

THE

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OF THE AMERICAN ACADEMY  
OF NEUROLOGICAL SURGERY

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AUGUST 1969



# THE AMERICAN ACADEMY OF NEUROLOGICAL SURGERY



## OFFICERS 1965-1966

<i>President</i>	-	-	-	-	GEORGE L. MALTBY
<i>President-Elect</i>	-	-	-	-	GUY L. ODOM
<i>Vice-President</i>	-	-	-	-	FRANCIS A. ECHLIN
<i>Secretary-Treasurer</i>	-	-	-	-	ROBERT G. FISHER
<i>Historian</i>	-	-	-	-	HOWARD A. BROWN

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VOLUME 26, NUMBER 1

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## THE NEUROSURGEON

From all reports the twenty-sixth annual meeting of The American Academy of Neurological Surgery held at the Terrace Hilton Hotel in Cincinnati, October 14th to 16th was scientifically and socially another bright spot in the history of the Academy. Guy Odom is our new president-elect, an honor richly deserved. Francis Echlin is our new vice-president, rewardingly representing an expression of admiration and affection of the members, and Bob Fisher takes over the demanding duties of secretary-treasurer so well handled by Ed Davis.

The Academy can well be pleased with the election of four new members to its distinguished organization. They are Herbert Lourie, John J. Lowrey, Joseph Ransohoff, and Anthony F. Susen. Not only are they a valuable contribution to our membership, but the Academy in turn will bring rewarding pleasure and recognition to their neurosurgical careers.

For historical purposes as well as for the information of the members, a resume of their medical careers now follows:

### Herbert Lourie



Herbert Lourie was born in 1929 at St. George, South Carolina. He received his medical degree from the Duke University School of Medicine in 1952 after obtaining his premedical education at the University of South Carolina. He served a medical internship at the Duke Hospital from January 1952 to December 1952, and thereafter a surgical internship at the Barnes Hospital from January 1953 to June 1953. He was assistant resident in surgery at the Barnes Hospital from July 1953 to March 1954, assistant resident in neurology at the Barnes Hospital from November 1956 to June 1957. He was co-resident in neurosurgery at the same hospital from July 1957 to December 1957 and resident in neurosurgery from January to December 1958. He was a fellow in neuro-

surgery at the Barnes Hospital from January to December 1959. Subsequently he carried out research in neurophysiology at Washington University. He received his certification in the American Board of Neurological Surgery in April 1962. He was a captain in the medical corps of the U. S. Air Force from 1954 to 1956. Since 1959 he has been associate professor of neuro-logical surgery at the Syracuse University Hospital and Syracuse Memorial Hospital.

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John J. Lowrey

John Lowrey was born in Honolulu in 1913, and received his pre-medical education at the Punahou School and Harvard University. He graduated from Harvard Medical School in 1940. He served an internship at the Children's Hospital and the Peter Bent Brigham Hospital from 1940 to 1942. He served his residency from 1942 to 1944. He was in the U. S. Army Medical Corps from 1944 to 1946, his last assignment being as a major and Chief of the Neuro-surgical Section at the Halloran General Hospital in New York.

In 1947 he was awarded the Mosley Traveling Fellowship to the National Hospital for Nervous and Mental Diseases, at Queen Square, London. In 1948 he was assistant neurosurgeon at the Children's and Peter Bent Brigham Hospitals in Boston. He has been associated with the Straub Clinic in Honolulu since 1949. He obtained his certification from the American Board of Neurological Surgery in 1950. He has nine publications to his credit.

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Joseph Ransohoff

Joseph Ransohoff was born in Cincinnati, Ohio in July of 1915. After graduating from Harvard University in 1938 he obtained his medical degree from the University of Chicago Medical School in 1941. He interned in surgery at the Cincinnati General Hospital from 1942 to 1943, was assistant resident in surgery there from 1943 to 1944 and was in the Medical Corps of the Army of the United



States from 1944 to 1946. He was on the neurological service of the Montefiore Hospital in New York from 1946 to 1947, and on the neurological surgery service at the same hospital until 1949. From 1949 to 1961 he was instructor to associate professor of clinical neurological surgery at the College of Physicians and Surgeons, Columbia University, New York. Since 1961 he has been professor and chairman of the department of neurosurgery, New York University Schools of Medicine, New York. He obtained his certification from the American Board of Neurological Surgery in 1951.



Anthony F. Susen

Anthony F. Susen was born in Evanston, Illinois in March of 1921. After obtaining his premedical education at Dartmouth, he received his medical degree at Harvard University in 1945. He served his internship at Cook County Hospital, Chicago, Illinois from 1945 to 1946, and from 1946 to 1948 was in the medical service of the United States Navy. He was assistant resident in surgery at the Children's Hospital, Boston from 1948 to 1949;

assistant in surgery at the Peter Bent Brigham Hospital, Boston, and Research Fellow in Neurosurgery, Children's Hospital, Boston from 1949 to 1950; resident in neurosurgery, Bowman Gray School of Medicine, Winston-Salem, North Carolina from 1951 to 1952; and resident in neurosurgery at the Children's Hospital, Boston as well as at the Peter Bent Brigham Hospital in Boston from 1952 to 1953. Since 1953 he has been clinical assistant professor of neurosurgery at the University of Pittsburgh School of Medicine. He obtained his certification from the American Board of Neurological Surgery in 1955. He has eight publications to his credit.

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Edmund Morrissey's delightfully nostalgic and reminiscent Presidential Address with slides and movies cannot be captured here appropriately, but it is hoped from time to time the members will have an opportunity to peek into the past, and to see again some of the events and people that led to this incomparable neurosurgical association. How appropriate Longfellow's poem in the program:

*"And this Song of the Vine,  
This greeting of mine,  
The winds and the birds shall deliver  
To the Queen of the West,  
In her garlands dressed,  
On the Banks of the Beautiful River."*

"ACADEMY" MEMBERS HOLDING OFFICE IN  
THE HARVEY CUSHING SOCIETY

1966-1967



EBEN ALEXANDER, JR.  
*President*



CHARLES G. DRAKE  
*Vice-President*



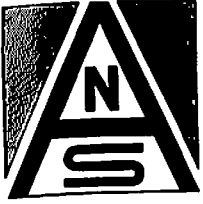
HENRY G. SCHWARTZ  
*President-Elect*



BENJAMIN B. WHITCOMB  
*Secretary*



WILLIAM F. MEACHAM  
*Treasurer*



## The Letters



Joseph and Rita Ransohoff  
February 2, 1966



Election to membership in the American Academy of Neurological Surgery as the third member from New York City is a great honor which I humbly and gratefully accept. Larry Pool and Frank Echlin have set high standards indeed, and I can only promise my sincerest efforts to continue in their path. I was especially happy to join many friends, old and new, in Cincinnati - "home" to me - my first introduction to neurosurgery being a summer job with Frank Mayfield between college and medical school in 1934. Actually though, the river never looked so good to me what with the calliope blasting, the wine flowing, and dozens of golf widows needing consolation - almost as good as Key Biscayne! Most impressive, however, was the free and honest exchange of scientific information which characterized the meetings, an almost unique asset in our increasingly structured society.

As some may know, my professional activity, on July 1, 1961, was transferred from Larry Pool's sheltering coverage to the wide world of New York University - Bellevue Medical Center. Here 50% of the time, I have run the Neurosurgical Service, and 50% of the time the converse has been the case. Our Center, including the New York University Divisions of Bellevue Hospital, the Manhattan Veterans Administration Hospital, and a 600 bed University Hospital lies along the East River from 23rd to 34th Streets, and houses some 4,500 patients. In close collaboration with my counterpart in Neurology, Clark Randt, a neurosurgeon's neurologist, and a full time staff of four neurosurgeons, James Campbell, Arthur Battista, Jerome Schachter, and Ernest



Mathews, we are striving to establish a unit for good patient care, teaching, and an honest attack on the frontiers of knowledge.

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From Joseph's letter it is obvious he can well use his great vitality and energy handling the Bellevue Medical Center. We are happy to have an addition from the great center of New York City to the Academy.

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Social Security agent to applicant: "Feeling 65 isn't enough. You must be 65."

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John and Katy Lowrey  
February 4, 1966



It was a great pleasure to receive the notice from Ed Davis of my election to the Academy and I thank you all.

We thoroughly enjoyed our visit at your Camelback Inn and Palm Springs' meetings and look forward to regular attendance from now on. We hope we can contribute to the organization.

As to my recent activities, most of us entered medicine to take care of people. It is surprising how the years and circumstances drag us into activities we never dreamed of. But if we are to influence the course of events and not just criticize others, we must serve when called.

I find myself this year President of the Honolulu County Medical Society. Since my first official act was to transmit to our Blue Shield Plan the signatures of over 400 physicians resigning from the Plan, it looks like an interesting year. The move was inevitable because we recently were being denied our proper voice in the provision and control of medical service in spite of the loyal support of this Society over the past 28 years. With this support, the Plan has grown large and strong with a membership of almost

half the state. In the early days, the doctors subsidized the Plan.

Since we believe in private health insurance, we are now seeking to interest insurance companies in a Medical Society Foundation Plan. The year will be complicated too by the impact of Medicare this summer.

The Straub Clinic, where I practice, has grown from 17 physicians when I joined in 1949 to 50 now, and I serve on the Executive Committee. Having barely survived for almost 13 years practicing alone, I enjoy thoroughly the stimulation and help of my associates, Dr. Okihiro, trained in Michigan and the Mayo Clinic in Neurology and Dr. Goebert, trained by Drs. Gardner and Hamby at the Cleveland Clinic in Neurosurgery.

Honolulu in attempting to consolidate its hospitals and the University of Hawaii, is starting a two year Medical School. And, so even though one might rather leave the planning and committee work to others and just practice medicine, one can't unless he will leave to others decisions as to how medicine will be practiced in the future.

With all the increasing travel to these islands, Hawaii can still be a wonderful place to visit. New visitor facilities on the outside islands of Maui, Kauai, and Hawaii are very popular and most people can find what they want. If any of you are headed this way, we would be happy to try and help make your stay enjoyable.

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As President of the Honolulu County Medical Society John, to say the least, will have an interesting and hectic year. All this to add to the practice of neurological surgery will require considerable containment. It is of interest also how the well-known clinic to which he belongs has grown, and a further increase would appear a foregone conclusion.

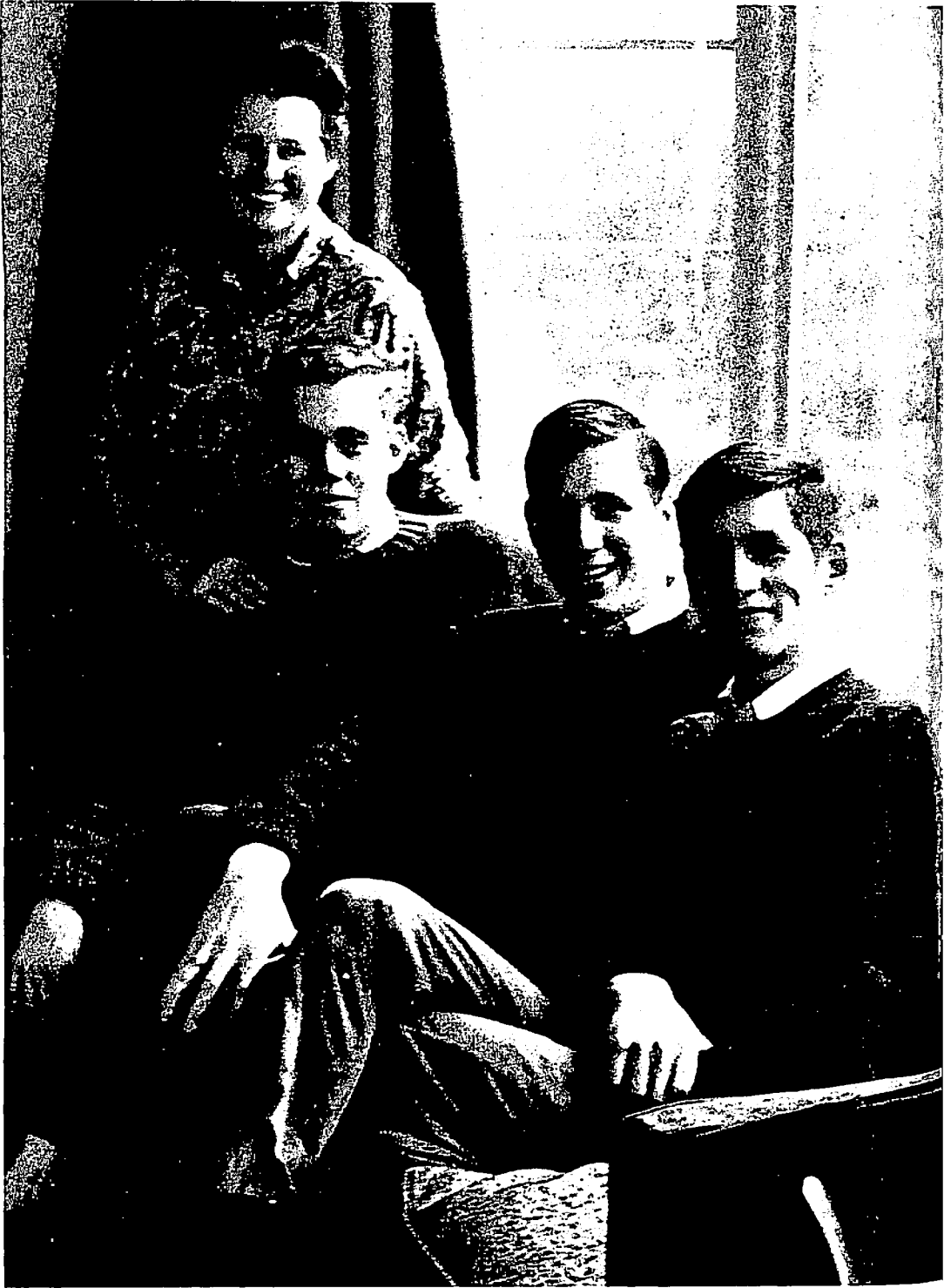
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California patriot: A man who derives a certain amount of satisfaction from getting almost killed by a Florida hurricane.

Career woman: One who goes out and earns a man's salary instead of sitting at home taking it away from him.

Subtlety: The art of saying what you think and getting out of range before it's understood.

Comic relief: When the life of the party goes home.



The Pools - Angeline, Mike, Eugene and Daniel



Angeline and Larry Pool  
March 8, 1966



Angeline and I have had a really fabulous time visiting exotic lands since seeing you all last, and were particularly sorry to miss the Cincinnati meeting for this reason.

In August, as you heard from Ernie Mack and Frank Smith, we joined the Neurological-Neurosurgical tour to Moscow and Leningrad, taking 17 year old son Daniel, who could read Russian, with us. We all had a most fascinating time visiting hospitals, labs and sights. The Russians everywhere, i. e. doctors, medical technicians, taxi drivers and people in the streets, seemed almost desperately eager to be friends with Americans. One gathered they do not like this arms race any more than we do. The second main impression I got was that the condition of living, oppression, etc. were so bad that the people were generally sad and rather listless. They want cars, and at least a two-room instead of one-room 4th floor walk-up apartment! Maybe they are getting somewhere for they now have savings banks paying 2-1/2% interest. When one of the group said "But that is capitalism" (which it is), our Russian guide most furiously denied this.

Then on to Copenhagen where I showed my color movie of exposing and clipping intracranial aneurysms through the Zeiss microscope (have done several more since then - great fun and often a real help).



Angeline and Larry Pool with  
Dr. Nikiforoff, neurosurgeon,  
in Leningrad, August 1965

We spent all October and November in Ankara, Turkey. The idea of the 2 months in Turkey was to teach neurosurgery at the new (3 years old) Hacettepe Medical School and Hospital. This is a new venture for in that whole part of the world there is only one good school - our American University at Beirut. All other medical schools have 200-300 students per class, few if any exams, and usually no required attendance. One passes the final 3 minute exam. in a course in some schools only if one has purchased the Professor's textbook! This new school is organized by a really wonderful and dynamic States-trained pediatrician, Dr. Ishan Dogramaci. He wants one topnotch place as a model for the Middle East. All department heads must be trained in the States (as they are) and there are only 80 students to a class. It looks most promising. The plant is large and adequate, with 20 operating rooms, and is largely built by U. S. funds, for we have a mighty important stake in Turkey as you know. Ernie Sachs is now there doing a great job. By next year they expect to have Neurosurgery running well, by the Turks themselves. Their Residents incidentally are a very bright, pleasant and fast-learning group.

On weekends we saw sights: Gordion where the knot was tied and untied, an hour or so west of Ankara in beautiful California-like country; the great Hittite cities 200 miles east another Sunday; and the South Mediterranean coastal towns of Tarsus, Antioch, etc. another time, across the snow-capped rugged Taurus mountains. Then later to Izmir or Smyrna - (one of the best hotels I've ever seen) - to visit Ephesus and then Pergamon where Galen was born. Finally to Istanbul of fabled mosques, the Bosphorus (complete with lobster, swordfish, etc.) and then home by way of Paris and all the art shows, etc.

Altogether an eye-opening experience that makes one all the more proud of our great country and the need for friendly relations with the people of other lands.

Since return, busy as two bees, with a great run of aneurysms (11 in the house 2 weeks ago) and several good acoustics, etc. One appreciates anew Earl Walker's fine article on the training of foreigners. We should all heed it.

Our three boys are so far flourishing. The oldest is planning a career in medical illustrating, the second is teaching (well) at a fine boy's school outside Boston, and the third, Daniel 18, is a Freshman at Harvard.

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What an interesting and informative letter! Our appreciation as well for the excellent photograph. Three hand-

some sons of whom anyone could be proud! In addition to his many other rewards and responsibilities, Larry has been elected treasurer of the International Congress of Neurological Surgery.

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Wrote a creditor: "Your account has been on our books for over a year, and we would like to remind you that we have now carried you longer than your mother did."

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Homer and La Myra Swanson  
March 8, 1966



I really have very little to offer of interest for the coming issue of *The Neurosurgeon* other than to request change in the mailing address of my office to 1938 Peachtree Road, N. W., Atlanta, Georgia.

I am now situated within running distance (I cannot run more than 100 yards) from the hospital where I now do all of my work and this is a much more convenient location.

Our weather this fall has been adominable, almost matching that of Montana with temperatures dropping to 4 above 0 on two occasions, alternating with constant rain which has recently fouled up the bird hunting. This sorry weather has, however, made duck hunting much more successful in that the ducks fly low and for a change, I have been able to hit a few with a stick.

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The weather has played strange tricks in various parts of our land this year, causing again the comment that it must be due to testing of the atomic bombs. With neurological surgery becoming more demanding each year, an office near the hospital becomes more important in the service of this jealous mistress.

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"Most fathers wish that higher education were lower."



Don and Ellie Coburn  
March 11, 1966

Since I last wrote in the society relative to activities, Ellie and I had the pleasure of a freighter cruise to the Orient, and, needless to say, it was most enjoyable. We also had the opportunity of spending some time in Tapei, Taiwan, where I was given the treatment so far as the medical was concerned. The Surgeon General in Chief took me in tow and I really had a good opportunity to see what their medical situation is and was most impressed by their VA hospital which, of course, our government built for them but which is very modern, very well equipped and I think well staffed.

As everyone who has been to Hong Kong knows or can imagine, it was one of the high spots and we thoroughly enjoyed five days there, particularly since we were in tow by a 78 year old Chinese, who was 6' 4" and kept us tired out with his boundless energy as he showed us many of the high spots of Hong Kong, from the Chinese standpoint. Okinawa was delightful and through contacts there we were royally entertained by the Soriano's. Tokyo was rather disappointing to me, in that it was such a mad rush and the Kamakaze taxi drivers scared the hell out of me. Also, I thought one could sense some anti-American feeling in both Tokyo and Kobe and Yokohama. They stopped at Midway, gave us an opportunity to see the Gooney birds, which I had not seen when in the Pacific, and of course, we enjoyed Honolulu where Shari's in-laws live.

At the present time, I am waiting it out to see whether my associate, Dr. Thomas Hunt, is going to be called into service. He has been reclassified as 1-A and I strongly suspect that he will get "greetings" one of these days.

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What an interesting trip--in many ways to most of us. We hope Don will not lose Thomas Hunt, but unless the war strategy changes, many more young doctors will get the call.

It was such a pleasure being with Ellie and Don, Dorothy and Howard, and Maxine and Cone Pevehouse at the Harvey Cushing banquet.

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"An executive is usually tied at the office and unstrung at home."

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MARY and WILLIAM SWEET - March 14, 1966



*Left to right: Gösta Norlen, Mary Sweet, Bill Sweet, Mrs. Sano, and Prof. Sano. Fujiyama for background. Lake Hakone near background center between Mary and Bill.*

Mary and I spent the month of November visiting some twelve university medical schools and assorted neighboring science spots in Japan. For the opening few days of the month Gosta Norlen and I were the two foreign guest speakers at the Japan Neurosurgical Society's annual meeting. He gave a superb talk summarizing



the salient points of his entire experience in the management of intracranial aneurysms, and I commend it to the membership for study when it appears in English in the Japanese journal "Brain and Nerve".



The above photo showing Norlen, two geisha girls, and me intimates that not all waking hours were devoted to scientific subjects. The other thirty members of the Japan Neurosurgical Society who were at the dinner at which this photo was taken had less than the one geisha girl per person assigned to Norlen and me on these occasions. We both found it eminently convenient to have our sake cups filled by these young ladies after every swallow we took. The costumes and hair decorations of the two in the picture indicate to the initiated that they are still students going to geisha school. This is a 3-year course undertaken in lieu of going to junior high school. Interestingly enough this institution is waning in popularity, and I am told that suitable candidates for the geisha school training are decreasing in numbers. Perhaps, as seems to be the case with medicine in this country, the period of training seems unduly long when one considers the responsibilities one exercises after the training is completed.

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What an interesting letter with such enjoyable comments about their experiences in Japan. We are indebted to Bill and Mary for the much appreciated photographs.

Gosta Norlen has done outstanding work on intracranial aneurysms with, as the baseball boys would say, a very low earned-run average.

Bill, who is chief of the neurological service at the Massachusetts General Hospital has been appointed professor of surgery in the faculty of medicine at Harvard University. Additionally, he serves for Harvard as a member of the Board of Trustees of the Associated Universities, Inc., which manages the Brookhaven National Laboratories and the National Radio Astronomy Observatory. More than one university on the Pacific Coast has tried to lure Bill away from the shores of New England to be professor of neurological surgery, but without success.

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Betty and Herbert Lourie  
March 16, 1966



It was a most pleasant surprise to learn of my selection to membership in the Academy, and I am very proud to join this august group. My sincere thanks to you for the expression of confidence.

We have survived another winter in Syracuse despite the "Blizzard of '66". Survival in 52 inches of snow in 36 hours takes a lot of courage and fire wood for a South Carolinian. However, trout season opens in 15 days and six hours, and I will be trying again for ten pound rainbow at Katherine Creek. I figure I'm due this year after being skunked five successive opening days. I have ultimate faith in worms and the law of averages.

Neurosurgery is struggling forward here as elsewhere. The Curriculum Committee is revising the program in the neural sciences which henceforth will be taught in the "vertical" system with complete integration and interdigitation of the pre-clinical and clinical disciplines. This will increase considerably the teaching demands on the full time neurosurgical staff during the freshman and sophomore years; but we look forward to the participation of our excellent associates in neuroanatomy and neurophysiology in the Junior-Senior clerkships and residency programs.

Bob King is still trying to figure out what makes trigeminal neuralgia tick. Sid Watkins has completed his masterful stereotaxic human atlas, and I'm studying the pathogenesis of strokes in hypertensive experimental animals.

We had hoped to occupy our 28 beds at the new University Hospital in January but shortage of nurses has caused a postponement of this move. Meanwhile, the clinical arm of our program continues at the adjacent Syracuse Memorial and Veterans Administration Hospitals.

Betty and I look forward with great anticipation to meeting the members of the Academy at future meetings.

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The teaching of neurological surgery with emphasis on the pre-clinical phases is presently a far cry from the old days, and infinitely superior. The teaching demand becomes greater each year.

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Office nurse to doctor: "Somebody wants to know if you will make a house call -- whatever that is."

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Ed and Helen Boldrey  
March 18, 1966



In the first place, it is good to hear from you and to know that you are back into some forms of activity at least. My agents had already informed me that you had gotten back to the East Coast at least once this winter. We missed you greatly, though, at the Academy Meeting in Cincinnati. This was truly another outstanding affair that the Academy had there, with a superb program of papers and matchless hospitality.

I fully appreciate, of course, the reasons for your absence from the meeting and the reason for the absence of the others who missed this session likewise is recognized. On the other hand,

I believe that all should know that absence from the Academy meeting detracts just that much from the meeting itself. I think that all of us recognize that one of the major values of attending meetings, particularly the Academy, is to have the opportunity to exchange thoughts and concerns, and the like with colleagues whose opinions and counsel and companionship we find invaluable. When one of these colleagues is missing then it detracts just that much from the meeting as a whole as far as most, if not all of those in attendance are concerned.

I believe deeply in this point of view and feel that all of us should consider it when absence from a meeting of the Academy is planned and therefore should not absent ourselves from the meetings left for us thoughtlessly.

In your letter you invited comments about local regional Society meetings. The Western Neurosurgical Society, with a membership liberally sprinkled with Western Academicians, seems to have shed its fledgling pinfeathers and is emerging, I believe, into a vigorous organization with great promise. The meeting in Seattle last fall was well attended and the papers were of fine quality. The next meeting is planned for Salt Lake City under the Presidency of John Green, with Art Ward as the President-Elect. With such direction to follow that which you, Dave, initiated, how can the organization fail?

*The Boldrey family.*

*Photo by Cone Pevehouse*





We have just recently had a meeting of a relatively new group in the West which bears the imposing title of the "Federation of Western Societies of Neurological Science". This has supplanted the old Pebble Beach meeting which so many of us enjoyed and which was attended by a number who came from Eastern snow-bound regions to taste of science, and the like, in Del Monte Lodge. The last session was in San Francisco and ran from Thursday noon to Sunday noon, with one night session and with a heavy concentration of talent, including Earl Walker. I believe a lot of us would still like to get back to Del Monte. Perhaps some way we shall. I should add that this is the Society which was the dream of Rupert Raney. Some of us who knew of this dream of his cannot help but think of how pleased he would be to see the Federation flourishing.

I am enclosing a photograph of the three Boldrey children. This was taken fairly recently by Cone Pevehouse. Nancy is on the left, Edwin E. is in the middle, and Susan is on the right. Nancy is working here in San Francisco as a legal secretary. Edwin is a Junior at Northwestern Medical School, and Susan is taking graduate work at Columbia Teachers in New York.

On the national scene, the organizational revitalization provided by Frank Mayfield last spring is, in my opinion, bearing fruit. This is not going to remove responsibility from the smaller societies, such as the Academy, but rather is going to channel efforts in a more organized fashion, I believe. There was some discussion of this at the meeting in Cincinnati and there will be a great deal more at the Cushing Society Meeting in St. Louis in April. These are exciting times for neurosurgery. They are important times, too, if neurosurgery is to maintain itself as the Ace of the specialties. Television has pretty fairly ruined the image of neurosurgery. Third party participation is certainly going to alter our activities in a major way. It is high time that all of us give some pretty serious thought to the matter and pool these thoughts so that we can act in unison to achieve what to us must be the most important of all goals.

Before closing I want everyone to know that we are looking forward to a full attendance at the Academy meeting here next fall. The meeting will follow immediately after the College of Surgeons. We have scant hope that we can match the River Boat Ride, of Cincinnati, or the many other attractive features that have been provided by our hosts over the last few years, but we will try to find something to fill in the niches between the scientific sessions.

Ed, as usual, has written his interesting and informative letter. We are pleased to have the fine photographs of the family and the children. Cone Pevehouse is indeed an excellent photographer.

Ed finished his term as president of the Western Neurosurgical Society and also that as president of the Society of Neurological Surgeons. As chairman of the liason committee for the Harvey Cushing Society, he again completed a difficult task superbly. As the saying goes, if you have something tough to do, give it to Ed.

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"Americans spend seven billion dollars a year on games of chance. And, mind you, this doesn't include weddings, starting up in business, and holding elections. "

"Our language has wisely sensed the two sides of man's being alone. It has created the word 'loneliness' to express the pain of being alone. And it has created the word 'solitude' to express the glory of being alone. "

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Hermene and Joe Evans  
March 24, 1966



Your letter of February 28 vexed my conscience because I have been such a poor contributor to The Neurosurgeon. It came just before setting out on a two-week jaunt to South America with a way stop at Miami where one of our twins, engaged in personnel work, is now assigned. Nick recently added a third daughter to his team. He and his wife Mary are finding Miami pleasant, but less attractive in their eyes than residence in Washington.

While in Miami I had the opportunity of spending the morning with Dave Reynolds, made rounds with him and saw his setup, and then attended a clinic given by the fabulous Lawton Smith

who spoke to us at Key Biscayne. What a showman, and a very alert and intelligent one.

We then moved on to Caracas. "We" refers to Hermene and myself because I was able to prevail on her at the last moment to come with me inasmuch as she was able to make satisfactory arrangements for the care of her elderly mother. We spent a very interesting forty hours there as guests of Tito and Maria Fernandez-Moran. Tito is the brother of Humberto Fernandez-Moran, the electron microscopist who was responsible for the development of the scientific research institute just outside Caracas. It was known as the Instituto Venezolano de Neurologia E Investigaciones Cerebrales. This institute was well in hand in 1957 and its construction was backed by Betancourt's predecessor, the dictator, Perez Jimenez. Humberto became too closely identified with the regime and had to leave. Since his departure the emphasis has changed, as is indicated by the present name: El Instituto Venezolano de Investigaciones Cientificas.

The first morning I spent with Dr. Rafael Castillo, visiting his service at the University Hospital and taking part in a neurological and neurosurgical conference. On the second morning Dr. Castillo took me to visit the institute, which is impressively set in the mountains at a level of 5,000 feet, some 18 kilometers from the city. It would be hard to imagine a more glorious climate and setting in which to work.

