



New England Surgical Society Newsletter

Volume 7, Number 2

August 2005

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FROM THE PRESIDENT

It's hard to believe how quickly my term as President of the NESS has gone by. I have been honored to have had the opportunity to serve our Society in this capacity for the past year and want to thank all of the membership for your support and input.

As this issue of the Newsletter goes to press, the final details of our Annual Meeting are being addressed. We are indebted to David Clark and the members of the Program Committee for their tireless efforts in selecting from the unusually large number of submitted abstracts (65) what promises to be an outstanding program.

In addition to the 12 podium papers, 12 brief reports, and 14 posters, several new elements are being added to the program this year. The authors of the top two prize winning studies at the NESS 12th Annual Resident Research Day held in May of 2005 have been invited to present



A. Benedict Cosimi, M.D.

(continued on page 6)

Editor's Corner

Edward Z. Walworth, M.D.

Back in the mid 1970's during my two years in the Navy, I had the time to take an evening community college course or two. Having never been a grease monkey, I thought it would be interesting to learn about the inner workings of my beat up, second hand Chevrolet Vega. This Lieutenant Commander from the Naval Regional Medical Center had as an instructor a retired Army Sergeant, a motor pool veteran who could fix a Jeep blindfolded. In those days before fuel injection, my carburetor was getting dirty, so I brought a replacement kit to one

(continued on page 10)



**Preliminary Scientific Program Highlights of the
86th Annual Meeting of the New England Surgical Society
September 30 - October 2, 2005 / Mount Washington Hotel, Bretton Woods, New Hampshire**

Friday, September 30, 2005

SCIENTIFIC SESSION I

Risk Factors for the Development of Abdominal Abscess Following Operation for Perforated Appendicitis: a Multi-Center Case Control Study

Marion C. W. Henry, Angela Walker, Bonnie L Silverman, Gerald Gollin, Saleem Islam, Karl Sylvester, R. Lawrence Moss

Is Right Hemicolectomy for 2.0 cm Appendiceal Carcinoids Justified?

Zubin M. Bamboat, David L. Berger

How Urgent Is Appendectomy For Acute Appendicitis? Do We Have To Operate In The Middle Of The Night?

Fadi Abou-Nukta, Charles Bakhos, Kervin Arroyo, Young Koo, Jeremiah Martin, Randolph Reinhold

Outcomes of Open Versus Laparoscopic Appendectomy in the United States, 1998-2002

Maksim Zayaruzny, Liam Haveran, Shauna Malone, Stephen P. Baker, Demetrius E. M. Litwin

BRIEF REPORTS

Delays in Interfacility Transport of Trauma Patients in a Rural Environment

Paul Kispert, John Sutton, Kenneth Burchard, Horace Henriques, John Higgins, James Whedon, Peter Steinberg

Injury Patterns in Elderly Drivers

Graciela Bauza, Wayne LaMorte, Peter A. Burke, Erwin F. Hirsch

Comparison of Seat Belt Use and Injury Outcomes Between Vermont and New Hampshire

John E. Sutton, Jr., James Whedon, John Higgins

Incidental Diagnosis of Cancer in Deceased Organ Donors

Paul E. Morrissey, Lena Sibulesky, Kevin O'Connor, Jane Goguen

Cystic Neoplasm Of Pancreas: Long-Term Outcomes With Surgical Therapy

Hironichi Ito, Evan Matros, Stanley W. Ashley, Michael J. Zinner, Edward E. Whang

Inguinal Herniorrhaphy in the Elderly

Eduardo A. Guzman, Frederick B. Rogers

SCIENTIFIC SESSION II

Women in Surgery: Do We Really Understand the Deterrents?

Debra A. Gargiulo, Neil H. Hyman, James C. Hebert

Neoadjuvant Therapy And Local Recurrence In Pancreatic Adenocarcinoma

Sarah E. Greer, Thomas A. Colacchio, John E. Sutton, Jr., J. Marc Pipas, Bassem I. Zaki, Richard J. Barth, Jr.

Incidence, Patterns, and Prevention of Wrong Site Surgery

Mary R. Kwaan, David Studdert, Michael J. Zinner, Atul A. Gawande

Implications and Cost of Pancreatic Leak Following Distal Pancreatic Resection

J.R. Rodriguez, S.G. Soto, P. Pandharipande, G.S. Gazelle, S.P. Thayer, A.L. Warshaw, C. Fernandez-del Castillo

Sirna-Medicated Gene Silencing in Colorectal Cancer

Abby Mulkeen

STATE CAUCUS MEETINGS

WELCOMING RECEPTION

Saturday, October 1, 2005

NEW MEMBER BREAKFAST MEETING

SCIENTIFIC SESSION III - BRIEF REPORTS

Minimally Invasive Parathyroidectomy Using Cervical Block: Reasons for Conversion to General Anesthesia

Tobias J.E. Carling, Patricia Donovan, Christine Rinder, Robert Udelsman

A Prospective Study of Cognitive Intervention in the Reduction of Postoperative Pain and Narcotic Demand

