and an eminent surgical historian, is to give the post banquet talk entitled, "A Portrait of Surgery" which should be most enlightening and entertaining.

As noted in the recent newsletter and at the last Annual Meeting, one of the goals of the Executive Committee this year was to get younger surgeons more involved in the affairs of the Society. Offering a monetary prize for new members' papers (less than 5 years) last year was one inducement.

In furtherance of this goal, a Young Surgeons Reception was held in April in Boston during the Spring Meeting of the ACS. We invited all members who had joined the Society within the past seven years. About 25 to 30 participated and expressed their views and concerns regarding the NESS and their specific role in it. It was a fruitful exchange and resulted in the formation of an ad hoc Issues Committee, headed by David L. Berger, MD of Boston. The Committee consists of 7 young surgeons who have communicated over the past few months. Dr. Berger summarized their preliminary discussions at the June Executive Committee Meeting (Editor's Note: Please see Dr. Berger's report inside this issue.) Among the issues concerning the young surgeons were socioeconomic matters, the establishment of a job bank, and the role of the specialist in the NESS. We will be hearing further from the Committee at the Annual Meeting.

Among our rules and regulations (a new category not requiring time consuming amendments), a rule was proposed and voted by the Executive Committee, to limit the number of official positions – officer, state representative, executive committee or program committee member – that any member may hold at one time. This should get more members involved in the governance of the Society. Also to be noted in this regard, is that any new member must be present to receive his/her diploma at the Annual Meeting of Election. Without a written excuse, the diploma will be withheld until the member appears at an Annual Meeting.

Another issue of concern to the Executive Committee is the matter of attendance at the Annual Meetings. The by-laws, Article 2, Section J states: "Any active member who is absent from 3 consecutive Annual Meetings without an excuse deemed valid by the Executive Committee and who dur-

ing the same period presents no contribution to the proceedings of the Society, shall be automatically dropped from membership". Since there are no longer any spring meetings, the Annual Meeting is probably the only venue to "contribute to the proceedings".

Needless to say, we do not want to drop any members. However, there is a significant number who have missed 2 or 3 meetings in a row, without an excusing letter. If the membership think this requirement is onerous or wish to pursue the issue further, please contact me or any Executive Committee member or bring this up at the Annual Meeting. By having an excellent, exciting, and enlightening program, we trust this will not be an issue. We hope to be able to have our NESS neckties, bow ties, and scarves for sale at the Annual Meeting in October.

One of the duties of the President is to represent the Society at the Annual Surgical Resident/Fellow Research Presentation Day, which we as a Society cosponsor. It was an exciting day with many excellent papers, about 20, both research and clinical. Some subsequently appeared as abstracts for the Annual Meeting. Only several members of NESS were there to hear these young surgeons who represent our future members, as well as the excellent address by Dr. Stan Dudrick. The meeting is held at New England Medical Center in Boston in May and I urge members to try to attend. It will be more widely publicized prior to the next meeting in the Spring of 2005.

As my term of office winds down, I can say, with confidence, that the Society is vibrant and the future looks excellent. The care and the feeding of a regional surgical society such as ours requires effort and commitment. This is especially true in this era of increasing sub-specialization and fragmentation of our craft with the attendant societies and the meetings that are the inevitable result. Our Society is very special in both its scientific and social aspects. It has a rich history of which we can be proud. Our job is to honor and preserve it, to improve and empower it, and to build upon it.

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**FUTURE MEETINGS**

**October 1 - 3, 2004**

Hilton Montreal Bonaventure  
Montreal, Quebec, Canada

**September 30 - October 2, 2005**

Mount Washington Hotel  
Bretton Woods, New Hampshire

**September 15 - 17, 2006**

Mystic Marriott Resort & Spa  
Groton, Connecticut

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## FROM THE PRESIDENT-ELECT

A. Benedict Cosimi, M.D.

As I sat listening to Ashby Moncure report the recommendations of the Nominating Committee on that September Sunday morning in Newport, Rhode Island, I suddenly realized that he was talking about me as the designated President-Elect of the New England Surgical Society. Certainly one of the greatest honors that a surgeon can receive is to be elected by one's peers to a leadership position in one of our prominent societies and I thank the members for the privilege of serving as the 85<sup>th</sup> president of the NESS.