On the evening of our arrival in Bogota, where a former resident of ours, Dr. Hernando Torres was my host, I was to have spoken to the Colombian Neurological Society. However, our flight was delayed unduly and the meeting had to be canceled, but I did have the opportunity of speaking to the staff and students the next morning on that old perennial: head injury.

Neurosurgeons in Bogota are making an impressive effort to do a good job in the face of great odds. There is, I think, no question but that the number of neurosurgeons in Colombia is excessive in view of the present development of the hospital system and of the economic hurdles that are set against adequate distribution of medical care. This is a problem that is going to involve very careful attention and those of us who are responsible for training programs in the States and elsewhere must take cognizance of this fact. There are now 53 neurosurgeons in Colombia, 31 of them in Bogota, 5 in Cali, 6 in Medellin and the others scattered. There are 13 men known to be in training in the States and 18 involved in training programs in Colombia, which means that in another three or four years there will be 84 neurosurgeons for a population of 17.5 million. Slightly less than a third of the population has available to it some type of medical care, some of it very deficient. There are some 12 million in the population without



medical care and with no adequate means of obtaining it under the present system. These are appalling figures, and one can't help but wonder whether some of that 50 billion dollars ought not to be diverted in the direction of South America rather than across, in such large part, the Pacific. At least the positive gains would seem to be more immediately evident.

After our brief stay in Bogota we came on over to Medellin where, as many of you know, our daughter Caroline resides with her Colombian engineer husband and their four children. Medellin is a beautiful valley, set in the middle range of the Andes, about 5,000 feet. It has an ideal climate, and the weather has been perfect.

I have had the opportunity of meeting at a dinner with most of the neurosurgeons here and some of their neurological colleagues. Ernesto Bustamente is now in charge of the surgical program here since Luis Posado is now only engaged in private practice. He has a first-rate organization here and he is doing very effective work, again under difficult economic circumstances. Raul Piedrahita, who spent six months with us last year, has been a very gracious neurosurgical host.

I should confess that in our program in Chicago we have three of the thirteen men being trained outside Colombia (nine of them in the States), but having seen the situation again at first hand, I think we must certainly discourage Colombianos.

I had hoped to get to Cali where there is another good neurosurgical service that I visited on two previous occasions, but there was a slip up in the arrangements. Since I am having to cut my time short by a week I shall not be able to include a visit there.

I think perhaps the only other newsworthy point I have to bring up is a recent Head Injury Conference held at the Center for Continuing Education at the University of Chicago. This was the fruition of the work of the Head Injury Planning Committee over the past year and a half, a group that was brought into being through the initiative of Bill Walker and Bill Caveness, and I believe that Mait Baldwin had a hand in it as well. Forty-seven people from various places and countries gathered--engineers, physicists, and biochemists, physiologists, electron microscopists and clinicians--to consider the problems posed. One of the conclusions drawn was that we are a long way from knowing the answers but in a good position to start adding to past knowledge. The Proceedings of the Conference are to be brought out no later than June 1 by Lippincott. I would think that all our membership would be interested in obtaining copies.

Family-wise we are all well. We had a good visit with

Mary in Geneva last summer in connection with the international meetings. Ed, the other twin, is just back from the Pacific area on re-assignment. Anne and her doctor husband, Claude Lanctôt, are living in Boston where Claude is working at the Harvard School of Public Health on population problems. They have just had a second daughter. Willi, our fourth daughter, is a junior in college. John is finishing college this year. He will be commissioned as 2nd lieutenant in the Army but may receive deferment for graduate study in languages. Tom is finishing prep school and is now awaiting word concerning college acceptance. These can be tough days for lads at his stage, but his academic and athletic records are both good, so we do not feel undue concern.

Work in our program goes along busily, and I am trusting that Sean Mullan will say something to that subject. I am looking forward to the spring meetings when, no doubt, the paths of most of us in the Academy will be crossing in one way or another.

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What an interesting letter filled with information and neurosurgical personalities. The proceedings of the Head Injury Conference to be published by Lippincott will represent an important reference on this subject.

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Father trying to explain to his youngster the difference between the ordinary rifle and the automatic rifle, wound up "it's as if I spoke and then your mother spoke".

\*\*\*



Catherine and Ted Rasmussen  
March 24, 1966



The enclosed photograph was made from a Kodachrome taken by Charlie Branch on the occasion of a surprise party for Dr. Penfield, following a talk he had just given to the M. N. I. Wives' and Fellows' Societies. The party, incidentally, marked his 75th birthday, which was the day before.



Nineteen sixty-five saw the Rasmussen travel budget, both time and money, rather badly overspent, with a three-week jaunt to Lebanon, Jordan and Turkey in connection with the Middle East Medical Assembly. Catherine and I both found this a fascinating part of the world.

All six of us visited Scandinavia at the time of the Neurosurgical Congress, making the circle from Copenhagen to Stockholm to Oslo, and then by ferry from the southern tip of Norway back to Denmark and on through Denmark back to Copenhagen. The high point of the whole experience was our visit with the Kristiansens in Oslo and a three-day stay in their island-cottage, with young Kris as host and guide. Incidentally, this is the first time in my memory in which I did not have to spell my name a single time during three whole weeks!

The architect's drawings are finally completed for our little addition to the Neuropathology Department, to house our new electron microscopic unit, and also for the complete renovation of the basement which will give us a larger and more efficient EEG Department and office-suite for Dr. Brenda Milner's Psychology Department; it will also improve a number of hospital services. By the time you are reading this, I trust that construction will be well along.

We are grateful to Ted for the fine photograph. He indeed has had a travel-filled 1965.

Incidentally, our operatives tell us that Ted gave the Wilder Penfield Lecture at the Middle East Medical Assembly in Beirut, Lebanon and spoke in Jordan and Turkey at the invitation of former Montreal Neurological Institute Fellows.

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"In most places nowadays, risking life and limb with Fourth of July fireworks is illegal. You have to use an automobile."

"A farmer friend says if he fills his barn with grain he gets mice; if he leaves it empty he gets actors."

\*\*\*



Elva and Stuart Rowe  
March 24, 1966



Although it seems a long time ago, the Cincinnati meeting certainly deserves an initial comment. I thought it was a very well run affair, and our hosts and hostesses did themselves proud. We would like to extend our best thanks to all those who were responsible for its success. And, speaking of meetings, it was pleasant just recently to encounter four or five Academy members at the recent sectional meeting of The American College of Surgeons in Cleveland, together with our old friends in that city.

Clinical problems continue to rear their puzzling heads. Within the past month or two I have seen a patient with a left temporal lobectomy for long-standing seizures. The attacks have been considerably altered but not entirely relieved. At infrequent intervals she still has episodes of disturbance of consciousness, occasionally minor convulsive movements, but rather marked aphasia for a matter of some hours. The operative notes, in my memory, do not distinguish the procedure from others that have been more successful, but I wonder if reoperation with more radical excision medially is justified. Perhaps John Green, or someone else who has been interested in this field, could give me some idea of their experiences, if any, with reoperation. A more recent

*Elva steers 30,000 tons  
as easily as 25!*



*Neurosurgeon and wife on a trip through  
the Carribean with camera in hand.*

visit by a patient now about ten years post-temporal lobectomy for seizures, who has remained free for some years, reassured me a little.

Another unusual experience was in encountering a patient with attacks of sleep paralysis, which sound so typical that I hesitate to call them psychogenic; these followed a not too severe automobile accident with minor head trauma. As nearly as I can determine from my reading, the etiology of this condition remains obscure but, as in most other conditions where the cause is unknown, trauma has been mentioned as a possibility. Any comments on experience with this syndrome would be appreciated.

In February we had a vacation from neurosurgery and spent two weeks on a cruise in the Caribbean. Unfortunately, this was not carried out on our own vessel but on a slightly larger ship of the Hamburg-Atlantic Line, known as the S. S. Hanseatic. Like most tourists, I suppose, we thoroughly enjoyed the climate, the scenery, and, here and there, the bargains of such places as Jamaica, Curacao, Trinidad, and the Virgin Islands, but as a spot to live in found it highly satisfactory to return home to Pennsylvania.

I am enclosing a few pictures of various items, including the current three grandchildren. To paraphrase a remark of Dean Echols under one of his family pictures some years ago, the grandchildren keep getting older but Elva does not change at all.

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The Caribbean ship cruises have had their share of bad luck, what with fires and rescues. Fortunately Elva and Stuart have no such difficulty, and Elva even had an opportunity to steer the luxury liner. As Stuart has said, most of us have to take a vacation to appreciate our own fireside and what we are apt to take too much for granted.

Stuart's cases are of considerable interest.

We appreciate the photographs of the grandparents and the grandchildren.

*The grandchildren -  
two boys and a girl.*





Bob and Connie Fisher  
March 28, 1966



We have been very busy as you may know this past year. For about half of June and all of July and August, 1965, we were in Copenhagen, and I was doing some special work with Dr. Poul Astrup and Dr. John Riishede and the combined clinical chemistry and neurosurgical services. I enjoyed myself tremendously. I must admit that the responsibilities were not extensive, but on the other hand I did participate in everything that I wished to and am quite certain that I gained a great deal out of it and hope to further some research that I have been interested in for some time.

Quite frankly, the family had a wonderful time. The kids played soccer and lived in the countryside with the Danish kids. They attempted to speak their language and communicate -- they were quite successful after a while. Incidentally, they were far more successful than Connie and I were in this respect. We have the greatest of respect for Danish people and were delighted to spend as much time as we did in Denmark. We also managed to get around to see other countries in Europe and did visit other neurosurgical centers. We traveled by car all the time throughout Europe. This was done on long weekends. The only scrape that we really had was at the exit from the city of Berlin at Staacke when I came within an ace of getting in a physical brawl with a vopo who took our money after we had declared East German money on coming in to East Germany. He had my passport and that is the only reason why I finally backed off and acceded to his taking my few East German marks that I had.

The winter has been very hectic but extremely rewarding. We have had Ted Kurze here to do an angle tumor with a microscope, and this impressed all of us tremendously. We had the Neurosurgical Society here the next week, that is, the New England Neurosurgical Society Meeting. The following week we had Earl Walker here as a visiting professor of neurological surgery for a period of four days. This was a great light to all of us.

I am still trying to carry on some research and I have finally formulated plans and have been given space for the Neurosurgical Research Laboratory. Plans are already underway, and we have several projects which we are starting. These are going along well at the present time.

The position of Secretary-Treasurer of the Academy, I am finding out, is a demanding job. The assistant Secretary-Treasurer, Connie, has not squeaked as yet, but I suspect that she will in the future.

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A most interesting last summer. Those of you on the eastern seaboard find your way to the interesting spots of Europe far more readily than those of us on the Pacific Coast. Sounds as though your schedule is filled to overflowing.

We are happy, as you are, that Connie can help with the demanding position as Secretary-Treasurer of the Academy.

\*\*\*

"Prejudice: Weighing the facts with your thumb on the scales."

"Sophistication: The ability to do almost anything without feeling guilty."

"The Declaration of Independence is also noteworthy because thirty odd lawyers participated in drafting it without recourse to fine print."

\*\*\*



Jess and Mary Jo Herrmann  
March 31, 1966



Our work has been pretty much routine. I think all of us are probably more concerned about the training of the younger neurosurgeons and what effect the Great Society is going to have on future medical education than about our own problems.



*A favorite pastime*



I am sure, however, that other generations have had equally perplexing situations arise and progress has resulted whether for the good or bad.

-----

We are pleased with the new photographs of Mary Jo and Jess along with that picturing Jess's favorite pastime. It was pleasant indeed seeing Jess at the St. Louis meeting even if, as so often seems the case, it was momentarily. Perhaps the new group of neurosurgeons will have things much better in the "Great Bologna Society", but many of us are happy we are not starting out at this time.

\*\*\*

"Civic-mindedness may be defined as continuing to vote for new school houses after your kids have grown up."

\*

"Political campaign: A matter of mud, threats and smears."

\*

"A government that robs Peter to pay Paul can always depend on the support of Paul."



Jennie and Wes Gustafson  
April 7, 1966



Have now returned to practice and have been practicing for some time after having been on the receiving end of surgery. This changes one's outlook a bit concerning most things, but my recovery is back to normal with a few handicaps.

One interesting observation I have made in regard to therapy, being the only neurosurgeon here in the Valley, and the only one with neurological training, I have the opportunity of seeing a large number of cerebral thrombosis in varying degrees of severity. Following Lyle French's presentation and use of Dextran, I have started using Dextran on cerebral thrombosis cases, giving one unit daily for two days. There have been some rather spectacular improvement in these thrombotic patients and a reasonably high percentage of severe hemiplegias have improved during the administration of the Dextran. This improvement seemed to remain relatively permanent, likewise facilitating the diagnosis, particularly in the older age group, not necessitating further tests to rule out the possibility of neoplastic disease.

I have also used Dextran on a severe case of cerebral hypoxia, following induction of the anesthetic prior to surgery. The patient was extremely irrational and uncooperative on awakening from the anesthetic and almost appeared decerebrant. During the course of the administration of the Dextran the patient cleared relatively rapidly, with total clearing within 24 hours, enough so that the surgeon proceeded with his gastric resection some four days later.

I am planning to go to San Francisco and will see you there.

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We are all pleased that Gus has made such a fine recovery and happy as well to learn he will be at the Academy meeting

in San Francisco. It was nice getting a glimpse of him at the St. Louis meeting. His use of Dextran has apparently been rewarding and it will be interesting to all of us to learn the experience of others in this respect.

Gus has sent us a photograph taken at last year's meeting of the Southern Neurosurgical Meeting held in McAllen, Texas, of which he was vice-president. With him, of course, are Jess and Mary Herrmann. (See picture below.)

\*\*\*

Old timer: 1. A fellow who remembers when rockets were just part of a fireworks celebration. 2. One who can remember when callers rang the doorbell instead of blowing the horn. 3. One who can remember when there were no deductions in his pay until he got home. 4. One who remembers when a babysitter was called a mother. 5. One who remembers when a child had more brothers and sisters than fathers. 6. One who remembers when, if a woman told how many quarts and pints she had on the shelf, she meant canned fruit.

\*

In Russia they are telling a story of a man who, arriving in hell, was asked by the devil which section he wants to go to, Capitalist or Communist. "The Communist hell, of course," he replied. "I know the heating won't work."

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Henry and Kit Heyl  
April 7, 1966



My winter's occupation and even preoccupation has fallen pretty much under the general heading of Journal of Neurosurgery. It has taken the full time of three devoted associates and myself to get publication back on schedule. It has been a happy, satisfying, and enlightening experience.

It is a particular pleasure to be back in first hand communication with so many of my old friends and their current interests. It hasn't brought me back to the operating table physically, but spiritually I feel much closer to that irreplaceable source of joy and anguish.

Unless you have served on the Editorial Board of the Journal, you have no idea what a tremendous job it does. Three hundred fifty manuscripts a year pass through their hands and each member reads every paper. Their written comments are a never-ending source of stimulus to my own thinking; often, in fact, I am tempted to publish the comments instead of the paper. By a happy coincidence, all of the present Board are members of the Academy and I just can't thank them enough.

Bronson Ray, as Chairman of the Board in 1965, and Paul Bucy, as Publications Manager of the Journal, have guided me through the pitfalls of my first six months with infinite patience and wisdom. The Banta Company, printers of the Journal, have outdone themselves in responding to the unscheduled load of putting out two issues a month.

It is a good feeling to which many have contributed and I hope we can keep things going smoothly from now on.

I enclose a photograph of Dr. Cushing and myself that may interest some of you. It was taken in Dr. Cushing's New Haven office in 1936. At that time I was learning brain tumor pathology under Louise Eisenhardt and working up those of Dr. Cushing's old Brigham patients that were still coming to see him

for follow up. Later in the same year I started my neurosurgical residency under Bill German. It was an exciting and memorable segment of my life.

Kit and I were sorry to miss seeing all of you in Cincinnati but we are already looking forward to San Francisco.



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Henry has carried out an outstanding assignment in getting the Journal of Neurosurgery on schedule and improving its character in many ways. It was wonderful seeing him in St. Louis, and the pleasure will be increased seeing Henry and Kit in San Francisco with our exclusively fine group. It is interesting that all of the members of the Editorial Board of the Journal of Neurosurgery are members of the Academy. We are indebted to Henry for his photograph with Harvey Cushing.

\*\*\*

"Anyone who has time to look for a four leaf clover needs to find one."



Bill and Faith Feindel  
April 11, 1966



Sorry to have missed the Cincinnati meeting, but very much looking forward to the San Francisco gathering. After the Copenhagen Congress which Ted Rasmussen and I attended, things were fairly busy here in the fall. I have just finished off publication of a two-volume facsimile set of a tercentenary edition of Thomas Willis' Anatomy of the Brain, which came out in a Latin version in 1664, as you know. We have reproduced the 1681 English translation which is quite a vigorous and colorful version, with the original anatomical drawings of the brain done by Christopher Wren being reproduced from a fine edition which they have in the National Library of Medicine at Bethesda. The McGill University Press has done all this and I am sending along Dr. Willis' crest which appears on the title page of the book, garnished a bit more with red lions. It has been put out as a limited edition of two thousand sets, dedicated to Sherrington and Charles Symonds, with Dr. Penfield writing the foreword and Lloyd Stevenson, who now holds John Fulton's Chair of Medical History at Yale, contributing an essay on the problem of Latin-English medical translation in the seventeenth century. Howard Denham, who is Chief Cataloguer at the Wellcome Historical Medical Library in London, England, has done a scholarly bibliographic analysis of the various editions of the Cerebri Anatome, and I have written a section myself on the circumstances surrounding Willis' work and on the significance of some of his anatomical findings, particularly regarding the cerebral circulation. The original edition was dedicated to the Archbishop of Canterbury--a somewhat unusual feature for a medical book--and as I have mentioned Christopher Wren and Richard Lower, who carried out the first blood transfusion, did the drawings. The photograph shows our slightly smug satisfaction at having the whole thing completed when we had a "vernissage" in the new Osler Library at McGill and presented a copy for the Library to Dr. Penfield who is Honorary Osler Librarian. The two men to my left are Howard Denham and Robin Farr, Director of the McGill Press.

The first volume contains the modern letter press with



# 65-66



MCGILL UNIVERSITY BULLETIN 2

November

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Dr. Thomas Willis' family coat-of-arms is embodied in a woodcut engraved by Fritz Kredel for the Tercentenary Edition of *The Anatomy of the Brain and Nerves*, edited by DR. WILLIAM H. FEINDEL, published by the MCGILL UNIVERSITY PRESS. Further details on Page 18.



the three essays as I mentioned and Dr. Penfield's foreword. The second volume contains the facsimile. Both are printed on beautiful moulded Spanish paper which incorporates the family crest of Willis as a water mark. The portraits of some of Willis' circle of friends were reproduced by Enschede of Amsterdam, and the facsimile was done by Meriden Gravure who are well known as experts in this field. Willis described clinically and at autopsy patients who had carotid and vertebral thrombosis and argued very closely the important functional role of the circle and what he called "the fourfold fountain" of cervical arteries providing collateral circulation to the brain. This all sounds very modern now. I understand that McGill University Press are even considering selling a few of these two thousand copies if the occasion arises!

Now that the Willis project has been pretty well tidied up, we are pursuing at a little faster pace our analysis of some twenty cases where we have studied circulation during operation with radio-isotopes and Coomassie blue dye. This gives us a method of quantitative analysis of cortical blood flow. This work is being combined with anatomical studies on the cerebral blood vessels using a new x-ray projection microscope which gives a display of capillary-size vessels. This work is being carried on with Dr. Richard Saunders, at Dalhousie Medical School in Halifax.

In January Faith and I had a pleasant visit to Jamaica to take part in a symposium on microcirculation at the Medical School in Kingston. This school, which was started only in 1950, is impressive for its rapid expansion and the high standard of medical care, and the homes for members of the faculty are no less impressive, with a delightfully planned area set off by tropical gardens just off the campus.

From swimming in the tropics in January, I went to Regina, Saskatchewan, to a new university campus extension there, with the temperature having been a few days before at  $-40^{\circ}$ .

And finally, just as I got your letter, there was a most pleasant visit to Yale to give the Samuel Harvey Lecture in the History of Surgery, when I talked on "Dr. Thomas Willis and His Circle". This was a good opportunity to see Bill German and to spend a few moments in that elegant Cushing-Klebs-Fulton collection.

As those of you who will have heard Frank Turnbull at the Society meeting will appreciate, the Canadian provinces in the past ten years have taken on hospital insurance programs which provide hospital inpatient treatment out of taxation. Now, each province, although moving somewhat more slowly, is nevertheless accepting in one way or another a scheme which provides professional medical care. In some provinces this is universal, covering

all of the population; in others, it is so far related to welfare groups, this being the case in the province of Quebec. These legislative measures have made the past decade a busy time for those concerned with insuring excellence and progress in medical teaching and research generally, and a continuing dialogue with government departments of Health in particular. Since these things are still en courant, it is too early to get any valid overall picture. No doubt we shall adapt to these things as we have done to war, the atomic bomb, Earlybird, and northern winters.

I hope you will not mind me reminding everyone that the World Fair -- Expo '67 -- is being held in Montreal next year on the general theme of "Man and His Nature". There are some very intriguing theme exhibits and any of you who come through here next summer will be most welcome.

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What an interesting and rewarding work concerning Thomas Willis, and our appreciation for the fine photograph of the presentation of the copy to Doctor Penfield, Honorary Osler Librarian at McGill.

Socialized medicine appears to be here to stay. The changes it will provoke will be many.

\*\*\*

"Man's capacity for justice makes democracy possible, but man's inclination to injustice makes democracy necessary."

"The boy whose dad used to drop him off to school and then drive himself to work, now has a son who drops him off to work and then drives on to school."

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#### BILL and PHYLLIS BESWICK - April 12, 1966

As far as I am concerned, I think this has been a wonderful year as far as local experiences here in Buffalo and also some of the national meetings that I had the good fortune of attending.

First of all, the meeting held by the Congress of Neurosurgeons in Chicago was without a doubt a well planned and beautifully executed meeting. Of course, I would be prejudiced but I thought that the highlight of my particular experiences there was Wally Hamby's attack upon a congenital vascular malformation presented on captive television. This was especially worthwhile

for the young men who are well trained and just learning some of the difficulties of doing surgery under their own responsibility. They saw that even a surgeon like Wally can knock off silver clips and then just replace them without too much fuss, although once he did say in a very benign fashion that these little "so and so's" annoyed Dr. Harvey Cushing and intimated that he saw no reason then why he shouldn't be bothered by them occasionally. His demonstration also showed that the operation was well planned and some of the residents there had the opportunity to see good assisting by well trained residents and scrub nurse.

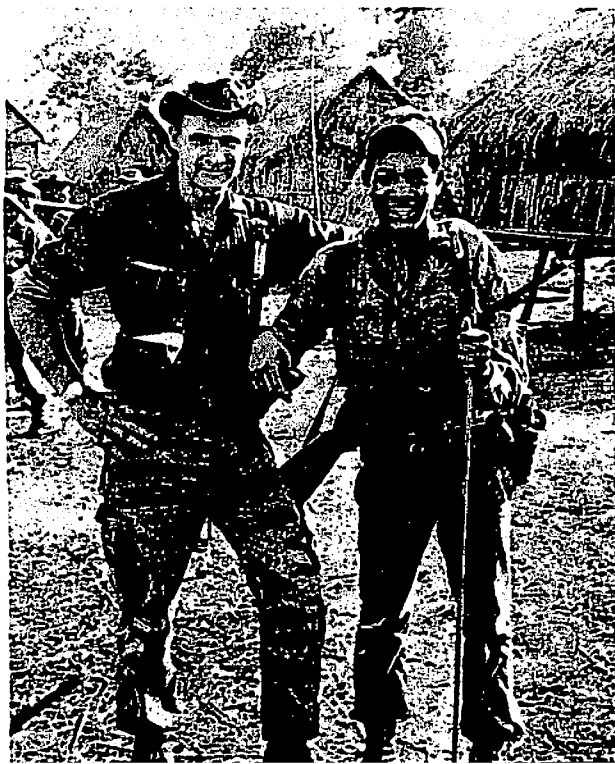
The sectional meeting in Cleveland was a bit disappointing in spots, particularly in reference to the handling of the problem of spondylosis. I do hope sometime in the near future that the Academy will take a crack at this subject. I should state that I am particularly concerned about the cervical spondylosis because I know the problems I encounter are not any different from those that you and the rest of the neurosurgical group face, and we have a fairly good supply of patients coming to our hospital with cervical spondylosis. I have followed the same type of posterior laminectomy done by neurosurgeons from Chicago and along the eastern trek, and I just feel that many of these people are not relieved by so-called decompressive laminectomy and cutting of the dentate ligament. I recall in 1954 watching Ted Rasmussen carry out this procedure, routine removing the laminae above and below the interspace the site of proliferative changes. He cut the dentate ligament and in our conversation I felt that he was a little bit unhappy about the results in cases of "hard mid-line" protrusions. He said he left the dura open and closed it on other occasions. I came back to Buffalo and carried out this same procedure and on occasion would do two and a half to three laminae removals above and below the offending ridge and most often left the dura open and frequently closing the incision with a "relaxing" fascial graft. In nineteen cases in this group, two were greatly relieved, but they were not individuals with long tract signs. These two had radicular discomfort with some hand or arm weakness or reflex alterations. The remaining seventeen patients I just could not follow because most of them refused to come back to see me because they were no better and many of them claimed that they were worse. All of these people had long tract signs. My neurologist on his own accord stopped referring similar patients to me and if I saw them initially, I told them that we had no surgical treatment available for them (unless they had the most minimal symptomatology).

Since we have been using the anterior approach and using interbody fusion, we have had a growing series of good results, but in the past year we have seen some very severely disabled patients with long tract signs and although many of them feel they are much improved, by neurological examination I can

find very little change in their spasticity, hyperreflexia and posterior column changes. Maybe I am too impatient. However, when I hear others talk about the badly disabled patients who are practically bed-ridden receiving treatment by the posterior approach and end up in good shape, I just can't understand this predicament. When transverse bars or ridges are demonstrated in the absence of neurological long tract signs, will we be using prophylactic decompression?

Now for our local and family news. My son is still in Special Forces and is back again in Viet Nam. He is doing a very good job and although we are very proud of him, we have cause to worry. Phyllis never misses a broadcast of news, no matter where it comes from. She seeks these releases over television, radio and newspapers. Valley has decided to become a medical secretary and is just about finishing a course preparing for this career. Phyllis is fine and we are all looking forward to attending the next meeting.

This morning I dropped some pictures off at our Photographic Department at the hospital and our chief photographer promised that she would make copies of the pictures that Bill sent home. I am going to enclose one of those where it shows Bill and his interpreter standing together after they liberated a Viet Nam village. You will see Bill looks pretty fit and one can see by the expression he wears, I am sure most of us will be much better off being his friend than his foe.



It would seem the problem of cervical spondylosis continues a frustrating one even though brave souls have continued attacking it with vigor.

We are appreciative of the photograph of Bill Jr. with his interpreter. Any of us who have read, "Outpost of Freedom", and have heard the song of the Green Beret cannot help being moved by the courage and ability of those in the Special Forces.

\*\*\*

"A long dispute means that both parties are wrong."  
--Voltaire

"Men do not stumble over mountains but over mole hills."  
--Confucius



Ben and Margaret Whitcomb  
April 12, 1966



A contribution to THE NEUROSURGEON gives me an opportunity to say that, although I have always had great admiration for you, after living through one year as secretary of the Cushing Society, anyone who finishes the job such as you have and has only one coronary occlusion to show for it is certainly a rock.

The present Liaison Committee of the Cushing Society, made up of delegates from the various neurosurgical societies in the United States, among its other duties, is attempting to clarify the aims of the various societies so that these organizations will not work at cross purposes, etc. The present avowed interests of the societies have been set down as follows:

The Senior Society is interested in overall education, particularly in the postgraduate field.

The Congress is interested in education of the younger neurosurgeons with particular reference to those prior to taking their Boards.

The Neurosurgical Society of America is interested in certain extra-territorial projects such as the "Ship Hope", etc.

However, the Academy's aims have not been set down. Whether or not we need any may be a question, but it would seem to me appropriate that the Academy undertake the lead in some of the practical problems in neurosurgery in this country. This could include such things as safety controls in automobiles regarding head injuries which has already had a good start by certain members of the Academy some years ago; head and spine injuries associated with athletic events; standarization of instrumentation and neurosurgical techniques for which we already have a committee; and the dissemination of newer but well-conceived techniques which may be developed from research laboratories into clinical practice. It seems, since we have leadership in these particular aspects of neurosurgery and already have started on many of them, perhaps this could be our contribution to the overall picture.

I am enclosing a few candid shots of some of the characters that make up our organization.

-----

The work as secretary of the Harvey Cushing Society, Inc. has increased by leaps and bounds, so that the stress can now be considerable, though greatly relieved by admirable personal secretaries. Ben has, as anticipated, had everything under remarkable control and with his youth and vigor should not experience anginal discomfort.

His thoughts concerning the Academy's aims referable to neurological surgery are important considerations, though it would appear that the Academy is presently running and directing this specialty in our country and the world.