Mike C. Gavin, Mark Litt, Ahmed Khan, Hilary Onyiuoke, Robert A. Kozol

Treatment of Hepatic Abscess

David A. Iannitti, Sr., Dionisios Vrochides, Sarah Majercik, William Mayo-Smith

Vocal Cord Paralysis After Surgery for Acute Dissection of the Thoracic Aorta

Ioannis Hatzaras, Jesse Bible, Richard Shaw, Douglas Ross, Clarence Sasaki, John Elefteriades

A New Paradigm for Managing Information in the ICU in Response to the 80 hour Work Week

Brian A. Janz, Joseph Frassica, Christopher Baker, Gari Clifford, Roger G. Mark

The Induction of Robust Tolerance in an MHC-Mismatched Porcine Pulmonary Allograft Model Prevents Obliterative Bronchiolitis

Hisashi Sahara, Tsuyoshi Shoji, Ashok Muniappan, Dax A. Guenther, John C. Wain, Stuart L. Houser, Akshat Pujara, Marjory A. Bravard, David H. Sachs, Joren C. Madsen, James S. Allan

PANEL DISCUSSION

“Approaches to Solving the Donor Shortage Crisis”

MODERATOR: Marc I. Lorber, M.D.

PANELISTS: Francis L. Delmonico, M.D.

“Expanding The Deceased Donor Pool”

Elizabeth A. Pomfret, M.D.

“Living Liver Donors”

David H. Sachs, M.D.

“Xenotransplants”

POSTER SESSION

Decellularized Ovine Arterial Tissue: A Three-dimensional Tubular Scaffold For Tissue Engineering Small Diameter Vascular Conduits

Matthew P. Brennan, Amit Goyal, Jamie A. Howland, Peter M. Fong, David A. LaVan, Themis R. Kyriakides, Christopher K. Breuer

Local Administration of the Poly ADP-Ribose Polymerase (PARP) Inhibitor PJ34 During Hindlimb Ischemia Modulates Skeletal Muscle Reperfusion Injury

Mark F. Conrad, David H. Stone, Hassan Albadawi, Fateh Entabi, Michael T. Watkins

Salvage Therapy For Recurrent Rectal Cancer: A Single Institution Cohort Analysis

Michael R. DiSiena, Harold J Wanebo

Directed Parathyroidectomy Using Preoperative And Intraoperative Localization Facilitates Unilateral Exploration For Cure Of Primary Hyperparathyroidism

Donald E. Dupuis

Differential Response Between Type 1 and Type 2 Diabetes to Ischemia Reperfusion Injury

Fateh Entabi, Hassan Albadawi, David H. Stone, Rameses L. Sroufe, Mark F. Conrad, Michael T. Watkins

Breast Cancer and Age

Tiffany T. Fancher, Jacek J. Paszkowiak, Ravi P. Kiran, Alpin D. Malkan, Niby Mathew, James J. O'Campo, Ellen G. Polokoff, Stanley J. Dudrick

Failure of a Web-Based Educational Tool to Improve Residents' ABSITE Scores

Charles M. Ferguson, Andrew L. Warshaw

Lipiodol CT for Difficult to Image Hepatocellular Carcinoma

David A. Iannitti, Sr., Alan Thomay, Dionisios Vrochides

Procedures at Bedside for Intensive Care Unit Patients - Initiating a program, May, 2004 - April 2005

Peter A. Igneri, Frederick B. Rogers, Bruce Crookes, William Charash, Susannah K. Wells, Bruce Leavitt

G1 Cell Cycle Arrest Associated With Upregulation of p16 and p21 by Procaine Hydrochloride

Laura A. Lambert, Kelly K. Hunt, Khandan Keyomarsi

Diaphragmatic Hernias Following Left Ventricular Assist Device Explantation and Heart Transplantation: A Series of Both Laparoscopic and Open Repair

Kelly T. Migliero, Steven D. Schwaitzberg, David DeNofrio

Patterns Of Injury In Geriatric Falls

Peter Ojo, Judith O'Connor, Donald Kim, Kenneth Ciardiello, John Bonadies

Necrotizing Pancreatitis: An Update on Current Management

Flavio G. Rocha, Eric Benoit, Peter Banks, Koenraad Morteale, Michael J. Zinner, Edward E. Whang, Stanley W Ashley

The Treatment of Atrial Fibrillation Using a Novel Energy Source: High Intensity Focused Ultrasound

Sanjay A. Samy, Harold L. Lazar, Oz M. Shapira, Curtis T. Hunter, Richard J. Shemin

SCIENTIFIC SESSION IV

The Learning Curve in Pancreatic Surgery

Jennifer F. Tseng, Jeffrey E. Lee, Peter W.T. Pisters, Charlotte C. Sun, Henry F. Gomez, Douglas B. Evans

Poor Preoperative Glycemic Control is Associated With Increased Postoperative Infections

Annika Dronge, Melissa Perkal, Sue Kancir, John Concato, Michela Aslan, Ronnie Rosenthal

Reassessment of PTH Monitoring during Parathyroidectomy for Primary Hyperparathyroidism after Two Preoperative Localization Studies

Atul A. Gawande, Jack M. Monchik, Thomas A. Abbruzzese, Jason D. Iannuccilli, Shahrul I Ibrahim, Francis D Moore, Jr.

