



NORTH AMERICAN SKULL BASE SOCIETY NEWSLETTER

Summer 2009

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MESSAGE FROM THE PRESIDENT

Daniel Nuss, MD, FACS

“The NASBS is alive and well!”

This year marks the 20th anniversary of the North American Skull Base Society. *Twenty years!*

Why has the NASBS remained viable after all this time? We are, after all, a group whose early focus was squarely centered on surgical techniques. Considering all the technical progress that has taken place in two decades, some would have predicted that the NASBS would have outlived its usefulness. Not so!

NASBS has evolved, and while we are still in some ways a technical society, we have increasingly focused on broader issues, with more emphasis on understanding basic disease processes, measuring treatment outcomes and realistically examining alternative (nonsurgical) modalities of treatment. Indeed, the NASBS has matured, evolved and substantially broadened its scope in 20 years.

But there is an even more important reason for our continued success. *The fact of the matter is that the NASBS gives something to its members that no single-specialty society can: interdisciplinary comradeship and genuine collegiality across specialty lines.* Think about it, no matter what your individual specialty, there are very few meetings where you can interact informally with world-class experts in other fields who share your deepest concerns for your patients with skull base diseases. At its essence, this benefit is downright *fraternal*; members regard their NASBS participation as one of the most rewarding, satisfying and practical activities of their professional lives.

NASBS will mark this 20th anniversary by holding its annual meeting in the great city of New Orleans. This city, one of America’s truly unique places, was devastated in 2005 by Hurricane Katrina. Although there was widespread destruction, the city has made an extraordinary recovery and is, once again, resplendent in its beauty. Its centuries-old traditions of gracious hospitality, *joie de vivre*, music and all the performing arts, and (of course) sumptuous food are stronger than ever. There’s never been a better time to visit New Orleans. Come to the meeting and plan to spend a few extra days.

Given the locale, the theme of this year’s NASBS anniversary meeting is extremely fitting: *Recovery, Rehabilitation and Renewal: Optimizing Outcomes in Skull Base Surgery.* An outstanding program organized around this theme awaits you, thanks to the work of the Program Committee, Drs. Ali Krisht, Samuel Selesnick, James Liu, and Program Chair Mark Varvares. High points of the meeting are many. There will be a 2-day Practical Dissection Course, in the LSU School of Medicine’s new state-of-the-art dissection laboratories, directed by Drs. Ehab Hanna, Vijay Anand and Jacques Morcos. Dr. Albert Rhoton will give his incomparable 3-D skull base anatomy lectures. Lecturers include Dr. Ivo Janecka and Dr. Laligam Sekhar, two of the founding members of NASBS, both venerated as innovators in skull base surgery. And on the last day of the meeting, special sessions will be aimed at residents and fellows.

NASBS also has an eye on its future. The Board of Directors has tackled some formidable challenges in the past year, and made plans to meet these challenges head-on. Financial trials brought on by global market woes have had a big impact on meeting sponsorship for all medical societies, and ours has been no exception. Compliance requirements for CME certification have also become more stringent. To help NASBS adapt to such challenges, the Board voted in 2008 to change its management company. We have contracted with BSC Management, a Los Angeles-based organization with an excellent reputation for managing specialty societies, including the American Head and Neck Society, the American Radium Society, and others. This new direction in management will enable us to continue to grow and embrace challenges as we enter our third decade.

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The Board has also taken on the recurring problem of “floating” meeting dates. Our interdisciplinary nature has always made it tricky to find the perfect meeting date that will not conflict with major specialty meetings. While there is never a perfect solution, the Board resolved to simplify this problem by establishing a fixed, recurring time of year for all future meetings, which will make it easier for our members to consistently attend NASBS meetings. In order to accomplish this, our next annual meeting will actually take place in 2011, with no meeting in calendar year 2010, and from that point, NASBS will have its annual meeting in February of each year. Dr. Peter Neligan, President-Elect for 2010-11, will preside over the 2011 meeting in the beautiful city of Phoenix, Arizona to be held February 18-20, 2011 (premeeting courses on February 16 and 17).

NASBS continues to attract the world’s greatest expertise in neurosurgery, otolaryngology, plastic and reconstructive surgery, ophthalmology, maxillofacial surgery, neuroradiology, radiation oncology, interventional radiology, medical oncology, and other related specialties. On behalf of the Board of Directors, I invite you to get more involved in the NASBS. We look forward to seeing you in New Orleans, October 16-18, 2009!

