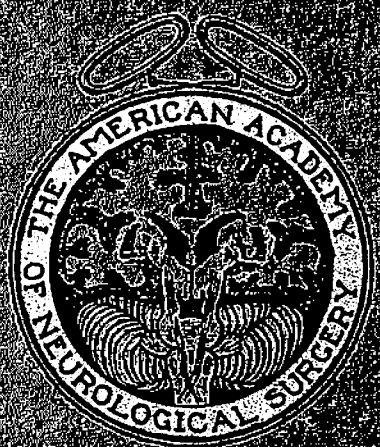


NEUROLOGY

THE PERSONAL JOURNAL
OF THE AMERICAN ACADEMY
OF NEUROLOGICAL SURGERY



VOL. 20, NO. 1
FEBRUARY 1960

THE AMERICAN ACADEMY OF NEUROLOGICAL SURGERY



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1959 - 1960

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FEBRUARY 1960

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THE NEUROSURGEON

The ROUND ROBIN LETTER *of*
THE AMERICAN ACADEMY OF NEUROLOGICAL SURGERY

Now that our Twenty-First Annual Meeting at Del Monte Lodge, Pebble Beach, California has passed into history the time has arrived for another number of the NEURO-SURGEON. What a delightful and gay meeting it was. Many of us thought the programs were particularly attractively designed. Both the scientific and social arrangements were outstanding, and the weather treated us with every consideration.

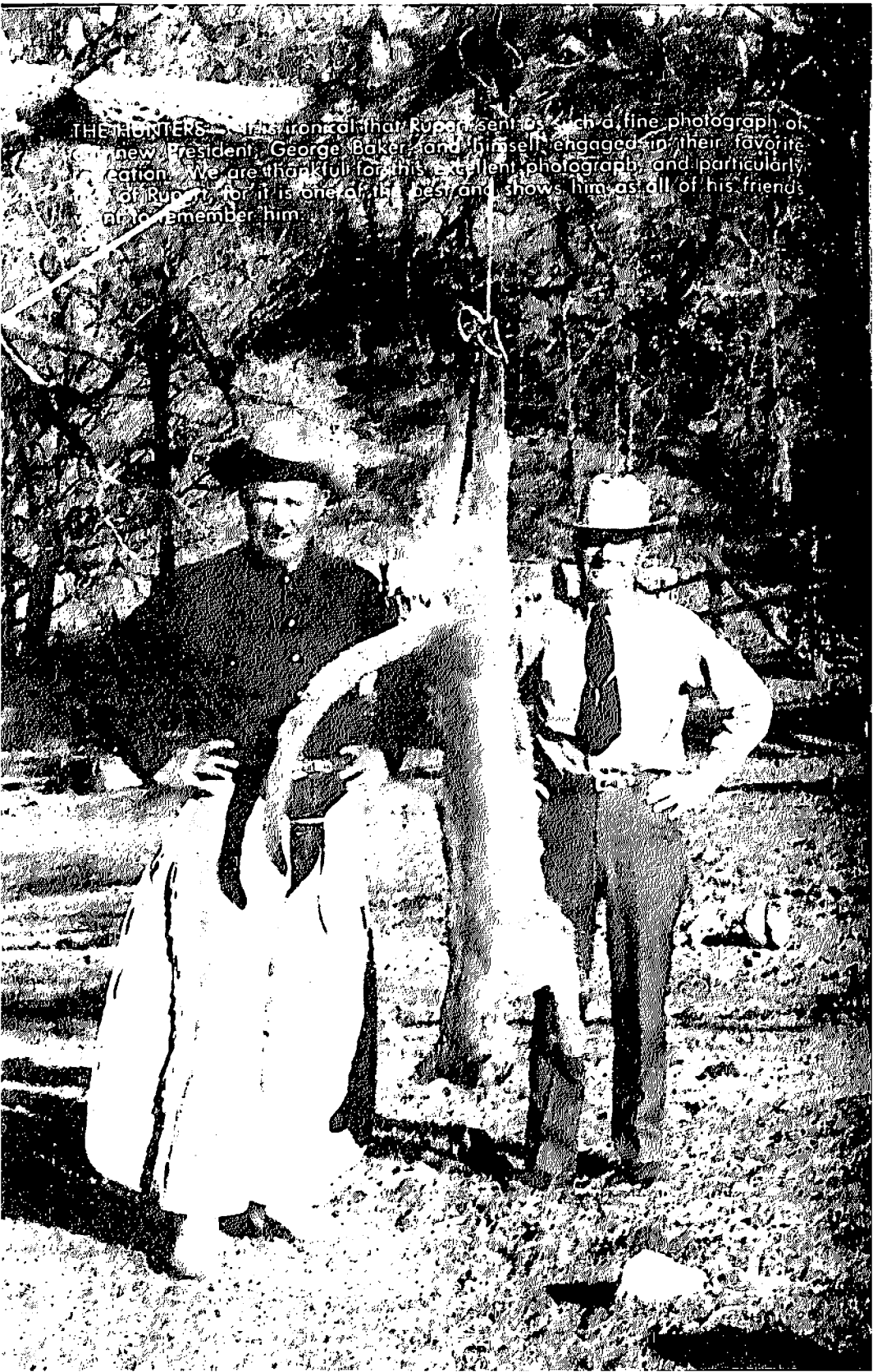
Prior to the Academy meeting many of us enjoyed the meeting of the Western Neurosurgical Society at La Valencia Hotel, La Jolla, California. Rupert Raney was president for that occasion, and Ed Morrissey was elected president for the coming year and Hunt Shelden vice-president. Ernie Mack continues as secretary. The meeting in 1960 will be at the Del Monte Lodge.

