



EXPANDED SCOPE — SHARPENED FOCUS
AANS 2008 ANNUAL REPORT



American
Association of
Neurological
Surgeons

and the American Association of Neurosurgeons

PRESIDENT'S MESSAGE

EXPANDING TECHNOLOGY REQUIRES SHARPENED FOCUS



I recently had the pleasure of presiding over the 2008 AANS Annual Meeting in Chicago. What a remarkable event, reflecting the incredible growth of our increasingly technological surgical subspecialty. The 2008 AANS Annual Meeting offered 41 hands-on practical clinics in the use of a plethora of cutting edge medical devices. Conflict of interest disclosures were required from all presenters participating in this meeting, 830 of whom were neurosurgeons.

There were an impressive 236 corporate exhibitors occupying 800 exhibit booths on a football-field-sized exhibit floor. The annual meeting was a confirmation of how the practice of neurosurgery has become a complex surgical subspecialty dependent on the advancements of technology.

New devices and techniques have evolved due to visionary neurosurgeons forming collaborative relationships with industry. The numerous neurosurgical innovations over the last century have improved treatment efficacy and patient outcomes for many neurological conditions and diseases. Today, these medical advances are recognized as lifesaving interventions that have positively impacted thousands of patients. These innovations would not be possible without the neurosurgeon-industry collaboration.

The goal of medicine always should be to serve the best interest of the patient, whereas business must promote profitability for the success of its investors. Although partnerships between physicians and industry have resulted in major medical advances, they also have created opportunities for bias which can lead to unfavorable public perceptions. And this has inevitably led to heightened scrutiny initiated over the last few years by the Federal government into the relationship between physicians and industry.

In September 2007, the U.S. Department of Justice announced that a settlement had been reached with five major medical device makers that accounted for nearly 95 percent of the market in hip and knee surgical implants after a multiyear investigation into violations of the federal anti-kickback statute.

During the same month, Senator Charles Grassley (R-IA) and Senator Herb Kohl (D-WI), chairman of the Special Committee on Aging, introduced the *Physician Payments Sunshine Act*, which would require drug and device makers to disclose the amount of money they give to physicians through payments, gifts, honoraria, travel and other means.

There are several AANS documents that have been developed over the years to help neurosurgery maintain the highest ethical standards in delivering patient care. In 1986, the AANS Code of Ethics was created as a guideline for neurosurgeons to follow in medical, social, and professional relationships. This document was updated by the AANS Board of Directors in April 2007. The AANS Guidelines for Corporate Relations, developed in 2004, has allowed the AANS to develop a balanced, long-term approach to working with industry that ensures industry's financial support for the benefit of patients and educational programs. This document established disclosure policy that is in compliance with the Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support.

In July 2007, the AANS issued the *Neurosurgeons and Industry Policy Statement*. The purpose of this policy statement was to affirm the AANS position that the ethical care of patients is the highest priority for neurosurgeons and that the AANS is taking deliberate steps to prevent industry from unethical influence within the organization, its sponsored educational meetings, and its patient/public education initiatives.

In April 2008, the AANS issued *Guidelines on Neurosurgeon-Industry Conflict of Interest*, which expanded on the 2007 policy statement, addressing this issue in far greater depth, in particular the continuing medical education (CME) components. Speakers, authors, committee members, or others in the planning process who have the ability to influence and/or control the educational content must disclose their financial relationships.

In May 2008, James R. Bean, MD, and Anthony L. Asher, MD, issued the *Joint Statement on the Guidelines on Neurosurgeon-Industry Conflict of Interest* from the AANS and Congress of Neurological Surgeons. This document served to reinforce to membership the importance organized neurosurgery places on this very serious issue.

As a professional medical organization, the AANS has a mutually beneficial relationship with industry. Industry is supportive of the AANS mission of advancing the specialty of neurological surgery to provide the highest quality of neurosurgical care to the public. And today's practice of neurosurgery is dependent upon industry to provide the tools and devices necessary to care for our patients. It is a neurosurgeon's responsibility to resolve conflicts of interest that are at odds with the best interest of his or her patients. And as your professional organization, the AANS is committed to helping you maintain the highest standards in delivering neurosurgical patient care and advancing the specialty.

Jon H. Robertson, MD
2007-2008 AANS President



HARVEY CUSHING

American
Association of
Neurological
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EXECUTIVE DIRECTOR'S REPORT

COLLABORATIVE FOCUS ENABLES PROGRESSIVE GROWTH



On behalf of AANS leadership and professional staff, I am very pleased to present to you — the members — this AANS Annual Report. I am grateful for the opportunity to be able to present this report for the eighth consecutive year and am particularly pleased at the growth of your association, as outlined in these pages.

The accomplishments of the AANS leaders and members that are highlighted within this year's report are impressive. The remarkable growth and quantifiable member satisfaction of the

2008 AANS Annual Scientific Meeting extended the run of record-breaking attendance at AANS Annual Meetings to three consecutive years.

The association's breadth of offerings this year of non-annual meeting educational courses and meetings set record attendance, reaching out to diverse levels of AANS members, from the successful programs for residents to the unique perspective of the *Neurosurgeon as CEO* program.

The collaborative pool of technological talent and skills of both physician and AANS professional staff accelerated offerings of online products and resources designed to deliver more timely information to members at less cost and in more customizable formats than at any time in the organization's recent history.

The organization accelerated its initiative of focusing on the needs of international members and colleagues with specialized programming at the AANS Annual Meeting, international visiting fellowships, a new focus on international members on AANS.org, and availability of AANS Annual Meeting scientific, section, and plenary session programming online to the international community. And as host of the XIV World Congress of Neurological Surgery meeting next summer in Boston, Mass., the AANS is managing a meeting that will provide neurosurgeons and visitors from around the world a dynamic experience in the sharing of education, knowledge, and culture.

This year witnessed the cooperative but prudent collaboration between AANS and its corporate partners grow in scope and mutual satisfaction. But that partnership received more scrutiny and ongoing assessment by AANS leaders and management than ever before, and occurred within the framework of ongoing policy-specific guidelines. The funding of AANS/NREF research and education enjoyed another successful year through the generosity of AANS' industry partners, as the organization's openness and accessibility in working with those partners to mutually develop policy and guidelines to enable that cooperation also escalated.

All this growth in service to you as an AANS member has been realized within an exceptionally sound and nimble financial environment. As recently as seven years ago, the AANS routinely raised member dues annually and there existed no fiscal reserve, with no specific and consistent policies to prevent unbudgeted spending. Now, with the organization's fiscal policy under monthly review by leadership and annually evaluated by outside auditors, your association is able to undertake many new initiatives and enhance most of its current offerings with non-dues funding available for programming that is continually reinvested in members services.

At the beginning of this decade, the AANS routinely funded the majority of its services to you like many other professional associations — by customarily raising members' dues in accordance with the government's cost of living index. As a result of AANS fiscal policies implemented within the past seven years, and rigidly adhered to every year since, the AANS' successes and progress in serving its membership and the specialty have been realized with no increase in member dues since 2001.

What is most personally gratifying for me is to have been able to witness the evolution of the partnership between AANS members and professional staff at the Executive Office in Rolling Meadows, Ill. The success of any member-driven association is vitally dependent on the choreography between strategic vision, sound planning, efficient execution, and collaborative synergy between the organization's members and its professional employees. That give-and-take partnership of strategic direction and practical implementation has reached a new level of seamlessness and success at the AANS over the past several years, and is the basis for every service available to you as a member.

It bears remembering that the programs available to you — every course, product, online offering, cost efficiency, general support of the medical community and its publics, and all the achievements highlighted in the following pages for your review — are the sum total of an extraordinarily like-minded vision of success shared by the organization's staff, its physician leaders, and its growing membership.

Thank you for your membership in the AANS.

Thomas A. Marshall
AANS Executive Director

AANS MISSION STATEMENT

The American Association of Neurological Surgeons (AANS) is the organization that speaks for all of neurosurgery. The AANS is dedicated to advancing the specialty of neurological surgery in order to promote the highest quality of patient care.

