

NEWS WOMEN IN NEUROSURGERY



President's Message: WINS Supports Mentorship Program

Women in Neurosurgery (WINS) is a dynamic, international organization of 174 active members, involved in every discipline of neurosurgery. We remain dedicated to inspiring, encouraging, and enabling women neurosurgeons to realize their professional and personal goals. Central to our mission of neurosurgical quality, continuing education and peer support is our commitment to mentorship.

I owe my evolution as a neurosurgeon to my mentors:

Dr. Franklin Wagner, my former chair at the University of California, Davis Medical Center, who is a rigorous yet compassionate teacher and staunch resident advocate. Dr. Dachling Pang and Dr. Roderick Smith exposed all facets of neurosurgical practice to me during residency. Dr. Alexa Canady molded me into the "friendly neighborhood neurosurgeon," while teaching me every area within pediatric neurosurgery at Children's Hospital of Michigan. Dr. David Kline nurtured my interest and research in peripheral nerve surgery. My partners, Drs. Steven Ham and Sandeep Sood, remain my mentors as well. All of these stellar individuals showed me throughout my training what being a neurosurgeon and physician is all about.

It is difficult to be a neurosurgeon today. Every discipline of neurosurgery is busier than ever. Our patients are sicker, and our technology for caring for them is continually changing. We are all familiar with the current malpractice climate and the cost of practicing neurosurgery. All of these issues are daunting to residents in training. They need our support. They need to know that, despite the challenges

we face, neurosurgery after residency is still phenomenal. It is a privilege. It is intellectually stimulating, exhilarating, and rewarding beyond description. I do not believe that the decrease in resident work hours has to signal a decrease in the commitment of our trainees to our patients or to neurosurgery. The residents need our mentorship.

WINS encourages and supports talented women who aspire to neurosurgery, from medical school onwards.

The AANS recently has begun an initiative to match residents with AANS member mentors. Those neurosurgeons participating as mentors are at least 5 years out of residency, and may be either in private practice or academia. WINS strongly supports this effort, in spirit as well as in the participation of our senior members. The response on both sides has been enthusiastic, and I am sure the relationships formed will be rewarding for both mentors and mentees.

Our organization will continue to promote leadership and career development, at every stage of our profession.

We support neurosurgical scholarship in training through our Louise Eisenhardt (AANS) and Sherry Apple (CNS) Travel Scholarships. These awards of up to \$1000 are given semiannually at the CNS and AANS meetings to defray travel expenses for the resident submitting the most outstanding abstract accepted at the respective meeting. Please see page X of the newsletter for further information.

In the spirit of mentorship, please join us for the Ruth Kerr Jakoby Lecture, "Inside Secrets: WINS Masters Share Tools for Success," on April 19, 2005, from



Holly S. Gilmer-Hill, M.D.
WINS President

5:30-7:30 p.m. in the La Galerie 1 room at the New Orleans Marriott. During this panel discussion, esteemed senior neurosurgeons Drs. Alexa Canady, Tina Duhaime, and Karin Muraszco will discuss strategies for a fulfilling career in neurosurgery, from rising in academia to balance to building a successful practice.

As my tenure as WINS President winds down, I would like to express my gratitude to my fellow officers, President-Elect Dr. Kimberly Page, and Secretary-Treasurer Dr. Jamie Ullman, for all of their hard work over this past year. I am indebted to my outstanding Executive Committee for their contributions, tireless efforts, and sage advice: Drs. Edie Zusman, Deborah Benzil, Isabelle Germano, Cheryl Muszynski, Roxanne Todor, Gail Rousseau, Karin Muraszco and Denise Crute. All of these dynamic neurosurgeons exemplify the spirit of mentorship and support. In these challenging times, we must do our utmost to guide our trainees and assist our colleagues. WINS remains dedicated to recruiting and supporting neurosurgery's best and brightest future leaders.

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WINS MISSION

To inspire, encourage, and enable women surgeons to realize their professional and personal goals.