Some of the Academy members gathered in Montreal to celebrate the 25th Anniversary of the opening of the Montreal Neurological Institute. This, too, occurred prior to the meeting of the Academy at Del Monte. It was a great event. One must confess that the Canadians excel in the appropriate handling of events of this sort. It was, your reporter thought, a memorable occasion.

At the meeting in Del Monte, this personal journal of ours became recognized officially in the by-laws, and that is as it should be. We would like to take this opportunity to welcome the newly elected members of the Academy to the pages of THE NEUROSURGEON. We trust they will contribute to its interest and improvement as well as to that of the Academy.

Congratulations are in order to the new officers and to those ending their offices for work well done. George S. Baker takes over the presidency from Edwin B. Boldrey and will have charge of the meeting next year in Boston. George has long had the interests and welfare of the Academy at heart. Hunter Shelden is the President-Elect and is well chosen to head the organization for the following year. Ed Morrissey was

THE HUNTERS—It is ironical that Rupert sent us such a fine photograph of our new President, George Baker, and himself engaged in their favorite sport. We are thankful for his excellent photograph and particularly of Rupert, for it is one of the best and shows him as all of his friends will remember him.



elected Vice-President, and deservedly so as one of the prominent and respected neurosurgeons of the West. Bob McLaurin is getting into the swing of the difficult job as Secretary-Treasurer and will have things rolling along smoothly as usual.

All of us enjoyed so much the Presidential Address given by Ed Boldrey at the Del Monte meeting. After much pressure and several letters, Ed was good enough to send this along for this number. In this way it can be preserved for those of us in the Academy, and hopefully, also, he will see fit to publish it in some neurosurgical journal. At this time it seemed appropriate to include his letter which accompanied his manuscript.

EDWIN B. BOLDREY - November 25, 1959

As I think back over the flight of events in mid-October at Pebble Beach, there are myriads of things that could be said. I will limit myself to just a few.

Those of the Academy who could not be present certainly missed a fine scientific program which had been put together by Jack French and his Program Committee. Also, I felt that Kate and Ed Morrissey did a remarkable job of engineering in supervising the arrangements and seeing that every last detail went along smoothly. Also, our absentee members missed an opportunity to see the excellent work of our Historian in properly preserving the Archives of the Academy in a remarkable and invaluable collection, which I understand is called "The Scrapbook". Howard and Dorothy Brown certainly deserve our thanks for this continuing and invaluable contribution to the Academy.

I will not mention all the other committees here but as with previous meetings the success was a result of sincere and wholehearted effort on the part of everyone who was called upon - and most were called upon for something.