AANS VISION STATEMENT

- The American Association of Neurological Surgeons will ensure that neurosurgeons are recognized as the preeminent providers of quality care to patients with surgical disorders that affect the nervous system.
- The American Association of Neurological Surgeons will work to expand the scope of neurosurgical care as new technologies and treatments of neurological disorders become available.
- The American Association of Neurological Surgeons will be the organization speaking for neurosurgery through its communications and interactions with the public, media, government, medical communities, and third party payers.
- The American Association of Neurological Surgeons will be its members' principal resource for professional interaction, practice information and education.
- The American Association of Neurological Surgeons will promote and support appropriate clinical and basic science to expand the scope of neurosurgical practice.

DIVERSIFIED EDUCATIONAL PROGRAMMING EXPANDS SKILLS

The AANS continues to support the highest level of professional excellence through the American Board of Neurological Surgery's (ABNS) Maintenance of Certification (MOC) program. The second MOC recertification preparation course directed by Thomas J. Leipzig, MD, *Weekend Update: Interactive Review of Clinical Neurosurgery by Case Management* took place February 23-24, 2008 in Houston with 64 people in attendance. Of these, 26 went on to take the ABNS MOC exam and all passed. In addition, a free course was offered during the AANS Annual Meeting in the technology pavilion. This was geared primarily towards helping neurosurgeons learn how to enter their key cases, a new feature on the ABNS' Web site.



In fiscal year 2008, the AANS offered a total of 17 courses, covering practice management, oral board preparation, and resident education. Launched by the late Julius M. Goodman, MD, in 1997, AANS oral board courses remain incredibly popular offerings. Now under the direction of Allan D. Levi, MD, PhD, FACS, *Goodman Oral Board Preparation: Neurosurgery Review by Case Management* courses were offered November 4-6, 2007 and May 25-27, 2008, with sell-out attendance.

Enhancing the regular curriculum of on-site courses, the AANS also continued to offer innovative vehicles to obtain CME, including one new online course. *C-1 Lateral Mass Screw Placement* by Jeffrey Florman, MD, was launched in November 2007, with 180 members receiving CME. In addition, 129 members took *Minimally Invasive Microendoscopic Decompressive Laminotomy for Lumbar Stenosis* by Richard G. Fessler, MD, PhD, bringing the total number of members receiving credit since inception to 358.

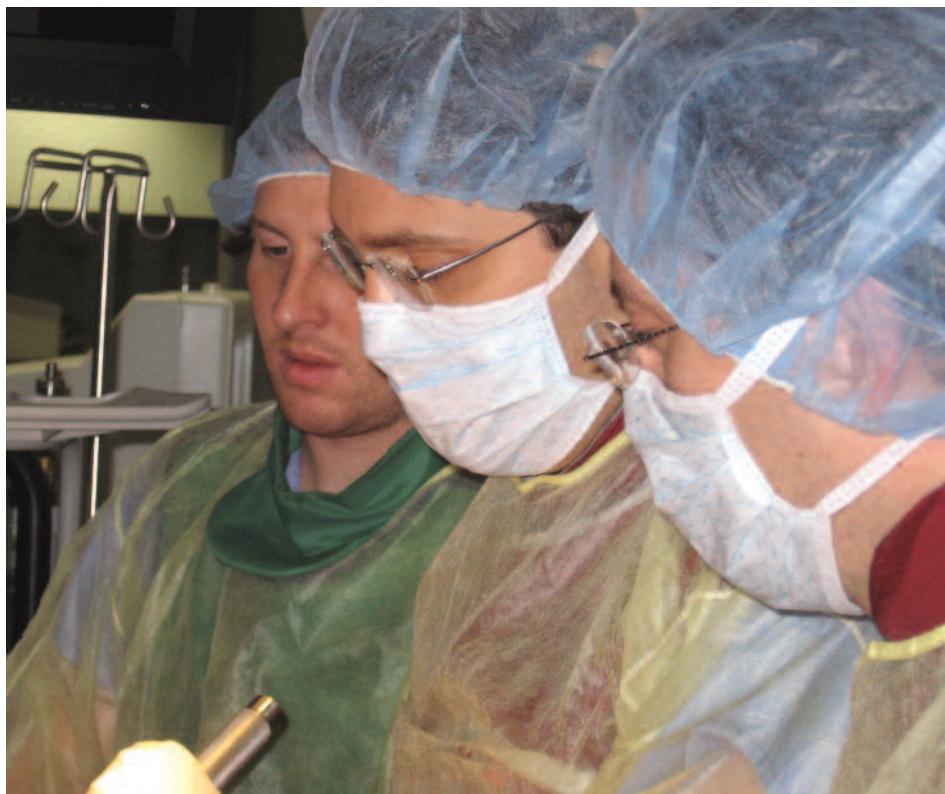
New this year, the AANS offered three innovative webinars taught by NERVES faculty in October and November 2007. *Ways to Collect Every Dollar Your Neurosurgical Practice is Due*, *Financial Reporting Can Enhance the Management of Your Neurosurgical Practice*, and *Managing and Controlling Practice Overhead* attracted a combined total audience of 191. There was a sizeable increase in the number of people who received credit through *Neurosurgical Focus* — from 763 in 2007 to 1,398 in 2008. In addition, 25 programs were jointly sponsored and 53 were cosponsored, more than doubling the total in the latter category from the previous year.

EXPANDING THE SCOPE — RESIDENT EDUCATION

Recognizing the importance of providing outstanding, no-cost education to residents, AANS President Jon H. Robertson, MD, continued to provide exemplary leadership to the resident education program he launched in 2006. The goal of these courses is to expose residents to advanced educational training opportunities that are not currently available to them within their residency programs. Through the generous support of industry partners, the AANS was able to offer five courses in 2008 to a total of 134 residents. Three of the five courses

were held at the state-of-the-art Medical Education and Research Institute (MERI) in Memphis, Tenn.

- *Minimally Invasive Spinal Techniques*, August 17-18, 2007, Memphis; Course Directors: Kevin T. Foley, MD, Charles Branch Jr., MD; Sponsors: Anspach, Medtronic, Medtronic Neurologic Technologies, Carl Zeiss Meditech.
- *Socioeconomic Issues*, October 12-13, 2007, Atlanta; Course Directors: Gary M. Bloomgarden, MD, MBA, Frederick A. Boop, MD, FACS; Sponsor: Medtronic.
- *Fundamentals in Spine*, October 18-21, 2007, Memphis; Course Directors: Regis W. Haid Jr., MD, Christopher I. Shaffrey, MD; Sponsors: Medtronic, DePuy Spine, a Johnson & Johnson company, Synthes, Globus Medical.
- *Spinal Deformity*, March 28-30, 2008, Baltimore; Course Director: Robert Heary, MD; Sponsor: DePuy Spine, a Johnson & Johnson company.
- *Endovascular Techniques*, April 11-12, 2008, Memphis; Course Director: Robert H. Rosenwasser, MD, FACS; Sponsors: Boston Scientific, Cordis Neurovascular, Inc., a Johnson & Johnson company, ev3 Neurovascular, Micrus Endovascular Corporation.



John A. Wilson, MD, FACS

EDUCATION AND PRACTICE MANAGEMENT COMMITTEE CHAIR



For the past two years, John A. Wilson, MD, FACS, has guided the initiatives of the Education and Practice Management Committee with strong leadership and insightful guidance. As a liaison to the Scientific Program Committee, socioeconomic course offerings at AANS Annual Meetings have expanded greatly under his direction. In addition, the committee continually strives to enhance and expand the professional educational offerings of the AANS through courses offered outside the annual meeting. Dr. Wilson has also helped the Development Committee expand its array of resident education courses, offering invaluable input and ideas.