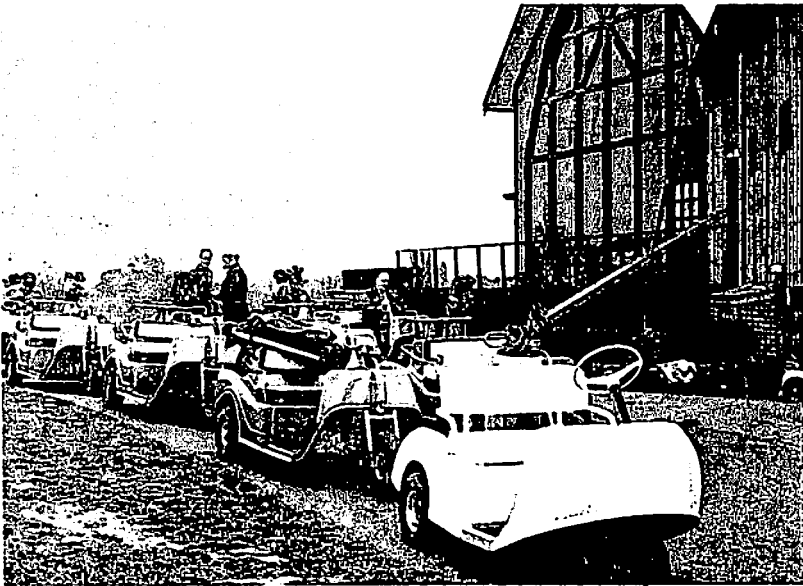
*Montreal Neurological Institute memoirs*





*New England ponder*

*The Academy golfers are aging*



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George and Sim Maltby  
April 13, 1966



First, the greatest news in our family is that I am a grandfather for the first time. I am sure this is old hat with many other members of the Academy and I am especially thinking of my former associate, Joe Evans. In any event, it is a great thrill for Sim and myself to have our first grandchild, Camilla Catlin, born 2-1/2 weeks ago in Boston and I must say that I found that I aged markedly in one day. As to the rest of my family and their commitments, my second daughter is finishing her second year of medical school at Tufts. She is going through the usual second year depression about being over-exposed to preclinical subjects as a result of having little contact with clinical activities. It seems to me that this is just another confirmation of the fact that the Western Reserve System and other systems which try to get clinical medicine into the early years along with the basic sciences is very important. In spite of her depression, I have hopes that she will stick with medicine and not decide that the concentrated basic sciences, which still is of the old school type at Tufts, is so boring that she has lost her interest. It seems to me that this reorganization of the medical school curriculum is terrifically important. I understand that Dr. Ebert at Harvard, Johns Hopkins, B. U., Western Reserve and elsewhere have realized this and are doing something very active to adjust the medical school curriculum from what we used to know it to be in the old days. My third daughter, Susie, has spent the last year in Europe; several months in France and several months in Germany in an effort to polish her already rather competent linguistic ability. I hope that she will return and finish her fourth year at the University of Maine and get her degree, but I am sure that all of you know the many foibles of the female in college. Michael is graduating from Milton this spring and where he will land in college is still a mystery to me. I am writing this before the 15th of April which is apparently D-day with the various college admissions people.

Our regional New England Neurosurgical Society certainly is serving an important purpose in the overall neurosurgical field. I am sure that others have found regional neurosurgical

societies a valuable adjunct to the local evaluation and further education of practicing neurosurgeons. We had a recent meeting in Hanover in Bob Fisher's excellent setup which was fascinating and extremely interesting. He presented an interesting and thorough follow-up study of over 100 patients with anterior fusions. I realize this is a small group but I think Bob Fisher studied them very thoroughly and had some very interesting comments to make. It seems to me that there is no question that the so-called anterior fusion or the Cloward approach, or whatever technique one uses to do osteophytic decompressions and disc procedures by the anterior approach, is here to stay and is a great addition to our total armamentarium in neurosurgery.

Another interesting experience that I have had during the past year was to have been invited to the meeting of the Neurosurgical Society of America held in New Orleans several weeks ago. This invitation was tendered because of my membership as a representative of the Academy on the Ad Hoc Liaison Committee of the Cushing Society which met following this meeting. I was terribly impressed by the caliber, both scientific and social, of this meeting in New Orleans. This is an extremely vital group with many young active men in both clinical and basic neurosurgical work. As I have mentioned in letters to others of my friends in the Academy, it makes me feel strongly that we must make every effort to bring into the Academy young, vital, and active neurosurgeons throughout the country and be doubly sure that our programs continue in the high standard that they have in the past. I thought their meeting was well balanced between basic and clinical problems, and I certainly feel that it is important that discussion of overall clinical problems not be pushed into the background inasmuch as there are now so many young neurosurgeons practicing more or less on their own away from academic centers.

Another great experience I have had over the past year was serving as a representative of the Academy on the Ad Hoc Liaison Committee of the Harvey Cushing Society and working with the Cushing Society in their plans for basic changes in their by-laws and reorganization of their Board of Directors. I feel that neurosurgery has taken a great step forward in doing this; that is, deciding that neurosurgery and neurosurgeons as a whole throughout the country should be represented in their relationship with other medical, surgical, and government activities and agencies through one mouthpiece or representative which should certainly be the Cushing Society. I also think it is equally important, if not more so, that each society be represented within the Cushing. Ed Boldrey has been chairman of this committee and has done an outstanding job in organizing the three or four meetings that we have had. I think very few neurosurgeons, and especially those practicing neurosurgery throughout the country,

should be represented in their relationship with other medical, surgical, and government activities and agencies through one mouthpiece or representative which should certainly be the Cushing Society. I also think it is equally important, if not more so, that each society be represented within the Cushing. Ed Boldrey has been chairman of this committee and has done an outstanding job in organizing the three or four meetings that we have had. I think very few neurosurgeons, and especially those practicing neurosurgery throughout the country, have any realization what these men on these various committees are doing to advance the image of neurosurgery in this country and its relationship to the rest of the medical profession. It is really a task of protecting neurosurgeons in the many problems that may come up in their practice, especially in the relationship with other disciplines and with government agencies. Serving on this committee has been a great honor and a great privilege, and I hope that I have been able to contribute a modicum of help to its deliberations.

I am looking forward to seeing many of the Academy members at the Cushing meeting, and one thing that continues to amaze me throughout all the meetings of the various committees is how many of the Academy members are leaders in other societies and on many important committees. This is a great satisfaction and makes me feel more and more humble about being president of such an outstanding organization as the American Academy of Neurological Surgery.

Sim and I send our best to all the members of the Academy and their wives. We are looking forward to a great meeting in San Francisco this fall. I think we are fortunate to be following the College because many members who are going to the College will, I hope, stay over for the Academy meeting--or probably I should put it in the reverse, that many members going to the Academy may come early for the College of Surgeons meeting. I have received great early reports from Ed Boldrey, Ed Morrissey and other members of the Local Arrangements Committee as to the many fascinating things that will go on in San Francisco while we are there. I do feel very strongly that at the next meeting in San Francisco the Academy should discuss thoroughly its role in the overall neurosurgical organizations in this country. Each of the other societies when they came to the Ad Hoc meeting with Ed Boldrey had various areas staked out as their province, and both Ed Morrissey and I were a little bit embarrassed by not being able to say what was the primary interest of the Academy. I think this should be considered for discussion, both at the executive sessions in San Francisco as well as at the open session of the Academy.

Again, let me say how honored I am to be President of

the Academy this year. See you in San Francisco.

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A most interesting letter from our President, who has joined the "grandfather's club".

Our next meeting in San Francisco at the beautiful Fairmont Hotel should be another highlight for the Academy. There are few cities to surpass its charm, and again we will be with our old and cherished friends.

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"San Francisco has only one drawback--'tis hard to leave. "

-- Rudyard Kipling

"The gayest, lightest hearted, and pleasure-loving city of the Western Continent. "

-- Will Irwin

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*Wintertime  
in  
Maine*





Dorothy and Howard Brown  
April 13, 1966



We are all looking forward to the Academy meeting in San Francisco this Fall and it is hard to believe that this happy event will be here in such a short time.

We will do our best to see that everyone has an enjoyable time though I'm sure we are going to find it difficult to keep up with the high standard set up in Cincinnati last year. I'm sure that we all agree that this was one of the most enjoyable meetings that we have ever attended.

We are presently in a new office location at 2000 Van Ness Avenue in San Francisco. Our recent move was necessitated by the removal of our building to make way for the new Franklin Hospital which is rising at a fairly rapid rate. We are all most pleased that in the future we will have a new and modern hospital which we hope will be an active neurosurgical center.

Recently we had the pleasure of attending the Pacific Coast Surgical Meeting in Palm Springs and were delighted to see our editor of the "Neurosurgeon" with whom we enjoyed some very pleasant social activities. I must report that he looks very well and has made a quick come-back from his recent indisposition.

At this moment, we're about to take off for Atlanta and St. Louis where we hope to see many of our Academy friends.

As you know, the Harvey Cushing Society is planning some rather extensive changes which have been suggested in the past and crystalized by Frank Mayfield and Francis Murphy. Francis asked that some of the past presidents join him in a discussion at the meeting in St. Louis to help with this rather formidable job of reorganization which is being undertaken.

We hope you will all be here in October.

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It was such a pleasure seeing Dorothy and Howard Brown, John and Lorene Raaf, and John French in Palm Springs at the meeting of the Pacific Coast Surgical Association. The old Riviera Hotel has been taken over by the Holiday Inn, and that together with a Coca Cola convention and much of the help falling by the way-side because of an influenza epidemic, left service and other things to be desired. Your correspondent was pleased and honored that a surgical organization made him Vice-President.

We are indeed looking forward to the Academy meeting at the beautiful Fairmont Hotel in San Francisco. This should be one of the highlights in our history.

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London has its palace guards; we have our spectacles, too. Visit the White House. See the colorful changing of the pickets.

In New York Daily News story about a belly dancer marrying British royalty: "Former Navel person is now her Ladyship."

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Jim and Mary Greenwood  
April 13, 1966



Mary and I are looking forward to the meeting in San Francisco and to seeing all of you. Since our children are now grown up, Mary has more time to attend meetings with me, and the Academy is always her favorite meeting and is now being held in the city she likes most to visit.

Nancy and Andy, our youngest children, accompanied us to Europe in July and we had a wonderful time driving over a considerable portion of the continent. The highlight of our trip, however, was the wonderful hospitality in Edinburgh, with Norman Dott, the John Gillinghams, and the Phillip HARRISES. I was also much impressed by the work of Krayenbuhl and his associates in Zurich. The International Congress at Copenhagen was exceedingly worthwhile and we were delighted to see many of our friends there. Seven of our former residents were present, in addition

to members of the Houston group, and it is gratifying to see that some of our ex-residents are writing and beginning to make contributions to neurological surgery. Our first Ex-residents' Dinner was held at the Terminus Hotel and was a small affair which I will remember for many years.

We have had a number of distinguished visitors in Houston since the first of the year, including Dr. James Kernohan, Earl Walker, Charlie Drake, Charlie Brackett, and Leo Davidoff.

Within a few days now our new operating rooms for neurosurgery will open and in these we will have, we hope, a very workable set-up for surgical research, particularly pointing toward stereotaxic work in monitoring of many factors. We now have a fairly respectable series of cortical and cerebral resections for epilepsy, carried out with Peter Kellaway and others, which I hope to have ready for publication within the next year.

Mary Grace was married on February 26 to Dr. John Knolle who will be my first and probably only son-physician. Harris, our third son, is in his last year at law school. He is happily on the Dean's list and one of the editors of the Law Review. Marriage to Donna and the arrival of a delightful little girl, who is now beginning to walk, has done something to Harris and to all of us.

I have just returned from the Southern Neurosurgical meeting in Charleston, South Carolina, and was delighted that Nancy could come down from Converse and visit with me for a few hours. She is a senior and should graduate this June. Andy is a junior at Texas. It is hard to realize that our six babies will shortly be through with college.

I continue to feel strongly, and evidence indicates, that large vitamin C intake is beneficial to the preservation of discs, ligaments, joints, blood vessels, etc. It should probably be used as a food additive after cooking rather than as a medicine.

Thousands of years ago, man was chiefly a vegetarian. His intelligence led to the discovery of fire and cooking, weapons and tasty vitamin C free meat, agriculture, and storage of foods, all of which reduced his total vitamin C intake. Optimum values of vitamin C are much greater than the minimal values which result in lethal scurvy.

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Jim has written another of his interesting letters. It is always so pleasant to learn something of the children of our members.

Vitamin C intake may well be beneficial for the preservation of discs. There's little doubt there is much to be learned about diet and its influence on many of our structures.

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By the time a man realizes that his father was right, he usually has a son who thinks he's wrong.

A wise man puts aside 10 per cent of the money he gets-- and 90 per cent of the free advice.

\*\*\*



Aidan and Mary Raney  
April 15, 1966



I am a little tardy and perhaps too late for the current issue of the NEUROSURGEON. I delayed until I could get a picture of our family together. In the enclosed picture, on the left is Michele, age 14. She had the flu but agreed to get out of bed long enough for the picture-taking. She is a freshman at Immaculate Heart High School. Daniel is seven months old. Nancy, age 8, is in the second grade. Kathleen, age 19, and Aidan, age 18, are at Santa Clara. Kathleen is in her sophomore year and Aidan in his freshman year. Brendan, age 13, is in the eighth grade and will be entering Loyola High School next year. Neither he nor Daniel have announced their plans for a career. Aidan plans to study medicine. I don't know about the girls, but I suppose they plan to do whatever girls do when they grow up.

On the professional side, there is not much news. There is, of course, anticipation of the problems that Federal Medicare will bring. We are already noticing changes as a consequence of our State Medicare, which has recently become effective. Some of the County Hospital Services are running about 40 per cent fewer patients than last year. It appears that these patients, through State Medicare, are now entering the private hospitals. Several private hospitals that ran 70 to 80 per cent occupancy are now running full capacity. This is a difficult situation for the utilization committees, because the increase in occupancy is not due to





*The Aidan Ramey family*

patients' remaining in the hospital longer than is necessary from a medical standpoint. These changes are, of course, what everyone expected.

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What a delightful photograph of a fine family. Aidan's comments about the effects of socialized medicine add to the interest of other comments concerning such change.

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Modesty is becoming to the great. What is difficult is to be modest when one is a nobody.

A man who is pulling his own weight never has any left over to throw around.

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Bill and Helene Scoville  
April 18, 1966



I am happy to write after a long lag. There is much news in the Scoville family. Medically, I have just returned from an exciting trip to Verona, Italy, where, inspired by Sean Mullen, I attempted a transoral removal of a chordoma in a beautiful 17 year old girl who could dance and ski but could neither speak nor swallow. The tumor protruded into the posterior pharynx and had destroyed the dens. Previous transcervical attack, a la Stevenson and Adams, had been performed the year before in France. I had blithely telegraphed that Sean's approach, by which I had been intrigued since 1950, for platybasia, was a "simple, easy and fast approach". The operation took 14 hours and they are still laughing over "Scoville's simple approach". I learned many things, especially postoperative things, and more especially that of more or less continuous irrigations with 5% glucose in water administered by the patient herself, which proved a godsend, and I am sure was the most comforting treatment of all during the first few days of enormous edema. I used a plastic tube for feeding through the mouth but I am told that the latest improvement is transcervical

insertion of the tube into the oesophagus at the time of the prophylactic tracheotomy. Instruments should include a modification of Cloward's anterior cervical retractors in preference to a Gelpi. I ended with Tevdec silicone coated plastic sutures because of my abhorrence of catgut and can testify they cause no reaction and can be left in permanently because of the rapid overgrowth of mucous membrane although I removed most of it.

The parents of this girl had a ski house in Cortina and took my son Barrett, a research hematologist at Hopital St. Louis, Paris, and myself for one week's skiing which was probably the Great Adventure of my life. There were cable cars going in three directions to 10,000 feet altitude and a new descent each run; we were skiing stripped to the waist in hot sun. The runs were as steep as Stowe's National but the combination of snow and 6'5" fiberglass skis convinced me that I was a better skier than I am. Barrett and I both improved 97% in one week with instructors. We had lunches in summit restaurants with wine, cheese, spaghetti, and frozen strawberries.

En route home I did a cervical disc in Bermuda in the hopes of building up a vacation practice.

My greatest operation was the birth of a baby girl one week ago by cesarean which gave me considerable trouble as the obstetrician kept getting in the way. Hélène came home on the 2nd day and I brought the baby home in a basket on the 4th day. Her name is Sophie -- she looks reasonably normal and not too homely.

*Helene and Billy Jr. in greenhouse designed by Bill in which Helene does all the work.*



What a fabulous letter. Who but Bill could do all of these things. Congratulations and best wishes to all. We're happy Sophie has joined the Academy.

Bill has been responsible for the very enjoyable Bulletin of the World Federation of Neurosurgical Societies of which he is Editor. Ponce de Leon should have had a little chat with Bill. It would have saved him a trip to Florida and he would have learned more about perpetual youth.

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Liberal: 1. A man who is willing to spend somebody else's money; 2. A man with his mind open at both ends; 3. One who has both feet firmly planted in the air.

Husband, watching TV, to wife: "Talk about old movies! In this picture Elizabeth Taylor likes horses!"

Man (to small son of workman who has met with an accident): "When will dad be fit to work again?"

Boy: "Can't say for certain, but it will be a long time."

Man: "What makes you think that?"

Boy: "Cause compensation's set in."

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#### BILL and GWEN COLLINS - May 2, 1966

It is always enjoyable to read "The Neurosurgeon", and I apologize for not contributing last year. I wish it were the only thing I did not get done last year. The past two years have been vigorous ones in Richmond with a few accomplishments and many uncompleted projects. Most of it has been fun, particularly when you look back on it.

Much of my time is involved in the details of running the neurosurgical service. Summarizing three of the projects which have been instituted at the Medical College of Virginia during the past year might be a good topic for this letter. As I wrote before, we have a large active clinical service, and because of the way the hospital has grown, it is spread among three hospitals, all geographically close but still distributed over three city blocks. Since my arrival here, I have been struggling with the administration to consolidate this service. Fortunately, during the past year, I have been able to get construction funds and hospital space so that the neurosurgical service can be almost entirely in one patient area. This should give a tremendous increase in efficiency since the area will include our intensive area, a semi-intensive care

area, and a usual nursing unit. It is hoped that everything will be completed by the end of this year.

One of my pet contentions has been that the care of the neurosurgical patients, both pre- and post-operative, is equally as important as the surgery that is done on them. It has been my experience that despite frequent supervision, residents are usually not well versed in what consists of good neurosurgical nursing. I feel that when they leave the residency, they will not find people who are capable of knowing how to give excellent neurosurgical patient care, and therefore, as a neurosurgeon, they will have to teach neurosurgical nursing techniques to the personnel within any hospital they work. I am also convinced, partly from my own experience, that one learns more by teaching than by being taught. A portion of the residency program now consists of having the residents teach a continuing course in nursing education to the nurses who are, or will be assigned to our nursing area. Such a teaching session is of no value unless it is supervised just as with any other residency training exercise. Therefore, a member of the attending staff attends most or all of the lectures. The lectures consist of a fifteen minute period given two to three times a week, usually between the day and evening shift hours, and the subjects vary anywhere from anatomy of the nervous system to how to place pillows on a Foster frame.

A second area which has become deficient in most neurosurgical training programs, and particularly in this hospital, is the lack of some neurosurgical operations which used to be quite frequent in teaching centers. This, of course, relates to the number of neurosurgeons in the surrounding community. The surgical approaches which are most deficient in numbers for the residents are posterior fossa, cerebellar pontine angle, intraventricular, and middle fossa procedures. When the resident does such a case, I have felt that they have not gained the maximum educational experience from it since they do not have enough familiarity with normal surgical anatomy of the area. For this reason, I have set up an operating area in the morgue with table, instruments, and head holder so that the above operations can be done many times before and after operating room experience. Fortunately, the department of pathology has been most cooperative in contributing space, and with the supervision of the attending staff, the delay in the autopsy has been minimal. I have found it has helped the residents and myself, not only in gaining experience in the areas described above, but also in determining relationship of structures which ordinarily one does not approach during the usual surgical operation. A further dividend has been that since the operating room in the morgue is set up and running, and since help is available for anyone who wishes to do experimental procedures, it is quite simple to use it to develop new approaches for neurosurgical procedures.

I am certain that neither of these procedures will make an excellent neurosurgeon, but I feel that we are already beginning to see some benefit from them. It is particularly true in nursing care since the residents after formulating their own ideas concerning neurosurgical care in their lectures, are much more aware of breaks in neurosurgical nursing techniques. I think there is also evidence that the learning experience of the residents has increased in the operating room, and I hope that both of these will reflect in better patient care and better trained residents.

My best to you and all the members. I am looking forward to our meeting in the fall and, of course, the next issue of "The Neurosurgeon".

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The problems of running a neurosurgical service and training center obviously require consideration, much planning, and patience. So many of our members are similarly concerned, that Bill's letter will be of particular interest.

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Charles and Ruth Drake  
May 2, 1966



I am enclosing a new photo of the family that arrived as my birthday present.

It is somewhat startling for me to realize that John, 19, is in pre-medical school. Jim, Stephen and Tommy have also staked out claims on medical careers.

Although this is not neurosurgical, it is a problem about which I would appreciate comments from the members. It relates to the question as to whether or not a boy should attend medical school at home. John has been away at Ridley, a prep school, and Ruth is rather keen that he finish his university training here. She is all for his best interests but feels that his education could be received equally well here and at the same time he would be around the house for an extra few years. I have had the feeling that it



*The Drake family*

would be best for him to mature in another centre although I would hate to lose him. We have considered also the compromise that he complete his 2 or 3 years of premedical education here and then apply to another medical school. I am sure many have considered this question and I would be interested to hear their views.

I am sure we were all overwhelmed with the Cincinnati hospitality. It was fascinating to enjoy and realize the significance of a mighty river in the middle of a continent. Once again I would like to mention the warmth of the hospitality and the kindness extended to the residents by the hosts and members. It is a memorable occasion for them, and Graham Venderlinden and his wife are still talking about it.

The Academy meeting is always the highlight of the year. Ruth is anticipating the trip to San Francisco and I am determined

to get some time on the Rogue river. This shouldn't be difficult if we take the plane.

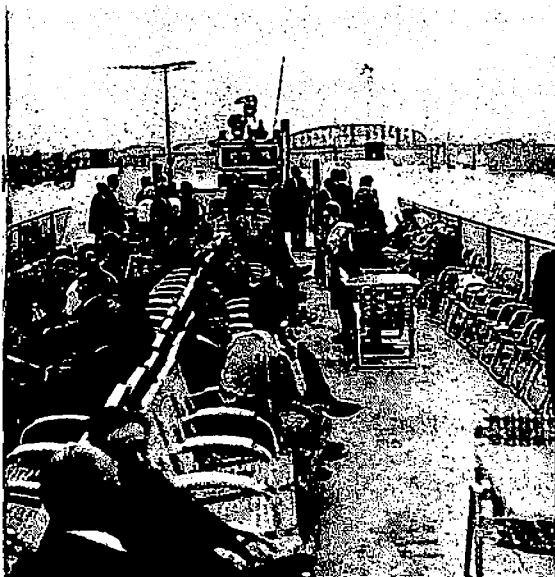
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We appreciate the fine photograph of the family. What a wonderful group of boys and how deservedly proud both of you must be. The problem of schooling has many aspects for consideration, and I'm confident you'll hear many diverse points of view. Why not let John receive his Bachelor's degree at home and then send him off to some other medical school if he still is convinced such remains a desirable career?

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"Very few women have skeletons in their closet, there is not enough room."

"All that keeps some families from having a home of their own is a popular teenage daughter."



*The river boat*

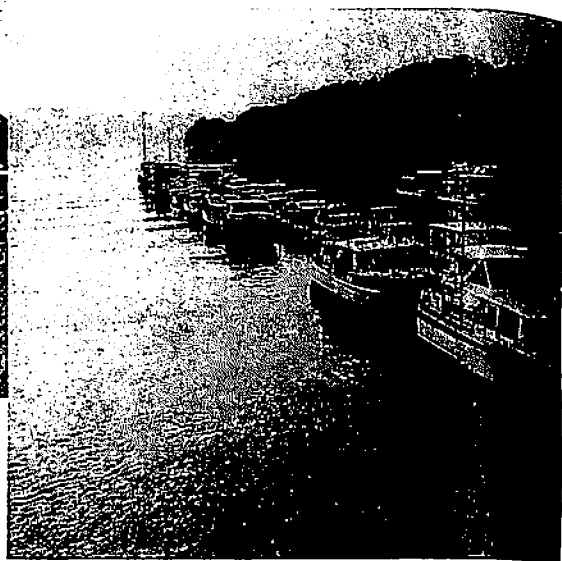
*A friendly gathering*





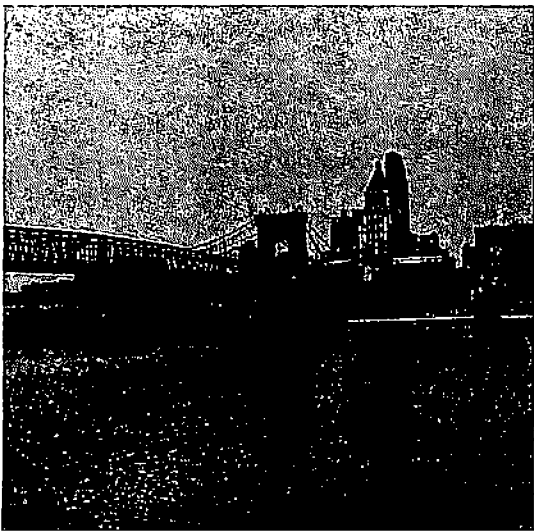


*Covington fishermen*



*Boats of Queen City Yacht Club*

*From Covington*



*Kate*



George and Velaire Ehni  
May 3, 1966

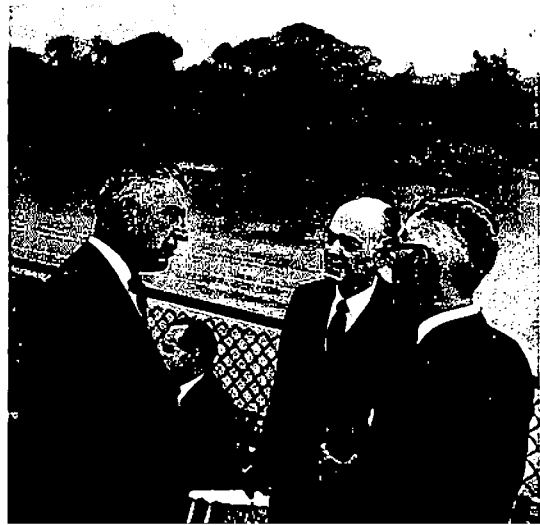


Larry and I looked forward with especial pleasure to the meeting in Cincinnati because it was to that city we went immediately after our marriage. During my internship at the Cincinnati General Hospital, the respect I developed for Joe Evans and Charles Aring firmed into resolve what, on graduation from medical school, had only been a yearning to become a neurological surgeon. I was kept so busy at the hospital during that year of 1939-40 and our exchequer was so depleted that we got to know relatively little of the beauty of Cincinnati. Not until last year's meeting had I ever walked across the Ohio bridge built by Roebling who later used its design in the Brooklyn bridge. As you see in the photographs, I walked to Covington and photographed the bridge and Cincinnati from the opposite shore. Upriver away I encountered some fishermen who were particularly pleased with their catch that day and also, with a photograph of themselves I subsequently sent them. The river trip arranged by our Cincinnati hosts was a constant delight as the boat made its way upriver to the Queen City Yacht Club as afternoon became twilight, and then downriver many miles past Cincinnati as the last of the sky's natural light gave way to the river's evening haze and the lights of man on either bank.

*Members boarding river boat*



*A nice discussion*



I wonder if, instead of commenting upon an interesting personal case or two, I may voice some thoughts concerning the recent publicity attending and public interest shown in automobile design and injuries sustained in vehicle accidents. Neurosurgeons, among others, have had their attention attracted by the occurrence of over two million head injuries in car accidents yearly and realize that a problem exists which demands solution.

Reportedly, the head and brain are being injured in about three-quarters of the cases which are occurring in the United States at the rate of between 50 and 60 thousand injuries and deaths weekly. Presumably, driver competence cannot be improved sufficiently to have any significant effect on these figures. Claims have been made that radical (and probably expensive) change in automobile design could reduce casualties by 50%, or more, not by preventing accidents, but by enclosing the driving population at risk in automobiles which will be easier on the occupants when they have their inevitable accidents.

Over the years as I have tried to understand injury of the head in terms of its physical properties and mechanics, I have come to believe that every lesion produced by trauma (and also the sometimes seemingly conflicting reports on experimental trauma) can be explained by a searching consideration of the physical forces and conditions existing. Also, it seems to me we already possess the know-how and the means to reduce significant intravehicular trauma to the head and fatality by over 50% -- and at relatively small cost.

The brain is hurt and lesions are made in it when work is done on it differentially so as to cause physical separation of some of its constituent particles. It suffers no harm from work done on it uniformly as when it is moved linearly from A to B, even at great speed. It is not harmed by great pressure if this be uniform throughout it and its ramifications, or if non-uniform pressure variation occurs so briefly that inertia of the brain forbids physical separation of its particles. When work is done differentially so as to move a cell or an aggregate to a new position while the rest remain in their old relationships, a lesion results. The potent producers of differential work are penetrations, and the blows to the brain stem and the temporal and frontal lobes by internal skull irregularities set in motion relative to the inertia bound brain when the head is rotationally accelerated or decelerated.

The total energy available to do work on the brain is proportional to the mass of the head in motion times the square of its impact velocity, but this total energy is never yielded to the brain for there are always expenditures in the soft tissues and skull as well as that which may be yielded to the object struck.

The time during which energy is transferred to or from the head, the size of the traumatic contact (which influences the pressure on the investments at the site of blow), the state of head mobility, and the direction of the blow and the site of its receipt are important factors which determine how the energy deriving from mass and velocity will do differential work upon and injure the brain. The time of energy transfer to or from the unprotected head colliding with an unyielding object is a reciprocal of velocity. Short time means high acceleration or deceleration. In a fall to pavement, energy is spent in certain parts of the brain in a few milliseconds and fatal injury may result, but a fall at identical velocity to a hay stack or trampoline is pure fun because the head decelerates at a slow enough rate so the brain's inertia doesn't require an injurious amount of differential work to get all its particles stopped and then moving in the new direction. Time may be lengthened by interposing deformable and yielding material between the head and what it strikes. Undesirable though projecting knobs and surface irregularities of an unyielding nature on an automobile dash may be, these have a certain protective value for deep parts of the brain vulnerable to indirect, contrecoup, or rotational acceleration-deceleration injury, because time is lengthened and energy is dissipated when soft tissues are lacerated, bone is broken and a penetrating object makes frictional contact with bone edges. Such a head comes to a slower stop and rebounds less violently with less indirect injury to the frontal and temporal lobes and the brain stem.