Distal Splenorenal Shunt (DSRS) For Failed Transjugular Intrahepatic Portocaval Shunt (TIPS)

David R. Elwood, James J. Pomposelli, Elizabeth A. Pomfret, W. David Lewis, Roger L. Jenkins

Maximizing OR and Recovery Room Capacity in an Era of Constrained Resources

Suzanne M. Sokal, David L. Craft, Yuchiao Chang, David L. Berger

PRESIDENT'S RECEPTION & DINNER

ROCKAPELLA, *the internationally acclaimed singing group, known as the undisputed kings of contemporary a cappella music, will provide the entertainment.*

Sunday, October 2, 2005

ANNUAL BUSINESS MEETING (Members Only)

SCIENTIFIC SESSION V

Small Bowel Tumors in Connecticut: Epidemiological and Clinical Characteristics

Ioannis Hatzaras, Farshad Abir, Paul Sullivan, Robert Kozol, Walter Longo

Prestorage Leukoreduction Prevents Accumulation of Proinflammatory Matrix Metalloproteinases During Blood Storage

Walter L. Biffl, Paul C. Frake, Hadley E. Smith, Lii F. Suen

AND DON'T MISS

SUNDAY'S HIGHLIGHTS.....

PRESIDENTIAL ADDRESS

"Surgeons and the Nobel Prize"

A. Benedict Cosimi, M.D.

NATHAN SMITH AWARD

Michael R. Curci, M.D.

Portland, Maine

21ST ANNUAL SAMUEL JASON MIXTER LECTURE

Patricia K. Donahoe, M.D.

Boston, Massachusetts

MORE MEETING DETAILS ON NEXT PAGE

New at the NESS Annual Meeting

*Society of American Gastrointestinal
and Endoscopic Surgeons'*

Advanced Therapeutic Endoscopic Surgery Course

Saturday, October 1, 2005 / 1:00 p.m. – 5:00 p.m.

This course will provide the latest information on therapeutic endoscopy as it pertains to surgeons and illustrate how flexible endoscopy is changing the face of minimally invasive surgery. This course will include a comprehensive description of available and emerging therapeutic endoscopic techniques. The didactic session will include lectures by surgical endoscopic experts on management/palliation of biliary/enteric strictures (postop,malignant,etc), intraoperative endoscopy (surgically-assisted endoscopy/endoscopically-assisted surgery), enteral access techniques, endoluminal treatments for GERD, and the future of endoscopy (why surgeons need to perform/expand endoscopic techniques).

OBJECTIVES: Upon completion of this course, the participant will be able to:

- ♦ Discuss the latest data for the endoluminal management of gastroesophageal reflux disease and how these technologies fit into the therapeutic armamentarium for GERD.
- ♦ Describe what new technology is available in enteral stenting technology to improve the prevention and management of benign and malignant strictures.
- ♦ Describe how flexible endoscopy can augment the surgeon's armamentarium in the operating room for performing minimally invasive surgeries.
- ♦ Discuss the latest developments in endoluminal and transluminal surgery and how these techniques will change the face of general and minimally invasive surgery.
- ♦ Identify options for gaining expertise in therapeutic endoscopy.

FACULTY

Jeffrey M. Marks, MD, Assistant Clinical Professor
Case Western Reserve University

Brian J. Dunkin, MD, Associate Professor of Surgery
University of Miami School of Medicine

C. Daniel Smith, MD, Professor of Surgery and Surgical Anatomy
Emory University School of Medicine

Jeffrey W. Hazey, MD, Assistant Professor of Surgery
Ohio State University Medical School

Jeffrey L. Ponsky, MD, Oliver H. Payne Professor & Chairman
Case Western Reserve University, University Hosp.of Cleveland

John D Mellinger, MD, Associate Professor Of Surgery
Medical College of Georgia

SAGES gratefully acknowledges a generous unrestricted educational grant from Olympus Corporation in support of this course. The NESS wishes to thank Olympus America for it's educational grant in support of the NESS Annual Meeting and the SAGES Advanced Therapeutic Endoscopic Surgery Course.

Mt. Washington Activities during the weekend of September 29 – October 2, 2005

Equestrian Center at the Mount Washington Hotel

Offering carriage rides, horseback riding and more. Advanced Reservations are encouraged. For more information on rates and times available call (800) 314-1752 or contact the hotel concierge desk.

www.mountwashington.com

Mount Washington Cog Railway

A ride up Mount Washington on the world's first mountain-climbing cog railway remains, as it has for well over a century, an exciting and unforgettable experience. The round trip cog ride takes approximately three hours, including a 20-minute stop at the summit. We recommend that you bring a camera and extra jacket or sweater. Remember, trains are fired by coal so dress accordingly. Departing daily every hour from 9 am to 4 pm. Reservations are strongly recommended, call toll free (800)-922-8825. www.thecog.com

Crawford Notch Hiking

Mt. Willard Trail is a 2-mile beginner level hike that caters towards families and kids. Located directly on Rt. 302, about 3 miles south of the hotel, parking is available at the AMC Crawford Notch Visitor's Center (Railroad Depot). Other trails are also available at Crawford Notch. Advanced reservations are not needed.