Dr. Wilson has been instrumental in enhancing the coding and reimbursement educational programming offered by the AANS. By recruiting stellar faculty and continually striving to be on top of complex coding changes, the AANS coding course remains an important educational offering for members and their staff. When needed, Dr. Wilson has served as faculty for coding workshops as well as annual meeting coding courses. In response to a member needs assessment, the curriculum for this course will be revamped in 2009, with the expectation that it will remain an important and popular course for neurosurgeons and their office staff.

The late Julius M. Goodman, MD, developed and was an admirable course director for two highly successful AANS offerings: *Goodman Oral Board Preparation: Neurosurgery Review by Case Management* and *Weekend Update: Interactive Review of Clinical Neurosurgery by Case Management*. Dr. Wilson was able to ensure a seamless transition for attendees by securing Allan D. Levi, MD, PhD, FACS, and Thomas J. Leipzig, MD, respectively, as course directors. These dedicated neurosurgeons worked closely with Dr. Goodman on these courses for a number of years and will undoubtedly carry on the excellent tradition of these activities.

"It is challenging and rewarding to be relied upon to help the AANS achieve its goals of providing quality educational programs to its members, neurosurgery residents, as well as neurosurgical physician extenders and office staff," said Dr. Wilson. "The EPM Committee is committed to providing a curriculum that is ever-evolving and parallels both advances in the field and the clinical challenges being faced daily by neurosurgeons in practice. It is the dedication of the committee members that enables us to achieve those goals," concluded Dr. Wilson.

Dr. Wilson is vice-chair and residency program director of the Department of Neurosurgery, Wake Forest University Baptist Medical Center in Winston-Salem, N.C.

THE 2008 AANS ANNUAL MEETING — FOCUS ON LEARNING

AANS Annual Meetings are the largest gatherings of neurosurgeons in the nation, focusing on the latest research and technological advances in the field. Medical attendees choose from a dazzling array of state-of-the-art education and science presented by top neurosurgeons from across the world. In 2008, a maximum of 20.5 category 1 CME credits could be attained, with the potential of an additional 26.25 credits, by attending some of the optional programs such as breakfast seminars and practical clinics.

The AANS continues its commitment to educate physician extenders. In 2008, two new

courses were offered at the annual meeting geared towards RNs and PAs. *Organ Donation and Procurement* and *Integration of Patient Assessment Technology into Practice* were well attended and highly evaluated. The AANS offered nursing contact hours for 13 activities during the 2008 AANS Annual Meeting for a total of 19.75 CE credits.

The 2008 AANS Annual Meeting in Chicago commenced on Saturday, April 26 with practical clinics and concluded on Thursday, May 1. Led by Annual Meeting Chair Timothy B. Mapstone, MD, and Scientific Program Chair E. Sander Connolly Jr., MD, this year's meeting boasted

3,488 medical attendees, with more than 420 participants from 64 countries across the world. This meeting extended the run of record-breaking attendance at AANS Annual Meetings to three consecutive years. Medical registrants received the *Fact or Fiction* CD-ROM, an educational outreach initiative targeted towards primary-level students, spearheaded by local host Gail L. Rosseau, MD.

After a weekend of hands-on clinics, neurosurgeons enjoyed the Sunday evening opening reception. Attendees of all ages gathered at one of Chicago's very own — the unique and vibrant Navy Pier with spectacular views of Chicago's lakefront. A smorgasbord of the casual cuisine Chicago is known for — such as Chicago-style pizza and hot dogs — delighted guests of all ages. In the tradition of Chicago's great blues and jazz music, the Neurosurgical Jazz Quintet entertained the crowd with cool jazz vibes and vocals. AANS Past President Donald O. Quest, MD, James E. Rose, MD, Theodore H. Schwartz, MD, R. Michael Scott, MD, and Philip R. Weinstein, MD, gave another fantastic performance, an encore from their 2007 AANS gig in Washington, D.C.

THE 2008 AANS ANNUAL MEETING SNAPSHOT

- 41 practical clinics
- 21 general scientific sessions
- 146 oral abstract presentations
- Nearly 500 poster presentations
- Exhibit booths representing 236 companies
- 78 educational breakfast seminars
- 2008 Cushing Orator, author Douglas Brinkley, PhD

HONORING NEUROSURGERY'S LEADERS

- Cushing Medalist — Charles B. Wilson, MD
- Humanitarian Award — Robert J. Dempsey, MD
- Distinguished Service Award — Peter W. Carmel, MD

DIVERSE PERSPECTIVES — SPECIAL LECTURES

- The Richard C. Schneider Lecturer — A. John Popp, MD

- The Hunt-Wilson Lecturer —
Marcus E. Raichle, MD
- The Ronald L. Bittner Lecturer —
Eric C. Holland, MD
- The Louise Eisenhardt Lecturer —
Marcia Angell, MD
- The Rhoton Family Lecturer —
Lee Woodruff
- The Theodore Kurze Lecturer —
Michael L.J. Apuzzo, MD
- The Van Wagenen Lecturer —
Rodolfo R. Llinás, MD, PhD

NEUROSURGICAL TOP GUN COMPETITION

For three consecutive years, the Young Neurosurgeons Committee has offered a competition for residents and fellows. Skill stations included endoscopic procedures, computer-simulated ventriculostomy, and pedicle screw placement. Due to the generous support of corporate sponsors, awards were expanded this year to include the top three scoring residents/fellows as well as the top score in each of the stations. Sponsors of this innovative competition were: BrainLAB, Inc., Codman & Shurtleff, Inc, a Johnson & Johnson company, DePuy Spine, a Johnson & Johnson company, Integra Foundation, and Medtronic.

TOP GUN AWARDEES

- **Top Honors and Ventriculostomy Station Top Honors:** Richard B. Rhiew, MD, PhD, resident, Wayne State University (graduated June 2008)
- **Second Honors:** Wayne C. Paullus, MD, resident, University of Missouri-Columbia (to graduate June 2011)
- **Third Honors and Endoscopic Station Top Honors:** Matthew A. Hunt, MD, neuro-oncology fellow, The National Hospital for Neurology and Neurosurgery London, United Kingdom (graduated July 2008)
- **Pedicle Screw Station Top Honors:** Sathish J. Subbaiah, MD, resident, Brigham and Women's Hospitals (graduated June 2008)

Timothy B. Mapstone, MD 2008 AANS ANNUAL MEETING CHAIR



What does it take to stage back-to-back record-breaking AANS Annual Meetings? Having just finished tours of duty as Scientific Program Committee (SPC) Chair in 2007, and Annual Meeting Chair in 2008, Dr. Mapstone is well versed on the exacting science of holding the premier neurosurgical educational event in the United States.

"The entire process from beginning to end must be executed with a keen focus — every AANS volunteer and staff person is integral to making this meeting of enormous magnitude

play out seamlessly," remarked Dr. Mapstone. "It is not enough to just maintain high quality programming from year to year. The goal must always be to make an already state-of-the-art meeting new, innovative and vibrant for members from all over the world who are taking time out of their incredibly busy schedules to attend," stated Dr. Mapstone.

"The committee works diligently to offer a wide range of practical clinics, breakfast seminars and plenary sessions that offer a cross section of the extraordinary work being accomplished across all neurosurgical specialties, as well as special lectures that are intellectually stimulating," said Dr. Mapstone. And the SPC appreciates Dr. Mapstone's wisdom so much that they asked him to stay on in an unprecedented role as special advisor, to provide support to E. Sander Connolly Jr., MD, and Vincent C. Traynelis, MD, as they implement their vision to continue improving the AANS' most important educational endeavor.

Dr. Mapstone is Wilkins Professor and chairman of the Department of Neurosurgery at the University of Oklahoma Health Sciences Center in Oklahoma City, Okla.