2004 WINS Alexa Canady Lecturer

Martha Marsh, President & C.E.O., Stanford Hospital and Clinics

The Value of a Neurosurgeon to a Medical Center

Health care in the United States today faces many crises. From attacks on MICRA, Emergency Room Neurosurgical care shortages, the rising costs of technology and declining reimbursements physicians and medical centers across the nation are facing numerous often times conflicting challenges. On October 19, 2004, during the Congress of Neurological Surgeons Annual Meeting in San Francisco, CA, Martha Marsh, a nationally recognized leader in health care administration, shared her views of the value of the neurosurgeon to the medical center, and shed some light on the hospital perspective.

According to Marsh, critical components of the current health

care crisis include fixed costs, constraints to cost reduction, the demographics of an aging American population, and unfunded mandates. Fixed costs primarily center on skilled personnel, and include benefits as well as salaries. The current shortage of skilled personnel such as nurses impedes cost reduction in this area, since competitive packages must be offered to attract and retain qualified staff. In order to attract and retain the increasingly sophisticated patient population, hospitals often feel compelled to offer the latest innovations in medical technology. The consumption of medical/hospital care is expected to increase exponentially as well, as the American

population ages. All baby-boomers will reach the age of 40 by the end of 2004.

As neurosurgeons, Marsh pointed out, we have with our expanding technologies and new treatment paradigms much to offer to the hospital bottom line. Neurosciences are emerging as the premier service line and revenue source for many hospitals. Finding ways to work together will be essential for financial security for both hospitals and neurosurgeons. Marsh encouraged neurosurgeons to request resources and equipment which will help them improve care for their patients, and attract patients to their practice and, concurrently, to their hospital. In this endeavor, it is incumbent upon the neurosurgeon to demonstrate that his/her requests fit with hospital



and community needs not only medically or ethically but also in terms of cost-effectiveness, utilization, demonstrated results, and potential for return on the investment. Ultimately, we should all be working for the good of the patient. Marsh's perspective was refreshing in that she was able to demonstrate that the relationships between hospitals and physicians need not be adversarial, and could well be beneficial.

*Article by
Kimberly A. Page, M.D.
President-Elect, WINS*

Memberships Support Resident Research

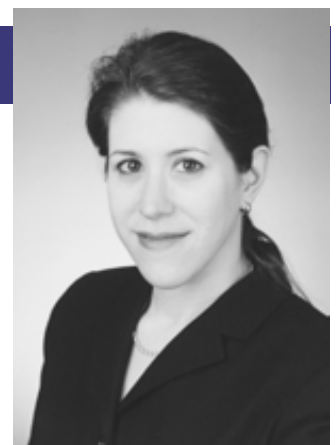
It is a pleasure for me to assume the post of WINS Secretary/Treasurer for 2004-2005. Our membership holds at approximately 174. As always, we encourage all women neurosurgeons to join WINS. Resident membership is free of charge, and other membership options are available. Please see the membership application included with this newsletter

WINS is an organization

founded with the goal of fostering the personal and professional development of women neurosurgeons. We participate in Mentoring Programs, actively encourage member participation in the AANS and CNS through program committee liaisons, and support resident research through two travel scholarships to the AANS and CNS annual meetings. These scholarships are chosen from submitted resident abstracts. Please

refer to the AANS and CNS abstract centers found at www.neurosurgery.org.

In order to continue providing these and other services, it is necessary for us to receive revenue through membership dues. All outstanding dues can be sent to the address listed on the last page of this newsletter. Your continued support and participation is greatly appreciated. We look forward to seeing many of you in New Orleans!



*Jamie S. Ullman, M.D.
Secretary-Treasurer
2004-2005
President Elect
2005-2006*

Presenting
The Spring 2005 WINS Reception
And Ruth Kerr Jakoby Lecture



Inside Secrets *WINS Masters Share Tools for Success*

Tuesday, April 19, 2005 • 5:30 to 7:30 p.m.

Le Galerie I • New Orleans Marriott

A Panel Discussion Featuring:

Dr. Alexa Canady



*Former Chair
Department of Pediatric
Neurology
Children's Hospital of
Michigan*

Dr. Tina Duhaime



*Professor
Department of Pediatric
Neurology
Dartmouth College*

Dr. Karen Muraszko



*Chair
Department of
Neurosurgery
The University of
Michigan Health System*

*WINS gratefully acknowledges Guilford
Pharmaceuticals' support of this event.*



Congratulations!