I recognize this is a major responsibility, especially at a time when the seemingly interminable subspecialization of traditional general surgery boundaries has resulted in a massive proliferation of surgical societies and annual meetings. The resulting demands on the limited time availability of typically busy surgeons has begun to raise serious questions such as: whether annual meetings might be reduced to alternate years and/or attendance requirements relaxed; whether some societies with overlapping membership should merge; whether previously espoused missions are still valid; and even whether some societies should continue to exist at all. Not surprisingly, some of these issues have begun to surface among our own membership as well, and in fact, last year the NESS and the NESVS ventured into their first attempt to merge the annual meeting programs. Where this experiment will ultimately lead remains to be determined, but it emphasizes the likelihood that the status quo we have enjoyed in the past is subject to change.

More and more, even our established and most venerable societies are recognizing that their new members, who represent the future of the organization, are being vigorously recruited to other educational and social opportunities. Unless these typically younger and enthusiastic individuals are given the opportunity to participate meaningfully in the Society's activities early in their careers, they will quickly gravitate to one of the more recently formed specialty groups where their input is welcomed. We should not then be surprised to find

that they have stopped submitting abstracts and are irregularly attending our annual meetings.

Recognizing the importance of this issue, our current President, Walter Goldfarb, has led the NESS Executive Committee in reaching out to the new members. This first led to a special meeting of the Executive Committee with interested recently-

elected members at the American College of Surgeons' Spring Meeting in Boston last April. This, in turn, led to the establishment of a new NESS *ad hoc* Issues Committee to specifically address topics and concerns on the minds of our newer members. Dr. David Berger initially Chairs this Committee and has

provided some of their current ideas in this issue of the Newsletter. We are all grateful to Walter for pushing this initiative which will remain one of our top priorities during the coming year and I welcome any suggestions as to how we can most productively involve all of our membership in the NESS. I must say that I am encouraged by the enthusiasm and excellent suggestions already coming from the Issues Committee.

Another ongoing, high priority topic must be the continual reassessment of the content of our annual scientific program as well as whose input should shape it, and how best to provide for its publication. Fortunately, this year we had more than 60 excellent abstracts submitted from which the outstanding program for the Montreal meeting has been designed by Jim Hebert and his Program Committee. In recent years, the apparent interest in submissions to the scientific program has been less intense. In other organizations, I have been an advocate of assigning the design of part of the meeting's agenda to newer members and have been gratified to witness their successful presentations of invigorating new ideas. Perhaps this approach could be used successfully by the NESS as well. A possible starting point might be, for example, the recently introduced, and generally extremely popular, "Quick Shots" format.

Of perhaps even greater importance to the young investigator than the presentation of either basic or clinical observations at a scientific forum is the possibility of scientific publication. The NESS has had a long association with the *Archives of Surgery* and a generally successful record of publication of plenary session presentations. Another question now is how "Quick Shots" might be considered for citable publication.

These thoughts touch only on a few of the possible issues that the NESS must continue to address. Many others, such as the role of the "specialist" in the Society or academic/community interaction have already been identified and only serve to emphasize the plea that I believe the Executive Committee unanimously voices: **GET INVOLVED!** As your next President, I certainly pledge to put forth every effort on behalf of the Society, but clearly recognize that failure is the only option unless we can convince the majority of our membership to participate.



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## FROM THE ISSUES COMMITTEE

David L. Berger, M.D., Chair

Prior to the Spring Meeting of the American College of Surgeons, the NESS invited all members who had joined the Society within the last five years to meet and address their role in, and the role of, the NESS. Twenty-five members attended this meeting. Dr. Goldfarb explained the decision to drop the Spring Meeting, the issue of paper publication and the *Archives of Surgery*, and opened the forum to assess member's needs.

A lively discussion ensued including the role of the NESS in the context of its historical mission as defined in the by-laws which states; *the society is constituted for the purpose of promoting the science of surgery and kindred arts and sciences and the welfare of the profession of surgery in New England; to hold professional and social meetings and to publish transactions.*

It was decided that an Ad Hoc Issues Committee would be formed to give representation to the younger members of the Society to promote and encourage participation in the NESS by recently inducted members. The Committee consists of the following members.