AN EVER-EXPANDING SCOPE OF MEMBER BENEFITS

Beginning with the Fall 2007, Volume 16, No. 3 issue, the *AANS Bulletin* changed its name to *AANS Neurosurgeon*, more accurately reflecting the membership it serves. Along with the name change there was a major redesign of the quarterly publication, including the new section: *Inside Neurosurgeon*, which encompasses AANS-specific content. This highly rated publication continues to publish in-depth peer-reviewed articles and covers the crucial socioeconomic issues affecting the specialty. This is enhanced by four-color printing throughout and an array of creative cover art. Cover articles in fiscal year 2008 included: *Building a New Kind of Practice: Neurosurgeon Owned Hospitals and Ancillaries*; *What You Need to Know as CEO: Neurosurgeons at the Top Discuss Leading a Practice*; *Conflict and Opportunity: Neurosurgery and Industry*; and *Where Danger Lurks: Recognizing Hazards in the OR*.

The AANS National Neurosurgical Procedural Statistics report, released in May 2008 to members, offers insight into the practice management world of neurosurgeons. This is posted on MyAANS.org, exclusively for members, so that the data can be easily accessed

at any time. The 2006 data obtained in this report is the most comprehensive representation of caseloads for board-certified neurosurgeons in the United States currently available. With inclusion of the CPT codes and new procedures, this report is more comprehensive than a similar 1999 AANS survey. However, many side-by-side comparisons are included to capture a glimpse of how the field has changed demographically and procedurally since 1999.

The AANS is committed to developing products and services that address the clinical needs of members. In fiscal year 2008, new offerings included:

- *Legacy of Harvey Cushing: Profiles of Patient Care*
- *A Guide to the Primary Care of Neurological Disorders, Second Edition*
- *Neurosurgical Emergencies, Second Edition*
- *A Patients Guide to Cerebral Aneurysms*
- *AANS 2008 Annual Meeting Sessions* (offered online or on DVD)

The AANS has made a commitment to developing essential products and services neurosurgeons need to improve their bottom line and practice more efficiently. In fiscal year 2008, publications included:

- *2008 AANS Guide to Coding: Mastering the Global Service Package for Neurological Surgery Services*
- *Express Code 2008: Quick Reference to ICD-9 Coding*
- *AANS Guide to Informed Consent, Second Edition*

The AANS developed a new Census collection vehicle for gathering practice demographics from individuals in the field of neurosurgery which is the most comprehensive database for this information in the world. New questions and areas have been added to the Census that include academic rank; medical conditions and treatments in neurosurgical practice as related to the conditions patients can find on www.NeurosurgeryToday.org; affiliation as medical specialist for major sports teams; interest in mentoring medical students and/or residents; and survey questions about the American Medical Association Physician Recognition Award.

MAGNIFYING NEUROSURGERY'S GLOBAL REACH

AANS outreach efforts to the international neurosurgical community have helped boost international membership. At the end of the fiscal year, the AANS had 657 International members, an increase of 10 percent from the previous year. Membership in the International Resident/Fellow category has doubled each year since its inception in July 2006, with 71 International Resident/Fellow members currently. Further, membership in the International Lifetime Membership category has increased to 117 members.

Global outreach will reach new and exciting heights when the AANS hosts the XIV World Congress of Neurological Surgery of the World Federation of Neurosurgical Societies (WFNS), August 30-September 4, 2009 in Boston, Mass. The scientific program committee unveiled the preliminary program at the interim meeting of the WFNS in Nagoya, Japan in November 2007. A diverse gathering of international faculty will

actively participate in the sessions, with enticing social functions planned to showcase both Boston and the international assembly convening for the meeting.

A variety of fellowship and award programs enable the exchange of knowledge and experience between physicians in the United States and those abroad. In 2006, the AANS initiated the International Visiting Surgeons Fellowship Program, providing a visiting surgeon from a developing country the funding to visit a North American institution for up to three months.

2008 AANS INTERNATIONAL VISITING FELLOWSHIP RECIPIENTS

- Sudipta Mukherjee, MD, Adarsha Biddalaya, Bagerhat, Bangladesh, the University of Washington at Harborview Medical Center, working with Laligam N. Shekhar, MD, observing skull base and cerebrovascular treatments.
- Okezie Obasi Kanu, MD, Surulere Lagos, Nigeria, Duke University, working with Allan H. Friedman, MD, FACS. Dr. Kanu's interest is in neuro-oncology, particularly the management of skull base lesions, including pituitary tumors.

Okezie Obasi Kanu, MD

2008 INTERNATIONAL VISITING FELLOWSHIP RECIPIENT



When Okezie Obasi Kanu, MD, first arrived at Duke University from his native Nigeria, he was taken under the wing of AANS International Outreach Committee member Cory Adamson, MD, PhD, MPH, who helped him adjust to his new environment. He worked closely with the Chief of Neurosurgery, Allan H. Friedman, MD, FACS, and attending neurosurgeons on work covering all aspects of the field. This ranged from complex spine to pediatric neurosurgical procedures, but primarily focused on his

subspecialty interests of neuro-oncology and cerebrovascular surgery.

"I had the honor and pleasure of observing Dr. Friedman and Takanori Fukushima, MD, working side-by-side in the operating room to remove complicated skull base tumors. I was fortunate to be able to follow Dr. Fukushima while he assisted other Duke neurosurgeons on many complex cases," remarked Dr. Kanu.

Dr. Kanu also had the opportunity to work in the research laboratories of Dr. Adamson and John H. Sampson, MD, PhD, studying targeted therapies for glioblastoma multiforme (GBM). "I have many fond memories of working with my dissecting 'sparing partner' Yoichi Nonaka, MD, Dr. Fukushima's fellow, late into the evening on projects in the skull base laboratory," said Dr. Kanu.

"As a little side adventure during my fellowship, James T. Goodrich, MD, PhD, hosted me at Albert Einstein College of Medicine for two weeks in September to observe him. I also had a wonderful experience at his center."

"Throughout my time at Duke, I built numerous long-term relationships across many departments, including with residents, attending surgeons, operating room staff, and laboratory staff. I am grateful for this camaraderie and trust that these relationships will benefit me for years to come. I am also indebted to the neurosurgery chief residents at Duke for helping me fit in comfortably, and most notably to Dr. Friedman and his staff for a remarkable experience."

"Finally, I am tremendously grateful to the AANS for this wonderful opportunity! I hope to build on this experience and these new relationships in the future and continue to establish meaningful collaborations throughout my career, especially in the area of neuro-oncology research," concluded Dr. Kanu.

Dr. Kanu is attending neurosurgeon, Division of Neurosurgery, Department of Surgery, Lagos University Teaching Hospital in Surulere, Lagos, Nigeria.

The AANS has continued to support a number of international outreach efforts in conjunction with AANS Annual Meetings, including several awards and a special reception on site.

During the International Reception at the 2008 AANS Annual Meeting in Chicago, the AANS presented its first International Lifetime Recognition award to Humberto Mateos Gomez, MD. Dr. Mateos has dedicated his life to teaching, and has been a principle force in elevating the quality of neurosurgical training in Mexico.

The AANS International Abstract Award is given to the highest ranking international abstract submitted to the AANS Annual Meeting. Yves R. Lazorthes, MD, of Toulouse, France was the 2008 recipient.

The AANS International Travel Scholarship provides \$1500 funding to help a neurosurgeon from a developing country attend the AANS Annual Meeting, and is awarded based on the strength of abstract submission. Faiz U. Ahmad, MD, from the All India Institute of Medical Sciences in New Delhi, India was the 2008 recipient.

Additional international outreach efforts have involved the much sought-after scientific journals. AANS International Resident members have enjoyed complimentary *Journal of Neurosurgery* subscriptions for several years. This year, JNS Publishing Group initiated innovative plans to encourage international readership of its journals, *Journal of Neurosurgery*, *Journal of Neurosurgery: Spine*, *Journal of Neurosurgery: Pediatrics* and *Neurosurgical Focus*, as well as assist international authors. In 2008, JNS started offering global open access to all JNS Publishing Group material older than 12 months. Further, complimentary journal subscriptions to Band I countries are now offered via the World Health Organization Health InterNetwork Access to Research Initiative (HINARI) program. HINARI provides free or very low cost online access to the major journals in biomedical and related social sciences to local, not-for-profit institutions in developing countries.