Lost River Gorge and Boulder Caves

It's an adventure that combines the beauty and mystery of caves with exploration of this magnificent gorge. A self-guided tour, which takes about an hour and is about 3/4 of a mile in length, takes you back through millions of years of natural history. There are some caves into which you can easily walk, but others require some agility to negotiate. You can, of course, bypass all the caves, and still enjoy the beauty of the Gorge. The park is open from 9-5 pm. Tickets are \$11.00 for Adults, \$7.00 for ages 4-12 and ages 3, 2 and 1 w/adult are Free. Advanced tickets are not required. Directions will be available at the hotel. www.findlostriver.com

Annual Scarecrow Contest & Fall Festival

October 1 at Settler's Green & Downtown, North Conway. Lots of prizes, carving pumpkins, live music and more! Beginning at 11 a.m. Directions will be available at the hotel. Call (603) 356-7031. www.settlersgreen.com

The New England Surgical Society returns for its annual meeting this year to the Mount Washington in Bretton Woods, New Hampshire after an absence of sixteen years. This beautiful Fall setting was first visited by the society in 1949 for its 30th meeting when Emery Porter of Providence, Rhode Island was President. Revisits there were made in the mid-1950s after which it became supplanted by Poland Springs House, Wentworth-by-the-Sea, Equinox House, The Mountain View House, the Balsams, and others, until 1982. The seventieth annual meeting in 1989 marked the last NESS sojourn to Bretton Woods and many of our members and spouses applauded the return.

Those members who save old stuff will find the program booklet for the 1989 meeting uniquely dark green in color contrasting with the standard beige of recent years. Perusal of

The intimacy of the surgical arena perhaps promotes in surgeons the tendency to honor their mentors as heroes. With the presence of Francis D. Moore as the recipient of the Nathan Smith Award, and Alexander Walt as the Mixer Lecturer at the 1989 Annual Meeting, one need not search very deeply into the program book to find surgical heroes.

the scientific program provides one with an appreciation of the rapidity of change in medicine, with some innovations, some attractive possibilities, and old shibboleths being cast aside. The resident competition was won by Eugene Foley, the lead author on a paper from

New England Deaconess Hospital sponsored by Peter Benotti entitled, "Albumin Therapy in the Critically Ill: A Prospective Randomized Trial". Its conclusion was that "the costly use of exogenous albumin. . . in this patient population does not appear to be justified". The group from the Lahey Clinic presented evidence of the effectiveness of strictureplasty in the treatment of Crohn's disease patients with symptomatic stenotic lesions of the small bowel. Appropriately marking the pre-laparoscopic cholecystectomy era, Randy Reinhold and colleagues from Tufts NEMC compared extracorporeal shock wave lithotripsy to elective (open) cholecystectomy and found that ESWL was pretty effective, less costly, and returned the patients to normal activity in days instead of weeks.

A paper from Connecticut by Steve Ruby and his colleagues presaged the actual mandate on resident work hour reform by a decade. A questionnaire on the subject that had been distributed to all 625 surgical residents in the New England programs elicited a remarkable response rate of 83%.

74% of the residents agreed that reform was needed, 60% felt that long hours (some reporting as many as 168 hours of duty per week) affected the quality of patient care, and 76% expressed concern that the lengthy work hours had a negative impact upon their education.

As a former state representative from Connecticut with an abiding interest in surgical education, my trip through the 1989 program book also called forth some poignant memories. The obituaries included two fine surgical educators from Hartford both of whom had died of lymphoma: Henry Mannix of St. Francis Hospital, and Robert W. Painter of Hartford Hospital. The superb presidential address entitled "Some Eastern Thoughts for Northeastern Surgeons" was given by my friend and mentor, James Foster. He spoke of quantity masquerading as quality, and of the need for reflection on the principles and values of medicine to avert their subservience to science, technology and data. He was introduced by the vice-president, Joe Pytek, also a friend and mentor from Hartford. Joe was so weakened and dispirited by pancreatic cancer that he doubted whether he could make his presentation. With a little help, Joe gave the introduction, a tribute to his friend. It was September 23rd. He succumbed to the disease three weeks later. A final irony of their friendship was the death of Jim Foster from the same disease in June, 2003.

The intimacy of the surgical arena perhaps promotes in surgeons the tendency to honor their mentors as heroes. With the presence of Francis D. Moore as the recipient of the Nathan Smith Award, and Alexander Walt as the Mixer Lecturer at the 1989 Annual Meeting, one need not search very deeply into the program book to find surgical heroes. And, if history provides its usual lessons, the same will be true of this year's program at Bretton Woods.