Female Neurosurgeons Who Obtained ABNS Certification In 2004

Dr. Sepideh Amin-Hanjani

Dr. Florence Barnett

Dr. Ana Maria DeVilliers

Dr. Marilyn Gates

Dr. Lori McBride

Dr. Ann Ritter

Dr. Jodi Smith

Dr. Shelly Timmons

Dr. Lyndell Wang

Dr. Monica Wehby

Dr. Ann-Marie Yost

2005 AANS Annual Meeting

April 16 - 21

WINS Highlights

Saturday, April 16

PC003 Anterior Lateral Approaches to Skull Base

Co-Directors:

William T. Couldwell,

Gail L. Rosseau

Learning Objective:

After completing this clinic, participants should be able to: describe the surgical anatomy of approaches to the skull base, evaluate advantages/disadvantages of approaches for specific pathologies, minimize morbidity of tumor resection in the skull base.

PC007 Peripheral Nerve Injuries, Entrapments and Tumors: Examination and Evaluation

Co-directors: Line Jacques,

Eric L. Zager

Learning Objective:

After completing this clinic, participants should be able to: identify the biology and classification of various nerve injuries, nerve de-generation and regeneration, design a rational diagnostic and management plan for patients with peripheral nerve injuries, entrapments and tumors.

PC011 Head Trauma: Current Treatments and Controversies with Hands-on Practical Session in Brain Monitoring and Techniques

Co-directors: Geoffrey T. Manley,

Shelly D. Timmons

Learning Objective:

After completing this clinic, participants should be able to: describe the ICU management of the TBI patient, describe the current surgical controversies in the management of the head injured patient, identify the current concepts in dealing with the head injured athletes, recognize the role of the neurosurgeon in a trauma center and discuss the concept of neurotrauma referral centers.



Practical Course

Saturday Morning, April 16 0800-1200

Advanced Leadership Training for Neurosurgeons

After excellent reviews by participants in the last AANS Leadership Training Course, Edie E. Zusman MD, FACS and Deborah Benzil, MD, FACS were asked to reprise this popular program for the April AANS meeting, in New Orleans, Louisiana. This year, particular focus will be placed on how to negotiate with hospitals and how to understand and create the business case to convince your hospital to provide the support you need for your specialty practice and programs. The keynote speaker for the program is Ms. Margaret Vosburgh, former vice-president of center operations, Albany Medical Center, who will discuss the economic value we as neurosurgeons bring to our hospitals. Ms. Vosburgh will be joined on the panel by her husband, past AANS President Dr. John Popp, Chairman, Department of Surgery and the Division of Neurosurgery, Albany Medical Center, and Dr. Mark Camel, Orthopedic and Neurosurgery Specialists, P.C., Greenwich, CT. This course was originally based on Leadership Training courses designed for women leaders in medicine by the American Association of Medical Colleges. Dr. Zusman states, "Neurosurgeons need to know what we bring to the table economically so that we can negotiate from a position of strength to achieve win/win solutions with our hospitals. Women particularly will benefit from benchmark data given in this course, which may not be directly accessible at their own facility."

Course Directors

Dr. Deborah Benzil



Dr. Edie E. Zusman



PC012 Non-Invasive Pre-Operative and Intra-Operative Brain Mapping and Treatment of Epilepsy

Director: Isabelle M. Germano

Learning Objective:

After completing this clinic, participants should be able to: identify the technologies currently available for pre- and intra-operative brain mapping, apply learned techniques to his/her practice, recognize complication avoidance by the experts of this field.

Sunday, April 17

PC030 Practical and Technical Aspects of Transsphenoidal Surgery

Co-directors: Gail L. Rosseau,

William T. Couldwell

Learning Objective:

After completing this clinic, participants should be able to: describe the transsphenoidal approach and contemporary modification, cite the advantages of the endonasal, endoscopic technique, outline current approach to surgery, evaluate adjunctive therapies for patients with pituitary tumors.

WINS Highlights

New Orleans

Sunday, April 17

PC033 Innovations of Pediatric Neurosurgery: Putting it in Perspective

Director: Ann-Christine Duhaime

Learning Objective:

After completing this clinic, participants should be able to: evaluate new techniques and technologies in pediatric neurosurgery, recognize when new techniques developed and introduced in adult neurosurgery may or may not give similar results in pediatric care, evaluate the best ways to learn new techniques once the surgeon is no longer in training – how to get you and your patients “past the learning curve”.