Just as driver performance is incapable of much improvement, so mass and velocity are incapable of being favorably modified. Heads are going to keep their present mass and cars are going to cause heads to travel ever faster rather than slower. Body harness and more clever car construction may limit collisions of heads with rebounding vehicle structures and may lengthen the time of energy transfer to or from the head a bit, but one wonders whether the roof and body members, the dash, and the parts that must necessarily be transparent can ever be made sufficiently limber and yielding to obviate injury yet retaining the strength and rigidity requisite for performance of their primary functions in the vehicle.

Competition drivers, construction workers and all but fool-hardy motorcyclists accept the fact that their heads may be projected into violent contact with some unyielding object or vice-versa. They accept and wear protective headgear of one sort or another designed to meet the special requirements of the anticipated traumatic situation. Occupants of automobiles, accustomed to seeing their vehicles move with them at the same speed they are moving, do not realize that when their vehicle strikes something, it will already be at rest or even moving back toward them at the

same time they are moving forward at the pre-collision velocity, and that their heads may strike some part of the vehicle with a velocity greater, and with a time of energy transfer shorter, than would be the case if they were riding an unenclosed vehicle, striking a tree or wall.

A currently available, effective, relatively inexpensive and quite direct tactic to lengthen the time of energy transfer to or from the head, and so minimize the indirect lesions produced by rotational acceleration or deceleration, and to broaden the area of blow to limit or to obviate direct or penetration trauma, is use of a well designed piece of headgear, highly resistant to deformation and penetration on its outer surface with a properly yielding, time expanding substance next to the head.

Such headgear as is currently available will prevent penetrating and indirect, contrecoup or closed brain injury in 60 mile an hour collisions. Headgear embodying these features could, no doubt, be styled to make it acceptable and even chic. What is needed is effective education concerning the inevitability of a collision of the head with some part of the vehicle and popularization of the effective protective device. I suggest that to accomplish this worthy objective, an organization of neurological surgeons--the Academy perhaps--should get together with Madison Avenue and arbiters of men's and women's fashions.

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We are indebted to George for his fine photographs of the Cincinnati meeting and of the bridges.

The problem of automobile accidents which so invariably include the neurological surgeon, has been foremost in the minds of many. Hunt Sheldon has carried the torch for reforms of many kinds for some time. It is something that must be attacked from various angles. Certainly the wearing of an attractive helmet headgear is one of many important necessities, and yet it is amazing how difficult it is to get people to consider something of that kind. It took a long time and the serious injury of Mickey Cochrane, the great big-league catcher, to get baseball players to wear protective headgear while batting.

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"One traffic hazard the experts can't eliminate is the attractive pedestrian in shorts."

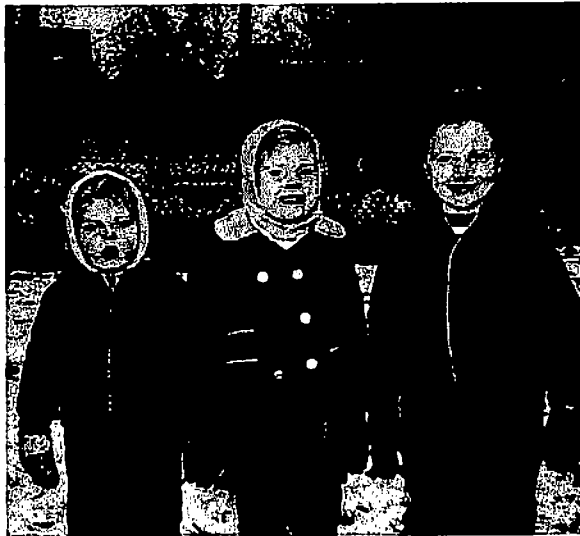
"Women drivers are about as good as men--and not the least bit ashamed about it."



John and Vivian Mullan  
May 9, 1966



With pleasant memories of Frank Mayfield's river boat, Ed Morrissey's presidential review, and the McLaurin flair for hospitality still strongly with us, we have just begun to think of San Francisco. We plan to take Joan Clare (5), John (4) and Brian (3) with us and we may go by train in order to convince John that places like San Francisco and New York are not, in fact, on other planets to be arrived at only by "blasting off" from O'Hare.



*The children*

It has been a busy year, over-burdened perhaps by pain problems--but this has been a useful experience and certainly enough to convince one of the limitations of being a one symptom specialist. Our interest in the stereotactic thrombosis of aneurysms continues but it will be some time before its exact role in the neurosurgical armamentarium can be determined.

Joe Evans' role in running the recent head injury conference took him off the clinical service more than either of us desired and we were glad to welcome him back until we learned that further Washington commitments would again keep him close to his desk. However, he has assured us that nothing will keep him from San Francisco in October.

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What delightfully attractive children. Even now a trip West to one of our country's most beautiful and celebrated cities on a train such as the Domeliner City of San Francisco should be a most pleasant occasion, and I'm sure the Mullans will have a joyous change from their demanding routine in Chicago.

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*Frank and Letitia*

*More fun*

*Kate and Dean*





Alice and Bill Meacham  
May 17, 1966

Your recent letter of "sympathy" regarding my new job as treasurer of the Harvey Cushing Society was appreciated. I am just now finding out how much work is entailed in the affairs of an organization of that size--something that you can well appreciate.

Except for the routine matters concerning neurosurgery, I have nothing exciting to report. We have our complement of residents for next year and I am always pleased to note more and more medical students and interns express an interest in things neurological fairly early in their career. To me, this means a healthy future for our discipline which still harbors a great challenge to the young and curious as well as to the mature and experienced person.

On more personal grounds, the Meacham family has a decided international flavor this year. Our oldest son, Bill, a junior at Tulane, has decided to major in foreign languages in preparation for a possible career in the diplomatic corps, and is spending this year at the Sorbonne taking French, Russian, Spanish, Old English and bistro. In addition, we have taken a foreign exchange student into our home for a year. This is a young (19 years) boy from Geneva who is taking his senior year in high school here and learning, in general, about the American "way of life". He is fluent in French, German, and Italian, in addition to English which he handles very well and has now learned the idiomatic speech with a distinct southern flavor.

All in all, this year is a very full and busy one for me since I am also the current president of the Nashville Academy of Medicine, our local society, and with the problems of Medicare and the heart disease, cancer and stroke program, the administrative problems are very demanding.

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An interesting and informative letter. It is unusual for



the American student to be adept in foreign languages, but what an opportunity this affords for a career in the diplomatic corps, and for that matter in international affairs generally.

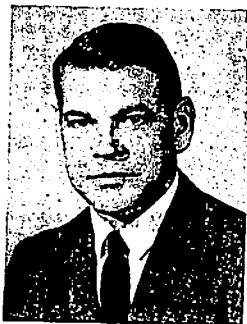
Bill has a responsible and demanding position as treasurer of the large Harvey Cushing Society

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"What usually makes them the good old days is a rich imagination and a poor memory."

"There will always be a demand for unskilled labor - as long as husbands are home on Saturdays."

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David and Marjorie Reynolds  
May 17, 1966



I am afraid my activities since my last letter have not been of great interest to neurosurgeons in general although they have been of some importance to those of us who are involved in the regional programs.

In our state the total number of neurosurgeons is expanding very rapidly. From a total of 17 that were present when I arrived in Florida in 1957 there was at the last listing of The Congress of Neurological Surgeons 47 neurosurgeons. Since the publication five additional neurosurgeons have moved into the area.

This rapid growth of neurosurgery in any one segment of the country is obviously associated with a large number of problems both from the standpoint of economics and standards of practice. For the past three years both Dr. Lamar Roberts at Gainesville and myself, along with several other neurosurgeons who are interested in upholding the standards of neurosurgery, have been busily engaged in organizing the Florida Neurosurgical Society.

In terms of societies this is a very new society established in 1960. Although the aims, ideals and purposes of the

society are well outlined in our charter, they have not been implemented. During the past two years Dr. Roberts and I have spent time organizing seminars, conferences and teaching sessions for this society in the hopes that we can perpetuate some of the idealistic aims of our predecessors.

As you might suspect there is a wide range of neurosurgical practice, both from the standpoint of the quality and the value of the neurosurgical procedure in terms of dollars and the particular neurosurgeon involved. Most of the people are well trained and carrying out good personal programs for continuing education. On the other hand there is a segment of this group whose training may or may not have been less than desirable at the beginning and who do not attend meetings either on a local or national level to increase their functional capacity. The tendency toward excessive fees resides primarily in the latter group.

The problems on a local level are those of making our society a functional society both from the standpoint of improving the general level of neurosurgical practice and particularly of attracting this group of neurosurgeons who have expressed little interest in educational societies on a national level. If other members of the Academy have been through this sort of organizational procedure and have any suggestions, we would be more than appreciative of their comments.

The other areas of my endeavor have been associated with our South American educational program which is improving on nearly a day to day basis. On the basis of our survey of South America last summer many of the local problems have been resolved.

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Local and regional neurosurgical societies continue to develop and are playing an important role in bringing harmony and educational features to many members. It's an old story but a few bad apples can raise hell with all concerned, medically and surgically.

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"Drive so that your driver's license will expire before you do. "

"Owners of a small ranch in Utah call it 'Oleo Acres' because it is one of the cheaper spreads. "

"Advice is what you take for a cold. "



Barnes and Frances Woodhall  
May 20, 1966

Today and for the next two days we are entertaining the last of the long crop of neurosurgical societies. I think that this one is called the Society of University Neurosurgeons or some such high hat title. I must say that one is encouraged by seeing the calibre of these people and there is little doubt in my mind that neurosurgery is in good hands in the future. I think our major task is perhaps to reorganize not only university areas in terms of training programs but also the general practice of neurosurgery to meet our changing social needs. In this too, I think, we will be successful.

Last summer Frances and I roamed around abroad and had a gorgeous time and almost died from fatigue. We were able to help a former student of ours, Emmanuele Mannarino, to come back to his adopted land and renew his life here. He is now working on a study of neurosurgical training in the Veterans Administration. He is a good, hard nosed and honest neurosurgeon, and I hope that he will find a good place in a scientific community once again.

I am almost fully recovered from what one of my grandsons called the "brokes", and Frances and I are going down to the ocean late this spring and in the fall again, since this is probably the only place where we are ever fully and utterly content and happy.

Betsy, whom you recall, is having her first baby in the fall. She is married to a young man who is a terrific cardiologist and I think this result almost inevitably will be termed a new candidate for medicine.

Frannie has worked all year long on a head of our recent past president of Duke University, Dr. Deryl Hart, and has this now at last in a wax foundry in New York City so she is relaxed and content too.

About the only brown spot at the moment has to do with

the fact that two of our promising young men have gone into the military service. One went into the "green hat" group where he turned out to be first in his class of eleven hundred paratroopers. This is apparently a side value derived from good neurosurgical training.

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Another enjoyable letter from the Vice Provost of a great university. We are happy that Barnes is healing up from the "brokes". Anyone who has read "Outpost of Freedom" by Captain Robert H. C. Donlon will have much admiration for the men of the "Green Beret".

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"Fun is like insurance; the older you get the more it costs you."

"The trouble with the public debt is that private individuals have to pay for it."

\*\*\*



Georgia and John Green  
May 23, 1966



It appears that I must leave town to fulfill the really pleasant request for a letter to The Neurosurgeon. Georgia and I are in Chicago for a long week-end. The reasons for coming were the invitation to deliver the Presbyterian-St. Luke's Hospital Alumni Foundation Lecture and to return to Northwestern University for the 25th Anniversary reunion of my medical class. Both experiences were most interesting.

Since my last letter, I've enjoyed the opportunity of speaking and neurosurgical service responsibilities for Ted Kurze at USC and Kemp Clark at Southwestern in Dallas. I spent three weeks in April in St. Louis for a number of purposes, -- a Post-graduate Course in Neuroradiology (Taveras, et al), preparation of a rough draft of the Presbyterian-St. Luke's Lecture, a visit

is President-Elect and Ed Boldrey is immediate Past-President. The Academy members are certainly active in the various aspects of neurosurgery and its development.

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John, as usual, has written an interesting and enjoyable letter, and as always has been immersed in the neurosurgical world. There are few hobbies as recreational and enjoyable as painting, and one is to be envied who has such talent. We're certain Georgia has done well in this field, and to be an excellent tennis player as well is indicative of all around ability.

The meeting of the Western Neurosurgical Society in Salt Lake City should prove a good one. This society is one of the delightful and worthwhile regional neurosurgical organizations.

We appreciate the photograph of the Greens.

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"Smokey the Bear is 15 years old, and a lot of people are getting worried. In six more years, he'll be old enough to smoke."

"You can always tell married couples on a picnic, they're the ones who get the food ready."

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Enid and George Baker  
May 25, 1966



I could not go to the Cushing Society meeting this year but from all reports it was an excellent meeting and Murphey got the "bit in his mouth" and carried on to the last hurdle. That is what Beefeater's can do for you!

Last fall we spent a few weeks on the salmon and trout streams of Ireland and enjoyed the companionship of Enid, Ione and Al Uihlein, Henry Schwartz and Francis Murphey. For those

who understand the ghillie system it was probably O. K., but I will take Montana or the Rogue River for my type of fishing. We had a good time, however.

The most interesting case in recent months has been a lady with 5 diopters of papilloedema and ataxia, and a normal ventriculogram. The continued elevation of choke to 6 diopters necessitated a shunt from ventricle to right auricle to prevent optic atrophy. After the shunt the choking of the optic disks came down rapidly to 1-1/2 and to 1 diopters. However, the patient noted shortness of breath, the right diaphragm was elevated, a sensory and motor level at C3 and signs of a cord lesion. The ventricular CSF was 25 mg. of protein -- a careful spinal puncture and 3 cc Pantopaque at L4, found 1800 mg. protein, complete block at C4. Operation in cervical area revealed an intramedullary astrocytoma grade 2 from C2 to C4. The entire cord was involved and only decompression and biopsy could be done. The reserve spinal puncture effect when the shunt was done is a very interesting phenomenon - for a cervical cord tumor, but with preoperative normal neurologic exam and high choking of optic disks it was not expected.

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The St. Louis meeting was a good one with many significant changes evolving. Francis handled the entire and difficult situation with masterful ability. It was a great pleasure to see many of our old friends again.

The trip in Ireland sounded most rewarding. George's case was unusual and of considerable interest.

Inasmuch as your reporter missed out on a planned European jaunt last year, hopefully better luck will be with us this time, even if no medical or surgical meeting for a partial write-off will be available.

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"Utopia: Conditions that will prevail when Americans enjoy 1959 wages, 1926 dividends, 1932 prices, and 1910 taxes."

"It now looks as though the taxpayer will be the first of America's natural resources to be completely exhausted."

"Sometimes we think the world is growing worse, but it may just be that the news and TV coverage is better."

"Dime: A dollar with all the taxes taken out."



Phyllis and Richard De Saussure  
May 26, 1966



Just after the meeting in Cincinnati, I had as a patient a 41-year old lady taking Provest, which is the Upjohn brand of oral contraceptive. This lady developed headaches and visual disturbance. An ophthalmologist referred her to me because of the papilledema. Her neurological examination was negative except for the papilledema. X-rays of her skull were negative. A lumbar puncture demonstrated that her spinal fluid pressure was elevated. I felt that this was a case of pseudo-tumor cerebri caused by the medication, but I felt that I was obligated to do an arteriogram. Fortunately, this turned out to be within the limits of normal, and I did not carry out air studies.

This lady was placed on Diamox and on this regimen her papilledema slowly subsided. She has been followed for a number of months and has had no symptoms.

I feel that this is another case of pseudo-tumor cerebri produced by the contraceptive pills. It would have been interesting to have proved this by placing her back on this medication to see if she would have a recurrence, but I did not feel justified in carrying this experiment out.

At the time I saw this lady in the Fall of 1965 there were not many cases of this reported, but at the present time there are many more cases, so this report is not quite as "timely" as it would have been in the Fall.

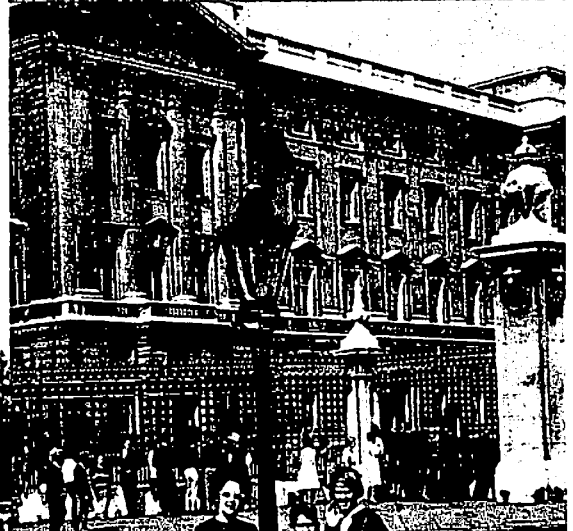
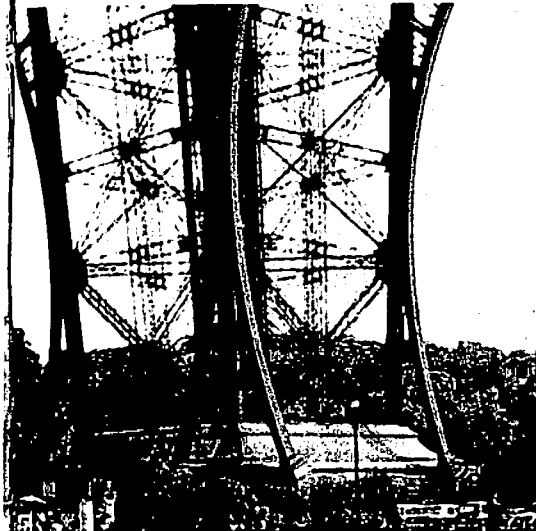
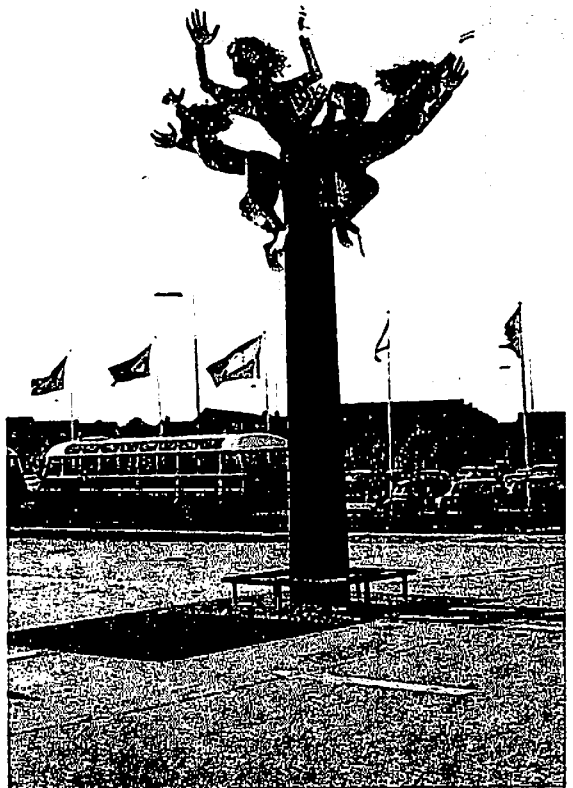
Recently two of my aneurysm patients returned. These were patients upon whom I had performed carotid ligations for aneurysms. A vertebral arteriogram demonstrated extensive anastomoses between the vertebral and the external carotid artery. The filling of the internal carotid appeared to be of the same caliber as it had been before the common carotid artery was ligated. I suspect this may occur frequently.

We took the opportunity to take our three children to Europe to attend the International Neurosurgical meeting. We all

*Right - Figure at Copenhagen airport*

*Below - Richard L. DeSaussure, Jr., and children, Richard, III, Denise, and Alexis by Eiffel Tower*

*Below right - Phyllis DeSaussure and children, Denise, Richard, III, and Alexis near Buckingham Palace.*





learned a great deal about ships, having an opportunity to ride the Hydro-foil to Malmo, seeing the Viking in Oslo, and the sailing vessel, VASA, which was raised from the harbor in Stockholm after three hundred years.

During our travels we encountered Gus and Helen McCravey who were traveling through Europe on \$5.00 per day. I hope he will write of his experiences, but I must say that after hearing his account I don't believe I have the strength to attempt it.

The pictures enclosed show the mermaid in Copenhagen, which I am sure everyone has seen, and the grotesque figure which greeted everyone as they entered the airport in Copenhagen. The other two pictures are ones of my children and me by the Eiffel Tower and my wife and children near Buckingham Palace. Phyllis really took the picture in front of Buckingham Palace because she thought the lamp was pretty and had an idea of trying to obtain one at some time in the future.

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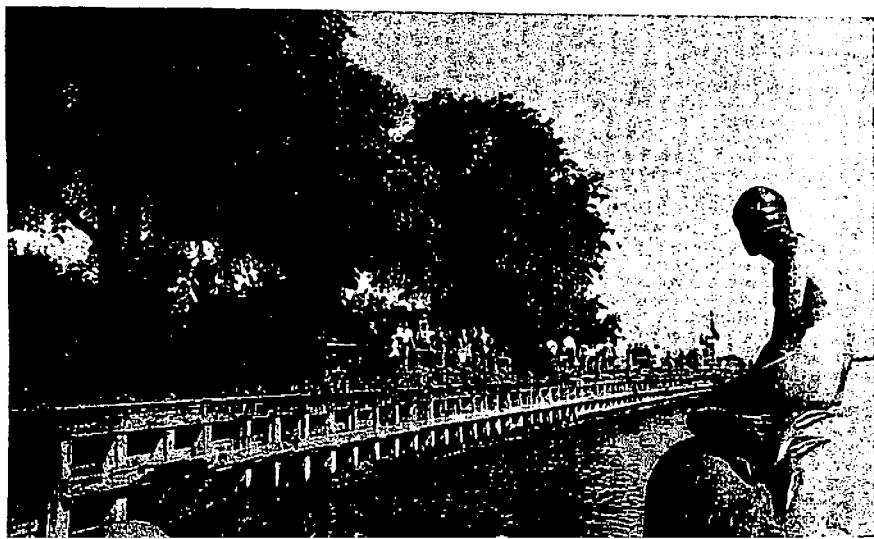
Dick's case referable to Provest is most interesting. To many this will come as something not previously realized. His comments concerning the two aneurysm cases are appreciated.

At the present time we have not received a letter from Gus McCravey, but hopefully he will have some comment on his efforts to travel through Europe on \$5.00 a day.

We are happy to receive the photographs of the European tour. Virginia and I hope to see some of that part of the world this fall, especially after missing out on the trip last year.

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*The mermaid in Copenhagen*





John and Lorene Raaf  
May 27, 1966



To date, 1966 has been a very busy year. Inasmuch as I came to Portland in 1936 I have been concluding my first thirty year program and launching on the second thirty year plan. With a little luck and profiting by the first thirty year experience I expect the next thirty to be very exciting.

Our residency in neurosurgery at Good Samaritan Hospital is functioning nicely. At present I have four very good boys on the service. Another just left for his stretch in Vietnam and will be back with us when he finishes that little tour of duty.

Plans for rebuilding Crooked Riffle Lodge are progressing. I hope shortly to have a group together who are interested. Perhaps the next copy of The Neurosurgeon will contain a picture of the newly constructed Crooked Riffle Lodge.

Neurosurgically the usual run of tumors, aneurysms, tics, entrapment syndromes, etc. have occupied our time. Having in mind a crack that Francis Murphey once made to the effect that "How could you know anything about sex till you had tried it?", we have done a few anterior cervical fusions--very carefully selected, of course. My sentiment is still very much along the lines expressed by Bruce Cameron (see his editorial copied from the American Journal of Orthopedics, February, 1966, which follows) but I am willing to be proven wrong.

Son John completed his thesis and received his Doctor of Philosophy Degree at Oxford. He and his wife, Heather, are getting excited about returning to Boston. They both went to school there and John will start Medical School in Boston this fall. Lorene and I became grandparents for the first time about a month ago. Our daughter Jean graduated from the University of California at Berkeley June 10.

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## The Brave Anterior Cervical Approach

Recently a qualified surgeon reported eight cases of anterior cervical fusion. He described, with clarity and satisfaction, his surgical deftness as he wove his way among the vital structures, escaping the carotid artery and vagus nerve here, the internal jugular and phrenic nerve there, the mesh of the Brachial plexus. This haunted, enchanted, anatomical forest clung to him, tried to ensnare him, but he escaped all, even though he tripped rather heavily on the recurrent laryngeal nerve and bruised himself on the esophagus.

It was with a thrill that he recalled the uncomplicated course of all but one case. With a sense of an adventure, well executed, he found that he had avoided the soft structures with his carpenter's tools and only one had to be twice reoperated. He even managed to scoop out the disc without damaging the unvisualized spinal cord, and this was the thrill of it all. In this series of less than ten, not one died.

I was, I admit, fascinated; spellbound. In less than 10 operations he had escaped a total of over a thousand structures, any one, which if injured, might have caused irreparable damage to his patient and to the physician's reputation. In only 12.5 percent of his cases was there serious harm. Considering the eminent possibility of danger, this was most impressive.

This, I thought, was a brave man to venture into such wild, untamed territory when a safe, posterior avenue of approach was available. Surely, to know and to memorize the anterior, complicated anatomy was to have intimate, minute knowledge of the simple, posterior structures which he disregarded with the bravado of a World War I, open-cockpit, biplane pilot, dashing along with the wind in his goggles, his white scarf trailing, to do battle with the Bloody Baron.

To further increase my admiration of this brave approach, I went to the anatomy museum and studied the neck. It was true: it could be divided into a complicated, anterior compartment and a simple, posterior one. I was charmed by the cross section of the many blood

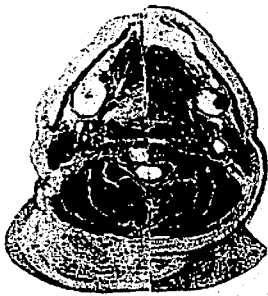


FIG. 1. Anatomical cross-section of the neck at C-6. Note the complicated anterior structures (top) and simple posterior ones.



FIG. 2. Anatomical longitudinal specimen showing the myriad of structures in the path of an anterior approach.



FIG. 3. Anatomical longitudinal specimen showing the simple, posterior structures in the path of a posterior approach.

vessels, nerves, and their relationship to such magnificent structures as the thyroid, trachea, and esophagus anteriorly (Fig. 1). I was disappointed how poorly the dull, homogeneous, uncomplicated posterior area compared to its dazzling anterior companion. In the longitudinal specimens (Figs. 2 and 3), it was apparent that the same comparison held and that much more was required of the anterior surgeon. For the posterior surgeon, the thrill of danger and high adventure was lost.

When I coupled these observations with the possibility of complications such as death-dealing swelling, severely disabling infection, fistulae, traumatic aneurisms, mediastinitis, damage to vital structures, the lost thrill was even more apparent. To probe blindly the spinal cord and to laugh at paralysis instead of visualizing that structure easily, safely, and posteriorly demonstrated a breed of strength and power and intelligence.

To escape without complications was like the Apache hoping to emerge without pain at the end of the mile-long, punishment gauntlet.

When I further coupled this with the ease of the posterior fusion, its high degree of success, and its lack of complications, then my admiration for this venturesome doctor and his supporters for anterior fusion, like Pinocchio's nose, grew and grew. They were, indeed, the ones who would and do tackle anything! Try as I could, I never would be able to muster the courage for this dangerous, anterior approach unless there were no posterior avenues available or unless there were some reasons why a simple, safe, successful, posterior fusion could not be performed. I, with most of my colleagues, remain the conservative cowards: afraid for my patients and their structures.

*Bruce M. Canary M.D.*

John has an amazing ability to find interesting and entertaining comments as well as admirable wit and humor to make them. Whether one agrees or not with the procedure, "The Brave Anterior Cervical Approach" is written by one with wit and talent.

John is indestructible and no doubt will be doing neurosurgical procedures long after most of us have gone to our reward. It reminds your reporter of one of our delightful honorary members, who, so the story goes, didn't want to keep operating after his time, so with his attorney, he had three colleagues tell him when he should no longer wield the blade. He agreed to abide by their decision. The complication developed that all three of them died and he had to pick out three more, and he is still going strong.

John can justly be proud of his children who have done so well, and we know how proud they are of their new granddaughter.

John and I attended our 40th reunion at Stanford University, both being members of the class of '26. His daughter graduated from the University of California at Berkeley and ours from Stanford. On this occasion we attended the wedding at the beautiful Stanford Memorial Chapel of Susan Ellen Boldrey and Eric Ernst Frische. We were fortunate as well to attend the reception at the Hillsborough Racquet Club and to enjoy seeing many of our friends in the Academy.

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*The editor rides a horse*

ARTHUR and JANET WARD - May 31, 1966

I am sorry that things were so rushed in St. Louis that it seemed so difficult to spend any real time with good friends. I am afraid that this is going to get worse before it gets better since it is quite clear that the Harvey Cushing Society will be, to an increasing degree, increasing its scope of influence. This cannot be productively achieved without the expenditure of man-hours and effort on the part of talented individuals from the field of neurosurgery, and I suspect that the members of the Academy will be heavily involved in this endeavor.

I am afraid that I have been a poor contributor to "The Neurosurgeon" largely because I never seem to have the time to sit down and figure out whether or not we have anything of any interest to report! We are actively recruiting more staff and I hope that all of us will not continue to be so committed as we have been the last two years.

Last fall Janet and I did manage to break away for several weeks and combine a short vacation with an invitation extended to me by the Czechoslovakian Academy of Sciences to participate in a closed symposium in Prague. We took this opportunity to pick up a new XKE in London and then dash through Europe at breakneck speed trying to cram in all of the sights between London, Prague and back to Antwerp! The visit behind the Iron Curtain was most interesting although I must say that our form of transportation aroused an embarrassing amount of interest since this was apparently the first Jaguar to drive over the border.