The JNS Publishing Group is putting finishing touches on an agreement to translate selections from the *Journal of Neurosurgery* into Chinese, and has several other translation opportunities in development. They also developed a directory of translation resources that will be available to submitting authors for whom English is a second language.

SHARPENED FOCUS — ADVOCATING ON BEHALF OF NEUROSURGERY

The AANS/CNS Washington Committee advocates on behalf of neurosurgery on several key fronts including adequate Medicare reimbursement, Pay-for-Performance (P4P), and EMTALA Rules. In this role, they interact frequently with members of Congress and key government entities including the Centers for Medicare & Medicaid Services (CMS) and collaborate with other national medical associations.

MEDICARE REIMBURSEMENT

The Washington Committee is committed to working with Congress to pass both short- and long-term solutions to the Medicare reimbursement system crisis. Physician reimbursements were under fire all year with pending Medicare legislation. After many months of deliberation, Congress overwhelmingly voted to override President Bush's veto of the *Medicare Improvements for Patients and Providers Act of 2008* and the bill became law. The 10.6 percent Medicare physician pay cut was replaced with a 0.5 percent payment increase retroactive to July 1, 2008. The bill extended the current 0.5 percent update through the end of 2008 and will give physicians a 1.1 percent payment increase in 2009. The legislation extended the Medicare Physician Quality Reporting Initiative (PQRI) program through 2010, allowing physicians who qualify to earn 2 percent bonus payments on all Medicare allowed charges. Finally, the bill extended rural physician payment increases through December 31, 2009.



Despite these positive aspects, the Washington Committee did not support this legislation because the bill contained a number of provisions potentially detrimental to neurosurgeons and therefore felt that the "cons" far outweighed the "pros." Their top three concerns:

- Payment cut for 2010 will now be nearly 21 percent rather than 5 percent because of the way in which the temporary fee increase was financed;
- Medicare will be required to publicly report the names of physicians who satisfactorily submit data on quality measures on the CMS Web site;
- Medicare will be required to establish a "Physician Feedback Program" to improve efficiency and control costs; Medicare will be required to develop a plan for transitioning to a value-based purchasing program (aka P4P) for physicians.

EMTALA RULES

In June, the Washington Committee submitted a detailed comment letter to CMS regarding the agency's proposed changes to current EMTALA regulations. John A. Kusske, MD, represented organized neurosurgery during the 30-month tenure of the EMTALA Technical Advisory Group (TAG). If implemented, most of the TAG recommendations will help clarify the current interpretation of certain aspects of EMTALA and enable improvements to the delivery of emergency medical services.

PAY-FOR-PERFORMANCE ISSUES

The Washington Committee supports a pay-for-participation system in which clinical data collection occurs in a nonpunitive environment. This entails that data is appropriately risk adjusted, physicians continually receive performance feedback, and individual data is not publicly reported.

The AANS and the CNS collaborated with the American Medical Association (AMA) to launch a National study about medical practices. Participation in this ongoing study gives neurosurgeons the opportunity to communicate accurate financial and operational information to policymakers, including members of Congress and CMS. CMS recently announced in a national regulation that data from this survey will be used to help determine physician payment.

SPREADING THE ADVOCACY MESSAGE

The “Key Connection Program” was launched in August 2007, to ensure that organized neurosurgery has a robust and active network of “Neurosurgery Advocates” to aid the Washington Office staff in their lobbying efforts. This program helps communicate to key leaders in Congress that advocacy messages delivered by the Washington staff genuinely represent the concerns of trusted neurosurgeon-constituents.

On March 9-11, 2008, the AANS and CNS joined with other surgical societies including the American College of Surgeons, in sponsoring the first annual Joint Surgical Advocacy Conference in Washington, D.C. Neurosurgeons attending this important advocacy event made their voices heard on Capitol Hill on key issues including Medicare reimbursement cuts, problems with the emergency medical system, and the need to change the medical liability system.

THE SPOKESORGANIZATION FOR NEUROSURGERY EXPANDS ITS REACH

ANNUAL MEETING PUBLIC RELATIONS

Every year, the AANS highlights neurosurgical topics chosen by a peer-review process from all accepted oral abstracts for release to the media. This year’s scientific releases reflected the unique variety and innovations in neurosurgery.

Total media coverage of the 11 scientific releases exceeded all expectations, with a record-breaking 1.96 billion total media impressions, equating to more than double from the previous record of 901 million attained in 2007. Deep brain stimulation for depression generated media coverage of 458 million, a record for any single highlighted scientific release. Ali R. Rezai, MD, and Donald Malone, MD, of the Cleveland Clinic, conducted multiple interviews from McCormick Place on their DBS research, including with CNN. CNN Chief Medical Correspondent Sanjay Gupta, MD, covered this research in a broadcast segment which aired on May 2, 2008.

There was coverage in major U.S. print and Web publications such as *The Washington Post*, *U.S. News and World Report*, *Forbes*, *USA Today*, MSN, Yahoo, and AOL. Further, newspapers and Web outlets as far a field as Zambia, Pakistan, China, Iran, India, Russia, and the United Kingdom covered the research. In addition, OR-Live filmed and captured interviews on site over a two-day period. These video spotlights were posted on the AANS Web site and featured Drs. Rezai/Malone (DBS for Depression), Robert E.

Gross, MD, PhD/Roy A. E. Bakay, MD (Novel Cell-Based Parkinson’s Disease Therapy), and Vincent C. Traynelis, MD (Artificial Cervical Disc Economic Analysis).

2008 AANS ANNUAL MEETING HIGHLIGHTED RELEASES

- Research Analyzes the Effectiveness of Decompression Surgery in Patients with Cervical Spinal Cord Injuries
- Study Analyzes How the Malpractice Environment Impacts Practicing Neurosurgeons
- Identification of Novel Tumor Biomarkers Holds Promise for Improved Outcome in Patients of All Ages with Primary and Metastatic Brain Tumors
- Does Depression Affect Outcome in Patients Undergoing Brain Tumor Surgery: Study Investigates Connection between Depression and Survival
- Does Country or Continent of Treatment Affect Outcome in Patients with Ruptured Cerebral Aneurysms?

- An Economic Analysis: Does Artificial Cervical Disc Equate to Lower Treatment Costs in Patients with Degenerative Cervical Disc Disease?
- Research Shows that Deep Brain Stimulation May Offer Hope for Select Patients with Treatment Resistant Major Depression
- The Connection between Obesity and Low Back Pain: Research Analyzes if Bariatric Weight Reduction Helps Improve Symptoms
- Novel Cell-Based Therapy Shows Promise in Long-Term Pilot Study in Patients with Moderate to Advanced Parkinson’s Disease
- Millions of People Worldwide Suffer from Chronic Intractable Headache Disorders: Surgical Procedure May Provide Relief When Medications Fail
- Research Analyzes if Decompression Surgery Provides Pain Relief to Patients with Two Difficult to Treat Conditions: Chiari Type 1 Malformation and Syringomyelia

Michael G. Fehlings, MD, PhD, FRCSC, FACS 2008 AANS ANNUAL MEETING HIGHLIGHTED RESEARCH AUTHOR

Every year, nearly 12,000 individuals in the United States and Canada, mostly young adults, sustain a spinal cord injury (SCI), so it is a topic that certainly evokes great public interest. This was certainly the case when Buffalo Bills football player Kevin Everett suffered a cervical spine injury which set off a firestorm of highly controversial and inaccurate media coverage on hypothermia.

Michael G. Fehlings, MD, PhD, FRCSC, FACS, understands the value of the media to furthering important neurosurgical research. He also understands how important it is to dispel inaccuracies in the media through well-researched evidence-based data. He contributed in both these areas, by participating in 2007 and 2008 AANS Annual Meeting PR initiatives, and co-authoring the *Hypothermia and Human Spinal Cord Injury Position Statement and Evidence Based Recommendations* from the AANS/CNS Joint Section on Disorders of the Spine and the AANS/CNS Section on Neurotrauma & Critical Care in November 2007.