Those absent will be happy to know that there is still enough fire in the business sessions to insure that this is by no means a rubber stamp organization with members ready to give over their prerogatives.

Helen and I enjoyed the visit with those who stayed over after the session and look forward to return visits from many of the Academy members at the meetings planned for San Francisco in 1960. I am sure all of us are looking forward to a rousing session at the foot of old Cape Cod, if not on Bunker Hill.

MEDICINE: A TRADE OR A PROFESSION

Presidential Address

First, I want to let you know how deeply I appreciate the honor which you have bestowed upon me electing me your President for this past year. You all know well, I hope, the deep affection I have for this Academy. Through the years our autumnal equinoxial migrations are pleasantly anticipated by all of us. There is an old Hoosierism which defines a friend as "a feller who knows all about you and is still your friend." To you, my long-standing friends of this society then, I offer my sincere thanks.

But you are not going to get off with this alone! For two years I have been reflecting on what I should say on this occasion. The product of this reflection I fear is not very substantial. I have reviewed the offerings of the past. I could never match the humor or entertaining qualities of some of the presentations which a number of my predecessors have given. I have not traveled abroad and therefore have no slides to show the wonders of the far corners of the earth. I have no recent scientific accomplishments to report under the present circumstances; and I am no master of the well-turned phrase, such, for example, as extolled "The Virtue of Inconstancy." Had I your best interest truly at heart I would, of course, follow the lead of my immediate predecessor and forgo this talk entirely, releasing you to enjoy for the rest of the morning the outstanding beauty of sun and sand and sea just beyond these walls. But I am not that altruistic!

One of the major sources of pleasure in this society has been the opportunity to talk over problems and topics of mutual interest. For the next few moments then, though unilaterally, I would like to comment on one or two of these. They are, in a Quakerish way, concerns of mine. In the past I have already discussed them with some of you, and no doubt will reflect thoughts which you yourselves have originated.

Ulysses said, "I am a part of every man whom I have met." We in this Academy have met frequently. What I have to say is in a sense a composite of your thinking as well as my own. Wherein these thoughts have value, you may therefore take the credit. Wherein they fail, I must take the blame for my ineptitude.

This is the 21st meeting of this Academy of Neurological Surgery. If we permit our corporate selves an analogy with the individual, it is with this meeting that we come of age. I was not present at the initial meeting and do not know all of the details leading to the ultimate adoption of the name "Academy". I have read with interest, however, that this term in the 18th Century was frequently applied to schools run by dissenters. Many of us have heard from the founders the circumstances of the Academy's eclamptic birth (at least there was high blood pressure). This was followed by an idyllic childhood and a stormy adolescence, but more recently there has been evidence of serene and vigorous maturity. Scientifically, over the years it has approximated Cicero's description of the original academy of Plato, of which he said, "The characteristic of the academy is never to interpose one's judgment, to approve what seems most probable, to gather different opinions, to see what may be advanced on the other side, and to leave one's listeners free to judge without pretending to dogmatize."

In these years of our existence changes in our profession and in our special corner of it have, of course, been tremendous. On the occasion of that first meeting only a few of the sulfonamides were known. The antibiotics were at most a ten-year old idea in the mind of a Scottish biologist. Blood banks were rumored to exist in Russia, collections no doubt being from cadavers. The atom was a harmless something which combined with other atoms to make a molecule. The train was the principal means of long distance travel and was, in fact, incorporated in an early seal of this society. The airplane existed but many were happy that their wives opposed their using these hazardous machines. The helicopter had not yet flown. The jet engine which brought many of you to this meeting was just appearing on the drawing boards, and the cow was the only terrestrial body reliably reported to have seen the other side of the moon.

In neurosurgery, too, there has been great change. The number of neurosurgeons then practicing in the entire country was less by 50 than the number now residing in California alone. They were operating upon tumors and abscesses, though the latter were drained and seldom removed; sympathectomies were being done for hypertension, for vascular disease, and for causalgia; tracts and sensory nerves were cut for pain and motor nerves for spasms. Complete laminectomies were done for lumbar disc disease (cervical disease was even less understood than today), and there was spreading

interest in the removal of scars for epilepsy. Most had never carried out an angiogram, much less removed an aneurysm or angioma. Thrombosed vessels remained thrombosed - as most do today. Lipiodol was thought to excel over air for myelograms. The peduncles and pyramids had been cut, but the thalamus and globus pallidus were unravished. Blood pressure during surgery was to be maintained if at all possible; a temperature drop to 35 degrees C. was alarming; and the 100th anniversary of anesthesia approached with endotracheal tubes not yet appearing on the scene.