Janet and I are looking forward to seeing everybody in San Francisco.

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*Ward wonders why*



There are certain workaday problems of neurosurgery which should be democratically decided. These might include: qualifications to practice neurosurgery, dates and times and formats of annual meetings of national societies, methods and morals of practicing neurosurgery, etc.

My experiences as a member of the Committee on Mission and Structure of the Cushing Society, have proven to be most stimulating. It seems to be regrettably true that our lives are going to be more organized in the future and that unless we take some part in the organizing of the organization we are likely to be reduced to medical cogs in a great big wheel of social services. So--please find below some of my thoughts on the matter.



Elizabeth and Tom Ballantine  
May 31, 1966



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"The man who says he is a bachelor by choice may mean that the girl chose the other fellow."  
"The trouble with marrying the boss' daughter is that you have to take orders night and day."

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As Arthur has said, those in official capacities in the Harvey Cushing Society carry a heavy burden, not only in time but in responsibility. This would not be so bad if it were not for the fact that neurosurgery is one of the most demanding of the specialties, and in itself could consume all the energy at one's command. A very jealous mistress.

I can just imagine the furor Arthur and Janet caused roaring around back of the Iron Curtain in the new Jaguar. Small wonder they weren't put in the clink.

We're sorry we were unable to find any photographs of Arthur and Janet to grace the top of the letter.



On the other hand there are considerations having to do with professional excellence that must be autocratically decided and this combination of democracy and autocracy has plagued every politician since Plato!

I believe we should encourage regional neurosurgical societies and be certain that they have some type of representation in one National Neurosurgical Society which would allow their opinions to carry some weight. This National Society could then act as the framework for organization of a neurosurgical democracy.

From this National Society, about 150 (or perhaps 200) promising young neurosurgeons could be chosen as possible candidates for later admission to an Academic Senate whose membership would be about half that of the younger group, and it would be that "Senate" which would have entrusted to it all of those problems having to do with professional excellence.

I know that little of what I have said is new and much of it has been discussed before, but I do think it is well for the Academy to ponder once again its present and future role. As a gesture to "open-mindedness" I have not given any of the presently existing societies a role in my Table of Organization but I think it can be guessed where my sympathies lie!

Now about those photographs. Last year I sent one of three generations of Ballantine males. This one portrays the dis-taff side. It was taken at Beth (Ballantine) Gardner's wedding, August 14, 1965. Many of our members knew William Jason Mixer; his wife, Dorothy, who is Beth's grandmother, is in the center. I hope that the picture is suitable since I look upon the Academy as a sort of "family group"!

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The Committee on Mission and Structure of the Harvey Cushing Society had a time consuming and difficult but nonetheless important task. Just what the outcome will prove to be ultimately is problematical, except that changes have and will occur. The more I think about one phase, the more I believe we should not have associate members, but those deemed important enough to be members, I really feel should be full members, even if of necessity their number should be limited in comparison to that of the neurosurgeons.

We are grateful for the excellent photograph, and how pleased all of the family must be--and proud of Beth. She is beautiful.

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Barbara and Ed Davis  
June 1, 1966



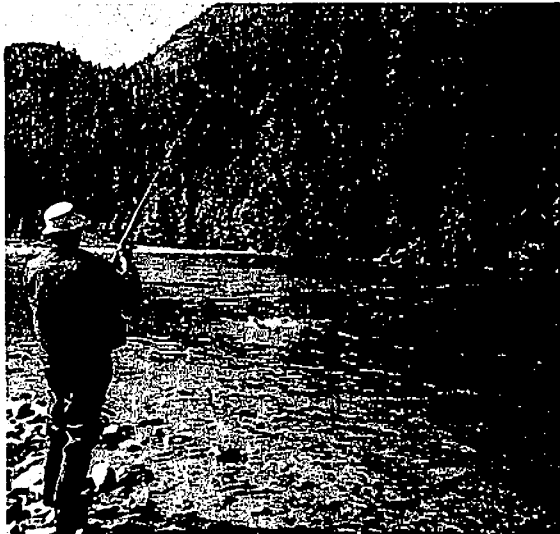
It was indeed a pleasure to see you and Virginia at St. Louis. As you know, we all missed you very much at the Cincinnati meeting of the Academy. I am sure that I can only echo the feelings of the other members in saying that this was an outstanding meeting, both scientifically and socially.

For the last several months Barbara and I have been using all our free time on planning a new home on a thirty acre farm, just out of Portland. We hope to start construction within the next month and are looking forward with anticipation to our move. We hope we will get this finished before the cost of labor and materials goes up too much more.

Last summer my son, Howard, and I had a wonderful trip into British Columbia. We spent a week on the Lower Dean river. The enclosed pictures show Howard with a fourteen pound steelhead caught on a fly, and another twenty-five pound steelhead that I managed to land. We flew in and out of this area in a small float plane over some magnificent country. If any of the members want to get some steelhead fishing such as they have never experienced, I can give them the particulars.



*Steelhead country*



It is hard to realize how rapidly time is passing. Michael is graduating from the University of Oregon this year and Howard will be a junior at the University of Oregon next year. Susan graduates from high school with no definite plans for the future at the moment.

Needless to say, I am happy to be relieved of the duties of Secretary, although I must admit that the three years passed quickly and the officers of the Academy made the work light. I am delighted that the affairs of the Academy are in such competent hands for the next three years.

Barbara and I will be looking forward to the San Francisco meeting in October.

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The trials and tribulations of building or construction are enough to try anyone's soul, but to have something attractive on a 30-acre farm not far from Portland should be a just reward for a hard-working neurosurgeon.

The steelhead are fastastic. It must have been a real fight to haul them in. The many fishermen in the Academy will appreciate the photographs. We are happy to have one of your handsome son.

Ed performed his tasks as secretary admirably, and there is little that is more important to our Academy than a competent secretary.

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Al and Ione Uihlein  
June 2, 1966



Activities have been much as usual here. Dr. Al Rhoton, our new staff member has been a valuable and delightful addition to our group and brings us all sorts of stimulating ideas, partially St. Louis oriented. He is a fine young man and we are very happy to have him with us. I suppose Henry will take all the credit!!

The New Methodist Hospital in Rochester is being completed and as some of you may know, our neurosurgical section will have to staff two hospitals for the first time in the history of our department. This poses many perplexing logistic problems but we are looking forward to this new endeavor with anticipation and excitement. As Ione and I were unable to attend the meeting in Cincinnati last fall, we missed seeing many of our friends but did catch up with many of them at Atlanta this past spring. An excellent scientific as well as social gathering took place at this time. The Atlanta countryside was approaching full bloom.

Two patients who required surgical cord decompression due to the development of a progressive paraparesis following repeated intrathecal spinal injection of cortisone recommended in the management of their multiple sclerosis stirred clinical interest. Because each patient noted clinical improvement after each injection, they were repeated whenever an exacerbation of their disease became apparent. After about 9 months of therapy, a progressive severe paraparesis developed in each patient to the point where they became wheelchair patients. Reports from the physicians who conducted the injections indicated that the spinal fluid protein seemed to increase after some 6 months of this form of treatment, but this apparently did not seem to evoke much concern. As the paraparesis progressed to a paraplegic, they consulted us for an opinion. The general clinical picture was classical for multiple sclerosis with the superimposed signs of a progressive cord compression syndrome. X-rays of the lumbar and thoracic spines were normal. Pantopaque myelography in each instance revealed a complete block in the cephalad flow of pantopaque at the thoracic 12 lumbar level, with a CSF protein determination between 195 and 210 mgs. per cent respectively. At surgery, a very extensive and thickened arach-

noiditis was encountered, denser than I have ever seen before, involving the conus medullaris and the upper cauda equina. The adhesions were gently broken and dissected away to release as much of the cauda equina as possible; the dura was left open and the defect covered with lyophilized dura to offer an adequate decompression.

The postoperative course in each patient was uneventful. However, there was no improvement in one patient's general condition but there was slight improvement in the other patient's ability to move the lower extremities. Urinary incontinence, unfortunately, persisted. I have tried to find similar reports in the literature but these have escaped me so far. I don't believe that the cortisone per se was responsible but wonder whether a traumatic tap or a low grade inflammatory process accompanied the repeated spinal punctures to contribute to the progressive neurologic picture. I wonder if any Academy members have had similar experiences.

See you all in San Francisco. Have a pleasant summer.

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The development of two neurosurgical staffs to care for two hospitals will pose, as Al intimates, new problems; but no doubt stimulating ones.

His comments concerning the intrathecal injection of cortisone represent an important contribution and consideration.

It is noted on the Mayo Clinic letterhead that both Jim Love and George Baker are now listed as consultants.

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A new father who, after pacing the corridors of the maternity sanitarium for hours, was finally given the news. It was a girl. "Thank God," he said piously. "I'd never want a son to go through what I have today."

\*

Prisoner: "Judge, I don't know what to do."

Judge: "Why, how's that?"

Prisoner: "I swore to tell the truth, but every time I try some lawyer objects."

\*\*\*



Frank and Letitia Echlin  
June 2, 1966



So far as a note for The Neurosurgeon is concerned, nothing unusual has happened in our life. The daily routine of neurosurgery and neurology continues. I am still working on epilepsy and vasospasm in the laboratory.

I am enclosing a photograph which you probably have but which is quite unique, I believe, in containing so many men known to the Academy. In this photo, taken I think in the fall of 1937 or early in 1938 at the Montreal Neurological Institute, I note the absence of three people who I believe must have been there at or about that time; namely, yourself, Joseph Evans and Herbert Jasper.

Back row from the left: Odom, Boldrey, McClure (neuropathologist, dead), Erickson, Cipriani (physicist, neurologist and Director of the Canadian Atomic Energy Plant at Chalk River, dead), Kershman (neurologist, EEGer, dead), Humphrey, Echlin.

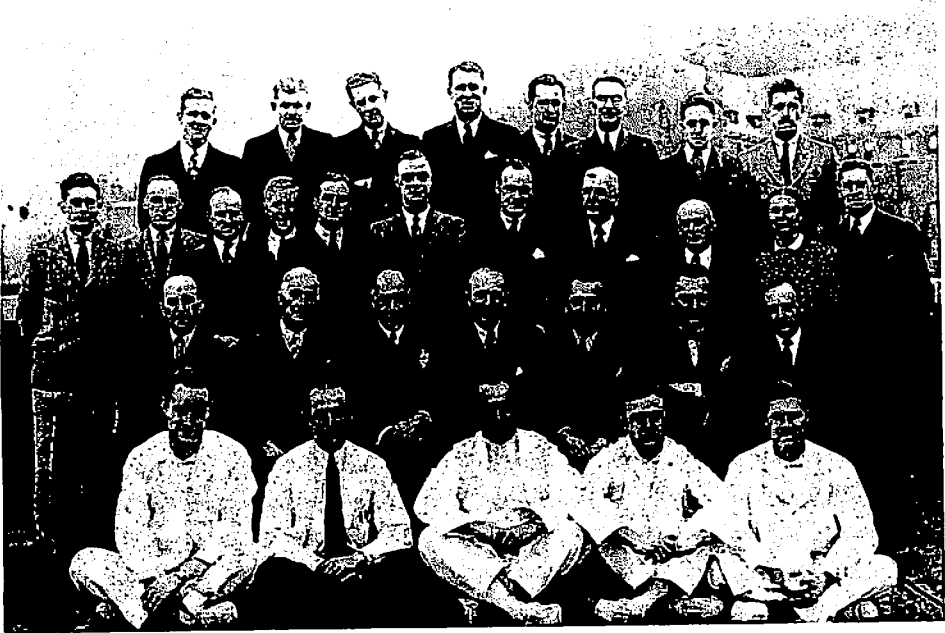
Second row from the left: Nichols (Prof. Neurosurgery, Aberdeen), McNaughton (Prof. Neurology McGill University), Keith?, Hebb (of psychological fame, recently made FRS), McEachren (neurochemist, Prof. Neurology McGill, dead), Childs (neuroradiologist), Young (neurologist), \_\_\_\_\_?, \_\_\_\_\_?, Molly Harrower-Erickson (psychologist), Elvidge.

Row three from the left: \_\_\_\_\_?, \_\_\_\_\_?, Russell (Prof. Neurology McGill, dead), Penfield, Cone (dead), Saucier (neurologist), Peterson (neurologist, dead).

Front row from the left: \_\_\_\_\_?, \_\_\_\_\_?, Reid (neurosurgeon, Australia), Pudenz, Stewart (neurosurgeon, dead).

Perhaps you can supply the missing names of the neurologists above.

We shall look forward to seeing you and your wife in San Francisco.



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Francis' photo was taken in the fall of 1938, and at that time I was in Los Angeles associated with Carl Rand. I'm unable to add any names other than those of Roma Amyot, and Fred McKay beginning with row three. No doubt others will recall those unnamed. It's a bit shocking to realize how many the "Dark Angel" has gathered up in her arms. Cipriani was one of the most talented of the lot.

We will all be looking forward to the Vice-President and his wife in that glamorous city of San Francisco this fall.

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"The height of confusion--Father's Day in Harlem or Watts."



Jim and Peggy Galbraith  
June 2, 1966



This is in response to your gentle reminder concerning The Neurosurgeon. The pleasure derived from reading this delightful publication creates in all of us a sense of responsibility to contribute to it, stimulated by your excellent editorial effort.

Assuming your place on the Board has been a rewarding experience, as well as an increasingly arduous one. The May meeting was extended to four days, and the forthcoming October session will fill five days. The number of eligible candidates is increasing steadily.

Last September I moved into a full-time academic position in the Medical College of Alabama in order to gain time and opportunity for teaching and some investigative work. Shortly thereafter the Chairman of our Department of Surgery, Dr. Champ Lyons (who was known to many in the Academy) succumbed to a glioblastoma. Since then the responsibility of this post has been mine, but I'm delighted to report that a new Chairman of Surgery has now been selected. We all feel most fortunate that John Kirklin has consented to accept this position, and are looking forward to his arrival in September.

We are looking forward to an extended visit in San Francisco for the meetings of the Academy and the College in October.

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As Jim has indicated, the experience on the American Board of Neurological Surgery is rewarding, but arduous to say the least. Jim is excellently qualified to be a member of this important board.

Jim has wisely assumed a full-time academic position in the Medical College of Alabama, and brings to this situation a vast experience in clinical neurosurgery which some of the younger full-time professors have not obtained. Our members are retiring

and modest, so that it is not easy to report or comment on their achievements. Fortunately in the Medical Tribune of January there was a fine article about Jim. As a result of this we find he is President of the Southern Medical Association, where he first served as secretary and then chairman of the Section on Neurology and Psychiatry between 1952 and 1955. He was a member of the governing council from 1957 to 1962. During his tenure with the council, he was both its vice-president and president. Before becoming president of the Southern Medical Association, he served as its first vice-president.

Jim comes from a family of doctors, including a grandfather and a favorite uncle. The eldest of his four daughters is training at the medical center to be a radiologic technologist.

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"Next time the government announces that personal income is at an all-time high, do a little figuring and you'll find that so is personal outgo."

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Bill and Eleanor Keith  
June 2, 1966

After the meeting in Key Biscayne, Eleanor and I went to the University of the West Indies near Kingston, Jamaica. There, for six weeks I was the guest and helper of Andrew Masson, the neurosurgeon in the University College Hospital. I learned a lot and I was able to help him some too, I think.

He is a general surgeon. He was brought up in British Honduras. He began the study of medicine in 1944 in St. Thomas' Hospital, London, when there was not a single pane of glass left in that institution. About eight or nine years ago he had a Rockefeller Fellowship for a year with John O'Connell at St. Bart's and since then, of course, his time has been increasingly taken up with neurosurgery so that now he does nothing else.

In addition to doing a lot of useful work, Eleanor and I



had a wonderful time on that lovely Island. The Christmas season there was especially interesting and, of course, we now have a great many friends there.

The University of the West Indies is the last remaining evidence of the disrupted Federation, but it does truly serve the whole of the West Indies region. Bill Feindel was at a meeting in Kingston in January. He and Andrew Masson took out a large convexity meningioma together. Each one says he learned a lot from the other. When I arrived back in Jamaica for my second visit in February, 1966, the patient had almost completely recovered and he returned to the Island of St. Kitts by sea. This second visit was for just over two weeks. On this occasion I was accompanied by Dr. Jack Silversides, neurologist from the University of Toronto. We did quite a lot of work and some recreation, and best of all they would like us to go back.

The University of the West Indies has a beautiful site and I believe it is rapidly developing into a very fine university and filling a great need. You would be interested to know that the charter of the university was lost in an aircraft at sea. The College of Heralds in London was unable to affix the great seal of Great Britain to another charter, so now they have a declaration from the College of Heralds that such a charter was in existence. The Chancellor of the university is Princess Alice. If I remember correctly she is the granddaughter of Queen Victoria and she is the widow of Lord Athlone who was Governor-General of Canada following Lord Tweedsmuir.

As a result of my first trip to Jamaica, Andrew Masson and I have now arranged for the training of a neurosurgeon in Toronto. He is Andrew Joaquin, a native of British Guiana, of Portuguese ancestry. He studied medicine in the University of the West Indies. He is just finishing a year of neuropathology and will go on in the course in neurosurgery under Tom Morley.

I enclose a photograph taken by Dr. Jack Silversides in Kingston. The smaller child is Karline Griffiths who was visiting her grandmother in Jamaica. The other child is Karline's aunt, Annie McCoy. I brought Karline back to her parents in Toronto when I returned on the 1st of March.

Last summer I spent ten days with Harry Botterell and two other friends on his new fibre glass thirty foot sloop sailing in Lake Ontario



near Kingston. Also, we were royally entertained by Margaret and himself in their lovely home on the edge of the lake.

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A most interesting letter from Bill. What an enjoyable time Bill and Eleanor had. We are happy to learn that Harry's life as a Dean has proven such an enjoyable and rewarding one.

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Guide: "This castle has stood for six hundred years. Not a stone has been touched, nothing altered, nothing replaced."

Visitor: "Um, they must have the same landlord we have."

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Don and Dorothy Matson  
June 6, 1966



This last year has been a wild one, indeed. Now that I have graduated from the American Board of Neurological Surgery, I am hoping to get ahead faster with a revision of "Neurosurgery in Infancy and Childhood", but all sorts of other commitments seem to be conspiring to keep me from it, to say nothing of a clinical and teaching load that constantly expands.

We are still working hard to try and establish the radical surgical management of craniopharyngioma on a more predictable and favorable basis, as well as to bring the treatment of the chronic post-operative problems relating to hypopituitarism and hypothalamic dysfunction into a more standard regimen. We are keeping these patients on our Clinical Research Center at the Children's Hospital and under the supervision of the endocrinologists who are accumulating a vast amount of neuro-endocrine data. We are trying to bring back as many of the post-operative cases as possible every 6 months or so for re-evaluation. There are enough of them now, though, that it could become practically a full time job for somebody to pursue this work.

I am certainly convinced, in children at least, that the tumor should be completely removed if at all possible initially. The morbidity and mortality, in our experience, go way up with secondary operations and particularly after x-ray therapy. For instance, since the first of the year we have had seven new cases. Six of them were initial operations, and all have done well after what I think are total removals. The seventh had had two previous attempts, under the frontal lobe and trans-ventricularly, elsewhere and then had over 12,000 R of Radiation in 3 courses. We took this boy's tumor out and he has finally returned to his home in the West, but only after a stormy 2-1/2 post-operative months. I think he may well remain a chronic hypothalamic invalid. Magnification-vision is a great help in teasing these lesions away from all those structures in there that people seem to need.

We are going to miss two Scandinavians leaving us this month; Karl Hovind from Kris Kristiansen's clinic in Oslo and Ollie Heiskanen from Gunnar Björketsen's clinic in Helsinki. They have really been a great addition to our group. John Gillingham is sending us a young man to visit in our lab for the summer, and Keino Sano is sending over a man in the fall for a year from Tokyo. Dr. Larry Page, who some may remember giving a paper in Cincinnati on gliomas turning up in children with chronic epilepsy, is going to stay with us next year.

Our group at home are all well. Dotty has just completed a 2-year term as President of the League of Women Voters locally and has now taken on Planned Parenthood - this is a real challenge in Massachusetts! We finally made it legal this year, the last state in the Union. Martha is doing Little Theater this summer and will be a junior at Cornell next year. Don works in our lab this summer and enters Bucknell in the fall. Jed and Barby are going to Wyoming this summer to try and find out if horses know more about teenagers than their parents.

The best thing that happened all year was suddenly playing hookey for a week in early March when Dotty and I, with Francis Moore and his wife, chartered a 35 foot sloop for a fabulous escape from reality in the British Virgin Islands. Not sure we will make the San Francisco meetings as we are going to Australia in November where I am going to be the Felton Professor pro-tempore in Melbourne for a couple of weeks.

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Another of Don's enjoyable and informative letters. His time spent on the American Board of Neurological Surgery would take almost the full time of the average neurosurgeon. This graduation will allow needed opportunity for many other commitments.



Gene and Lyle French  
June 6, 1966



I just returned from a short fishing trip with my oldest son. The precipitating reason for the trip is that my son wanted to go on one last trip before he is married on July 1, 1966. Frankly, I think he will be out fishing much more after he gets married than before because his bride-to-be is a wonderful girl who really enjoys the out-of-doors. It seems that during the winter they have been skiing every moment they haven't been in school and in the spring either riding or fishing. I guess he just wanted to go one more time with the old man. Incidentally, the fishing was very good and the mosquito crop is a real beauty. Two or three times we thought we would be carried away boat and all.

Things around the University are going along about as usual. We anticipate Dr. Ken Livingston, who has been out in Shiraz, Iran for the past five years or more, to join us for at least a year beginning about the middle of August. He then will probably go on to a more permanent position some place. We are looking forward to seeing him and Tash. I think it will be possible for him to have a good year here with us.

Relative to things that are new on the clinical service, we have been fussing with DC potential recording both in the cerebellum and cerebrum in patients that have underlying neoplastic diseases. It has been a great deal of fun, but I am not at all certain that much will come of it. Fortunately we have had enough help from one of the men who is basically a neurophysiologist and works on our service to help us. This is a prime necessity for a neurosurgeon.



I pulled out some old photographs of Gene and myself. Obviously, they were taken last summer when we were both about five years younger. At least it seems that we have lived about five years during this last winter.

We are looking forward to the San Francisco meeting. That is always such a delightful place, especially when one is with good friends.

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What a wonderful feeling it is when one's devoted son is marrying someone so generally acceptable to the parents.

The news about Ken Livingston is of interest. Your reporter had heard he was somewhat disillusioned about his efforts in Iran, and that he was coming home, but not back to Portland, Oregon.

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"Compatibility is when a woman always laughs at her husband's old jokes, and he never laughs at her new hats."

"A lot of colleges are adopting a new marking system: A, B, C, D, and Vietnam."

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Betty and Eben Alexander  
June 8, 1966



Courtland Davis and I have added this year a bright young man who we feel has a great future in neurosurgery, David L. Kelly, Jr., who has spent, during his training with us, some time with Don Matson and some time with Henry Schwartz and Sidney Goldring. He is well equipped to do the job here and is

already beginning actively to get the laboratory under way, and we hope he will attract other people to work with us in the laboratory directly under him and in our department.

We have, I must confess, been delighted with the results obtained by percutaneous cordotomy using the radio-frequency generator, a technique recently described by Hubert Rosomoff.

Dave Kelly has mastered this technique, has done a number of these, and the relief of pain is immediate and better than we have ever obtained with high cervical or upper thoracic cordotomy. Furthermore, the patient is very little disabled by this procedure and one can apply it to patients who are terminal as well as to some patients who have benign disease on whom one would scarcely feel justified in doing a standard cordotomy.

I regret that this procedure has become so effective since I have enjoyed doing standard high cervical cordotomy so much, but I believe this is the thing of the future.

We have also been going over our results with stereotactic surgery for Parkinsonism. This also is a truly remarkable procedure, particularly as it has been described by Claude Bertrand in Montreal. It turns out to be a fairly standardized, predictable, safe, effective procedure, provided one selects the appropriate patient for it.

The patient with unilateral rigidity and tremor, one under 65, seems to be the most ideal patient, but there is no question but that the left side of the brain has a more profound effect than the right side when one makes a lesion, so that a good many of these patients have a very slight speech disorder afterwards which, however, may be very difficult to detect, particularly after several weeks.

It is a procedure which is firmly entrenched now in neurosurgery along with some others and I feel very happy about it.

Frank Nulsen has made a genuine contribution in his survey of Holter valves and the way in which they ought to be managed. We have been electively revising these now for some time on Frank's suggestion, and it works remarkably well. Usually the young infant who has a shunt will need to have it revised sometime before it is a year old, and if this is done electively, the child is scarcely in the hospital overnight. It may be, as Frank suggested, that all of these patients will be "shunt-dependent" for life, but this is something we can't know for awhile and the data that are being accumulated will be valuable to us.

We are all looking forward to the meeting on the West Coast in the Fall. It looks like this is the West Coast year, 1966-67, for neurosurgical meetings.

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It seems indeed fortunate good results can be obtained by percutaneous cordotomy, as such obviates a major procedure in debilitated patients, and affords relief of disabling and destructive pain. This then should be an important advance neurosurgically, just as that of stereotactic surgery for Parkinsonism. Sometime a newer and more desirable procedure for hydrocephalus will replace that of the present tubular valve method.

It would appear that the west coast, and more particularly that incomparable Baghdad on the Bay, San Francisco, will be the spot for neurosurgical meetings for the 1966-1967 era. Eben, indeed, has great responsibilities as well as honors during this time.

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John and Shirley Hanbery  
June 9, 1966



The following note is for THE NEUROSURGEON to bring you up to date concerning the neurosurgical program at Stanford.

It has been almost seven years now since the Stanford Medical School moved from San Francisco to Palo Alto. The transitional period has been difficult, but we are now beginning to enjoy the results of a lot of hard work, organization, and planning.

The neurosurgical training program is on a firm footing, being based at the Stanford Medical Center and with affiliated programs in the Palo Alto Veterans Administration Hospital and the Santa Clara County Hospital. Nine residents are in the program at the present time. We require a year of general surgery beyond an internship and have the opportunity to fill one position in the Stanford general surgical program each year. The men are required to spend a full year in clinical neurology and either gain this ex-

perience with Frank Morrell and his colleagues here at Stanford or obtain their neurology elsewhere. Thus far, three of the residents have obtained their training in neurology either with Milton Shy at the University of Pennsylvania or at the National Hospital in Queen's Square.

Lucien Rubinstein joined the Stanford faculty in September, 1964 and heads our neuropathology unit. Each of our neurosurgical residents spends a year with him.

A year ago, Tony Aguilar joined me in the full-time faculty in neurosurgery and thus far has been spending most of his time in the supervision of the work at the Palo Alto Veterans Administration Hospital. Our new clinical sciences research wing was just opened last month and we now have 2200 square feet of excellent laboratory space. Tony and one of our residents will be beginning some experimental work there this summer. We are momentarily expecting the arrival of our Leksell stereotaxic equipment from Sweden and hope to begin clinical work with this apparatus in the very near future.

During the past year, our own neuroradiologist, Dr. Leslie Zatz, has been on sabbatical in London and we have all had the extreme privilege of having Dr. Ingmar Wickbom from Gothenburg, Sweden, as our visiting professor of neuroradiology. He has brought with him a wealth of experience, has worked very closely with us all year, and we shall always be indebted to him.

All in all, I am pleased to say that things are good "on the farm". I am looking forward to the Academy meeting in San Francisco this coming October. All of us at Stanford would be pleased and honored to have any of you pay us a visit at that time.

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It was a pleasure to see Jake and Shirley at the Stanford Memorial Chapel at the time of the wedding of Ed and Helen Boldrey's younger daughter. Our own daughter, Lander, graduated this year from Stanford.

Jake has written an interesting and informative letter about the neurosurgical service and training program at Stanford.

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In Fort Wayne, Indiana Journal-Gazette: "Help! Must sell 1953 Chevrolet, complete with genuine Goldwater bumper sticker, to help pay for the Great Society."





Francis and Roder Murphey  
June 21, 1966

After a hectic year I now have a chance to read my mail and answer most of it. I am also back in the swing as a neurosurgeon again and expect to get back in the Laboratory when it re-opens following the three week holiday that all of the University personnel have in June. However, I don't expect this happy state to continue because the problems of Medicare and the stroke program will be on us all too soon.

It does appear that we are finally making some progress after all of these years on our particular approach to the surgery of aneurysms and intracranial vascular occlusive disease. There is reason to believe that we will lick the problem of increased fibrinolytic activity which occurs during and following the use of the pump and profound hypothermia. Dr. Sundt and Dr. Nofzinger have developed a circumferential clip lined with a vein graft for patching holes in arteries which would result from aneurysms and arteriotomies in vessels down to two millimeters in internal diameter. It also appears that hemodilution using a combination of Rheomacrodex and human albumin is effective in cerebrovascular spasm and in ischemia produced by occlusion of small vessels, although, of course, this is quite difficult to prove because of the unpredictable behavior of such lesions. We have, on several occasions, been able to titrate patients in and out of hemiplegia using this combination. Of course, we don't know all of the dangers of this. I was particularly concerned about the possibility of overloading the circulation and right-sided heart failure, but up to now we have had no such difficulty, although we do keep tab on the venous pressure and don't allow it to get too high.

We do hope to have something to report about all of this before the year is out.

Betsy is expecting in July and has had no significant difficulty to date, which is more than I can say about her old man. Lou Frank, my secretary, is quite ill with regional ileitis and I am quite concerned about her. She is such a perfectionist that the demands of the last few years have, I am afraid, been too much for her.

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Francis must feel a few years younger after completing an arduous and successful year as President of the Harvey Cushing Society. He's apt to feel a few years older after grappling again with the problem of the surgery of aneurysms and intracranial vascular occlusive disease--a provocative and fascinating subject that has captured him and never let him go.