Monday, April 18

BS103 Surgical Strategies and Approaches to the Anterior Skull Base

Moderator: William T. Couldwell

Invited Panelists:

Gail L. Rosseau, Fred Gentili, Linda L. Sternau

Learning Objective:

After completing this clinic, participants should be able to: recognize indications and limitations of various surgical approaches, minimize morbidity and effectively manage complications, identify complex, expert, or team-based approaches for unusual lesion with high potential morbidity.

BS106 International Opportunities in Neurosurgery

Moderator: Daniel F. Kelly

Invited Panelists:

Merwyn Bagan, Gail L. Rosseau

Learning Objective:

After completing this clinic, participants should be able to: discuss the current educational and material needs of neurosurgical training programs in the developing world, define the educational and training activities of FIENS in the developing world.

Monday, April 18

BS107 Epilepsy: New Surgical Treatment and Management Approaches

Moderator: Dennis D. Spencer

Invited Panelists:

Richard W. Byrne, Edie E. Zusman, David W. Roberts

Learning Objective:

After completing this clinic, participants should be able to: describe the common preoperative evaluations, describe what each evaluation provides, recognize how surgical approaches are made based on these evaluations.

BS109 Pediatric Head Injury: Avoid Common Pitfalls

Moderator: Thomas G. Luerssen

Invited Panelists:

Ann-Christine Duhaime, David M. Frim, Peter B. Dirks

Learning Objective:

After completing this clinic, participants should be able to: recognize current issues specifically related to pediatric brain injury, integrate or diagnose specific management strategies in pediatric head injury.

BS113 Contemporary Treatments of Cervical Spondylotic Myelopathy

Moderator: Robert F. Heary

Invited Panelists:

Thomas B. Ducker, Emily Friedman, Carl Laurysen, Darryl J. Di Risio

Learning Objective:

After completing this clinic, participants should be able to: identify the various pathologies in myelopathy, distinguish the treatment (operative) options, review operative success/failure rates.

BS114 Update on Psycho Surgery

Moderator: Alim L. Benabid

Invited Panelists: Ronald F.

Young, Ali R. Rezai, Aviva Abosch

Learning Objective:

After completing this clinic, participants should be able to: discuss indicators for psychosurgery, describe the different surgical procedures used, evaluate and validate psychiatric outcomes rating scales.

Tuesday, April 19

BS206 Functional Mapping of the Cerebral Cortex: Advantages and Limitations

Moderator: Isabelle M. Germano

Invited Panelists:

Stephane Palfi, Mitchel S. Berger, George A. Ojemann

Learning Objective:

After completing this clinic, participants should be able to: identify and work within eloquent areas of the brain, discuss the technologies available to localize eloquent cortex, how this can enhance the safety of the surgery, and what are their limitations.

BS207 Chiari Malformation: Diagnosis Treatments, and Failures

Moderator: Nicholas M. Barbaro

Invited Panelists:

Richard G. Ellenbogen, Karin M. Muraszko, Bermans J. Iskandar

Learning Objective:

After completing this clinic, participants should be able to: describe the current concepts of the pathophysiology of Chiari malformations, recognize the indications for treatment of Chiari malformations, discuss the options for treatment of Chiari malformations.

2005 AANS Annual Meeting

April 16 - 21

WINS Highlights

Wednesday, April 20

BS306 Current Surgical Alternatives and Complications in the Treatment of Parkinson's Disease

Moderator: Zelma HT Kiss
Invited Panelists: Philip A. Starr, Alim L. Benabid, Aviva Abosch

Learning Objective:
 After completing this clinic, participants should be able to: discuss indications for different surgical techniques, as well as surgical techniques for PD, discuss common complications and how to avoid them.

BS307 Pediatric Posterior Fossa Brain Tumors

Moderator: Frederick A. Boop
Invited Panelists: Liliana C. Goumnerova, Peter B. Dirks, Nalin Gupta

Learning Objective:
 After completing this clinic, participants should be able to: assess and measure personal outcomes using known standards, define the treatment appropriate for the tumor type.