FUTURE ANNUAL MEETINGS

2006 - September 15 – 17
Marriott Mystic Hotel and Spa
Groton, Connecticut

2007 - September 27 – 29
Wyndham Hotel
Burlington, Vermont

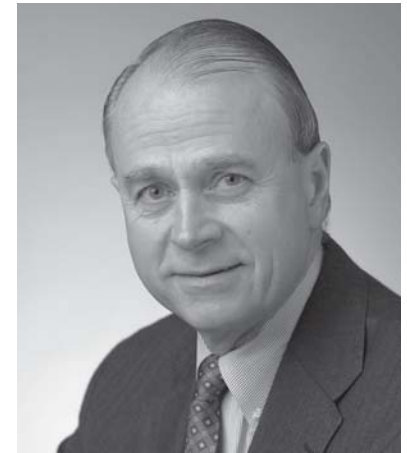
FROM THE PRESIDENT-ELECT

Robert M. Quinlan, M.D.

Your support for my nomination as President-Elect of NESS was and is very much appreciated. The honor is humbling. I will do my best to fulfill your trust in my commitment.

The 86th annual meeting of the society, at the Mount Washington Hotel in Bretton Woods, N.H., September 30th – October 2nd promises an outstanding educational program and a wonderful venue for camaraderie.

Camaraderie was among the top 3 reasons, cited in a survey conducted by the Massachusetts Chapter of the ACS, for continued membership and attendance at annual meetings. Our meetings should be happy social gatherings for all involved, where there are not only hard data discussions of surgical science but also softer discussions of good fellowship. Life's twists and turns can be bittersweet and surgeons with their significant others should benefit from communication with fellows in like circumstances. I have also benefited from sidebar conversations on patient care problems with many of our members if not the majority. There is everything right about camaraderie and there is no



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downside. If you haven't registered for the annual meeting, do so today.

My plans for 2006 will be to support the many initiatives put in place by membership and thoughtful predecessors on the Executive Committee. The major area of effort has been to foster young surgeon involvement, while at the same time respecting traditions begun by our now senior membership. This needs to continue with an increased recruitment of well-qualified women to our ranks.

Issues of patient safety and professional ethics are hot topics with the general public and have long been at the forefront of what it means to be a member of NESS. We will continue to hold these paramount. We will also plan to speak with unity regarding the dilemma of increased subspecialization and the continued need of our rural/community surgeons. Given the world of politics, it is not surprising that partisan feelings exist in our membership and will need to be addressed through society wide discussion where there will be compromise as in all life's situations, avoiding the sometimes acrimonious debate seen among our national elected leaders.

Although much has been discussed, we as a prominent surgical society should aim for consensus on topics of liability reform, effects of work hour restrictions, surgical education reforms, and policies of future health care delivery and costs. Finally, reimbursement issues, despite the self-promotion, should be realistically discussed, especially in view of an increasing problem with access to surgical care for both the insured and uninsured.

With consensus we can better dialogue with sister organizations including local surgical societies, state chapters of the ACS and state medical societies. With their involvement and support we can hopefully enlist our patients and their families to bring the agenda to our political representatives. Our deliberations will need to be supported with data, which will cost time and money. This is worth doing and I hope you will become involved with your voice and emotion. It is a must that all members have a voice, from Bangor Maine to Greenwich Connecticut, from the youngest to the oldest. Thank you for your consideration.

FROM THE ISSUES COMMITTEE

David L. Berger, M.D.

The Issues Committee invites *all* members (and not just those recently inducted) to its next formal meeting in Bretton Woods on Saturday, October 1, 2005, from 12:15 to 12:45 PM. The Issues Committee wants to gauge interest and level of potential membership involvement in a variety of projects it is considering undertaking, including the establishment of a regional databank and/or a collaborative research effort across the NESS. The meeting takes place between the adjournment of the last Saturday Scientific Session and the start of the SAGES Advanced Therapeutic Endoscopic Surgery Course, so as not to coincide with any other scheduled events. Please join us; the committee hopes to involve as many members as are interested.

their manuscripts at our Annual Meeting. I was fortunate to attend this year's highly successful Resident Meeting and would like to extend our gratitude to Steve Schwaitzberg for his dedicated commitment to this increasingly popular NESS activity.

Another new aspect of the program this year will be the presentation by SAGES of an advanced therapeutic endoscopy course on Saturday afternoon. In conjunction with this, the Olympus Corporation which sponsors the course is providing the NESS with an unrestricted educational grant of \$25,000. This will be our first tentative trial of accepting sponsorship for some NESS activities in the effort to limit the charges to the membership. Pending the membership's reaction to the Olympus support, your Executive Committee plans to look into the possibility of expanding sponsorship opportunities in future years. Particularly attractive might be jointly sponsored awards for trainees and new members.

Also on this year's program will be an interesting panel discussion of the organ donor crisis in the United States. This has currently reached such proportions that desperate candidates for transplantation have resorted to soliciting potential donors via billboards or other public media. This topic precipitated a recent discussion on "Dateline".

Finally, in lieu of an after-dinner speaker, I have invited an internationally acclaimed group to entertain us on Saturday evening. This should be another of the many highlights of the 2005 Annual Meeting program.