<b>David L. Berger, MD</b>	<i>Massachusetts</i>
<b>Guy Lancellotti, MD</b>	<i>Rhode Island</i>
<b>Bruce Leavitt, MD</b>	<i>Vermont</i>
<b>Thomas Macgillivray, MD</b>	<i>Massachusetts</i>
<b>Ronald Martin, MD</b>	<i>Maine</i>
<b>Richard Swanson, MD</b>	<i>Massachusetts</i>
<b>Kathleen A. LaVorgna, MD</b>	<i>Connecticut</i>

The group initially met via e-mail with the charge of having a preliminary report prepared for the Executive Committee Meeting on June 9<sup>th</sup> 2004. The Issues Committee generated several ideas, which were felt to be pertinent to the younger members of the Society. These included socio-economic issues affecting the region, the effect of the 80-hr work week, tort issues in the region, the role of the specialist in the NESS, academic and community surgeon interaction in the Society, regional trials disseminated through the Society, critical pathways and an NESS job bank.

The committee report was well received by the Executive Committee and the committee was encouraged to press forward. There will be formal meeting of the Issues Committee in Montreal and a short informal report to the membership during the business meeting on Sunday. The committee believes there is great importance to having a Society involving the surgeons of the region from an educational, collegial and academic perspective. The strength of this Society is its members.

My e-mail address is [dberger@partners.org](mailto:dberger@partners.org) and I would appreciate any and all suggestions or requests to participate. The committee hopes to involve as many members as are interested.

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### Editor's Corner (continued from page one)

nary obituary if you will, remembering that newspapers write rough drafts of these far in advance.

As the New England Surgical Society turns 85, with only 15 years to go before its Centennial, historical documentation becomes increasingly important. The 25-year retrospectives written by Dr. David Crombie take most Senior Members back to their own early years as Active Members in the Society. While the NESS does not need to wallow in nostalgia, it should value its collective heritage as the Society redefines itself in this new century.

#### Memorial Statements Needed

Clifford Agnew, MD, Plymouth, Massachusetts (9/11/2000)  
Benjamin Barnes, MD, Lincoln, Massachusetts (2/4/2000)  
Thomas Botsford, MD, Brookline, Massachusetts (6/10/1998)  
Warren Eberhart, MD, Contocook, New Hampshire (10/8/1999)  
Howard Frank, MD, Boston, Massachusetts (6/27/2004)  
Gordon Johnson, MD, Portland, Maine (8/12/2003)  
Thomas Lacey, MD, Keene, New Hampshire (8/28/1999)  
Carroll Miller, MD, Alton, New Hampshire (2/21/1998)  
Robert Rix, MD, Manchester, New Hampshire (11/6/2001)  
Ernest Sachs, MD, Hanover, New Hampshire (12/3/2001)  
Edward Twitchell, MD, Peterborough, New Hampshire 1/10/2002)

~~George L. Wilson, MD, Derby, Connecticut (5/2/1998)~~

Hastings K. Wright, MD, Branford, Connecticut (4/2004)

### NESS State Representatives

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## Highlights of the EXECUTIVE COMMITTEE MEETING

June 9, 2004 - Waltham, Massachusetts

### Report of the President

Dr. Goldfarb presented a report on the Young Surgeons Reception held Saturday, April 24, 2004. The meeting served as a discussion on the future of the Society. Of the topics summarized, Dr. Goldfarb focused on the publication of papers in the Archives of Surgery. Dr. Goldfarb had appointed an ad hoc Issues Committee with David L. Berger as Chair to present young surgeons' thoughts and ideas to the Executive. Dr. Berger presented a preliminary report of the list of issues that might be addressed by to-be-formed committees: Socio-Economic Issues; 80-Hour Work Week; Tort Reform; and Academic/Community Interaction. Additional topics to be considered included the role of the specialist in NESS, regional trials, a job bank, and critical pathways.

A proposed rule that "no member should concurrently hold more than one official position as Officer or State Representative, or Executive or Program Committee member" was reviewed. The purpose of the rule is to foster greater participation in the affairs of the Society. Except for the President, President-Elect, Secretary, and Recorder, no member shall hold more than one title concurrently. In addition, written regulations codifying the definition and election of members both to the Program Committee and as State Representatives to the Executive Committee were presented and the Executive Committee voted to adopt proposed rules and regulations.

Dr. Goldfarb reported that the 11th Annual Surgical Resident/Fellow Research Presentation Day included twenty papers that were extraordinary.