MEET THE EXECUTIVE COMMITTEE



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*President, North American Skull Base Society
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Dennis H. Kraus, MD
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Base Society, Attending Surgeon, Head
and Neck Service, Department of Surgery,
MSKCC, Professor, Department of
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Carl Heilman, MD
*Secretary, North American Skull Base Society
Chairman, Dept of Neurosurgery, Tufts
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Ehab Hanna, MD, FACS
*Treasurer, North American Skull Base Society
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Franco DeMonte MD, FRCSC, FACS
*Immediate Past President, North American
Skull Base Society, Professor, Mary
Beth Pawelek Chair, Department of
Neurosurgery, The University of Texas M.D.
Anderson Cancer Center*

2009 SCIENTIFIC PROGRAM COMMITTEE UPDATE

Dr. Mark Varvaras – Scientific Program Co-Chair

Greetings from the Program Committee for the 20th Annual NASBS Meeting!

This year's meeting, with a central theme of "Recovery, Rehabilitation and Renewal" and set in the beautiful city of New Orleans, it undergoing a self-rebirth, promises to be outstanding.

In this, the 20th year of the society, we have developed a more outcomes and patient centered program that not only evaluates where we have come in our abilities to impact the lives of our patients, but also what our direction will be in the future. This emphasis is best illustrated by our list of keynote speakers and their talks; "**Systems, Sciences, Complexity, and Chaos: A Dialectic Path to Optimizing Outcomes in Skull Base Surgery**": Dr. Ivo Janecka; "**Recovery and Renewal After a Life-Altering Event: A Surgeon's Journey of Faith and Hope**": Dr. Anna Pou; "**Measurement of Functional and Quality of Life Outcomes Following Treatment of Skull Base Tumors: Current Methods of Measurement and Expected Outcomes**": Dr. Gerry Funk; "**20 Years of the NASBS; What Has Been Our Impact on Patient Outcomes? A Senior Surgeon's Retrospective**": Dr. Al Mefty; and "**Functional Outcomes after Skull Base Surgery: What We Know and What We Don't Know**": Dr. Laligam Sekhar.

The program is ambitious with concurrent sessions that address the most critical issues relevant to our society's members, including new technological advances, endoscopic approaches, management of cranial neuropathies and cognitive issues post treatment, skull base imaging, multimodality management of skull base neoplasms, management of the orbit during skull base surgery, cerebrovascular surgery and many more.

Once again the membership of the NASBS has responded with a great number of excellent abstracts, filling our proffered paper sessions and spilling over into a poster session. It is in these sessions that the latest advances in our specialty can be found. This promises to be an excellent set of paper sessions. Reflecting the current rapidly changing state of the art, there are several sessions reporting new findings in the advancing field of endoscopic skull base surgery.

From all of us on the program committee and the Board of the NASBS, we hope you will join us in New Orleans for our 20th Annual Meeting. We feel this important gathering of our members represents an important milestone for our society as we celebrate our past and, at the same time, is the point at which we launch into our future.

NEW MEMBERS INDUCTED AT 2008 ANNUAL MEETING

Samuel Barnett, *University of Texas Southwestern Medical Center*

Benedicto Baronia, *Saint Louis University Hospital*

Daniel Coelho, *Virginia Commonwealth University*

Kuniki Eguchi, *Hiroshima University*

Maher Elayyan, *King Hussein Cancer Center*

David Eytan, *Vancouver Coastal Health Authority*

Andrew Fabiano, *Millard Fillmore Hospital- SUNY Buffalo*

Robert Fenstermaker, *Roswell Park Cancer Institute*

Soha Ghossaini, *Penn State Milton Hershey Medical Center*

Nakamasa Hayashi, *University of Toyama*

David Hiltzik, *Roosevelt Hospital*

Mark Hornyak, *Wayne State University, Detroit Medical Center*

Vladimir Hufana, *UERM Hospital/ St. Luke's Medical Center*

Louis J. Kim, *University of Washington*

Joshua Krauss, *Providence Hospital*

Nicholas B. Levine, *UT MD Anderson Cancer Center*

Robert Malyapa, *University of Florida*

Babak Mehrara, *Memorial Sloan-Kettering Cancer Center*

Iman Naseri, *Emory University*

Paulo Pires De Aguiar, *Division of Neurosurgery, Hospital Das Clinicas, Sao Paulo Medical School*

Ali Sadr, *SUNY Downstate*

Zoukaa Sargi, *University of Miami Miller School of Medicine*

Jonathan Sherman, *Mountain Neurological Center*

James Stankiewicz, *Loyola University Medical Center*

Marcus Ware, *Tulane University School of Medicine*

Richard Wein, *Tufts Medical Center*

Jean-Paul Wolinsky, *Johns Hopkins University*

Donald Wright, *Virginia Neurosurgeons, PC*

Eugene Yu, *Princess Margaret Hospital*

Heng-Wai Yuen, *Alexandra Hospital, Singapore*

Chad Zender, *Loyola University Medical Center*

Call for Committee Applicants!