A number of other issues that the Executive Committee is continuing to address will be presented at the annual business meeting. These include ongoing efforts to increase the value of NESS membership to the younger surgeons; streamlining of the membership application process to reduce it to a one-year period; and development of a definitive policy regarding more specific requirements for attendance at Annual Meetings in order to maintain one's membership. An ad hoc Subcommittee chaired by President-Elect Bob Quinlan has been asked to draft a By-Law Amendment to address this consistently vexing issue.

As before, I again ask the membership to get involved by letting me know your thoughts regarding any of these issues which are of significant import for the future of our Society.

Your input is your best way to support the NESS and guide its future direction.

I look forward to seeing all of you at the annual meeting in Bretton Woods this fall. Please plan to attend what should be one of our most informative and enjoyable meetings ever.

As before, I again ask the membership to get involved by letting me know your thoughts regarding any of these issues which are of significant import for the future of our Society.

12th Annual Surgical Resident and Fellow Research Presentation Day May 27, 2005 / New England Medical Center

The NESS Program Committee proposed (and the Executive Committee agreed) that the presenters of the two prize-winning clinical and basic science papers from the Resident Research Day, already selected as two of the 14 podium papers being presented at the Annual Meeting, be invited as guests of the Society.

OUTSTANDING BASIC SCIENCE PRESENTATION

Abby Mulkeen, MD

Sirna-Mediated Gene Silencing in Colorectal Cancer: A Novel Anti-Antiangiogenic Targeted
Yale University, Department of Surgery

3RD PLACE

Freeman Suber, MD

Modulation of Burn Wound Depth by Complement (C) and Antibody
Brigham and Women's Hospital/Harvard Medical School

OUTSTANDING CLINICAL SCIENCE PRESENTATION

J. R. Rodriguez, MD

Implications and Cost of Pancreatic Leak Following Distal Pancreatic Resection
Center for Clinic Effectiveness in Surgery and Institute for Technology Assessment,
Massachusetts General Hospital, Harvard Medical School

HONORABLE MENTIONS

Salman Ahmad, MD

Noninvasive Cerebral Oximetry in Patients with Traumatic Brain Injury
Maine Medical Center

2ND PLACE

Tiffany Fancher, MD

Breast Cancer and Age

Saint Mary's Hospital

Mark F. Conrad, MD

Local PARP Inhibition During Hindlimb Ischemia Ameliorates Skeletal Muscle Reperfusion Injury
Massachusetts General Hospital,
Division of Vascular and Endovascular Surgery



Highlights of the EXECUTIVE COMMITTEE MEETING June 8, 2005 / Waltham, Massachusetts

- ♦ The Executive Committee discussed the Olympus Corporation grant in support of the 2005 Annual Meeting. SAGES will offer its advanced therapeutic endoscopy course (sponsored by Olympus) on the Saturday afternoon of the Annual Meeting. Olympus will provide an educational grant to NESS and will be given sole sponsorship of this year's meeting and one page of advertisement at the back of the program book. Pending reaction to the Olympus support, the Society will consider expanding sponsorship opportunities next year.
- ♦ The Executive Committee debated various suggestions to develop a definitive policy regarding the annual meeting attendance requirement; Dr. Cosimi appointed an Ad Hoc By-Laws Amendment Committee to be chaired by Dr. Robert M. Quinlan, with members Drs. David L. Berger, James C. Hebert, Paul E. Morrissey, and Robert J. Touloukian. This committee was charged with drafting a by-law amendment that would address this continually vexing issue.
- ♦ A review of the financial report for July 1, 2004 through April 30, 2005 reflected total assets of \$188,878, versus year-to-date 2004 assets of \$144,020. Disbursements of \$146,640 reported a net operating surplus of \$41,649.
- ♦ A financial report of the Charitable Foundation for the ten-month period ending April 30, 2005 indicated total assets of \$192,824. The Executive Committee voted to establish a \$250 prize to be given to the best poster at the Annual Meeting.
- ♦ Dr. David E. Clark, Program Committee Chair, reported on the continued enthusiasm for both podium presentations and the brief report format. Fourteen podium papers were selected, of which 7 are by residents; in addition there are 12 brief reports and 14 are posters.
- ♦ Dr. Francis D. Moore, Jr., NESS Representative to the ACS Board of Governors, reported that the American College of Surgeons has continued its work in developing accurate assessments of risk-adjusted outcomes of morbidity and mortality rates for patients undergoing general and vascular surgery procedures. The data gathered by this National Surgical Quality Improvement Program (NSQIP) will be the basis for much medical and insurance decision-making in the future. For many years the College has led the nation's efforts to ensure safe and effective treatment of all patients requiring surgical care. For example, the Joint Commission on Accreditation of Healthcare Organizations evolved from the ACS Committee on Hospital Standards. The College and its Committee on Trauma verify 197 trauma centers. The College and the Commission on Cancer currently approve 1,425 Cancer Centers in our country. These important programs receive national and international recognition for their role in setting standards to ensure safe and effective surgical care. The College's leaders recognized the needs to extend these established quality improvement practices beyond Trauma and Cancer into all disciplines of surgical care. For that reason, on February 12, 2005, the ACS Board of Regents voted unanimously to expand the ACS standard setting and accreditation efforts into additional disciplines. Because severe obesity has reached epidemic proportions and because weight-reduction surgery provides the only effective treatment for severe obesity, the Regents decided to give highest priority to the ACS Bariatric Surgery Center Accreditation Program. Since then, the College has reviewed the available information, consulted with experts in the field of bariatric surgery, listened to College leadership, developed standards, defined necessary resources, organized the means to collect data, and organized the processes for conducting site visits to accredit hospitals and outpatient facilities in an ACS Bariatric Surgery Center Network. In addition, the College assembled a team to manage and lead this project. The College will contract with hospitals and outpatient facilities that agree to implement the ACS Bariatric Surgery Center standards. Centers will report outcome data on all bariatric surgery patients, whenever possible using NSQIP. The College has recognized the impending shortage of surgeons and is now starting to take action, including pressing federal authorities to boost funding and support for increases in resident training programs.
- ♦ Dr. James C. Hebert, Ness Representative to the American Board of Surgery, reported that at the ABS meeting in January 2005, the directors approved three new advisory councils to the ABS' organizational structure—transplantation surgery; gastrointestinal surgery; and trauma, burns and surgical critical care.
- ♦ The previously disseminated proposed By-Laws changes regarding streamlining the membership application timeline were redistributed for review. Dr. Bagley had requested feedback from Past Presidents and Secretaries regarding the proposed By-Laws changes. The Executive Committee gave its backing to the proposed By-Laws change. (See related article on next page.)
- ♦ An update on NESS logo neckwear indicated that the Foundation had received 36 donations of \$100; for each of these donations, the contributor received his/her choice of necktie, bowtie, or scarf. Members still need to make 25 additional donations, each at \$100, for the Foundation to break even on its initial disbursement for the neckwear.