### Report of the Secretary

Current membership: 683 Surgeons; 278 Active, 362 Senior, 41 Associate, and 2 Honorary Members.

A list of the most recently deceased members and the status of their Memorial Statements was reviewed and the State Representatives acknowledged the importance of publishing timely memorials in the Annual Program Book, but concurred that finding even one person who might have known the deceased well enough to write a statement was often arduous. The Committee agreed to put out a call to the general Membership for help in assembling some of the longstanding, unwritten Memorials.

### Report of the Treasurer

Total assets at the end of March were \$158,017, versus year-to-date 2003 assets of \$176,716. The Reconciliation portion of the Balance Sheet indicates beginning cash of \$170,014 on July 1, 2003, and the current operating deficit on March 31, 2004, of \$11,997. This represents a decrease of almost \$12,000 over the same period a year ago. The NESS is now accepting MasterCard and Visa for all financial payments, including dues and meeting registration.

### Report of the Charitable Foundation

Total assets as of March 31, 2004, of \$185,451, represent \$6,500 more than last year.

### Report of the Recorder

Both the introduction of Quick Shots and the greater offering of panel discussions were well received. Of the 12 manuscripts from the Annual Meeting submitted to the *Archives of Surgery*, 11 were accepted for publication—the NESS's highest percentage ever. Over the last five years, the NESS's acceptance rate has averaged 79%.

### Report of the Program Committee

Sixty-five abstracts had been submitted for this year's Annual Meeting; the Committee accepted 12 for Podium Presentation, 19 as Quick Shots, and 24 Posters. Podium Presenters must submit full manuscripts for consideration of publication in the *Archives of Surgery*; authors of Quick Shots are strongly encouraged but not required to submit manuscripts. The Program Committee hopes to convince the publisher of the Archives to publish all Podium and Quick Shot abstracts.

#### QUICK SHOT PRESENTATIONS

Surgeons who want to save a paper for possible publication in a journal with a higher impact factor can still submit the abstract as a Quick Shot for presentation at the NESS Annual Meeting, without having to submit a full manuscript to the *Archives*.

### Report of the Representative to the American College of Surgeons' Board of Governors

Dr. Moore reported that the financial status of the ACS had improved; that Membership had increased for the first time in years; and that the ACS continues to churn ineffectively on malpractice reform. Beginning to take a life of its own is the Quality in Surgery Project, which Dr. Moore ultimately sees as heading off into a commercial project (QC Metrics). The major issue, though, remains how to implement the huge amounts of health data that have been collected on risk assessment, observed versus expected ratios, etc. What analysis can be extracted from with all this data that will create change and improve patient care?

### Report of the Representative to the American Board of Surgery

Dr. James C. Hebert detailed the status of the following major issues: the creation of a primary certificate in vascular surgery; the development of a surgical residency curriculum; the oversight of post residency fellowships; computer-based examinations; on-line exam applications process; and on-line resident rosters.

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**Preliminary Scientific Program Highlights of the  
85<sup>th</sup> Annual Meeting of the New England Surgical Society  
October 1-3, 2004 / Hilton Bonaventure, Montreal Quebec**

**Friday, October 1, 2004**

**SCIENTIFIC SESSION I Chairman: James C. Hebert, M.D.**

**Carotid Endarterectomy in 1,650 patients under 60 Years Old: Implications for Screening**

Desarom Teso, M.D., Jared Frattini, M.D., Stanley J. Dudrick, M.D., Richard J. Gusberg, M.D., Alan Dardik, M.D., St. Mary's Hospital, Waterbury, CT; Yale University School of Medicine, New Haven, CT

**The Open Retroperitoneal Approach for Spine Procedures: Experience with 59 Patients**

Andrew A Gumbs, M.D., Rahul Shah, M.D., James Yue, M.D., Bauer Sumpio, M.D., Ph.D., Yale-New Haven Hospital, New Haven, CT

**Localizing Colorectal Cancer by Colonoscopy: Are We Missing the Boat?**

Nicole Piscatelli, M.D., Neil Hyman, M.D., Turner Osler, M.D., University of Vermont, Burlington, VT

**BRIEF REPORTS**

**Decreased Breast Cancer Size, Stage and Mortality in Rhode Island: An Example of a Well-Screened Population**

Natalie G. Coburn, M.D., M.P.H., Maureen A. Chung, M.D., John Fulton, M.D., Blake Cady, M.D., Rhode Island Hospital, Brown University, Providence, RI; Rhode Island Department of Health, Providence, RI