In 2007, Dr. Fehling’s research on the use of Rho Inhibitor for the Treatment of Acute SCI reached an estimated 147 million readers across the world. This impressive coverage was exceeded in 2008 when his research on decompressive surgery for cervical SCI reached an audience of 216 million worldwide. His research contributed greatly to the record-breaking media circulation generated by the full compendium of AANS highlighted releases.

“This is an area of medicine that has not seen tremendous scientific advances, so there remains an urgent need to improve upon current interventions to help restore neurological function in patients with acute SCI,” remarked Dr. Fehlings. “In addition to sharing this research with our neurosurgical colleagues, the media coverage the AANS generated helped bring greater consumer awareness to this devastating public health issue,” stated Dr. Fehlings.

Dr. Fehlings is head of the Krembil Neuroscience Center at the University Health Network in Toronto and professor of Neurosurgery at the University of Toronto, Ontario, Canada.



A GROWING MEDIA PRESENCE

The AANS has extended its reach as the spokesorganization for neurosurgery through rich and varied media and public outreach campaigns. Media coverage has grown exponentially over the last few years. The media has increasingly relied on the AANS for its expertise — interviewing AANS spokespersons on topics ranging from Senator Ted Kennedy's malignant glioma diagnosis to low back pain treatments.

INJURY PREVENTION OUTREACH

Following up on successful injury prevention campaigns launched in 2007, the AANS once again helped educate the public about preventing potentially life-altering head and spinal cord injuries.

Winter head injury prevention was in the news in December 2006, when the AANS generated the highest media circulation ever for a nonscientific press release. The release focused on preventing winter sports-related head injuries and falls on the snow and ice. There were more than 125 articles, generating total circulation of close to 166 million.

This record was nearly matched when the AANS distributed its summer injury prevention release in late May 2008. Incorporating sports-related head injury statistics as well as injury prevention tips for both head and spine; this received widespread media coverage in three separate waves, reaching a combined total audience of 145 million people. The release initially was picked up in 12 major Web sites and newspapers. Subsequently, United Press International ran a story focused on SCI prevention, which was picked up by 65 radio stations across the country. HealthDay ran a story on June 24 which generated major coverage in outlets including Yahoo, AOL, U.S. News and World Report, The Washington Post, and Forbes.

FOCUS ON THE FUTURE OF NEUROSURGERY

MEDICAL STUDENT SUMMER RESEARCH FELLOWSHIPS

Launched in 2007, the goal of the Medical Student Summer Research Fellowship program is to expand neurosurgical education to medical students and thereby increase their interest in neurosurgery. In 2008, a total of 15 fellowships of \$2,500 each were awarded to first and second year medical students. This represented a substantial increase from the 10 grants awarded in the program's inception year.

WILLIAM VAN WAGENEN FELLOWSHIP

The William P. Van Wagenen Fellowship was established by the estate of William P. Van Wagenen, MD, who was one of the field's founders, and the first president of the Harvey Cushing Society. The fellowship provides private, nongovernmental funding for postneurosurgical residents from a North American training site, for overseas travel for medical enrichment, prior to beginning an academic career in neurological surgery.

Until 2008, the Van Wagenen Fellowship provided a \$60,000 stipend for living and travel expenses to a foreign country for a period of 12 months. This year, upon further review of the stipend compared to the salaries of most starting

faculty members, the Van Wagenen Fellowship Committee, led by Robert A. Ratcheson, MD, recommended the fellowship award increase to \$120,000. The increase went into effect beginning with the 2008 recipient, and will make this fellowship more competitive.

Samuel H. Cheshier, MD, PhD, was selected as the recipient of the 2008 William P. Van Wagenen Fellowship. As the 2008 Van Wagenen Fellow, Dr. Cheshier traveled to Lund University in Sweden, studying under the tutelage of Anders Bjorklund, MD, a pioneer in cellular transplantation. Dr. Cheshier has already done extensive research on the use of normal and cancer stem cells in the brain, identifying Wnt proteins in their potential to be utilized therapeutically for pathologies such as Parkinson's disease.

Odette Harris, MD, MPH

VAN WAGENEN FELLOWSHIP PROGRAM



Odette Harris, MD, MPH, embodies the spirit and philosophy of what the William Van Wagenen Fellowship is truly about. A Van Wagenen recipient in 2003, she completed her research fellowship at the University of the West Indies in Kingston, Jamaica, where she also served as visiting consultant in neurosurgery. "My own experience provided me with invaluable research skills in a truly unique environment, free of the constraints of traditional research fellowships, and was instrumental in ongoing research I am doing in the field of trauma epidemiology," remarked Dr. Harris.

Dr. Harris' enthusiasm and belief in this program is contagious.

Having just finished a three-year term as Chair of the Van Wagenen Selection Committee, Dr. Harris has made important contributions to moving the program forward. She has spearheaded a Van Wagenen Fellowship "road show" in which over the course of a three-year cycle, one of 39 fellows will travel to a specific training program to share the benefits of individual and collective research with neurosurgeons in training.

"The concept is that through sharing firsthand, personal experiences about the Van Wagenen Fellowship program with residents, that our network of mentors will inspire growing interest in this wonderful, once-in-a-lifetime research opportunity. Through this road show, we hope to mentor and guide the next generation of fellows along the path to academic success," concluded Dr. Harris.

Dr. Harris is assistant professor, Department of Neurosurgery, Emory University and chief of Neurosurgical Service at Grady Memorial Hospital in Atlanta, Ga.

NEUROSURGICAL RESEARCH — A LEGACY OF FINELY FOCUSED SUPPORT

The Neurosurgery Research and Education Foundation (NREF) was established in 1981 in response to the alarming decline in federal and private funding for medical research. Since the NREF awarded its first grant in 1983, a steady increase in support has led to the granting of

138 awards. The vast majority of the residents and young clinicians/researchers who have received NREF grants, continue to contribute significantly to neurosurgical research in their professional careers.

There were 153 first-time donors and the total monetary contributions increased by \$14,700 from the prior year. Dues invoices and the AANS Annual Meeting Registration form generated a combined total of \$141,705.

Through the generous support of members, corporations, and the public, the NREF continued its legacy of support by awarding a total of 12 research grants in fiscal year 2008. Of the 12 grants, four were cosponsored by corporations.

YOUNG CLINICIAN INVESTIGATOR AWARD (40,000 FOR ONE-YEAR)

- Gerald Grant, MD, Duke University, *Characterization of the Blood-Tumor Barrier in a Glioblastoma Intracranial Xenograft Model under Normal and Hyperthermic Conditions*
- Brian L. Hoh, MD, University of Florida, *Functional Role of Hematopoietic Stem Cells and Endothelial Progenitor Cells in Aneurysm Formation and Recanalization after Coil Embolization*
- Jason Huang, MD, University of Rochester, (cosponsored by the AANS/CNS Section on Disorders of the Spine and Peripheral Nerves), *Live Nerve Construct to Repair Extensive Peripheral Nerve Injury*
- Eve Tsai, MD, PhD, University of Ottawa, (cosponsored by Kyphon Inc.), *Bioengineering Strategies to Enable Combination Therapy for the Repair of Spinal Cord Injury*
- Gregory Zipfel, MD, Washington University, *Role of Apolipoprotein E and Amyloid-Beta Protein Peptide in Cerebral Vasospasm*

RESEARCH FELLOWSHIP AWARD (\$40,000 FOR ONE YEAR, \$70,000 FOR TWO YEARS)

- Justin Cetas, MD, PhD, Oregon Health & Sciences University, (cosponsored by Porex Surgical, Inc.), *Central Mechanisms of Pain in Dural Inflammation*
- H. Francis Farhadi, MD, PhD, University of Toronto (cosponsored by DePuy Spine, a Johnson & Johnson company), *Transcriptional Programming of the Myelin Basic Protein Gene Following Spinal Cord Injury in the Mouse*