Proposed Bylaw Change to Streamline Membership Process

The NESS Executive Committee proposes to consolidate and expedite the application process for new members to the Society. Currently it takes two years from the time a candidate is discussed at the Friday night caucuses to be inducted at an Annual Meeting.

The Executive Committee proposes to shorten this to one year through a By-Law change that would have members vote **once** by a mail ballot in the spring. The Executive Committee would then finalize the vote at its **June** meeting. The applicant would be notified and inducted at the Annual Meeting that fall.

A copy of the bylaw change will be circulated during the Annual Meeting at the Mount Washington Hotel, September 29-October 2, 2005.

In order for the proposed amendment to be read and **DISCUSSED** at this fall's meeting requires the unanimous consent of members present. The Executive Committee hopes the membership will unanimously allow discussion of this proposed By-Law change at this October's meeting so that it can be voted on the same day.

If the amendment is discussed (requiring a unanimous vote) and passed (requiring a majority vote), then those candidates discussed at this year's caucuses could join us as new members at the 2006 meeting to be held from September 15 – 17 at the Marriott Mystic Hotel and Spa in Groton, Connecticut.

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If any member of the NESS has an issue to be brought to the attention of the NESS Leadership, please contact your local representative.

MEMBERS IN THE NEWS

NESS Member Peter B. Angood
Appointed Vice President And
Chief Patient Safety Officer At JCAHO

The Joint Commission on Accreditation of Healthcare Organizations recently announced the appointment of Peter B. Angood, M.D., as Vice President and Chief Patient Safety Officer for the Joint Commission International Center on Patient Safety: *Partnering for Solutions and Systems Improvement*.

A member of the New England Surgical Society, Angood is an internationally recognized expert in critical care medicine and trauma surgery and 2005 President of Society of Critical Care Medicine. He is also a professor of Surgery, Anesthesia and Emergency Medicine at the University of Massachusetts Medical School in Worcester. He most recently served as chief of the Division of Trauma and Critical Care at the University of Massachusetts Memorial Medical Center in Worcester.

In the role of Vice President and Chief Patient Safety Officer, Angood will oversee the development and dissemination of the Joint Commission's patient safety efforts. His responsibilities will include oversight of the National Patient Safety Goals, leadership of the Sentinel Event Advisory Group, management of the Sentinel Event Database, development of *Sentinel Event Alerts*, and the integration of Joint Commission and Joint Commission Resources patient safety efforts into a database of patient safety solutions. In addition, Angood will work to strengthen the Joint Commission's relationships with national and international organizations and government agencies involved in patient safety. The Joint Commission International Center on Patient Safety serves as an advocate for patient safety information and a purveyor of solutions to improve safety in health care organizations.

Editor's Corner (continued from page one)

of the classes. Before I knew it, the existing unit was out of the car and the new parts were scattered in front of me. If I was going to drive back home that night, I had to figure it out and reassemble the thing in the remaining minutes of the class.

I broke into a cold sweat and froze for a moment or two. It took some prompting and perhaps some teasing from the Sergeant to get me moving. Then it struck me that just a few hours earlier I had done a colectomy. I had planned and accomplished the operation smoothly and the patient had done well. So why was I getting panicked by the current circumstances? After taking a deep breath, I got going and in a while was driving home. The Vega didn't even wheeze.