**New Treatments for ER+ Breast Cancer**

Sharon B. Chang, M.D., Penelope Miron, Ph.D., Andrew L. Kung, M.D., Alexander Miron, Ph.D., James D. Iglehart, M.D., Dana-Farber Cancer Institute, Boston, MA

**Surgical Resection for Well Differentiated Liposarcomas of the Retroperitoneum**

Shimul A. Shah, M.D., Flavio G. Rocha, M.D., Robert T. Osteen, M.D., Samuel Singer, M.D., Richard S. Swanson, M.D., Brigham and Women's Hospital, Boston, MA

**Hepatic Multiprobe Radiofrequency Ablation in the Porcine Model**

David A. Iannitti, Sr., M.D., Jason McKee, M.D., Caroline J. Simon, M.D., Damian Dupuy, M.D., Brown Medical School, Providence, RI

**Hepatic Hemangiomas: "Contrasting Pediatric and Adult Lesions"**

Charles J. Smithers, M.D., Adam M. Vogel, M.D., Harry P. Kozakewich, M.D., Patricia E. Burrows, M.D., Harriet J. Paltiel, M.D., Urmila Khettry, M.D., Heung B. Kim, M.D., Roger L. Jenkins, M.D., John B. Mulliken, M.D., Steven J. Fishman, M.D., Children's Hospital Boston, Boston, MA; Lahey Clinic, Burlington, MA

**POSTER SESSION A**

**SCIENTIFIC SESSION II Chairman: Thomas A. Colacchio, M.D. PODIUM PRESENTATIONS**

**Reduction of Hyperglycemia and Nosocomial Infections in a General-Surgical Intensive-Care Unit**

George A. Perdrizet, M.D., Steven H. Fox, M.D., Kelly Swan, M.D., Suresh K. Agarwal, Jr., M.D., Vincente Cortes, M.D., Neil J. Grey, M.D., Hartford Hospital-UHC, Hartford, CT

**Degree of Preoperative Insulin Resistance Predicts Whether Gastric Bypass Will Lead to Improved or Worsened Insulin Glucose Homeostasis in the Severely Obese**

Richard A. Perugini, M.D., Gordie K. Kaban, M.D., Steven H. Quarfordt, M.D., Donald R. Czerniach, M.D., Dariush Elahi, M.D., Dana K. Andersen, M.D., Demetrius E.M. Litwin, M.D., John J. Kelly, M.D., University of Mas-

sachusetts Medical Center, Worcester, MA

**Poly ADP-Ribose Polymerase (PARP) Inhibition Modulates Skeletal Muscle Injury Following Ischemia Reperfusion**

Hong T. Hua, M.D., Hassan Al-Badawi, M.D., Michael C. Stoner, M.D., Fateh Entabi, M.D., Bryan T. Meria, M.D., Glenn M. Lamuraglia, M.D., Michael T. Watkins, M.D., Massachusetts General Hospital, Boston, MA

**BRIEF REPORTS**

**Controlled Release of Parathyroid Hormone as a Potential Treatment of Hypoparathyroidism**

Amit Goyal, M.D., Tiffany L. Anthony, M.D., Peter Fong, M.D., W. Mark Saltzman, M.D., Christopher Breuer, M.D., Yale University School of Medicine, New Haven, CT; Department of Biomedical Engineering

**Validation of a Method to Replace Frozen Section During Parathyroid Exploration by Using the Rapid Parathyroid Hormone Assay on Parathyroid Aspirates**

Rodney K. Chan, M.D., Shahrul I. Ibrahim, M.D., Peter Pil, M.D., Francis D. Moore, Jr., M.D., Brigham and Women's Hospital, Boston, MA

**Surgical Treatment of Hyperparathyroidism in Patients With MEN I**

Laura Lambert, M.D., Jeffrey E. Lee, M.D., Suzanne Shapiro, M.D., Douglas B. Evans, M.D., Anderson Cancer Center, Houston, TX

**Prenatal Diagnosis Followed by Minimal Surgical Resection: The New Paradigm for the Treatment of Congenital Pulmonary Malformations**

Robert J. Touloukian, M.D., John Seashore, M.D., Yale University School of Medicine, New Haven, CT