BS308 Pituitary Tumors: State-of-the-Art

Moderator: Gail L. Rosseau
Invited Panelists: Martin H. Weiss, Sandeep M. Kunwar, Daniel F. Kelly, William T. Couldwell

Learning Objective:
 After completing this clinic, participants should be able to: discuss optimal management of prolactinomas, describe approach advances in and extensions of the transphenoidal, construct appropriate adjunctive treatment algorithms for their patients.

BS 313 Syringomyelia: Understanding Pathophysiology and Treatment Approaches

Moderator: Edward H. Oldfield
Invited Panelists: Charles H. Tator, Ulrich Batzdorf, Cheryl A. Muszynski, Karin M. Muraszko

Learning Objective:
 After completing this clinic, participants should be able to: discuss the indications for surgery, discuss the pros and cons of different operative approaches, discuss current opinion concerning optimal surgical techniques.

BS316 State-of-the-Art Treatments for Low grade Gliomas

Moderator: Joseph M. Piepmeier
Invited Panelists: Linda M. Liau, Peter M. Black

Learning Objective:
 After completing this clinic, participants should be able to: describe the range of pathologies included in low-grade gliomas, distinguish between different management strategies, construct treatment plans based on state-of-the-art neurosurgery.

BS319 Cerebral Trauma: State-of-the-Art Treatment

Moderator: Donald W. Marion
Invited Panelists: Brian T. Andrews, Shelly D. Timmons, Geoffrey T. Manley, Alex B. Valadka

Learning Objective:
 After completing this clinic, participants should be able to: evaluate controversies surrounding guideline utilization, apply guidelines to daily practice in cerebral trauma.

Thursday, April 21

BS401 Pediatric Neurosurgery: Meet the Experts

Moderator: Timothy B. Mapstone
Invited Panelists: Bermans J. Iskandar, Bruce B. Storrs, Rick Abbott, Thomas G. Luerksen, Mark S. Dias, James T. Goodrich, Ann-Christine Duhaime

Learning Objective:
 After completing this clinic, participants should be able to: recognize treatment modalities for the treatment of pediatric pathologies, discuss outcomes associated with various treatment modalities for pediatric pathologies, identify pediatric pathologies in daily clinical practice.

BS402 Cerebrovascular Neurosurgery: Meet the Experts

Moderator: Robert E. Harbaugh
Invited Panelists: Apio Claudio Antunes, Joseph M. Zabramski, Yoko Kato, Charles W. Kerber, Robert H. Rosenwasser, B. Gregory Thompson

Learning Objective:
 After completing this clinic, participants should be able to: recognize treatment modalities for the treatment of cerebrovascular disease pathologies, discuss outcomes associated with various treatment modalities or cerebrovascular pathologies, identify cerebrovascular pathologies in daily clinical practice.

BS404 Tumor Neurosurgery: Meet the Experts

Moderator: Isabelle M. Germano
Invited Panelists: Raymond Sawaya, William T. Couldwell, Jorg-Christian Tonn, Joseph M. Piepmeier, James T. Rutka

Learning Objective:
 After completing this clinic, participants should be able to: recognize treatment modalities for the treatment of tumor disease pathologies, discuss outcomes associated with various treatment modalities for tumor pathologies, identify tumor pathologies in daily clinical practice.

The Changing Face of Residency

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establishing guidelines and feedback systems may improve the efficiency and effectiveness of resident education (2). This first step in the process is to have a formal orientation for each rotation which may be as simple as defining rotation goals with a handout or on the departmental website, supplemented with as little as a five minute one-on-one session. By establishing goals of the rotation, expectations are well-defined, based on level of training. For example, the resident curriculum guidelines state that a junior resident on a neurotrauma rotation should be able to understand basic pathophysiology, care for non-complicated ICU patients, place intravascular monitors, place intracranial monitors, and assist in craniotomies. Senior residents are expected lead the ICU care, perform uncomplicated craniotomies and repair peripheral nerve injuries.