During this time fringe irritants have developed on the medical horizon - that is, they are irritants unless they happen to you and then they can be serious.

Physicians have become fair legal game in a culture centered about the jackpot, and, with the disappearance of the quiz show, may become even more highly regarded in this respect. With an increasing segment of the population having more to gain than lose by illness, we have become involved willy-nilly in myriads of quasi-judicial situations, usually accompanied by a multi-paged form, where decisions will be monetarily profitable to one of the contending parties, the medical facts appropriately distorted, and medicine usually the loser no matter what the end may be. Though deprived - through a variety of circumstances some of which are our own fault - of control of most non-professional functions, we have continued to be held responsible for increasing hospital expense and the misdemeanor of every maid, orderly and technician. The press, which has discovered that medical articles have an appeal second only to sex, has produced a semi-educated public which resents the disillusionment too often necessary from us - in fact, too often one of our own may have helped create the illusion in the first place.

The most important changes, though, and the ones which are the concerns of my discussion have been those tending to bring loss of stature to our profession. One of these has the appearance of deliberate attack. The other is the product of pre-occupation, and of intensified interest in the scientific aspect of medicine to the end that this part of the profession has been mistaken for the whole. I speak of the reference to our schools as trade schools, medicine then becoming a trade, and of factors culminating only recently in lead articles in two magazines of wide circulation, and as a major topic in the dedicatory address at one of our most respected schools of medicine. Each in a

varying degree is critical of our fulfillment of our obligation to the society constituted by our patients. Amazingly, all of this comes at a time when the people of this North American continent are incontestably better cared for than any other in the presently known history of mankind.

As we come of age, then, it seems to me that this last problem - these are two phases of the same problem - demands our serious reflection.

This trade school slur is venomous. It is directed at the neophyte and aims to destroy within him pride in the work that he is doing and in becoming a member of the corps. It is being perpetuated, if not inaugurated, by a small but vocal group of maladjusted paramedical beatniks - a brainwashing term which if left unchallenged, will add its bit in undermining the dignity of the profession, for as one speaks so will he act and think. We will discover, if we look into it, that "trade" is defined in Webster as originally meaning "a track of man or beast - a trail - a pathway" (such as made by one following faithfully behind another). In a more modern usage it is "hence a pursuit, as cobbler, merchant, carpenter, requiring manual and mechanical training and dexterity."

Certainly by this definition a trade is an honorable occupation of which no one should be ashamed. On the other hand, within this definition one could hardly aim at reaching that summit of human achievement which in medicine some of us think one can.

Broad advances are not to be made by trotting down some dusty trail like a string of packer's donkeys, one closely behind the other (though such demeanor is said to occur in certain medical quarters).

The insinuation in this term "trade school" and "trade" applied to the professional school and the profession of medicine must be quite apparent. But we have noted that the profession itself is under attack and by responsible parties whom we must accept as being constructively oriented.

To study the second and more serious phase of this problem, again definition would seem to be in order.

"Profession" is said by Webster to derive from a Latin term meaning "bound by a vow." Further, "it is the occupation, if not purely commercial, mechanical, agricultural

or the like, to which one devotes oneself." Going on, we learn "the three Learned Professions is the name often used for the Professions of Theology, Law and Medicine." Some have added a fourth, Pedagogy.

It was from the learned professions that the University system in Western culture took origin - specifically in the 9th Century from the School of Medicine in Salerno. The term "Doctor", said to derive from a Latin term for teacher, was first applied in the 12th Century at Bologna in the faculty of law. Later in the same century, about 1150, this degree was conferred in Paris at a faculty of divinity and not until the 14th Century was it first conferred in medicine.