We are sorry and concerned about his wonderful secretary, Lou Frank, and hope things will soon take a turn for the better.

Like so many others, Francis soon will be joining the "Grandfather's Club".

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A co-worker in a hospital nursery as she holds up a baby for proud father to see: "I have shown this one to twelve new fathers today and he is a chip off the old block to each one of them."

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Mary Jane and Wally Hamby  
June 21, 1966

I share the almost universally expressed regret of our colleagues that you have had to decrease your professional activities because of health. We hope that this change in routine will result in many continued years of activity in such things as editing the little journal.

Since the last issue, my own life has been brightened by marriage on October 1, 1965 to Mrs. Mary Jane Husk in Chicago. Many of you have met her at subsequent meetings and Joe and Hermine Evans from the Academy assisted her friends, Mr. and Mrs. Wallace Miller, in our little ceremony at the Rockefeller Memorial Chapel at the University of Chicago. Mary Jane has taken enthusiastically to neurosurgery and is slowly sorting out all the strange new names and faces that she must correlate.

One of my most interesting professional experiences recently was the removal of a right sylvian fissure arteriovenous

malformation under the television lights at the University of Illinois Research Hospital before the meeting of the Congress of Neurosurgery last October. Several of you have had this experience before but one's first always produces a tremendous pumping of adrenalin, probably due to having several hundred unseen eyes focused on your activities at the moment. Fortunately my hand was held verbally by John Gillingham of Edinburg, who helped talk the team into a good landing.

Professionally, we have continued to be interested in the effects of Yittrium hypophysectomy done by Dr. Dohn here. He now is initiating a program of percutaneous high frequency cervical cordotomy according to Rosomoff's technique. Modern neuroradiologic techniques certainly have opened new fields in simplifying ways of getting at precise areas in the nervous system. Another innovation here is transphenoid attack upon pituitary tumors which our associate, John Collis, is starting.

One of my residents, Dr. Sorensen, reviewed all of the surgical cases of spasmodic torticollis operated here over the years and reported on it in the AMA Journal. Apparently this condition is viewed rather hopelessly by the majority of neurosurgeons but as the report showed, a high percentage, 16 out of 25, were satisfactorily improved by Dandy's old anterior cervical rhizotomy (C1-3) and subarachnoid accessory nerve section. The report has stimulated a small run of such cases here and I hope that the percentage will be maintained. We have found nothing else that helps these poor people and they are rather miserable with the condition.

The summer has started out busily here and Mary Jane and I are looking forward to the meeting of the Academy in San Francisco in October. We hope to see all of you then.

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We are happy indeed to learn of Wally's marriage in October, and wish them all the best of good fortune.

Bill Beswick has already commented on Wally's television appearance before the meeting of the Congress of Neurosurgery. This should be, at least, a disturbing experience.

His comments concerning spasmodic torticollis are of interest for, in general, surgical procedures are infrequently done for it these days.

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"Pink elephant: A beast of bourbon."



Guy Odom  
June 27, 1966

Several years ago I decided that I would not send in a letter to THE NEUROSURGEON until I could write about a glowing trip through some foreign country such as those contributed by all of the other members.

The time arrived this year, but I am sorry to state that I cannot relate my experiences or opinions about neurosurgical centers, scientific studies, nightclubs or women. The morning after arriving in Cannes, I became ill with food poisoning or some type of virus and spent the next three days in bed at the hotel, and then the rest of the time in the American Hospital in Paris. I only had one solid meal while overseas and that was the evening we arrived. The rest of the time, it was hot tea and intravenouses. I left the hospital about two hours before flight time and was still having diarrhea, but not as bad. The flight back was a nightmare because I was afraid of a bottleneck in the two johns, but this did not occur. What started out as a pleasure trip without medical worries turned into just the reverse.

We have little to report from a clinical standpoint, even though the Service has been very busy. We have had some interesting studies on the problem of cerebral spasm and hope that we will have something worthwhile to report in the near future. We have been using the same technique described by Frank Echlin of exposing the basilar artery. Our tumor studies are also progressing very nicely. Recently, I had the pleasure of meeting with two young neurosurgical groups, The Form of University Neurosurgeons and the Society of University Neurosurgeons. Both Societies proved to be very stimulating and we will hear a great deal from them in the future. The only trouble in running around with a group like this, is that it makes you realize how old you are getting.

The affairs of the Board remain rather active. We have 92 applications approved for the Fall and, therefore, plan to extend the examinations over a period of five days rather than the usual three. The highest previous number was 51. The way things look at the present time, I would anticipate that we can expect about 90

at the present time, I would anticipate that we can expect about 90 - 100 applications for each examination in the future. I have been rather disappointed in the response for questions for the written examination from the Program Directors. So far, we have only received questions from six and the Committee has to meet on July 7th and 8th in Philadelphia to arrange for the December examination.

This week my family begins to break up. Guy, Jr. completes his surgical internship here at Duke and is now going down to LSU for three more years in General Surgery before going into Plastic. Carolyn (my youngest) and Terry, who have been in Durham since their wedding, leave in July for a two weeks' trip through the South before going up to Ann Arbor, Michigan. Terry finished at Florida, but now wants to go into naval architecture. Linda and Wes will remain here, as Wes is in the Neurosurgical Program.

Frances and Barnes have been down at the beach since commencement trying to recover from the administrative problems that always occur at the end of June. They both looked very well when they left.

I am certainly looking forward to the meeting in San Francisco.

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What a distressing and unfortunate European experience. Virginia and I had all of our reservations last year for the meeting in Copenhagen, and two days before the time to leave I had my ticker trouble and joined the "Coronary Club". How fortunate this didn't occur somewhere abroad. We hope to fly over there this fall and to enjoy ourselves without the requirement of any medical meetings and to go along with our daughter, Lander, and her roommate at Stanford.

We appreciate the news about Guy's family--always of interest to the members of our great Academy. We are pleased that "Time" has assuaged the loss of Guy's Suzanne.

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Judge: "Couldn't this case have been settled out of court?"

Defendant: "Yer honor, shure an' that is exactly what we wuz thryin' to do whin a couple av police butted in."

\*



Dean and Fran Echols  
June 27, 1966

Fran and I are looking forward to the California meeting, and will spend two weeks seeing that part of the world. Anyone interested in joining us for motoring or fishing or just loafing should drop me a line.

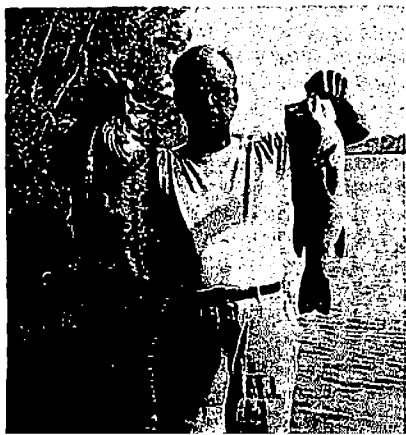
The neurosurgical practice at Ochsner Clinic grows slowly. Homer Kirgis, John Jackson and I take in a fourth man in July. He is Findley McRae, of Mobile, and is completing his training in our Tulane-Charity-Ochsner-V.A. Program. In our program, the residents spend the first and second years at the Clinic and the third and fourth years with Raeburn Llewellyn and Don Richardson at the V. A. and Charity Hospitals.

Our unmarried daughter, age 22, is working in New York City, and our unmarried son is externing at Fitzsimons General Hospital in Denver. Fortunately, the only grandchild lives a few blocks away.

Being too young to take golf seriously, I still fish two or three afternoons each week the year around. Gardening takes up the balance of the available time. Skeet and duck hunting are strictly seasonal. Medicare starts next week. I wish you all luck.

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Our first President obviously is a good fisherman. He also has joined the grandfather's club. Mardi gras is productive of strange costumes. See Dean and his grandchild below!



MARY and TOM WEAVER - June 29, 1966

Mary and I and a host of others missed you and Virginia in Cincinnati last fall and hope to see you in San Francisco in October. We hope to make the long trip if local circumstances permit. We have remained close to Dayton in the past year since my parents became ill and moved here from the East. Mother died in January, and Father was hospitalized for two months with basilar artery disease plus carcinoma of the prostate. We sort of play it by ear these days.

We begin to realize our age with two grandchildren. Our oldest son, Chuck, is in business in Cleveland, and number two son, Tom, is with Proctor and Gamble in Fort Wayne, Indiana. Suzie will be a Junior at Wittenberg, majoring in Psychology. Jeff will be a senior in high school, Molly a junior, and Jim a freshman. Needless to say, we know more and more or less and less about teenagers as the years go by. It's a wonderful experience anyway you look at it. We consider ourselves very fortunate in all ways.

Professionally, we stay in our strictly clinical atmosphere, trying to do a job and to keep abreast of all the advances in the Ivory Towers. I have not submitted a paper because of the uncertainty that I can get away, plus the fact that sometimes I sense and at other times I know that I have little to present that the majority in the Academy need or wish to hear. We have submitted titles a couple of times in the past, but only once appeared on the program--that a year or so after the war.

David Roth and I have enjoyed a new addition to our partnership in the past year. He is Jim Sheridan, who comes from the Cincinnati program under Bob and Frank. He has given us a professional transfusion, which any organization needs once in a while.

We have treated two cases of subarachnoid hemorrhage from vascular malformations and one from a ruptured anterior communicating aneurysm in children under ten years since January. All were admitted practically moribund. Two succumbed, one after desperation surgery, and one rallied and has remained asymptomatic with conservative management. These are at best frustrating experiences for anyone.

Also within the year we have encountered three cases of tumor, two gliomas and one meningioma, admitted and treated by others for periods varying from one to three weeks under diagnoses of cerebrovascular insufficiency or thrombosis. One actually was treated by anticoagulation before referral. I know of one other case which turned out to have a carotid-cavernous fistula who underwent carotid endarterectomy after an arch and neck vessel study

without visualization of intracranial vessels or neurological consultation. It appears to me that this represents a pitfall that some vascular surgeons may get into with a somewhat narrow concept of cerebral physiology.

It appears that more education and cooperation is needed between specialties, at least in this locality. I wonder if others have encountered similar experiences. I just reread Frank Mayfield's Presidential Address to the Harvey Cushing Society in 1965. In this I believe he points out beautifully that the neurosurgeon perhaps has allowed himself to take a back seat in promoting better understanding and cooperation in certain fields, one of which is the national attack on heart disease and stroke. Frank, of course, was making a strong plea for a truly National Society which could better speak for us in dealing with National Commissions, etc. Our local experience certainly lends strength to his contention.

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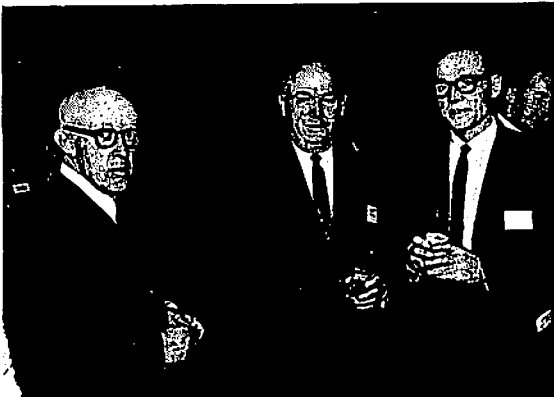
More and more of our membership have joined the grandfather's club. Tom has had a busy and interesting group of patients to handle. His comments concerning cooperation and education between the specialties will be found needed in most communities. Mary and Tom's nice family must keep them jumping with never a dull moment.

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"Blessed is he who carries within himself a God, an ideal of Beauty... ideal of Art... ideal of Science... for therein lie the springs of great thoughts and great actions."

Pasteur - 1892

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*Some of the old guard*





*Brit and Kristian Kristiansen*

It was a great pleasure to see many Academy members at the International Congress in Copenhagen last fall, and Brit and I were delighted to have our small neurosurgical travelers' club meeting in Oslo following the Congress.

Our older daughter, Kari, with her husband, Jonas, and their little boy went to live for one year in Urbana, Illinois where Jonas is taking postgraduate work at the University of Illinois School of Law. Our younger daughter, Mette, married in July 1965 another prospective lawyer. She is working in the Institute of Medical Biochemistry, University of Oslo. Kristian jr. went back to Montreal to continue his studies at the McGill Faculty of Engineering.

To recover a little after a very long, cold and snowy winter we went for a week to Paris in March this year, enjoyed museums and galleries and flowers, with a short visit to Doctor Guiot's excellent service at Hopital Foch. More snow awaited us on our return! In May the joint meeting of the Scandinavian Neurosurgical Society, the Deutsche Gesellschaft für Neurochirurgie and the Vereinigung Schweizer Neurochirurgen took place in Bad Durkheim, Germany. The main topic was "Cerebral Circulation" which

also was stimulated by a most enjoyable "wine seminar" included in the program. We then spent a couple of days in Zurich, enjoyed seeing Professor Hugo Krayenbuhl's famous department at the Kantonspital, and proceeded to Beirut, Lebanon, to attend the XVI. Middle East Medical Assembly. I delivered the sixth Wilder Penfield lecture at the American University of Beirut, and we had two weeks of exciting experiences through Lebanon, Syria and Jordan. The warm hospitality and kindness of our neurosurgical colleagues in Beirut, Damascus and Jerusalem gave us unforgettable memories. The origin of our culture came close to us in Byblos and Baalbek with their unique historical monuments. Julian Huxley's book: "From an Antique Land" (Max Parrish - London) is an indispensable companion for those who consider journeys in this part of the world. The soukhs and mosques of Damascus and the holy places of old Jerusalem were other highlights.

In the beginning of June we were off again for a meeting in Madrid arranged by Dr. Sixto Obrador on behalf of the National Health Service of Spain, to discuss neurosurgical emergencies. Dr. Obrador's energy and talents of organization have greatly influenced Spanish neurosurgery. We are looking forward to seeing him as president of the European Neurosurgical Congress in April next year.

Since our return home we have enjoyed visits from several friends from overseas, - particularly Dr. and Mrs. Penfield who stayed in Oslo for five days during which Dr. Penfield gave a lecture on Speech, Perception and the Uncommitted Cortex at the University of Oslo.

We hope to see many Academy friends at our next Scandinavian annual meeting in Gotenburg in the beginning of September.

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A most welcome, interesting and enjoyable letter from one of our corresponding members, and our appreciation as well for the good photograph.

As the members may know, Kristian is on the Editorial Committee for the Bulletin of the World Federation of Neurosurgical Societies, as well as Secretary for Federation Affairs.

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"A class reunion is where you get together to see who is falling apart. "

"Facts are stubborn, but statistics are more pliable. "



Arthur R. Elvidge  
July 4, 1966

I apologize for being a poor correspondent and realize it is a considerable time since I have written to The Neurosurgeon, and have missed seeing everybody very keenly. During the interval I have not made many headlines. Had flu in February for which I was hospitalized and when recovery seemed slow was re-admitted for another three or four weeks, and am still on part-time work. I have not attended so many meetings lately, leaving them for the younger men. In 1965 I felt that I must give more time to the Canadian Neurological Society, of which I was President. The meeting was in Edmonton and it was a great delight to have Bob Pudenz as guest speaker. There seem to be a great many meetings and congresses to attend these days. Our neurologists and neurosurgeons have now formed separate societies, mostly for business purposes and the two societies will meet together every year for scientific programs.

Regarding travel, in 1962 visited Zanzibar a few days before they joined up with Tanganyika to become the Federation of Tanzania. Also visited Addis Ababa and later toured some of the animal parks in Kenya and Tanganyika. The hospital in Addis Ababa seemed to be staffed mostly by Eastern Europeans. I visited three animal parks, the Amboseli and the Ngorogoro Crater and one other smaller park. I saw how lions organize in order to bring down a zebra, which was quite interesting to watch. In 1963 I went by boat as far as Spitzbergen and had an unusually fine trip through the Norwegian fjords both by car and by boat. We reached the pack ice around the North Pole, which I wish I could reach at the moment and get away from some of this dreadful heat in Montreal. In 1964 I had the opportunity of flying in an R. C. A. F. plane, with some businessmen, to Thule in northern Greenland, to see the various tracking stations in action. This, of course, was terribly interesting. On the way we dropped in at Goose Bay, Baffin Island, flew over the famous Thompson Falls in Northern Quebec, which was a thrill in itself, and on the way back flew down the full length of the Melville Peninsula, which I used to hear about at school as one of the coldest places on earth, and stopped over at Churchill. Last December I went on a similar tour of inspection of the NASA in-

stallations in Texas, Alabama, and Cape Kennedy, which was very impressive. In 1964 I went on a hurriedly arranged trip, my fifth, around the World, and on this occasion, however, I visited some of my former Residents. I flew from London to Tehran in a VC-10. In Persia I had planned to do sightseeing but also looked over one or two of the hospitals. In Persia or Iran I visited Tehran, Shiraz and Isfahan. I missed seeing Ken Livingstone, who was away at the time, but nevertheless visited the hospital. I took a trip by car from Tehran through the mountains, a hair-raising drive, to the Caspian Sea, where Darius III was chased through the mountains. Along the southern Caspian Sea I could hear broadcasts from Baku, from southern Russia, on the radio. I visited Persepolis and saw the tombs of Darius I, Artaxerxes and Xerxes. I did not see the tomb of Cyrus I, and the guide was very frightened of the tropical heat. Persia is an interesting country to visit. In India I spent a week at Lucknow with my former Resident, Dr. Tandon, who has now moved to the Professorship in New Delhi, which is, perhaps one of the key positions, if not the principal position in India, and I should think would be involved rather in administration rather than with patients as in Lucknow. I spoke to the students there and operated on an expanding lesion which they had trouble localizing as a result of an incomplete ventriculogram. I went from Lucknow to Madras and Vellore and met the Fellows in Vellore under Chandy, and they kept me busy from early morning to late at night. They called for me at 7:30 a. m. after breakfast, took me over to the hospital some three miles distance, told me to speak to the Residents, and had a case ready for me to do at 10:00 a. m., which happened to be a craniopharyngioma, and at 1:00 o'clock we had lunch and they drove me approximately one hundred and twenty-five miles to Bangalore and Mysore in the afternoon and evening. Needless to say I saw a fair amount but the visit, of course, was quite a hurried one. After two or three days in Vellore I went back to Madras to be the guest of Dr. Ramamurthi. I was quite impressed with Madras as a city as they seemed to have very wide roads and highways. Dr. Ramamurthi's wife is a gynecologist. They have a lovely home with a separate building for the wife's office. We made rounds in the hospital and I watched them do a Leksell stereotaxic operation very nicely. After staying at Madras for one or two days I ended up in Bombay and visited three hospitals there and, in addition, the Institute for Cancer Research. I saw an experimental unit in pasturization of milk. I visited also their atomic reactors, which have been built, I understand, in part, by Canada, and also by India herself. Following this visit to India, I went on to Ceylon to Kuala Lumpur and Penang and Singapore. Kuala Lumpur and Penang I found were quite nice cities, and there is a very modern looking University in Kuala Lumpur. I did not have time to visit the hospital in Singapore though I saw it. I left Asia through Hong Kong and met some of our nurses there.

Just before taking this trip and arranging it, I was called to consult in Venezuela, which meant delaying the Indian trip by about five days to a week. I had been to Venezuela before. It is a very beautiful country to visit. A month or two before that I went on the Greenland trip and also, I believe, flew up in a light plane to Lake Wakanicki and Mistassini which are up on a level with the lower end of James Bay and did a little fishing with the late Dr. Rabinovitch and some of his friends. We miss him very much. Last Fall I took a cruise around the Mediterranean. If I can get over this flu, I will probably go on a short trip in August.

I did a chronic subdural hematoma the other day, removing inner and outer membrane through a small bone flap with the help of a headlight, which is the way I like to do them.

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It's good to learn again something about Arthur, the world traveler, raconteur, and neurosurgeon. We hope he will soon be well again. We appreciate the photograph of Arthur and his camel.



*Anyone have a "Camel"?*

GRACE and WILLIAM LOUGHEED - July 6, 1966

As usual we have had a busy year in Toronto and are just now starting the summer season of diving and car accidents. Grace and the family are all well and our oldest daughter (Stoney, age fifteen) left last week to spend a month in the west at Banff School of Fine Art.

The Moppie (my 31 foot Bertram) went on the rocks last August and after considerable argument with the insurance underwriters, repairs have now been started and I am in hopes of having the boat in the water for my holiday in August.

Recently I encountered a case of an arteriovenous malformation of the cervical cord which extended from C-2 to C-7. This young boy was rendered quadriplegic shortly after his symptoms began. A cervical myelogram demonstrated a malformation but no enlargement of the cervical cord. He had a stiff neck but the spinal fluid was clear and colourless. I carried out a laminectomy and there was no evidence of subarachnoid blood. The malformation looked extensive and spread in the subarachnoid space from C-2 to C-7. We had just purchased a new diploscope so I decided to have a look at this malformation with it. Much to my surprise the diploscope enables us to resect the malformation from above downwards from the posterior aspect of the cord. Although in the gross the malformation looked like it was penetrating the spinal cord, under the diploscope it was clearly located in the subarachnoid space. When we reached the level of C-5 the malformation became truly intramedullary, occupying the left posterior column. Dissection was then carried upwards in the subarachnoid space to C-7 from C-5 and again the same attachment of the malformation at this level in the left posterior column was encountered. The intramedullary extent of the malformation was only 3 mm. in diameter and with the diploscope we were able to remove it. I did not encounter any intramedullary clot although my presumption is that there must have been some clot in the spinal cord and I missed it. There has been no improvement in his condition. This case, however, did arouse my interest because of the ease with which this malformation could be removed and because of the limited intramedullary component. I am sure that others have encountered this experience on numerous occasions, but it was new to me.

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Bill's case proved an interesting and difficult one. Jim Greenwood will be particularly interested in it.

We are pleased to learn something of Bill's family.



Ed and Kate Morrissey  
July 7, 1966



The meeting in Cincinnati was exceptionally well planned, and the Mayfields and McLaurins certainly left nothing to be desired. Bill Meacham and his committee arranged a very interesting, well received scientific program.

I certainly appreciate the advice and cooperation extended by the Executive Committee during my term as President. I am especially grateful to Ed Davis, whose work as secretary was of inestimable value.

A short time ago, Kate and I spent a delightful vacation at Mauna Kea on the big island of Hawaii. It is a beautiful spot--- excellent hotel; good food; fine sandy beach, not crowded and good swimming. The golf course was laid out by Jones, and is quite a challenge. I imagine Rockefeller is losing money and the prices are going up, but it is worth a visit. This is especially true for those members who are going to the Pan Pacific Surgical, and wish to relax for a few days before or just after the meeting.



Under the chairmanship of Ed Boldrey, we have the arrangements pretty well in hand for the San Francisco meeting. It follows immediately after the College of Surgeons, so I would advise those members who are planning to make their reservations for both meetings to do so as soon as possible.

We would like to get some idea as to the number wishing to play golf during the Academy meeting so that reservations can be made.

I was very much interested in Ed Boldrey's research on the various types of operative procedures that are done by the neurosurgeons in this area. It is an excellent study, very valuable especially for resident training, and he certainly should be urged to continue with this study.

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Word has it, as Ed has said, that Mauna Kea on the big island of Hawaii is the island paradise, with the necessity of having reservations well in advance. Plans for the wonderful meeting in San Francisco appear to be well in hand. From the photograph at Mauna Kea, Ed and Kate have discovered the secret of perpetual youth.

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"The ability to have our own way, and at the same time convince others that they are having their own way, is rare among men. Among women is it common as eyebrows."

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*A happy president*





Earl and Terrye Walker  
July 8, 1966

Now that the spring tour of meetings is over I can settle down to a nice hot summer of work.

After the Harvey Cushing Society meetings I was Visiting Professor at a number of Australian university hospitals during the month of May. This was a fascinating experience in many ways. In the first place, it is interesting to note the difference in the type of neurosurgical case which is prevalent in different parts of the world. The bread and butter disc of this country is not at all common in Australia and actually quite rare in Japan. In fact, in Tokyo last year not ten lumbar discs were operated upon in the University of Tokyo Hospital where more than 600 brain tumors were seen. One wonders if this marked difference in the prevalence of degenerated and herniated discs is related to genetic, somatophysical or dietary factors. Aneurysms and vascular malformations appear to be about as common in Australia as they are here but again are much less commonly encountered in Japan and the Asiatic countries. A good epidemiological study might bring up some very fascinating facts. A second point of interest concerned the neurological and neurosurgical manpower in Australia which by our standards is quite limited and yet in their opinion very adequate. Consider the city of Brisbane which has a drawing population of two and a half million people served by three neurosurgeons and two neurologists, according to their own calculations, quite satisfactorily. A third factor had to do with the intense interest in Australia and Asiatic countries in the problem of head injuries. Considering the neurosurgical manpower, there has been much more work on an epidemiological basis regarding head injuries in these countries than in almost any other part of the world. There are two quite excellent statistical programs being carried out in Australia at the present time which ought to give very significant information regarding not only the types of accidents, particularly automobile accidents, but also give a clue as to means of preventing some of the serious effects of such injuries. A number of other interesting points were apparent, not the least of which was the gracious hospitality of the Australians.

It seems to me that I meet more and more of the Academy members more and more frequently at committee meetings of various governmental and national organizations. These activities must keep a very considerable part of our membership on the go most of the time. One wonders if there is not some way in which these activities could be curtailed so that the time spent in organization and administration might be used to better advantage.

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Another entertaining and interesting letter from Earl, who really continues to see neurological surgery throughout the world as much if not more than any others of the Academy. It is becoming more and more apparent that our country has more neurosurgeons per capita than anywhere else. Again it seems so apparent that meetings of various kinds encroach increasingly on the time of our members, so that one is apt to become an administrator rather than a neurosurgeon. Possibly that should be a prerogative more and more of the Senior Neurosurgeon. The Australians are people of great charm. As mentioned in HERE AND THERE, Earl has been the recipient of many of the significant honors that come to few of our group.

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"Nobody is wholly tolerant. The more you believe in tolerance, the less you can tolerate the intolerant."

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*Drifting down the river*





Raeburn and Seleta Llewellyn  
July 8, 1966



We here in New Orleans marked the year just passed as a good one. Our families and homes weathered hurricane Betsy. I personally enjoyed a quiet week in Madrid Spain after appearance at the World Congress meeting in Copenhagen. The wonderful climate and the relaxed manners of the Spanish prompted me to contemplate the many fortunes so common to the readers of this unique news letter but perhaps so often accepted and overlooked by most. On one particular occasion in Madrid, I was so completely at peace with the world I could not think of a single problem confronting our neurosurgical group in New Orleans. This occurred while enjoying a roasted pig (newborn, complete with small apple) and eaten while wearing dark glasses, as the waiter observed the pig's eyes were brighter than mine. This letter, in fact, was conceived while under the influence of this pig. I included in my contemplation at the time all conceivable problems including the serious detriment supposedly facing most modern executives and leaders described as the "lack of feed back." The leader, and this must include neurosurgical department heads, is supposedly isolated from his associates by lack of meaningful, frank, personal communication. I would be the first to admit that "feed back" is no problem with me personally as Dr. Echols and Dr. Kirgis are not only my seniors but indeed trained me and from long association have no reservation in this regard. Dr. Donald Richardson and Dr. John Jackson, of the younger group, both trained here, as I did, and in fact are old enough to recall my own training days.

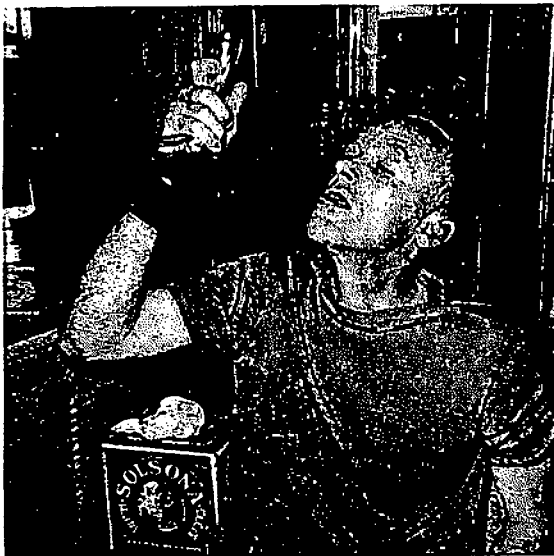
The present day neurosurgical residents may have faults but certainly, in my experience, cannot be accused of not being vocal, particularly where I am concerned. I am confident, therefore, that we have "feed back" to spare here in New Orleans. We have no foreign residents in our program. We have no NIAH grant renewal problems, as we do not have a dime of grant support to renew. We have no undergraduate teaching problems as the school curriculum has contracted and excludes subspecialty class instruction. The neurosurgery division here is small as to office space and will manage itself efficiently if left alone to do so.

In contemplating all of this in Madrid, I was pleased and, as is my custom, I confided in my eight-year-old daughter, Patsy, on returning home. She remarked, "Let's play like you have a problem, Daddy. . . . Tell me exactly what your answer would be." I thought about this for a while and considered myself most fortunate in recognizing no problems, as I apparently have no answers either. I would be happy, however, as is completely characteristic of individuals with no answers, to help readers of THE NEURO-SURGEON with their problems in any way asked or they may write directly to my daughter, Patsy, whichever they wish. We here in New Orleans grow stronger and stronger each year by using what talents and facilities we have and do not fret away time and energy contemplating things we do not have. This is our strength and with this strength we will resolve our problems as they arise as indeed they will with time.

My philosophy and one I would recommend to our group has been magnificently phrased by Ole Satchel Paige, the long-time professional baseball pitcher who said, "I never look behind me. . . . something might be gaining on me." The enclosed snapshot was especially posed in Madrid by the undersigned for this publication. This photo depicts the typical man with no problems who never looks behind him.

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We are happy again to hear from Raeburn and to enjoy his amusing and sardonic comments. We also enjoy his photograph, "A day in Madrid."