Implementing a system of feedback based on documented goals and expectations is a sound educational practice. These guidelines may have a motivational impact and allow residents to confirm that they are making appropriate progress. Having documented goals also allows attending physicians to have objective expectations of residents based on training level. DaRosa and Bethke use the format of the core curriculums established by the ACGME in developing their learning objectives (2). These curriculums include: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and

systems-based practice. The feedback sessions are essential to the implementation of learning objectives, and should ideally take place both at the middle and the end of the rotation. To maximize efficiency, the attending physician overseeing the rotation should provide the feedback based on how well the resident has met the expected goals. The 360-degree evaluation, which provides feedback from not only attending physicians, but also from co-residents, medical students, nursing staff, physician extenders, and patients, may offer new insight into improving bedside manner and patient-physician interactions. Again, well-defined guidelines need to be established so that these evaluations aren't based on friendships or perceptions.

Over the next few years, it will be essential to define the true impact of duty hour restrictions on resident training. The combination of objective data, such as board scores and operative logs, with assessment of operative skills and medical decision making through evaluations based on well-defined learning objectives should allow us to better compare the new model of training with the traditional one. Documentation by residents of what their daily duties include and the time spent on those duties may lead to the identification and reduction of activities which do not improve training. Taken together, this information will ideally allow our specialty to maintain training situations where educational content and patient care are optimized, despite work hour restrictions.

References

1. Cohen-Gadol AA, Piegras DG, Krishnamurthy S, Fessler RD. Resident duty hours reform: results of a national survey of the program directors and residents in neurosurgery training programs. *Neurosurgery* 2005 56: 398-403.
2. DaRosa DA, Bethke K. The 80-hour workweek: How to orient residents to their rotations and increase efficiency and effectiveness. *American College of Surgeons Website* 2005.

Louise Eisenhardt Resident Travel Scholarship

The 2005 Louise Eisenhardt Resident Travel Scholarship will be awarded to Martina Stippler, MD, Neurosurgical resident at the University of Pittsburgh, at the upcoming American Association of Neurological Surgeons Annual Meeting, on Tuesday, April 19. Dr. Stippler won the award for her abstract, "Continuous Magnesium Infusion for Cerebral Vasospasm Prophylaxis in Aneurysmal Subarachnoid Hemorrhage." She will present her abstract and receive her award during Plenary Session II of the meeting.



Dr. Martina Stippler

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

A WINS selection committee, headed by Isabelle Germano, MD, reviews the abstracts. All eligible residents may submit their abstracts for consideration by selecting the tab on the online submission menu.

Sherry Apple Resident Travel Scholarship

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

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

Dr. Kimberly Page
2510 Airpark Drive, Suite 303
Redding, CA 96001
(916) 246-2207 • fax (530) 243-6835
e-mail: kimberlypage@sbcglobal.net



American
Association of
Neurological
Surgeons



AANS/CNS

Women in Neurosurgery
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Rolling Meadows, IL 60008



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NEUROSURGERY
2004-2005
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The Changing Face of Residency

For the last fifty years, the Accreditation Council for Graduate Medical Education (ACGME) has been responsible for maintaining national standards in residencies throughout the country. However, the most sweeping changes made by the ACGME have been in the last five years. Recently, the ACGME began requiring education in six general competencies in the effort to more uniformly assess educational outcomes in residency programs. Of course, the most drastic changes were the ACGME guidelines which limited the resident work-week to 80 hours and work shifts to 24 hours. Taken together, these changes were designed to

standardize the educational experience of residents nationally and to maximize educational content while limiting work hours. The question now is how to comply with these changes in educational programs while continuing our specialty's tradition of producing well-trained physicians.

In the February issue of *Neurosurgery*, Cohen-Gadol et al (1) published the results of their survey on residents' and program directors' perceptions of the impact of duty hour restrictions on neurosurgical training. A majority of both residents and program directors noted a negative effect on training. Continuity of

care/knowledge of patients seemed to be most drastically effected. The true impact of the changes on operative experience, written test scores, and publication-related activities has yet to be defined. The next steps, as noted by Dr. Arthur Day, are to obtain these concrete data as well as to better define exact responsibilities and the time needed to perform those duties at various training levels, in an effort to reduce activities which do not improve resident training/education (1).

DaRosa and Bethke (www.facs.org/education/rap/darosa0305) describe how

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