The difference, then, between a trade and a profession is, I believe, readily apparent. The common elements in the professions, of course, are: privileged communication; superior ethical and moral conduct in assuming responsibility for the spiritual, social, and physical welfare of fellow man; and, by assumption of the title "Doctor", the obligation to teach. It should be emphasized, the fundamental and essential element is mankind. In medicine these concepts must, and I believe do, to a major degree, hold true today. However, the very advances in science which are improving our care of the organic physical welfare of man have clouded the emotional component and brought us discredit. Neurologically, we have forgotten that the archipallium was there first and still supersedes the neopallium at times of stress and conflict. We have forgotten that it isn't what you do but the way you do it - that the difference between acceptable and non-acceptable behavior often is salesmanship.

The physician, prior to a century and a half ago, had little to offer his patient but sincere interest, deep sympathy, and modest relief of symptoms (too often this still constitutes our armamentarium). Then came the dawn of the age of science; the rapid expansion of the orderly accumulation of knowledge and its interpretation. In other words, there appeared a recognition of and an elevation of the concept of research. Now research is utterly important and necessary, but, as was pointed out in a recent editorial in "Science", let us not forget that it represents the exercise of a very elemental biologic concept - that of investigation. An amoeba is capable of investigation. To jump rapidly to the other end of the scale, a baby investigates - carries on research if you will - when it examines its environment. Intellect becomes apparent when the results of these investigations are stored, interpreted, and applied. The accumulation and interpretation is science. The application is art.

To quote Jevons, "Science teaches us to know and art to do and all the more perfect sciences lead to the creation of corresponding useful arts." It were better to put "may lead" for there is no assurance. I believe, though, we will find in human biology, which is medicine, that such a goal is justifiably anticipated.

The pure scientist tends to work in an area of small dimensions, controlled variables, and, as the variables are limited, his work becomes more precise. From the amorphous, he produces crystals. These crystals are cold and brittle and lifeless. Pure science is amoral. It cannot be lifted whole into the human biological field.

Not that attempts have not been made. One of the first in matters neurological was reported 85 years ago from Cincinnati - the same city which was host to the first meeting of this Academy. Roberts Bartholow's classic initial confirmation in the human of the demonstration by Fritsch and Hitzig of the response of the dog's cerebral cortex to controlled electrical stimulation was an outstanding example of the application of scientific development - of a form of research if you will. But his "rather feeble-minded domestic" gave her life - at least sooner than she would have otherwise - to prove his point. As an exemplary exercise in the fulfillment of the obligation of the physician, then, it was not without question, for nothing was learned which of itself was necessary to the planned development of intracranial surgery by MacEwen and Horsley some eight to ten years later. In a sense, Bartholow's experiment represents the epitome of the fears of people today. The ultimate transfer to the patient of the developments in the laboratory is of course manifestly essential. The circumstance must be extraordinary, however, when one is justified in doing this without some positive benefit to the person involved.

Though the cry of the critic is for sympathetic understanding, it can be as unfortunate to go too headlong in that direction as in the other. There is no good without its bad and we must remember that the suave bedside manner is the principal stock in trade by which the charlatan hides his professional incapability. (Neurosurgery, by the way, with its good name and widely recognized inherent hazards to the patient may be particularly attractive to such scoundrels.)

These adverse comments discussed have come largely from outside the active profession. Let us not forget that to some there is a peculiar attraction to attempting to run

someone else's life, and not everyone with this propensity is in politics, national or local. Half-knowledge seems to create a superior feeling of exuberant self-assurance. Any patient with a perplexing problem will tell you he has had no trouble in obtaining, even from passing strangers, gratuitous advice. We must accept, though, that our critics are men of good will and that they too strive to have for us in medicine this sympathetic understanding.

The problem is ours, however. Perhaps there is no solution. In fact, perhaps Professor Hardin is correct in praising waste and in saying "The sentimentalist who seeks to eliminate the waste in species by preserving all mutants and breeding equally all types ultimately brings about the extinction of the entire species." The point can be argued. In the meanwhile a solution must be sought. I am in no position to hazard what the answer will eventually be. But there are some principles of long standing which must support this ultimate solution.