**STATE CAUCUS MEETINGS**

**WELCOMING RECEPTION**

**Saturday, October 2, 2004**

**NEW MEMBER BREAKFAST MEETING**

**SCIENTIFIC SESSION III Chairman: Walter B. Goldfarb, MD PODIUM PRESENTATIONS**

**Living Donor Lobar Lung Transplantation (LDLTx): A Safe and Effective Therapy**

John C. Wain, Jr., M.D., Cameron D. Wright, M.D., Dean M. Donahue, M.D., James S. Allan, M.D., Henning A. Gaissert, M.D., Michael Lanuti, M.D., Daniel P. Ryan, M.D., Leo C. Ginns, M.D., Douglas J. Mathisen, M.D., Massachusetts General Hospital, Boston, MA

**Twenty-Year Experience with Liver Transplantation for Hepatocellular Carcinoma**

Eddie R. Island, M.D., James Pomposelli, M.D., Elizabeth A. Pomfret, M.D., Fredric D. Gordon, M.D., W. David Lewis, M.D., Roger L. Jenkins, M.D., Lahey Clinic, Burlington, MA

**Is There a Role for Routine, Preoperative ERCP for Suspected Choledocholithiasis in Children?**

Dionisos V. Vrochides, M.D., Donald L. Sorrells, M.D., Arlet G. Kurkchubasche, M.D., Conrad W. Wesselhoeft, Jr., M.D., Thomas F. Tracy, Jr., M.D., Francois I. Luks, M.D., Brown Medical School, Providence, RI

**Management of Simple Gallstone Pancreatitis in 1285 Consecutive Cholecystectomies**

Meghna Misra, M.D., Jeffrey Schiff, B.S., Gonzalo Rendon, M.D., Janice Rothschild, M.D., Steven Schwaizberg, M.D., Tufts-New England Medi-

**SCIENTIFIC SESSION IV Chairman: David E. Clark, M.D.**

**BRIEF REPORTS**

**Long-term Acceptance of Porcine Pulmonary Allografts Without Chronic Rejection**

Tsuyoshi Shoji, M.D., Ashok Muniappan, M.D., Dax A. Guenther, M.D., John C. Wain, M.D., Stuart L. Houser, M.D., Rebecca S Hasse, Marjory Bravard, Joren C. Madsen, M.D., James S. Allan, M.D., Massachusetts General Hospital and Harvard Medical School, Boston, MA

**Factors Contributing to Acute Rejection Following Renal Transplantation**

Paul E Morrissey, M.D., Steven Reinert, M.D., Reginald Gohh, M.D., Angelito Yango, M.D., Amitabh Gautam, M.D., Anthony P. Monaco, M.D., Rhode Island Hospital, Providence, RI

**Cobrahead-Style Grafting for Intercostal Artery Attachment in Descending Thoracic Aortic Replacement**

Shawn L. Tittle, M.D., Desarom Teso, M.D., Maryanne Tranquilli, R.N., Richard K. Shaw, M.D., Gary S. Kopf, M.D., John A. Elefteriades, M.D., Yale University School of Medicine, New Haven, CT

**Lap-Band: Weight Loss and Complications at 2 Years**

Nicole J. Pecquex, M.D., John J. Kelly, M.D., Richard Perugini, M.D., Donald Czerniach, M.D., Gordie Kaban, M.D., Demetrius Litwin, M.D., University of Mass. Memorial Medical Center, Worcester, MA

**Introduction of a Virtual Reality-Based Laparoscopic Skills Training Program into Surgical Residency**

David B. Earle, M.D., Jay Kuhn, M.D., Neal E. Seymour, M.D., Baystate Medical Center, Springfield, MA

**Sunday, October 3, 2004**

**SCIENTIFIC SESSION V Chairman: Nick P. Perencevich, MD**

**BRIEF REPORTS**

**Post-Reconstructive "Paraomental" Hernias: A New Repair For A New Problem**

Jeffrey H. Donaldson, M.D., Thomas B. Brady, M.D., Maine Medical Center, Portland, ME

**Interval Appendectomy Improves Outcomes in Children with Complicated Appendicitis**

Dennis W. Vane, M.D., Nathaniel Fernandez, M.D., University of Vermont College of Medicine, Burlington, VT