Over the past several years, membership in the NASBS has grown. At the same time, we have observed a great increase in the number of enthusiastic members vying for committee positions.

This year, NASBS is giving you the opportunity to apply to be a part of the NASBS Committees.

Members will be asked to nominate themselves for up to three committees only. Please provide a brief (50-100 word) statement as to why you are interested in joining the committee.

Statements should be submitted via email to info@nasbs.org or via fax to 310-437-0585 ATTN: NASBS COMMITTEE APPLICATION by October 1, 2009.

We sincerely hope that this process will allow all interested members to put their names forward for the committees on which they would like to serve. We look forward to the continued growth of the NASBS, and we hope that these changes will encourage involvement.

NASBS Committees:

- *Annual Meeting Scientific Program Committee*
- *Audit and Finance Committee*
- *CME and Education Committee*
- *Constitution and Bylaws Committee*
- *Development/Vendor Relations Committee*
- *Distinguished Service Award Committee*
- *Membership and Credentials Committee*
- *Nominating Committee*
- *Publications and Website Committee*
- *Research Committee*

EDITORIAL STATUS: JOURNAL OF SKULL BASE SURGERY

Dennis Kraus, MD, Editor-in-Chief, Skull Base

The NASBS Journal, the *Journal of Skull Based Surgery*, has undergone some major changes over the past year and is continuing along this path. In addition to increasing the proportion of articles, which represent original data, it will soon feature new technologies and new surgical techniques. The Journal will continue to publish case reports, but it is interested in material that represents original experiences.

Emphasis will be placed on new technology such as robotics, endoscopy and image guided surgery. In addition, the Journal intends to increase publication on the biology of illness that impacts the skull base. Articles that focus on the biology of skull base neoplasm will be recruited in the future. Also, efforts will be made to incorporate allied fields, such as radiology, pathology, radiation oncology and medical oncology. There are a number of topics, which are in preparation for initial issues. Articles are being planned for neurofibromatosis 2, which is commonly referred to as NF2. This will provide an overview of the diagnosis, biology, and management of this disease. As earlier noted, the Journal would like to begin to highlight some of the new technologies as it relates to skull based surgery. The Journal is hoping to publish articles on the use of nasal endoscopy for the resection of skull base neoplasms, image guided surgery, and possibly robotics.

The Journal is planning an overhaul of the editorial board as well. Skull based surgery has long stood for the multidisciplinary nature, which is inherent to the management of these types of neoplasms. Many members of the editorial board have served since the beginning of the Journal. It is the hope of the Journal to include a new generation of skull based surgeons who have not only familiarity, but are also the leading edge of skull base surgery and new technologies. In addition to head and neck surgeons, otologists and neurosurgeons, it hopes to include individuals from allied fields, including physicians who are medical oncologists, radiation oncologists, pathologists, radiologists, oculoplastic surgeons, plastic and reconstructive surgeons, anesthesiologists, and other allied fields.

The strengths of the Journal continue to reflect the multidisciplinary nature of the skull based surgery. As previously noted, the interaction between neurosurgeons, head and neck surgeons, neurootologists and rhinologists allows for the multidisciplinary management of patients. This is reflected in many of the articles that have been published in the journal in the past. Moreover, the rarity of this group of tumors underscores the necessity of the expertise, both within the editorial board, as well as our submitting authors to educate many individuals who have an interest in this field. In addition, to the surgical disciplines, incorporation of non surgeons with expertise in this heterogeneous group of tumors, including radiologists, pathologists, medical oncologists, radiation oncologists and a host of other individuals, allow for a better understanding of this group of diseases. Lastly, the emergence of an improved understanding of the molecular biology associated with these neoplasms will further our understanding of their treatment and outcome.

The team approach utilized for tumor removal is a motto, which has been repeated in many of the tertiary care facilities that focus on skull base surgery. It is the marriage of continued emergence of technological advancements with the spirit of cooperation that has been the grounding paradigm in skull base surgery for nearly five decades. It is the intent of the editors and chief, Dr. Michael Gleeson and Dr. Dennis Kraus, to continue this spirit and approach in the skull based surgery journal. It is this environment that will continue to allow us to see an evolution and improvement in the field of skull based surgery.

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