- Andrew Foy, MD, Mayo Clinic, *Modulation of Bmi1 Expression in Pediatric Medulloblastoma*
- James Frazier, MD, Johns Hopkins University, (cosponsored by Biomet Microfixation), *Determination of the Role of PDGF and EGF in the Migratory Pattern of Brain Cancer Stem Cells and Comparison of this Migratory Pattern to Normal Fetal and Adult Human Stem Cells in an In Vitro Assay and In Vivo Rodent Model using NOD/SCID/IL2rynull Mice*
- Jason L. Gerrard, MD, PhD, Massachusetts General Hospital, *The Role of the Primate Hippocampus and Basal Ganglia Circuit in Visual-Motor Associative Learning*

- Dimitris Placantonakis, MD, PhD, Weill Cornell, (cosponsored by the AANS), *Generation of Purified Motor Neurons from Human Embryonic Stem Cells for Cell Therapy in Amyotrophic Lateral Sclerosis*

AMERICAN COLLEGE OF SURGEONS/AANS-NREF FACULTY CAREER DEVELOPMENT AWARD

- Uzma Samadani, MD, PhD, New York University, *Sonic Hedgehog Therapy after Lysis of Intracranial Hemorrhage*

Jason Huang, MD

YOUNG CLINICIAN INVESTIGATOR AWARD RECIPIENT



Jason Huang, MD, has a most unusual and inspiring story. He was born in Shanghai in 1970, and in 1988 enrolled in college amid a backdrop of political unrest in China. He became involved in the Beijing student democracy demonstration, culminating in the infamous June 1989 Tiananmen Square Massacre. Arrested and prosecuted by the Communist regime, he was subjected to daily brainwashing and forced to write countless confessions. Dr. Huang eventually escaped mainland China and came to America in 1992.

In those early days, Dr. Huang worked as a dishwasher and enrolled in junior college, then transferred to Amherst College, where he graduated magna cum laude in 1994. His hard work paid off when he was accepted into Johns Hopkins University School of Medicine, followed by his neurosurgical residency at the University of Pennsylvania.

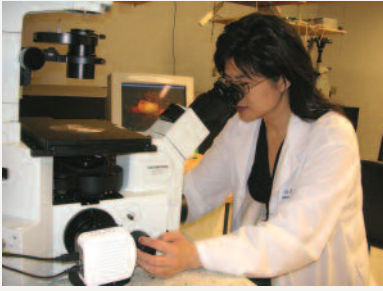
"It is my love for the United States and the intellectual and political freedom that this country afforded me that led me to join the U.S. Army Reserve after our country was attacked on 9/11," remarked Dr. Huang. Upon completing his residency, Dr. Huang accepted a position at the University of Rochester, quickly developing a busy surgical practice and an active educational and research program. He also ran a research lab focused on traumatic brain and peripheral nerve injury, inevitably leading to his being honored by the NREF with his YCI Award.

Dr. Huang was called up to serve a tour of duty at the Air Force Theater Hospital at Balad Airbase, Iraq, shortly after he received his research award. "I am grateful to my colleagues at Rochester for holding down the fort, continuing this important research while I served in Iraq, and to the NREF for understanding the somewhat unusual circumstances of my research year," remarked Dr. Huang. Dr. Huang has since returned to the United States and completed his NREF-sponsored research.

"My research studied the feasibility of transplanting a live nerve construct into a long gap of peripheral nerve injury in a mouse model. This project may have significant implications in future clinical trials for treatment methodologies in patients with severe peripheral nerve injuries, some of whom are coincidentally soldiers serving our country," concluded Dr. Huang. Dr. Huang's one-year grant was cosponsored by the AANS/CNS Section on Disorders of the Spine and Peripheral Nerves.

Dr. Huang is assistant professor, Department of Neurosurgery, the University of Rochester Medical School in Rochester, N.Y.

Eve Tsai, MD, PhD
YOUNG CLINICIAN INVESTIGATOR
AWARD RECIPIENT



In the United States and Canada, an estimated 250,000-350,000 people are living with spinal cord injury (SCI), and every year, there are about 12,000 new cases of SCI. While recent advances in emergency care and rehabilitation allow many SCI patients to survive, methods for reducing the extent of injury and for restoring function are still limited.

It has been demonstrated that bio-engineered constructs with a combination of growth factors and cell transplants can partially improve recovery after SCI in rats. With that in mind, Eve Tsai, MD, PhD, set out one year ago to undertake in-depth research on furthering this scientific melding of high-tech bioengineering with cell transplantation.

"This research involved the development of biodegradable constructs to improve upon the combination of agents required to enable complete restoration of function after injury. This translational research is a needed step on the path to developing therapeutic constructs that will allow repair of the human spinal cord," stated Dr. Tsai.

"I am thankful to the NREF and Kyphon Inc. for giving me this once-in-a-lifetime opportunity to pursue important scientific research applicable to patients living with SCI and other devastating forms of paralysis. It is my hope that one day this will lead to treatment for the thousands of patients living with paralysis," concluded Dr. Tsai. Dr. Tsai's one-year grant was cosponsored by Kyphon Inc.

Dr. Tsai is assistant professor of Neurosurgery at the University of Ottawa, The Ottawa Hospital, Ottawa Health Research Institute in Ottawa, Ontario, Canada.

10TH ANNUAL SILENT AUCTION

The 10th Annual Silent Auction at the 2008 AANS Annual Meeting was once again sponsored by the Young Neurosurgeons Committee (YNC) and benefited the NREF and its research grant program. YNC member Matthew J. McGirt, MD, of Johns Hopkins University, served as the 10th Annual Silent Auction chair. This year's auction raised more than \$32,000 in support. Once again, the NREF contracted with the online auction company c-Market to offer members and interested bidders online access to the auction. This enabled people to bid off site and after the exhibit hall closed, and streamlined bidding and check-out through an automated process.

THE NREF CUSHING CIRCLE

This program is a cumulative, lifetime and planned/deferred giving society for neurosurgeons who support the NREF. The goals of the NREF Cushing Circle include increasing NREF giving (annual, major and planned gifts), creating an organizational identity, and building camaraderie among philanthropists who consistently support the NREF. A vehicle to recognize those contributors who have made significant financial commitments to the NREF

and neurosurgical research, benefits include special invitations to Annual Meeting VIP events, advance notification on new products, services and educational offerings, and more. Criteria for individual membership include:

- Historical giving total of at least \$20,000
- Historical giving total of at least \$10,000, with a pledge of at least \$10,000 within the next five years (at a minimum rate of \$2,000 per year)
- Historical giving total of at least \$10,000, with a memorandum of understanding for a will bequest of at least \$50,000

CORPORATE ASSOCIATES PROGRAM

The Corporate Associates Program enables industry to help support young researchers working on potential treatments and cures for neurosurgical diseases and conditions that affect millions of people. In addition to new corporate sponsor Codman & Shurtleff, Inc., a Johnson & Johnson company, the following organizations cosponsored NREF grants: the American College of Surgeons, Biomet Microfixation, the Congress of Neurological Surgeons, DePuy Spine, a Johnson & Johnson company, Kyphon Inc., and Porex Surgical, Inc.



William T. Couldwell, MD, PhD

AANS NEUROSURGEON EDITOR AND DEVELOPMENT COMMITTEE CHAIR

Innovative is the word that comes to mind when contemplating the contributions William T. Couldwell, MD, PhD, has made to the AANS. Dr. Couldwell had two rather sizeable pairs of shoes to fill when he took over the helm of the *AANS Bulletin* and the Development Committee from James R. Bean, MD, and Jon H. Robertson, MD, respectively. Both had already established very high quality standards in these key leadership roles.

Editor of the association's socioeconomic quarterly since April 2005, Dr. Couldwell has brought many of his creative ideas to fruition, building on the already highly positive membership rating of the publication. Under his able leadership, online manuscript submission software was employed, a peer-review process was implemented, and the *AANS Bulletin* was renamed *AANS Neurosurgeon*. And to enhance the stellar content and visual aesthetic, four-color printing, a major redesign, and inventive cover art were incorporated. "These elements are all key to moving *AANS Neurosurgeon* forward and inevitably securing PubMed status. AANS members and the public have come to rely on the unique neurosurgical-related socioeconomic content this publication offers," remarked Dr. Couldwell.