*A day in Madrid*



Glen and Marion Spurling  
July 9, 1966

I had planned to write something that would be suitable for the News Letter, but now that document has long since gone to press, so I will scribble a few personal news items.

As you will note, we came to La Jolla after Marion almost died of acute potassium depletion following a moderately severe diarrhoea. After two weeks in Scripps Hospital she recovered and is now about as good as new. However, we decided that we had better be closer to expert medical attention, so we moved here.

Our apartment is just one block from the coast--we can see and hear the breakers during rough weather. It's one of a large group built some 18 years ago. No dogs, cats, or children allowed so most of our neighbors are in the older age group. There are several retired doctors, many doctors widows, quite a number of lawyers, but the majority are retired business people. The owner, a retired contractor, lives in one of the apartments and he sees to it that the landscaping is kept in perfect condition. Actually, there are just four units in each building, and each unit is well separated from the next one. All-in-all, it's a very desirable place to live and we're satisfied.

Yes, I'm still busy with my newly found hobby--painting. The next day after I retired from practice on my 68th birthday, I enrolled in the adult art class at The University of Louisville. I had never had charcoal or a brush in my hand, so they made me start from scratch. I spent the first six months drawing and sketching, then they grudgingly permitted me to buy materials for oil painting. They insisted that I should try water colors first--but I was in too much of a hurry for that! After doing still lifes for six months, I graduated to portraiture, then to landscapes (all of which have been done in California under the tutelage of Mr. Van de Velde). But perhaps the thing that I've had the most fun with is painting surgical instrument trays. I seem to be able to change them around so each one is a little different picture. Fortunately, Miss Roe, our operating room supervisor, saved all worn out

neurosurgical instruments, so I have a generous supply.

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It was such a pleasure to receive this thoughtful and enjoyable letter from Glen. Our requests for a letter were returned from Rancho Santa Fe. We are happy they are nicely settled in La Jolla near the Scripps Clinic, which is an excellent one. La Jolla is a beautiful spot, now a suburb of San Diego. This is the place where your editor learned to swim as a boy.

Interestingly, when Virginia and I were at the Rancho de los Caballeros in Wickenburg, Arizona, I noticed a very good looking man and his wife there at cocktail time, and thought he was probably a wealthy oilman from Texas. Later the hostess brought us together and said she thought two doctors should get acquainted. It turned out that neither of us recognized the other, even though we were contemporaries at Johns Hopkins. Ed Keeney has been with Scripps Clinic in La Jolla for some years. Time does things to us.



*Two contemporaries are reacquainted at Rancho de los Caballeros*



Dorothy and Jack French  
July 11, 1966

The past year has been a very busy one for Dorothy and me. She logged well over one hundred thousand miles running back and forth to concert tours and opera performances all over North America. Her season at the Met was long and fatiguing but very rewarding. The high points, I suppose, occurred on December 1st when she celebrated her 20th anniversary at the Met with a fine performance of "The Girl of the Golden West" and a gala party at "21". Another milestone, and a sad one for her, came this spring when she and the other artists performed for the last time in the old opera house, or so they thought. Apparently the possibility now exists that the structure will be retained.

Another substantial event for both of us occurred last Fall when we moved from Palos Verdes back to Bel Air. Our present house is about a block away from the one we left ten years ago. It is about five minutes from my office, an order of magnitude less than the Palos Verdes house which, with traffic as it is today, is a giant stride forward. The new house has another advantage of being right on the twelfth hole at the Bel Air Country Club thereby fulfilling one of Dorothy's life-long aspirations--to be able to stride out of her front door into a game.

The year has been unusually busy for me also. Dealing with deficiencies in resources required to provide general research support for scientists at the Brain Research Institute has been my biggest problem. Probably all medical schools, certainly those built in or engulfed by large cities, are constructed without sufficient attention to staff requirements for animals, electronic and mechanical instrumentation shops, computer facilities, editorial assistance, visual aids, and administration. Solutions to these deficiencies are unusually difficult because they require not only operating subsidy but space as well. After some five years of negotiations with the National Institutes of Health, NASA, and the Air Force, we are approaching these solutions for the BRI which has been handicapped by these inadequacies probably more than any other division of the Center for the Health Sciences. Last week we installed the last of twenty-one house trailers which will provide a little over ten thousand

square feet of space, across the street from the Institute in an experimental orchard being phased out by UCLA. In them we have installed resources designed to relieve our deficiencies, subsidized by grants and contracts provided through the enlightenment of our helpful donors. The tangible evidence of approaching solutions to these problems has been of inestimable morale-building value to us all. Personally, I view this initial success with some dismay; now I shall have to find the money to build permanent facilities to house our new additions.

My principal clinical outlet continues to be the Long Beach Veterans Administration Hospital. My Saturday mornings there, plus an occasional weekday when possible, are a joy in which I indulge myself with jealous concern for rare and necessary absences. Bill Porter, aided by Anselmo Pineda do a magnificent job of full time attention to clinical, educational, and research activities. Their close association with the BRI makes it possible for me to see them in Westwood almost as often as I do in Long Beach.

I was pleased to receive the Distinguished Accomplishment in Medicine award given by the UCLA Alumni Association during the past year. In academic, as in other environments, a little "lovin" does wonders to sweeten up an association punctuated by occasional battles.

Dorothy and I look forward with pleasure to the meeting in the fall when we will see the Reeves and other members of the Academy once more.

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An interesting and informative letter. We were in New York for the meeting of the Journal of Neurosurgery not long after your gala party at "21". One of the owners, who has known Virginia for a long time, mentioned your being there--this when we were there with friends.

From the description of your busy life, it would indeed seem indicated that you hide-away in the "Hide-Away Cottages" in Honolulu. It must be a joy for both of you to live in beautiful Bel Air, where you have a fine golf course at your front door. Congratulations to both of you for your fine achievements during the year past.

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"The tragedy of war is that it uses man's best to do man's worse."





Hank and Nancy Svien  
July 11, 1966

Currently, we are attempting to evaluate the effectiveness of pituitary stalk section on diabetic retinopathy. We have carried out stalk section in 40 patients over the past three years. All but two patients are living; one died six months after surgery from a coronary attack and the other patient was killed in an automobile accident one year after surgery.

One of our ophthalmologists has reviewed, from the visual aspect, 30 of these cases in which follow-up is longer than one year. From his analysis, it appears that the chance of retaining vision as it is, or of improving vision (over a one to three year period) after stalk section is 70 per cent, and that retinopathy improves in 43 per cent. However, a review of 30 similar cases culled from our records in which no surgery was done suggests that the chance of retaining vision or of improvement is 50 per cent, and that retinopathy improves spontaneously in 23 per cent.

If the results of the control study (which admittedly is small) proves (on further study and augmentation of number of cases) to accurately delineate the natural course of the disease, then the surgeon must evaluate even more carefully the decision to advise stalk section for these patients.

Family activities continue to burgeon with the children growing up. We had a great trip to Naples (by ship), Amalfi, Salerno (after 22 years and this time in sport clothes), Rome, Dubrovnik, Belgrade, Greece, the Islands, Venice, Copenhagen, Oslo, Bergen, and then home, last summer. This summer Kaia, who finished her first year at Smith, is in Guadalajara studying Spanish. Beth, who will be a senior in high school, is at Outward Bound Camp; and Rik (age 13) is busy attending summer school in the mornings, practicing with his "group" in the afternoon, and playing baseball and skating (for hockey) in the evenings. Accordingly, Nancy and I spend some of our time worrying about the girls and driving Rik about town. We keep telling ourselves that they are having wonderful worthwhile experiences.

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Hank's discussion of pituitary surgery for diabetic retinopathy is indeed revealing and important. What an interesting trip they had abroad. We appreciate reading about the children.

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**Optimist:** One who expects nothing, and therefore is never disappointed, and is always pleasantly surprised.

**Celebrity:** A person whose name is in everything but the telephone book.

**Traitor:** One whose footprints on the sands of time leave only the marks of a heel.

**Courtship:** A period during which the girl decides whether or not she can do any better.

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Betty and Hunter Shelden  
July 11, 1966



Betty and I have recently returned from a short but most interesting trip through southern Germany, Austria, and northern Italy. Visited Padua and saw Piero Frugoni's excellent 80-bed neurosurgical unit, filled with tumors and aneurysms. A most interesting experience, to visit a service of such size and find only one disc and one head injury!

In Freiburg, in south Germany, Professor Riechert has developed an outstanding service. They are primarily interested in stereotaxis, both clinical and experimental, and are carrying out some outstanding investigation of isotopes implanted directly into tumors. Apparently they are not very happy with the results of stereotaxis in relieving pain. Their equipment was beautiful, especially in radiology.

I have inherited Don Matson's position as Chairman of the American Board and only hope I can do as good a job as he did during his many very efficient years on the Board. It should prove

to be a most interesting period with Medicare and its many possible effects on neurosurgical training.

Bob and I are busy trying to extend our work on the electrical control of pain and the problem of depolarization in general. Our first three patients with trigeminal neuralgia, and one with motor tic of the facial, treated with implanted units activated by an external radio frequency have remained free of pain without sensory loss for over three years. We are now attempting to find out more about the physics involved.

Recently, I was appointed Neurosurgical Consultant to the Navy by the Surgeon General. I haven't, as yet, any idea how much time this will require, but it looks like the problem will consist in indoctrinating a new generation, as quickly as possible, with the knowledge and experience which took us all four long years to acquire!

Our three boys are well, busy and, occasionally, at home. Geoffrey, our youngest, is touring Europe this summer for fun and experience, with as little money as possible. Jim has finished his service, four years with the Marines, and is now working in Los Angeles. Jay, our oldest, graduated from Southern California in International Relations, but after three years in a Marine Helicopter Squadron, the last thirteen months in Vietnam, he decided he had had enough of International Relations and has returned to school for a postgraduate business program.

Betty developed a herpetic keratitis which really complicated the last few days of our trip, but has made a good recovery. Vision is normal, and no residua.

*Let's dance*



-----

Hunt has written an enjoyable and interesting letter. The trip to Europe must have been fascinating, and it seems so obviously important to know what others are doing in the field of neurosurgery and in their departments. As some may know, Hunt spent a couple of years in the beautiful city of Freiburg in southern Germany during the days of his youth and is much at home with the German language.

His important position as Chairman of the American Board of

Neurological Surgery is one of the most demanding in our specialty.

Their work on the electrical control of pain is most stimulating. Congratulations again to Hunt for being Neurosurgical Consultant to the Navy. His experience with them during World War II, plus his years in the discipline of neurosurgery, fits him admirably for this high honor.

It's always of interest to our outstanding group to learn about the children of our members. Any young man who gets into the Marines in the first place has to be sound, and after four years must have had a world of experience. How fortunate Jay returned home safely after his tour of Vietnam. He has made a wise choice in undertaking a postgraduate business program.

We are glad to know Betty recovered so well from the herpetic keratitis, which can be one of the most painful and enduring conditions.

\*\*\*

"The ones who usually manage to get the most out of middle age are the grandchildren."

"Nobody has a better memory than a small boy who has been promised to be taken to a baseball game."

\*\*\*



Harry and Margaret Botterell  
July 12, 1966



Health is a provincial responsibility in Canada, and Ontario is in the process of introducing government-sponsored "free" insurance to pay the doctor for all citizens who have no taxable income under the income tax regulations, and with reduced rates for those with limited taxable income. In effect this is the anticipated death knell for the medically indigent patient. Each medical school and hospital in the province, in their own way are moving in an attempt to develop a solution to new circumstances which will preserve what was good in the old public ward with the

interne, assistant resident, resident staff man relationship in a closed setting. The problems faced by medical schools in small communities vary widely from the situation in a large metropolitan centre, and Queen's is situated in Kingston, a community of about 70,000 people. In our immediate area are about half a million people.

It is too soon to report any sort of definitive solution. Out of our 1,000 general hospital beds, arrangement has been reached with the university whereby a minimum of half the beds in each hospital will be devoted to closed wards whether the patient is public, private, or semi-private.

Margaret is well, and loves living beside the lake. Daughter Jocelyn, who was coming along nicely in the ballet, was forced out by an injured back and has now just finished her first year at York University in Toronto. Daughter Daphne is busy with three children and a husband who works for a Boston firm of investment counsellors in a Toronto branch.

It was delightful when in Toronto some two weeks ago Joe Evans was made an honorary member of the Canadian Neurosurgical Society and I had the great pleasure and privilege of introducing him to the audience and presenting him with his parchment. His review of cranial cerebral injury with a survey of recent advances was extremely well received.

Margaret and I send our affectionate greetings to all our old friends whom we have missed so much from the lack of seeing them during the past four years.

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It's a pleasure to hear from one of our distinguished past presidents. His description of the problems, educationally and otherwise, precipitated by socialized medicine in our countries is becoming a familiar story to all of us.

We are happy to learn about the children and their doings and pleased indeed to find that Joe Evans was made an honorary member of the Canadian Neurosurgical Society.

\*\*\*

"What's happened to you!" explained my husband one evening when I came into the living room with my head bristling with curlers. "I just set my hair," I replied.

"Well," he asked, "What time does it go off?"

ROBERT W. PORTER - July 12, 1966

I realize that the hour is late for submission of material for The Neurosurgeon, but will send this brief note along anyway on the chance that it might still be included. I apologize for its tardiness, but circumstances in Long Beach this year have not been particularly conducive to the accomplishment of the type of activities which make interesting reading for members. An unusually heavy administrative load has been necessitated by our new construction program for a 1700 bed facility and by a complete turnover of administrative personnel. However, our new buildings are going up rapidly and the ultimate result should well justify the effort expended.

Undoubtedly the high point of our clinical investigative endeavors this year has been the fruition of our single unit recording program during stereotactic surgery. We have used essentially the same techniques which John Gillingham perfected and utilized so effectively. He was kind enough to include me in these activities during an extended stay in Edinburgh two years ago, so with such first hand knowledge it was not particularly difficult to adapt them for our purposes. We have found them extremely useful in the localization of thalamic structures not only by means of the sensory responses evoked but also by the relationship of the neuronal firing patterns to the characteristics of the tremor. We feel that such localization has been a major factor in accounting for our markedly improved morbidity figures in our Parkinson patients. Our basic interest from a research standpoint is directed toward the autonomic aspects of extrapyramidal function. Unit recording techniques have not only allowed us to localize visceral inputs to the thalamus in the human, but have also given us a chance to study the thalamic inter-mediation of a sustained visceral sensory input which will usually increase tremor activity rather markedly. Autonomic components of extrapyramidal syndromes are so overshadowed by the more obvious features of such disease that they seem to have been relatively neglected in the past. It is our hope that we can eventually look for such effects of extrapyramidal activity in both the normal and diseased state in the laboratory as well as clinically. As we currently have it planned, it shouldn't take much more than a life-time or two to complete.

I am sorry that I didn't make it to the Cincinnati meeting, but I understand it was an unusually good one from all stand-points. I am looking forward to seeing you in San Francisco in the fall.

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We are pleased to receive this interesting letter from Bob. We regret not having his photograph available to grace the top of the page.

His work on stereotactic surgery is just as intriguing as I'm certain his administrative headaches are not. Imagine having to handle administratively a 1700 bed facility and all of the red tape going along with it.

\*\*\*

At a banquet: "Well, did they like your speech after dinner?" "Rather!, when I sat down everybody said it was the best thing I'd ever done."

Young man to draft board: "But you can't turn me down. I have proposed to three girls, told my boss what I think of him, and sold my car."

\*\*\*



Exum and Frances Walker  
July 18, 1966

As my special interest in disc problems has continued I have revised my concepts of the basic causes of pain and of treatment from time to time. The following comments may interest some of you and may be challenged by others.

I conceived of and worked out the surgical details for the anterior approach to the cervical spine for disc problems in September, 1955 and have employed this technique in a large number of cases since and feel that this adds a useful procedure for cervical disc disturbances and some other problems in this area, such as fracture-dislocation.

Smith and Robinson worked out a somewhat similar approach independently at about the same time. I introduced this approach to Cloward as well as a technique for cervical discography and he and others have reported extensively on these subjects since. I believe I was probably the first to do a cervical discogram (September 24, 1955).

The anterior approach has certain advantages over the posterior procedure. It is technically much simpler and easier,

providing better exposure for disc removal and decompression of the neural structures with less nerve root trauma and adds stability to the interspace when fused. This is not only a useful procedure for the typical ruptured discs where nerve root decompression is the primary objective, but adds stabilization which can minimize the chronic pain which so often follows simple disc excision, as well as offering relief for the chronic pain from cervical trauma or degeneration.

The surgical procedure has been gradually refined. Initially, I worked out and used the circular plug technique but now believe that rectangular shaped plugs are superior although the circular plug is easier to use.

I have been using interbody fusions for lumbar discs for some twenty years. I find that I am gradually fusing a smaller percentage of disc problems, have a clearer concept of which ones should be fused, and prefer a transabdominal approach. I feel that in certain selected cases that this is a very useful procedure and should be used where indicated until we have something better.

While discography has been criticized by many, I believe it is a very useful diagnostic procedure and should be used when properly indicated, skillfully done and interpreted with judgement.

I feel strongly that more emphasis should be placed on weight control and progressive exercise programs to hasten convalescence, improve functional capacity, and minimize long range disability.

I may have learned enough from my personal experiences to justify a place on the program sometime soon.

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It's nice to have a letter again from Exum. We're sorry we have no photograph available of his wife.

He has presented the favorable side of the anterior approach for the problem of the disc pathology and concerning this controversial subject. Of interest is his comment that he introduced the approach to Ralph Cloward.

\*\*\*

Woman fixing drinks to guests: "Oh another one won't hurt us - 65 per cent of the spirits are neutral."

"Nobody is sicker than the man who is sick on his day off."





Gus and Helen McCravey  
July 26, 1966



The McCraveys have reached the period in life when time is at a premium. The many activities and obligations, as well as two teenagers, keep us busy much of the time; however, we do get out of the city occasionally and we are looking forward to the meeting in San Francisco.

The snapshot enclosed shows Helen and me in Frogner Park in Oslo, Norway prior to the meeting in Copenhagen last year. I had a most delightful visit to Professor Kristiansen's Clinic and was interested to see the total dependency of the neurosurgeon on the neuroradiologist.

*Gus and Helen*



The other photograph of the youngsters is more recent, showing John as he graduated from McCallie School and Martha finishing her junior year at Girls' Preparatory School. John will be going to Dartmouth this fall.

I have nothing unusual to report of scientific interest, but we continue to be involved with the routine neurosurgical problems. Our partnership of McCravey, Boehm, and Waters has recently been enhanced by the addition of a fourth man, Roger G. Vieth. Doctor Vieth comes to us fresh from his residency with Doctor Guy Odom, and we are expecting a great rejuvenation by the addition of this new blood line.



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*Martha and John*

We are happy to have the recent photograph of Gus and Helen, and particularly of John and Martha. John is fortunate in being admitted to such a fine institution as Dartmouth, particularly when entrance these days is so difficult.

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Hannibal and Margaret Hamlin  
July 28, 1966

Most of the prospective registrants for the San Francisco meeting contemplate the experience with apodictic apostasy. We find by some queer leger de cerveau that anticipation of return to the Bay Area provides more sentimental excitement of anticipation than remembrance of the last visit. Only a few other cities, if any, in the U.S. or the world, for that matter, share such a mystique with the transient guest.

Moscow is just the opposite. A great place to recall:

the Kremlin ... the Bolshoi ... the Pushkin ... Hotel Ukraine ... The Burdenko Institute! But what a feeling when you turn your back on the Red Star and walk out through Kustom Kontrol at whatever exit. Your visit to Russia depends perforce on your Intourist Guide - but that would require a separate chapter to explain. Even the final encounter with the CCCP is barbed as the official grimly scans your face to compare the mug shot on the special blue entry permit you must carry at all times, and then he keeps the \$10.00 souvenir of your only visit. They don't even do this at the Chinese or Albanian borders - but there they don't even let you cross over.

Interesting experiences can occur at the inlet to the West Berlin corridor. There are two such roadways for vehicular traffic and the one at Jüchoh (pronounced as if you were about to spit) is unique for more than its name, especially when it is raining with scarcely enough shelter in the barnlike shacks for the crowd of transient tourists, truck drivers, and Bundesleute. The queue eventually moves you along to a transom where a greasy-haired female stares at you - then slams down a window that says "Geschlossen". You need to go to the Jon too, but you can't surrender your lead spot in line. (Your wife is comfortably relaxed outside in the car.) At last the window opens again and a new comrade looks over your entry form. "Ist quatch - sie müssen ein ander zu machen" ... "Kennen mir hier bleiben?" "Ney!" You get shoved along - Ausgang! Well, you get to relieve your bursting bladder anyway (outdoor pisoir). The repeat form is finally okayed - marked, stamped and initialled. "Ein moment!" You're not off to the Autobahn yet, but to a similar adjoining shack where you get another form on which you must list all currency, cameras, side-arms, and any electronic devices you are taking through the East German corridor (where the motorist is frequently reminded DO NOT STOP). Total expenditures in West Berlin are recorded on this document which is inspected when you check back through. Traffic at the end of the border zone moves at snail's pace to the checkpoint where your documents are again certified; then a 30 second pause at the West Berlin politzei and 10 minutes later you are driving along the Kufurstendam. A direct flight to Templehof Airport in the West where the East Berlin officials are kept in dog houses will spare you all the intriguing fun of the Autobahn passage.

Unique among all European forms of travel perhaps is a night a la couchette - des Wagon Lits which provides one 6-1/2 x 2-1/2 foot slot in a double tier of three erected two feet apart across the transverse dimension of the compartment. And for bisexual accommodation (not in the same slot, though, except for mother and infant). The women usually doff suit coats and outer skirts, some pre-remove girdle and bra, and invariably cover the face with a kerchief. The male occupants keep on pants and shirts. Everyone lies unshod and the eventual search for matching shoes is quite an

event. A state of real sleep is almost impossible to attain. Snatches of REM or dream trances are interrupted by the sounds of your couchmates or extrawagon noises. The first rude awakening comes when the conductor bursts in with a switch-on of lights and loud requests for tickets. At least four of the unhappy coucheurs manage to find their fahrkartes (billets, etc). He promises another visit when he returns to get the delinquents. Next alarm comes shortly after a jolting halt - then quiet - you doze off again. It is a border stop for departure inspection of passports with another re-arousal to follow by the entry official after crossing. Now you realize that there are two more borders ahead. So you evacuate your couchette and make camp with the baggage on the platform - at least you can smoke and try to read a paperback.

This travelogue was started with intent to describe a visit to the clinic of Professor Kunc just outside Prague; but the trip took so long by train (see above) and auto (several delays due to bad motor fuel) that we lack space and time now to do him justice. It was a great experience to watch him work and to listen to him talk about spinothalamic conduction of pain. His O R nurses, however, must be mentioned: muscular, yet shapely, clad in wooden sandals and thin, practically transparent shifts over bikini-like underthings. They certainly should keep some zing in the Czech neurosurgeons of Prague.

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An enjoyable and interesting letter from Hannibal. In a few paragraphs he has devastated the totalitarian, imperialistic operation of communistic national socialism, as well as that of the novel, Dr. Zhivago.

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Marjorie and Robert Robertson  
August 2, 1966

In spite of your heroic efforts to get me to write you before the NEUROSURGEON went to press, it seemed impossible for me to manage this, even though I made the bravest of attempts.

I am not proud of my record for communicating,

particularly to the wonderful publication that you edit and publish, and which naturally I enjoy more than any publication I receive because of my intimate connections.

It would be nice if I had something interesting to report. The fact that I didn't may have influenced my not getting this to you in time, but if so, I was unaware of it.

Even though this will not reach you in time, I will give you a report starting that both Marjorie and I are doing fine. It doesn't seem that there is enough time for anything any more. I tend to interpret this as not so much the fact that I am busier, but that I may not do things as fast as I once thought I did. Of course, additional responsibilities that come with time may influence this to some extent, but I will not be that charitable with myself.

Our youngest son is still in school. We expect him to get his law degree in June of 1967, having finished up his business administration this past year. The older one is employed as a design engineer, so that aside from my connections with the Baylor University College of Medicine, after this coming year we will have no further foreseeable university connections.

Since a few weeks' tour of Europe last Fall, nothing really exciting has occurred except for the quail bird season and dove shooting as soon as we returned.

Neurosurgical practice continues, but I must say there is nothing startling in this that has not always been startling and interesting, and I am doubtful we can expect anything of a break-through in any major degree in this field, since it has become mature as opposed to something like cardiovascular surgery. Nevertheless it keeps me occupied.

Our Methodist Hospital continues to improve facilities as we go along. One of the major improvements in the last two years has been an addition to our X-ray Department by a most competent and interesting fellow named Robert A. Evans, our NeuroRoentgenologist. He has been very stimulating to us all and extremely helpful in our diagnostic problems. We are currently in the process of beginning some talk about making our neurosurgical service more sophisticated. Money is the big problem as usual.

My brother Joe and another associate, Doctor Bill Cheek, and I are trying to hold up our end of things, but it is possible we may need more help.

I regret my heel dragging.

I will see you in San Francisco in October.

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We're pleased to receive this word from Robbie and to learn something about his activities, as well as those of his family. We regret not having a photograph of Marjorie.

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Wife: "Every time you see a pretty girl, you forget you are married."

Husband: "You are wrong, my dear. Nothing brings home home the fact with so much force."

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*Ed Boldrey's 60th birthday at the Bohemian Club, San Francisco, June 17, 1966. Edward Connolly, senior resident, presents the trophy, "The Gold-Tipped Bovie." Photo by Cone Pevehouse.*

## HERE AND THERE

Only too quickly another autumn is upon us as we prepare to attend the 28th annual meeting in San Francisco. Much has occurred since the delightful occasion in Cincinnati. Many of our members have been the recipients of honors indicative of their distinguished place in the field of neurological surgery. As one reads over the interesting and variegated letters from the membership, it becomes apparent the members represent a dynamically intelligent and superior part of our society. Not only that, but increasingly it is evident the Academy is the "Blue Book" and the "Who's Who" in neurological surgery.

Francis Murphey has completed his term as President of the Harvey Cushing Society and distinguished himself during a difficult year of that society's constitutional transition. He now serves on the board of directors. Eben Alexander replaces Francis as President, and Henry Schwartz becomes President-Elect; so that the high honors in this international neurosurgical society are in the hands of prominent members of the Academy, including the important positions of Secretary held by Ben Whitcomb, and Treasurer by Bill Meacham. Moreover, the Academy continues to dominate the membership of the important American Board of Neurological Surgery. Additionally, the membership of the Editorial Board of the Journal of Neurosurgery is made up entirely of members of the Academy, including that of the Editor, taken over and handled so well by Henry Heyl. The newly appointed member, whose term begins in 1967, is Charles Drake, who was also elected Vice-President of the Harvey Cushing Society.



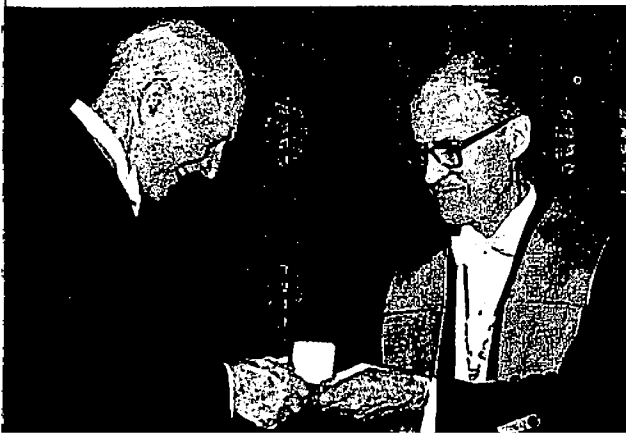
One of our early secretary-treasurers and presidents, now Professor of Neurological Surgery at one of our most illustrious medical schools, has had many important honors showered upon him. A. Earl Walker has been elected President of the Society of Neurological Surgeons, President of the American Neurological Association, President of the World Federation of Neurosurgical Societies, and has been appointed to the National Advisory Neurological Diseases and Blindness Council.



Larry Pool was elected Treasurer of the World Federation of Neurosurgical Societies; Bob King Assistant Secretary for Congress Affairs; and Bill Scoville, Editor of the Federation Bulletin. Charles Drake was appointed Editor of Publications for Canada.

Frank Mayfield, Past President of the Harvey Cushing Society, had the honor of giving the Scudder Oration on Trauma, October 19, 1965 at the Clinical Congress of the American College of Surgeons in Atlantic City.

Our Honorary Member, Dr. Wilder Graves Penfield, was honored with the Starr Award at the Annual Meeting of the Canadian Medical Association in Halifax, June 1965. "The Award, last presented in 1957, was established in the name of a former General Secretary and President of the CMA, Dr. Frederick Newton Gisborne Starr, to honor colleagues who have achieved distinction in one of the fields of Science, the Arts, the Humanities, or Literature. Doctor Penfield has made many valuable contributions to medical and non-medical literature. The Institution which he founded and directed for thirty years has been a mecca for students from all over the world desirous of perfecting themselves in the art and science of neurosurgery. Doctor Penfield's contributions to Canadian life, to international understanding, the teaching of children, the second career, and countless other realms of human activity have been well recognized in the past, and the Award is a fitting tribute from the profession he has so long, so brilliantly, and so faithfully served."





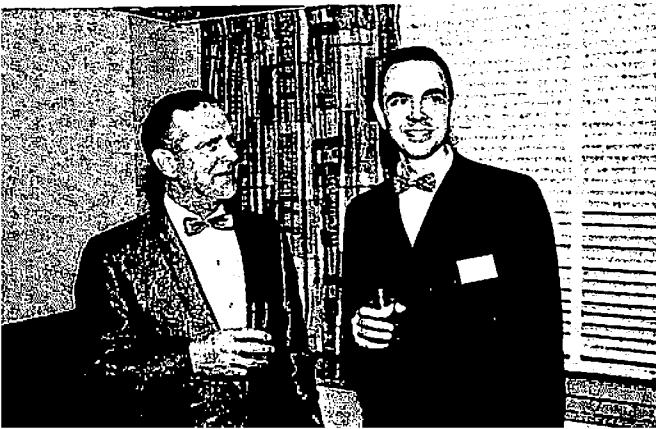
Wally Hamby has written, "Carotid-Cavernous Fistula", published by Charles C Thomas.