**Laparoscopic Peritoneal Lavage for Complicated Sigmoid Diverticulitis**

John C. Friel, M.D., John J. Kelly, M.D., Richard Perugini, M.D., Craig Paterson, M.D., Timothy Counihan, M.D., UMass Medical School, Worcester, MA

**En-bloc Heart and Thymus Transplantation in Cynomolgus Monkeys**

Ashok Muniappan, M.D., Douglas R. Johnston, M.D., Dax A. Guenther, M.D., Tsuyoshi Shoji, M.D., Svjetlan S. Boskovic, M.D., Ruediger Hoerbel, M.D., Stuart L. Houser, M.D., James S. Allan, M.D., Kazuhiko Yamada, M.D., Tatsuo Kawai, M.D., John C. Wain, M.D., David H. Sachs, M.D., Joren C. Madsen, M.D., Massachusetts General Hospital and Harvard Medical School, Boston, MA

**PODIUM PRESENTATIONS**

**Laparoscopic Roux-Y Gastric Bypass (LRYGBP): Results and Learning Curve of a High Volume Academic Program**

Scott A. Shikora, M.D., Tufts-New England Medical Center, Boston, MA

**Strength of Tissue Attachment to Mesh After Ventral Hernia Repair with Synthetic Composite Mesh in a Porcine Model**

Sarah Majercik, M.D., Vassiliki Tsikitis, M.D., David A. Iannitti, Sr., M.D., Brown Medical School, Rhode Island Hospital, Providence, RI

# NESS PROGRAM

HIGHLIGHTS

**INVITED GUEST SPEAKER**

*"Confidence Man – William Morton's Role in the Introduction of Surgical Anesthetics in 1846"*

**Ms. Julie Fenster, Author, *Ether Day***  
DeWitt, New York

**PANEL DISCUSSION**

*"Incorporating Technology in Your Practice"*

**MODERATOR: Rocco Orlando, III, MD**  
Hartford, Connecticut

**PANELISTS: David W. Rattner, MD**  
Boston, Massachusetts  
**Ajit K. Sachdeva, MD**  
Chicago, Illinois

**PRESIDENT'S RECEPTION & DINNER**

*"A Portrait of Surgery"*

**Gert H. Brieger, MD, PhD**  
Distinguished Service Professor and former William H. Welch Professor and Director, Institute of the History of Medicine, The Johns Hopkins University School of Medicine  
Baltimore, Maryland

**NATHAN SMITH AWARD**

*"A Century of Disaster Medical Response by Surgeons: Changing Priorities and Challenges"*

**Susan Briggs, MD**  
Boston, Massachusetts

**PRESIDENTIAL ADDRESS**

*"Frederick Henry Gerrish, M.D. (1845-1920): Portland's Prescient Polymath"*

**Walter B. Goldfarb, MD**  
Portland, Maine

**20<sup>TH</sup> ANNUAL SAMUEL JASON**

**MIXTER LECTURE**

*"Changing Clinical Practice in Surgery"*

**Irving L. Kron, M.D.**  
William H. Muller, Jr., Professor of Surgery; Chairman, Department of Surgery, University of Virginia  
Charlottesville, Virginia

## PROPOSED BYLAW CHANGES

*To be read and voted on at the Annual Meeting*

The following wording change from “will” to “may” in the amendment to Article III, Section A, regarding the succession of officers for the Society, would be voted upon at the Annual Meeting in October:

To replace the sentence beginning, “During any vacancy or disability ...”:

If a vacancy occurs in the Office of the President, the duties of the President shall be assumed by the President-Elect for the remainder of the vacated term. The President-Elect may ask the Nominating Committee to select both a President for the succeeding year and a new President-Elect at the subsequent Annual Meeting of the Society. If the President becomes disabled, the duties of the President may be assumed by the President-Elect until the period of disability is over. If a vacancy occurs in the Office of President-Elect, the President may ask the Nominating Committee to select a new President-Elect and succeeding President-Elect at the next Annual Meeting of the Society.

If a vacancy or disability occurs in the Offices of Secretary, Recorder, or Treasurer the President may assume the responsibility of the Office until the Nominating Committee chooses a new Secretary, Recorder, or Treasurer at the next Annual Meeting of the Society. The President may ask the President-Elect to assume a portion of the responsibility by mutual agreement.



**New England Surgical Society**  
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