Like Dr. Robertson before him, Dr. Couldwell is a firm believer in the philosophy that corporate support is an essential component to furthering neurosurgical research and education. As chair of the Development Committee, Dr. Couldwell has focused his vision on building relationships with corporations, in particular through the Corporate Leadership Council.

"The brainstorm of my predecessor, this council offers corporate partners a mutually beneficial setting with the opportunity for open dialogue. Corporate support has enabled the AANS to provide no-cost education to residents, extraordinary educational programming at annual meetings, as well as to help fund promising research fellowships. I am happy to help facilitate these partnerships for the goal of furthering neurosurgical education and research," stated Dr. Couldwell.

Dr. Couldwell is professor and Joseph J. Yager Chair of the Department of Neurosurgery at the University of Utah School of Medicine in Salt Lake City, Utah.



PINNACLE PARTNERS IN NEUROSURGERY PROGRAM



The Pinnacle Partners in Neurosurgery Program, now in its fifth year, continues to grow, with one new company signing on this year and 12 previous participants renewing their commitment to the program. The program helps the AANS continue its tradition of offering innovative educational programming throughout the year. This sponsorship offers companies a unique opportunity to establish added recognition and greater visibility by connecting with AANS members. The AANS gratefully acknowledges the support of the following Pinnacle Partners in Neurosurgery participating companies.

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The following gifts were made in memory of friends, family members, and colleagues.

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2008 FINANCIAL SUMMARY

Fiscal year 2008 heralded the beginning of a serious downturn in the economy and inevitable losses on Wall Street. In light of that economic reality, the AANS posted a remarkably strong operational bottom line of \$714,300. This now equates to seven consecutive years of a positive operational bottom line. The financial strength of the AANS continues to benefit members on many levels, while membership dues have remained at the same rate as billed in 2001.

AANS leadership and staff continued to employ adept cost-containing measures through a detailed and informative financial management process, instrumental in attaining this strong bottom line. Also integral to the financial success was the keen insight the Finance Committee provided with their monthly review of financial information, discussion of nearly every line item, and decisions on appropriate investments.

This report reflects the combined financial statements of the American Association of Neurological Surgeons and the American Association of Neurosurgeons covering the period of July 1, 2007, through June 30, 2008.

REVENUE

Gross revenue improved a little more than \$690,000 from fiscal year 2007. Every revenue category posted an increase from the prior year, with the exception of investments.

- Revenue for the 2008 AANS Annual Meeting in Chicago finished \$387,000 ahead of 2007. This year's meeting boasted 3,488 medical attendees, nine attendees shy of 2008, extending the run of record-breaking attendance at AANS Annual Meetings to three consecutive years. The impressive exhibit floor yielded an increase in exhibitor revenue from 2007.
- The *Journal of Neurosurgery* posted an increase in gross revenue of \$55,450. This was attributed to an increase in subscription revenue.
- Through the generous support of industry partners, the AANS was able to offer five resident courses in 2008 to a total of 134 course participants. This corporate sponsorship equated to \$534,000 in revenue, offsetting the substantial expenses of providing stellar education, at no cost to residents.
- The pie chart (Page 19) indicates the various sources of income. The AANS' reliance on membership dues continues to decrease. It went from 13.5 percent of gross revenue in fiscal year 2007 down to 13.2 percent in fiscal year 2008.

EXPENSES

Overall gross expenses increased by nearly \$348,500. Four areas posted a decrease in expenses in fiscal year 2008: AANS *Neurosurgeon*, *Journal of Neurosurgery*, governance, and committees.

- The 2008 AANS Annual Meeting in Chicago was costlier than the 2007 meeting in Washington, D.C., with a \$127,630 increase in expenses. The reality is that it is more expensive to host a meeting in Chicago, due to labor costs and transportation, especially with the logistical challenges posed by the location of the convention center.

- The *Journal of Neurosurgery* produced a remarkable 36 print journals and 12 online journals, as well as launching a new Web site, rapid online publishing, and podcasts — enhancing the benefits for subscribers. All the more remarkable is that they were able to do this with a \$15,000 decrease in expenses. This was achieved through the implementation of significant cost-saving measures at their editorial office in Charlottesville, Va.
- AANS committees are responsible for carrying out the core values and mission of the association, reflected in the strategic plan and fulfilled through the diverse array of committee projects. In fiscal year 2008, these committees oversaw an impressive number of programs while containing costs, posting an overall decrease of \$32,400 from the previous year.
- The AANS/CNS Washington Office and the Council of State Neurosurgical Societies carry out important work, advocating on behalf of neurosurgery on many key fronts. The AANS contributed \$34,700 more in 2008 to support the activities of these two groups, with a combined total expenditure of \$600,000.

All year-end financial statements of the AANS are reviewed by outside auditors. Any material differences between a published financial statement and the auditors' report are communicated to AANS members in AANS *Neurosurgeon*. Copies of the most recent audit are available to members by writing to: AANS Accounting Department, 5550 Meadowbrook Drive, Rolling Meadows, IL 60008-3852.



STATEMENT OF FINANCIAL POSITION 6/30/08

Assets

| | |
|-----------------------------|---------------------|
| Cash and Investments | 13,204,668 |
| Other Current Assets | 4,511,951 |
| Property and Equipment, net | 3,292,440 |
| Other Assets | 1,043,868 |
| TOTAL ASSETS | \$22,052,927 |

Liabilities and Equity

LIABILITIES

| | |
|--------------------------|--------------------|
| Accounts Payable | 5,339,592 |
| Deferred Revenues | 2,930,500 |
| TOTAL LIABILITIES | \$8,270,092 |

EQUITY

| | |
|----------------------|---------------------|
| Beginning Net Assets | 13,068,557 |
| Net Income | 714,278 |
| TOTAL EQUITY | \$13,782,835 |

| | |
|-------------------------------------|---------------------|
| TOTAL LIABILITIES AND EQUITY | \$22,052,927 |
|-------------------------------------|---------------------|

Income Statement

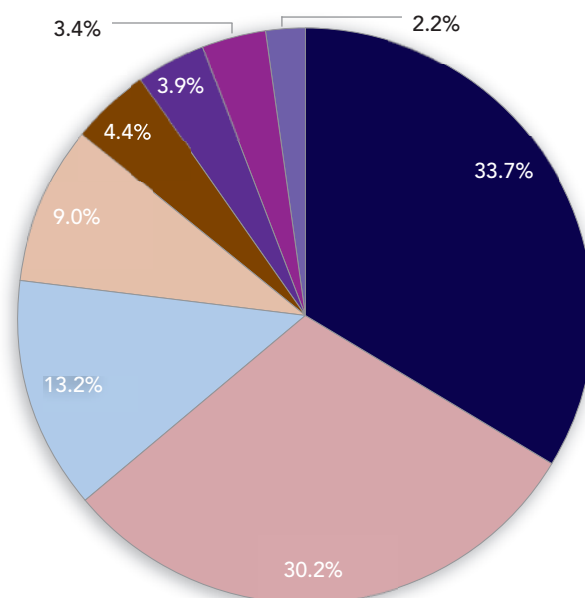
REVENUE

| | |
|------------------------------------|------------------|
| Operating Revenue | 17,134,236 |
| Operating Expenses | 16,172,448 |
| NET OPERATING INCOME (LOSS) | \$961,788 |

| | |
|--------------------------|------------------|
| Non-Operating Activities | (247,509) |
| NET INCOME (LOSS) | \$714,279 |

FY2008 Sources of Revenue

| | |
|--------------------------|-------|
| Annual Meeting | 33.7% |
| Journal of Neurosurgery | 30.2% |
| Membership Dues | 13.2% |
| Professional Development | 9.0% |
| Products & Services | 4.4% |
| Contract Services | 3.9% |
| Joint Programs | 3.4% |
| Other | 2.2% |



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