Our daughter, Lander, graduated from Leland Stanford Junior University this June and John Raaf's daughter graduated from the University of California at Berkeley. Additionally, John and I attended our 40th reunion at Stanford, which rather shockingly reveals our youth. Ed and Helen Boldrey's daughter, Susan Ellen, was being married at that time in the magnificently beautiful Stanford Memorial Chapel to Mr. Eric Ernst Frische, an electrical or atomic physicist Ph. D. This allowed us to attend and as well to be with them for their reception at the Hillsborough Racquet Club. We were happy to be with Dorothy and Howard Brown, Cone and Maxine Pevehouse, and John and Shirley Hanberry.

Ed Boldrey just completed the presidency of the Society of Neurological Surgeons and the Western Neurosurgical Society. John Green is President of the Western Neurosurgical Society, and Arthur Ward the President-Elect. In this year's "Clinical Neurosurgery", Volume 12, dedicated to Dr. Edgar A. Kahn, Arthur has contributed the paper "The Physiology of Concussion", Bob McLaurin "Metabolic Changes Accompanying Head Injury", and Bill Meacham "The Management of Head Injuries Complicated by Major Extracranial Trauma".

At this year's meeting of the American College of Surgeons in San Francisco, John W. Hanberry will be the surgeon on Telecast from Stanford on Friday, October 14th. This will be moderated by Ed Boldrey.

Ted Erickson, Larry Pool, and A. Earl Walker have joined the Senior Membership roster, and as the years creep up on us more may be expected to be with this enlarging group. As George Maltby has emphasized in his letter, the importance of obtaining the best in the membership becomes increasingly important. Nostalgia can play briefly with the illusion that all is as it was, that the sun never sets, and the leaves stay forever green. It's a dream nobody really believes while trying desperately to hang on to it. Things change, the sun sets, and the leaves grow dry and brown and fall from the trees. The great Yankee baseball team is gone.



*Guy and the  
Academy Award  
winner*

The Academy Award, "The Antigenic Potential of Human Gliomas", was given by M. Stephen Mahaley, Jr. from the Duke University School of Medicine. Honorable Mention Award, "Protein Synthesis in Normal and Abnormal Neurons went to Jacques Francouer, University of Toronto.

The people of San Francisco have a particular affection for their city, and most visitors--I'm sure all of us--share this love. Not infrequently it is referred to as "Bagdad by the Bay". It is spoken of as sparkling like a jewel on our western shores. Its 800,000 or more people are crowded into an area of some 50 square miles on a peninsula surrounded by a magnificent harbor which looks out to the Pacific Ocean and the Orient.

Its hills are reminiscent of Rome. Its tall buildings in the financial district remind one of New York. Its beautiful bay brings back memories of Hong Kong or Naples. Its flower stands, winding streets and outstanding restaurants effect a nostalgia of Paris. Its Old World charm, its culture and tradition, and its not infrequent fog simulate that other world capital, London. With all of this it has a freshness and an exoticism of our great West.

For the gourmets and others in our Academy, the celebrated restaurants which get the publicity and the awards--and deservedly so--include Ernie's, Amelios, Trader Vic's, Jack's, La Bourgogne, Alexis', the Blue Fox, Fleur de Lyes, Doro's, Kan's (Chinese), Yamato (Japanese), and Ondine across the bay in Sausalito.

An additional highlight of our San Francisco meeting will be the concert in San Francisco on the 15th of October by Dorothy Kirsten French.

It has always been difficult to choose the appropriate person to honor with the NEUROSURGEON AWARD, one who has contributed most to our distinguished Academy, but this year the choice has seemed obviously deserving, so that for the year of 1965 the honor goes to OUR LADIES. The loyalty, devotion, performance, and forbearance of these gallant women are without parallel. When they honored us with their Wedding Vows, they also indirectly assumed not only The Hippocratic Oath, but inherited the voracious Mistress of NEUROSURGERY.

This mistress is, at once, a tyrant, and a consuming inspiration relegating our dear wives to the incessant jangle of the physicians' exchange, sleepless nights, long absences and endless waiting. "They also serve who only stand and wait." --Milton

We salute the loving understanding of the rare women who not only contain but proudly embrace our Mistress!

The days roll by. Soon again we will be meeting with our old and cherished friends in San Francisco. Your reporter regrets missing this great occasion, but having joined the "Coronary Club" in 1965 which precluded a planned trip to Europe and the meeting of the Third International Congress of Neurosurgery, we are going to Europe during this time and taking our daughter, Lander, with us. This will be your correspondent's first jaunt abroad since 1930.

Your reporter has had the honor of being the Chairman of the Editorial Advisory Committee for THE NEUROSURGEON since it was tossed to him at the Portland meeting in 1949. It is now time for our brilliant younger members to take over its publication. Because of rising costs, it may well be advisable to have a less pretentious NEUROSURGEON appearing more frequently. It is also necessary for someone in an established neurosurgical setting with available stenographic assistance to shoulder this responsibility. For reasons not only of retirement but of health, this then represents the "Swan Song" for your present chairman, with appreciation for the honor of having a delightful assignment in our outstandingly fine scientific society.



Just prior to the completion of The Neurosurgeon we received word from Wanda Hyndman that Olan died suddenly at 8:00 a. m. on June 23rd as the result of an acute coronary occlusion. The Academy mourns the passing of this distinguished member.

THE GRANDFATHERS' CLUB

E. Harry Botterell  
Howard A. Brown  
Donald F. Coburn  
Dean H. Echols  
Joseph P. Evans  
James Greenwood, Jr.  
Hannibal Hamlin  
Jess D. Herrmann  
William S. Keith  
Kristian Kristiansen  
George L. Maltby  
Frank H. Mayfield  
Edmund J. Morrissey  
Francis Murphey  
John Raaf  
Stuart N. Rowe  
Samuel R. Snodgrass  
Alfred Uihlein  
Benjamin B. Whitcomb  
Barnes Woodhall

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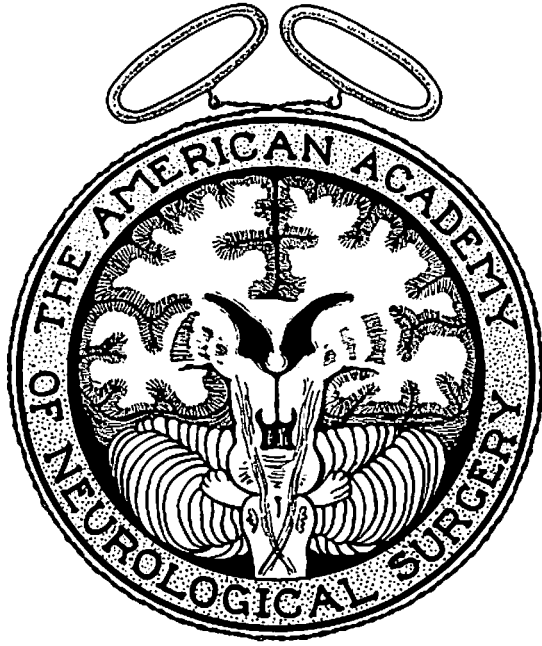
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Frank E. Nulsen  
H. Thomas Ballantine, Jr.

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Edwin B. Boldrey, Chairman  
Howard A. Brown  
Edmund J. Morrissey  
B. Cone Pevehouse

### President of Ladies' Auxiliary

Mrs. Edwin B. Boldrey



MEMBERSHIP ROSTER  
1965-1966

## "PAST PRESIDENTS CLUB"

1938	Dean Echols	1952	Henry G. Schwartz
1939	Dean Echols	1953	J. Lawrence Pool
1940	Spencer Braden	1954	Rupert B. Raney
1941	Joseph P. Evans	1955	David L. Reeves
1942	Francis Murphey	1956	Stuart N. Rowe
1943	Frank H. Mayfield	1957	Arthur R. Elvidge
1944	A. Earl Walker	1958	Jess D. Herrmann
1946	Barnes Woodhall	1959	Edwin B. Boldrey
1947	William S. Keith	1960	George S. Baker
1948	Howard Brown	1961-62	C. Hunter Shelden
1949	John Raaf	1963	Samuel R. Snodgrass
1950	E. H. Botterell	1964	Theodore B. Rasmussen
1951	Wallace B. Hamby	1965	Edmund J. Morrissey

## PAST VICE-PRESIDENTS

1941	Francis Murphey	1954	David L. Reeves
1942	William S. Keith	1955	Stuart N. Rowe
1943	John Raaf	1956	Jess D. Herrmann
1944	Rupert B. Raney	1957	George S. Baker
1946	Arthur R. Elvidge	1958	Samuel R. Snodgrass
1947	John Raaf	1959	C. Hunter Shelden
1948	Arthur R. Elvidge	1960	Edmund J. Morrissey
1949	F. Keith Bradford	1961-62	Donald F. Coburn
1950	David L. Reeves	1963	Eben Alexander, Jr.
1951	Henry G. Schwartz	1964	George L. Maltby
1952	J. Lawrence Pool	1965	Robert H. Pudenz
1953	Rupert B. Raney		

## PAST SECRETARY-TREASURERS

Francis Murphy . . . .	1938 - 40
A. Earl Walker . . . .	1941 - 43
Theodore C. Erickson . . . .	1944 - 47
Wallace B. Hamby . . . .	1948 - 50
Theodore Rasmussen . . . .	1951 - 53
Eben Alexander, Jr. . . . .	1954 - 57
Robert L. McLaurin . . . .	1958 - 62
Edward W. Davis . . . .	1963 - 65

# *The American Academy of Neurological Surgery*

FOUNDED OCTOBER 28, 1938

HONORARY MEMBERS — 4	ELECTED
Dr. Percival Bailey 1601 West Taylor St. Chicago 12, Illinois	1960
Dr. Wilder Penfield Montreal Neurological Institute 3801 University St. Montreal 2, Quebec, Canada	1960
Dr. R. Eustace Semmes 899 Madison Ave. Memphis 3, Tennessee	1955
Dr. R. Glen Spurling 5301 La Jolla Hermosa La Jolla, California 92037	1942

DECEASED MEMBERS — 8	
Dr. Winchell McK. Craig (Honorary) 2-12-60 Rochester, Minnesota	1942
Dr. Olan R. Hyndman (Senior) 6-23-66 Iowa City, Iowa	1941
Sir Geoffrey Jefferson (Honorary) 3-22-61 Manchester, England	1951
Dr. Kenneth G. McKenzie (Honorary) 2-11-64 Toronto, Ontario, Canada	1960
Dr. John M. Meredith (Active) 12-19-62 Richmond, Virginia	1946
Dr. W. Jason Mixter (Honorary) 3-16-58 Woods Hole, Massachusetts	1951
Dr. Rupert B. Raney (Active) 11-28-59 Los Angeles, California	1939
Dr. O. William Stewart (Corresponding) Montreal, Quebec	1948

CORRESPONDING MEMBERS — 2	
Dr. F. John Gillingham Westfield, Whitehouse Rd. Edinburgh 4, Scotland Boaston House, Ravelston (Residence) Edinburgh 4, Scotland	1962
Dr. Kristian Kristiansen Professor of Neurosurgery Oslo Kommune Ullevål Sykehus Oslo, Norway	1962



## SENIOR MEMBERS — 7

ELECTED

Dr. E. Harry Botterell Queen's University Kingston, Ontario	Margaret 2 Lake Shore Blvd. Reddendale, Kingston	1938
Dr. Donald F. Coburn 6400 Prospect Ave., Rm. 204 Kansas City 32, Missouri	Ellie	1938
Dr. Theodore C. Erickson University Hospitals 1300 University Avenue Madison 6, Wisconsin	Martha 531 N. Pinckney Madison, Wisconsin	1940
Dr. Joseph P. Evans University of Chicago Clinics 950 East 59th Street Chicago 37, Illinois	Hermene 1160 East 56th Street Chicago 37, Illinois	Founder
Dr. Wallace B. Hamby Cleveland Clinic 2020 East 93rd St. Cleveland 6, Ohio	Mary Jane 13700 Fairhill Road Shaker Heights 20, Ohio	1941
Dr. J. Lawrence Pool 710 West 168th Street New York 32, New York	Angeline Closter Dock Road Alpine, New Jersey	1940
Dr. A. Earl Walker Johns Hopkins Hospital Division of Neurological Surgery 601 N. Broadway Baltimore 5, Maryland	Terrye 6007 Lakehurst Drive Baltimore 10, Maryland	1938

## ACTIVE MEMBERS — 77

Dr. Eben Alexander, Jr. Bowman Gray Sch. of Medicine Winston-Salem 7, No. Carolina	Betty 1941 Georgia Ave. Winston-Salem, No. Carolina	1950
Dr. George S. Baker 200 First Street, S.W. Rochester, Minnesota	Enid Salem Road, Route 1 Rochester, Minn.	1940
Dr. H. Thomas Ballantine, Jr. Massachusetts General Hospital Boston 14, Massachusetts	Elizabeth 30 Embankment Rd. Boston 14, Massachusetts	1951
Dr. William F. Beswick 1275 Delaware Avenue Buffalo, New York 14209	Phyllis 59 Ashland Avenue Buffalo, New York	1949
Dr. Edwin B. Boldrey Univ. of Calif. Medical School San Francisco 22, California	Helen 924 Hayne Road Hillsborough, California	1941
Dr. Spencer Braden 1652 Hanna Building 14th & Euclid Avenues Cleveland 15, Ohio	Mary 2532 Arlington Road Cleveland Heights, Ohio	Founder

## ELECTED

Dr. F. Keith Bradford 435 Hermann Professional Bldg. 6410 Fannin Street Houston 25, Texas	Byra 3826 Linklea Drive Houston 25, Texas	1938
Dr. Howard A. Brown 2000 Van Ness Avenue San Francisco, California 94109	Dorothy 2240 Hyde Street San Francisco, California 94109	1939
Dr. Harvey Chenault 2134 Nicholasville Rd. Lexington, Kentucky	Margaret 2105 Nicholasville Road Lexington, Kentucky	1949
Dr. William F. Collins, Jr. Medical College of Virginia 1200 East Broad Street Richmond, Virginia	Gwen 5105 W. Cary St. Richmond 27, Virginia	1963
Dr. Edward W. Davis Providence Medical Office Bldg. 545 N. E. 47th Ave., Suite 310 Portland, Oregon 97213	Barbara 1714 N.W. 32nd Avenue Portland 10, Oregon	1949
Dr. Richard L. De Saussure 20 S. Dudley, Suite 101 B Memphis 3, Tennessee	Phyllis 74 Pinehurst Memphis 17, Tennessee	1962
Dr. Charles G. Drake 450 Central Avenue, Suite 301 London, Ontario, Canada	Ruth R.R. 3, Medway Heights London, Ontario, Canada	1958
Dr. Francis A. Echlin 164 East 74th St. New York 21, New York	Letitia 164 East 74th Street New York 21, New York	1944
Dr. Dean H. Echols Ochsner Clinic 1514 Jefferson Highway New Orleans, Louisiana 70121	Fran 1428 First Street New Orleans 13, Louisiana	Founder
Dr. George J. Ehni Hermann Prof. Bldg. 6410 Fannin Street Houston, Texas 77025	Velaire 16 Sunset Houston, Texas	1964
Dr. Arthur R. Elvidge Montreal Neurological Institute 3801 University Street Montreal 2, Quebec	1465 Bernard Avenue, West Outremont, Quebec, Canada	1939
Dr. William H. Feindel Montreal Neurological Institute 3801 University St. Montreal 2, Canada	Faith 492 Argyle Avenue Westmount Province of Quebec, Canada	1959
Dr. Robert G. Fisher Hitchcock Clinic Hanover, N. H.	Constance 11 Ledyard Lane Hanover, New Hampshire	1957

## ELECTED

Dr. Eldon L. Foltz Div. of Neurosurgery University Hospital Seattle 5, Washington	Catherine 3018 E. Laurelhurst Drive Seattle 5, Washington	1960
Dr. John D. French The Medical Center University of California Los Angeles 24, California	Dorothy 10800 Chalon Rd., Bel Air Los Angeles, California 90024	1951
Dr. Lyle A. French Univ. of Minnesota Hospitals Minneapolis 14, Minnesota	Gene 85 Otis Lane St. Paul 4, Minnesota	1954
Dr. James G. Galbraith The University of Alabama Medical Center 1919 7th Avenue, South Birmingham, Alabama 35233	Peggy 4227 Altamont Road Birmingham 13, Alabama	1947
Dr. Sidney Goldring Univ. of Pittsburgh Sch. of Med. 3550 Terrace Street Pittsburgh, Pennsylvania 15213	Lois 2416 Marbury Road Pittsburgh, Pennsylvania 15221	1964
Dr. Everett G. Grantham 405 Heyburn Building Louisville 2, Kentucky	Mary Carmel 410 Mockingbird Hill Road Louisville 7, Kentucky	1942
Dr. John R. Green Barrow Neurological Institute St. Joseph's Hospital 350 West Thomas Road Phoenix, Arizona	Georgia 88 North Country Club Drive Phoenix, Arizona	1953
Dr. James Greenwood, Jr. 1117 Hermann Prof. Bldg. 6410 Fannin Street Houston 25, Texas	Mary 3394 Chevy Chase Blvd. Houston 19, Texas	1952
Dr. Wesley A. Gustafson First National Bank Bldg. McAllen, Texas	Jennie North Ware Road R. R. No. 1, Box 296-A McAllen, Texas	1942
Dr. Hannibal Hamlin 270 Benefit Street Providence 3, Rhode Island	Margaret 270 Benefit Street Providence, Rhode Island	1948
Dr. John W. Hanbery Stanford Medical Center Palo Alto, California	Shirley 70 Mercedes Lane Atherton, California	1959
George J. Hayes, Brig. Gen., M.C., OSC, Box 236 USA Walter Reed General Hospital Washington 12, D.C.	Catherine 6932 15th Street, N.W. Washington 12, D.C.	1962
Dr. Jess D. Herrmann 525 Northwest Eleventh Street Oklahoma City 3, Oklahoma	Mary Jo 1604 Glenbrook Terrace Oklahoma City 14, Oklahoma	1938

## ELECTED

Dr. Henry L. Heyl Dartmouth Medical School Hanover, New Hampshire	Kit Norwich, Vermont	1951
Dr. William S. Keith Suite 207 Toronto Western Medical Bldg. 25 Leonard Avenue Toronto 2B, Ontario	Eleanor 55 St. Leonardi Crescent Toronto 12, Ontario, Canada	Founder
Dr. Robert B. King University Hospital Upstate Medical Center Syracuse 10, New York	Molly 2 Clara Road Fayetteville, New York	1958
Dr. Raeburn C. Llewellyn Tulane Univ. School of Medicine 1430 Tulane Avenue New Orleans 12, Louisiana	Seleta 15 Colonial Club Drive New Orleans 23, Louisiana	1963
Dr. William M. Lougheed 430 Medical Arts Bldg. Toronto 5, Ontario	Grace Eleanor 67 Ridge Drive Toronto, Ontario	1962
Dr. Herbert Lourie State University of New York Upstate Medical Center 750 East Adams Street Syracuse, New York 13210	Betty	1965
Dr. John J. Lowrey 888 South King Street Honolulu, Hawaii 96813	Katy	1965
Dr. Ernest W. Mack 505 Arlington Ave., Suite 212 Reno, Nevada	Roberta 235 Juniper Hill Road Reno, Nevada	1956
Dr. George L. Maltby 31 Bramhall Street Portland 3, Maine	Isabella (Sim) Breakwater Farm Cape Elizabeth, Portland, Maine	1942
Dr. Donald D. Matson 300 Longwood Avenue Boston 15, Massachusetts	Dorothy 44 Circuit Road Chestnut Hill 67, Massachusetts	1950
Dr. Frank H. Mayfield 506 Oak Street Cincinnati 19, Ohio	Queenee 3519 Principio Ave. Cincinnati 26, Ohio	Founder
Dr. Augustus McCravey 1010 East Third St. Chattanooga, Tennessee 37403	Helen 130 North Crest Road Chattanooga, Tennessee	1944
Dr. Robert L. McLaurin Division of Neurosurgery Cincinnati General Hospital Cincinnati 29, Ohio	Kathleen 2461 Grandin Road Cincinnati 8, Ohio	1955

## ELECTED

Dr. William F. Meacham Vanderbilt Hospital Nashville 5, Tennessee	Alice 3513 Woodmont Blvd. Nashville 12, Tennessee	1952
Dr. Edmund J. Morrissey 450 Sutter Bldg., Suite 1504 San Francisco, California 94108	Kate 2700 Vallejo Street San Francisco 23, California	1941
Dr. John Francis Mullan 950 E. 59th Street Chicago 37, Illinois	Vivian	1963
Dr. Francis Murphey Suite 101-B, Baptist Med. Bldg. 20 South Dudley Memphis 3, Tennessee	Roder 1856 Autumn Avenue Memphis, Tennessee	Founder
Dr. Frank E. Nulsen Division of Neurosurgery University Hospitals 2065 Adelbert Road Cleveland 6, Ohio	Ginny 21301 Shaker Blvd. Shaker Heights 22, Ohio	1956
Dr. Guy L. Odom Duke Univ. School of Medicine Durham, North Carolina	2812 Chelsea Circle Durham, North Carolina	1946
Dr. Byron C. Pevehouse 2000 Van Ness Avenue San Francisco, California 94109	Maxine 135 Mountain Spring Avenue San Francisco, California	1964
Dr. Robert W. Porter 5901 East 7th St. Long Beach 4, California		1962
Dr. Robert Pudenz 744 Fairmount Ave. Pasadena 1, California	Mary Ruth 3110 San Pasqual Pasadena 10, California	1943
Dr. John Raaf 833 S. W. Eleventh Avenue Portland, Oregon 97205	Lorene 390 S.W. Edgecliff Road Portland 19, Oregon	Founder
Dr. Aidan A. Raney 2010 Wilshire Blvd. Los Angeles 57, California	Mary 125 N. Las Palmas Los Angeles 5, California	1946
Dr. Joseph Ransohoff 550 First Avenue New York, New York 10016	Rita	1965
Dr. Theodore B. Rasmussen Montreal Neurological Institute 3801 University Street Montreal 2, Quebec, Canada	Catherine 29 Surrey Drive Montreal 16, Quebec, Canada	1947
Dr. David L. Reeves Studio 30, 1482 East Valley Rd. Santa Barbara, California 93103	Virginia 1278 Mesa Road Santa Barbara, California 93103	1939

Dr. David H. Reynolds Univ. of Miami Sch. of Medicine Jackson Memorial Hospital Miami, Florida 33136	Marjorie 1701 Espanola Drive Miami, Florida	1964
Dr. R. C. L. Robertson 437 Hermann Professional Bldg. 6410 Fannin Street Houston 25, Texas	Marjorie 5472 Lynbrook Drive Houston, Texas	1946
Dr. Stuart N. Rowe 302 Iroquois Building 3600 Forbes Street Pittsburgh 13, Pennsylvania	Elva 6847 Reynolds St. Pittsburgh 8, Pennsylvania	1938
Dr. Henry G. Schwartz 600 South Kingshighway St. Louis 10, Missouri	Reedie 2 Briar Oak, Ladue St. Louis 24, Missouri	1942
Dr. William B. Scoville 85 Jefferson Street Hartford 14, Connecticut	Helene 334 North Steele Road West Hartford, Connecticut	1944
Dr. C. Hunter Shelden 744 Fairmount Ave. Pasadena 1, California	Elizabeth 1345 Bedford Road San Marino, California	1941
Dr. Samuel R. Snodgrass John Sealy Hospital Univ. of Texas Medical Branch Galveston, Texas	Margaret 1405 Harbor View Drive Galveston, Texas	1939
Dr. Anthony F. Susen 3600 Forbes Avenue Pittsburgh, Pennsylvania 15213		1965
Dr. Hendrik J. Svien 200 First St. S.W. Rochester, Minnesota	Nancy 827 Eighth Street, S.W. Rochester, Minnesota	1957
Dr. Homer S. Swanson 1938 Peachtree Road, N. W. Atlanta, Georgia 30309	La Myra 1951 Mt. Paran Road, N.W. Atlanta, Georgia	1949
Dr. William H. Sweet Massachusetts General Hospital Boston 14, Massachusetts	Mary 35 Chestnut Place Brookline 46, Massachusetts	1950
Dr. Alfred Uihlein 200 First Street, S.W. Rochester, Minnesota	Ione 21 Skyline Drive Rochester, Minnesota	1950
Dr. Exum Walker 570-C Doctors Bldg. 490 Peachtree St., N. E. Atlanta, Georgia 30308	Frances 1819 Greystone Road, N.W. Atlanta, Georgia	1938
Dr. Arthur A. Ward, Jr. University of Washington School of Medicine Division of Neurosurgery Seattle 5, Washington	Janet 3922 Belvoir Place Seattle, Washington	1953

## ELECTED

Dr. Thomas A. Weaver 146 Wyoming St. Dayton, Ohio	Mary 868 W. Alexandersville-Bellbrook Rd. Dayton 59, Ohio	1943
Dr. W. Keasley Welch 4200 E. Ninth Ave. Denver 20, Colorado	Elizabeth 744 Dexter St. Denver, Colorado	1957
Dr. Benjamin B. Whitcomb 85 Jefferson Street Hartford 14, Connecticut	Margaret 38 High Farms Road West Hartford, Connecticut	1947
Dr. Barnes Woodhall Duke Hospital Durham, North Carolina	Frances 4006 Dover Road, Hope Valley Durham, North Carolina	1941

## THE ACADEMY AWARD WINNERS

Paul M. Lin . . . . .	1955	Robert Ojeman . . . . .	1960
Hubert L. Rosomoff . . . . .	1956	Lowell E. Ford . . . . .	1962
Byron C. Pevehouse . . . . .	1957	Charles H. Tator . . . . .	1963
Normal Hill . . . . .	1958	Earle E. Crandall . . . . .	1964
Jack Stern . . . . .	1959	M. Stephen Mahaley, Jr. . . . .	1965

## THE NEUROSURGEON AWARD WINNERS

Edwin B. Boldrey . . . . .	1955	Rupert B. Raney . . . . .	1960
Georgia and John Green . . . . .	1956	R. Glen Spurling . . . . .	1961
Dean Echols . . . . .	1957	Hannibal Hamlin . . . . .	1962
Arthur R. Elvidge . . . . .	1958	Frank H. Mayfield . . . . .	1963
John Raaf . . . . .	1959	Francis Murphey . . . . .	1964
		The Ladies . . . . .	1965

## PAST MEETINGS OF THE ACADEMY

Hotel Peabody, Memphis, Tennessee (Organizational Meeting)	April 22, 1938
Hotel Netherland Plaza, Cincinnati, Ohio	October 28-29, 1938
Roosevelt Hotel, New Orleans, Louisiana	October 27-29, 1939
Tudor Arms Hotel, Cleveland, Ohio	October 21-22, 1940
Ambassador Hotel, Los Angeles, California	November 11-15, 1941
The Palmer House, Chicago, Illinois	October 16-17, 1942
Percy Jones General Hospital, Battle Creek, Mich.	September 17-18, 1943
Ashford General Hospital, White Sulphur Springs, West Virginia	September 7-9, 1944
The Homestead, Hot Springs, Virginia	September 9-11, 1946
Broadmoor Hotel, Colorado Springs, Colorado	October 9-11, 1947
Windsor Hotel, Montreal, Canada	September 20-28, 1948
Benson Hotel, Portland, Oregon	October 25-27, 1949
Mayo Clinic, Rochester, Minnesota	September 28-30, 1950
Shamrock Hotel, Houston, Texas	October 4-6, 1951
Waldorf Astoria Hotel, New York City	September 29-October 1, 1952
Biltmore Hotel, Santa Barbara, California	October 12-14, 1953
Broadmoor Hotel, Colorado Springs, Colorado	October 21-23, 1954
The Homestead, Hot Springs, Virginia	October 27-29, 1955
Camelback Inn, Phoenix, Arizona	November 8-10, 1956
The Cloister, Sea Island, Georgia	November 11-13, 1957
The York, Toronto, Ontario, Canada	November 6-8, 1958
Del Monte Lodge, Pebble Beach, California	October 19-21, 1959
Sheraton-Plaza Hotel, Boston, Massachusetts	October 6-8, 1960
Larz Anderson House, Washington, D. C.	October 18, 1961
Royal Orleans Hotel, New Orleans, Louisiana	November 7-10, 1962
El Mirador Hotel, Palm Springs, California	October 23-26, 1963
Key Biscayne, Miami, Florida	November 11-14, 1964
Terrace Hilton Hotel, Cincinnati, Ohio	October 14-16, 1965



*The 28th Annual Meeting of the*

AMERICAN ACADEMY OF NEUROLOGICAL SURGERY

*will be held at*

FAIRMONT HOTEL

SAN FRANCISCO, CALIFORNIA

*October 16, 17, 18, 19, 1966*

## QUESTIONS TO BE ANSWERED BY MEMBERS

See the following letters and comments:

Dr. William F. Beswick - page 41

When transverse bars or ridges are demonstrated in the absence of neurological long tract signs, will we be using prophylactic decompression?

Dr. Charles G. Drake - page 60

Should a boy attend medical school at home?

Dr. Wesley A. Gustafson - page 32

Use of Dextran. Comments desired.

Dr. George L. Maltby - page 48

Primary interest of the Academy and its role in the overall neurosurgical organizations.

Dr. David H. Reynolds - page 71

Organizational procedures of a regional neurosurgical society in a rapidly growing area. Suggestions and comments desired.

Dr. Stuart N. Rowe - pages 25 and 27

Left temporal lobectomy and reoperation.  
Attacks of sleep paralysis - etiology?

Dr. Alfred Uihlein - pages 90 and 91

Progressive paraparesis following repeated intrathecal spinal injection of cortisone for management of multiple sclerosis. Similar experiences among Academy members?