Flash forward a few eons to this summer. I found myself playing in an orchestra rehearsal among musicians far more talented than I, thankful that a very competent tuba player was covering most of the notes that flashed by on my contrabassoon part. For a while I wondered about making a dignified exit, but I hung in there, remembering another colectomy done the week before. By the time the concert rolled around, I was holding my own and the performance went well.

Of course, there are moments in the operating room when we wish we were working on our car or making music instead. So we take a deep breath, start dissecting in a different direction or get someone to press down here while we clamp over there. Things do tend to work out when we get back to basics.

Is it just me or do all surgeons experience a brief moment at the outset of a case when we pause to realize just what we are about to do? Every day has its flow and routine, but "the act of surgery" still makes me pause, even before a simple case, to consider the wonder of it all.

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American Board of Surgery Announces New Position - Assistant Director

The American Board of Surgery announces the creation of a new senior level full-time position - Assistant Executive Director - to be based in the Board offices in central Philadelphia. The new position will join two other full-time surgeons presently in the Board office and will participate with them in the administrative management of the affairs of the Board. The principal focus of the new position, to which at least 50% time will be allotted, will be the oversight of development of a more standardized and enhanced surgical residency curriculum, to be accomplished over the next 3-5 years by the Board in conjunction with other surgical stakeholder organizations. The new position will devote his or her remaining time to the development of written examinations for the various specialty areas represented by the Board, the development of maintenance of certification programs for diplomates of the Board, and other administrative tasks of the Board office.

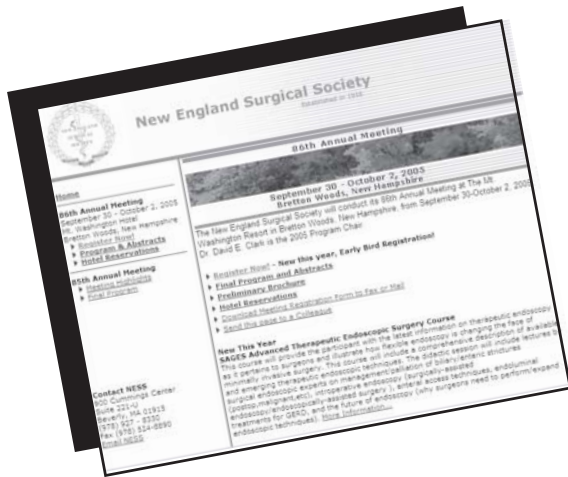
Candidates for this position must be Board certified in Surgery and must have extensive academic experience and expertise in surgical residency education. Prior surgery department or medical educational administrative experience is essential in positions such as Division Head, Hospital Departmental Chief, Departmental Chair, or Designated Institutional Official. It is highly desirable that the candidate also have prior experience in national educational organizations in positions such as Director of the American Board of Surgery, member of the Residency Review Committee for Surgery, consultant on examination committees of the American Board of Surgery, or member of national committees of the American Association of Medical Colleges or Accreditation Council for Graduate Medical Education. The candidate selected must possess the ability to exercise initiative, creativity, and play an instrumental role in the future of Board's programs and activities.

Recruitment for this position will be opened immediately and applications will be accepted until September 30, 2005. All applications should be sent to the attention of Frank Lewis, M.D., American Board of Surgery, 1617 JFK Blvd, Suite 860, Philadelphia, PA 19103. Applicants will be initially screened on the basis of their written application and curriculum vitae. Finalist candidates will be invited to the Board offices in Philadelphia for interviews by ABS Directors and Board executives. Final selection will be by the Executive Committee of the American Board of Surgery and will require ratification by the full Board of Directors. It is desirable that recruitment be completed by December 31, 2005 if possible.

The position will be salaried at a level commensurate with the candidate's experience and responsibilities. Excellent medical, retirement, and vacation benefits are provided. Questions may be directed to Dr. Lewis at 215-568-4000 or email at flewis@absurgery.org.

www.nesurgical.org

The New England Surgical Society has a new and improved website. Check out the new website at www.nesurgical.org.



- ♦ The complete Annual Meeting Program is listed with an individual link to every abstract being presented during the meeting;
- ♦ Register On-Line for the Annual Meeting
- ♦ Society activities and information on upcoming events.

NESS Logo Neckwear Available for purchase at the Annual Meeting or via mail order.

Make a contribution to the NESS Foundation and support its Archival Oral History Initiative. For each \$100.00 contribution, you can select an NESS necktie, bow tie, or silk scarf.



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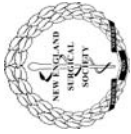
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- ♦ Winners from the 12th Annual Surgical Resident and Fellow Research Presentation Day
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- ♦ SAGES Advanced Therapeutic Endoscopy Course to be presented during the NESS Annual Meeting
- ♦ Bretton Woods in 1989 - A Look Back
- ♦ Visit the newly revised NESS Website: www.nesurgical.org