With sound scholarship in our professional schools directed by men of integrity and broad outlook, capable of "seeing problems clearly and of seeing them whole" - capable of example as well as of precept - there can be no implication of trade school.

For our patients, whoever and wherever we and they may be, we must reassert and demonstrate in a compelling way through a considered admixture of science and sympathy that our interest is their welfare. Slogans, ideas, and concepts must be kept in perspective.

In our medical schools and in the wards, both those formally connected and those not, there must be a re-dedication to the care of sick people and through this the advancement of our knowledge and the education of students of all levels - undergraduates, recently graduated, and, let us not forget - old grads - ourselves. I believe there is an active conscientious effort to do this now. It would seem we must try harder; and apparently we must let our efforts be known.

* * *

Now it is time to turn to the membership correspondence which makes these numbers of THE NEURO-SURGEON informative and enjoyable.

THE LETTERS

RUPERT B. RANEY - October 30, 1959

First, Alta joins me in wishing everyone the best for the Holiday Season.

It was my misfortune, in some respects, to miss the meeting of the Rogue River Neurosurgical Society. On the other hand, I was able to attend the opening of the opera season in Los Angeles and at the same time help to maintain the high cultural standing of the members of the Rogue River Neurosurgical Society.

In a couple of weeks we plan on leaving for Chicago, where we will pick up a new car, after which we expect to attend the White River Neurosurgical Society meeting in Augusta, Arkansas, and I am sure that the scientific as well as the social arrangements will be at the highest level, as they have always been in the past.

After the American Academy meeting at Pebble Beach we had a very pleasant visit with the Hambys. They spent a few days in Los Angeles visiting, with their daughter Marsha, and Wally was considerate enough to free himself from his vacation on Saturday and conduct a neurosurgical clinic for our resident staff on the Neurosurgical Service in Long Beach.

Recently Alta and I attended a costume party, and at the moment I can't quite remember in whose honor. Nevertheless, the picture, I think, turned out quite well, and I am enclosing one of the shots.

Another picture which might be of interest was taken on one of our hunting trips into New Mexico. I think everyone will recognize George Baker to the right.

Comment:

Rupert's letter was included and comments made prior to his untimely death. It was quite difficult to know just what to do. Should we include his letter with the photographs he sent in - or should we delete them? Those of us who have batted around the Neurosurgical Circuit these twenty years or more with Rupert - years that have included many ups and downs and unexpected transitions one way or another - believed quite sincerely that he would want his letter and the photographs included as he sent them in to us. We trust that any of those

Dr. Rupert Raney Dies in Indiana

Dr. Rupert B. Raney of Los Angeles, one of the foremost neurosurgeons in the West, died of a heart attack yesterday while hunting in his native Martin County, Indiana. He was 59.

Dr. Raney, who was a past president of the American Academy of Neurological Surgery and the Western Neurological Society, was graduated from the Creighton University school of medicine, Omaha, Neb., in 1927. He came here in 1934.

An avid outdoorsman who maintained a notable collection of guns, he would return each fall to Martin County to hunt, according to his brother, Dr. Aidan Raney of Los Angeles, also a neurosurgeon.

Dr. Rupert Raney, who had maintained offices at 2010 Wilshire blvd., had devised and perfected many surgical instruments that bear his name.

He also published more than 50 papers dealing with neurological problems, and had taught for many years at the U. S. C. medical school.

He was a staff member of Good Samaritan, Cedars of Lebanon, St. Vincent's, Queen of Angels, St. John's, Hollywood Presbyterian and other hospitals.

He was a fellow of the American College of Surgeons and the Harvey Cush-



DR. RUPERT RANEY
Neurosurgeon.

ing Society. He belonged also to the Los Angeles Country Club and a number of hunting clubs.

Besides his brother, he leaves his wife, Mrs. Alta W. Raney; his mother, Mrs. Frank Raney, Loogootee, Ind.; another brother, Vincent G., a San Francisco architect; and five sisters—Mrs. Irma Menz, Fresno; Mrs. Marguerite Schmidt, Evansville, Ind.; Mrs. Paula Newman, Los Angeles; Sister Angelica, a teaching nun on the island of Formosa, and Sister Marguerite, a nun in Jasper, Ind.

Funeral services are pending.

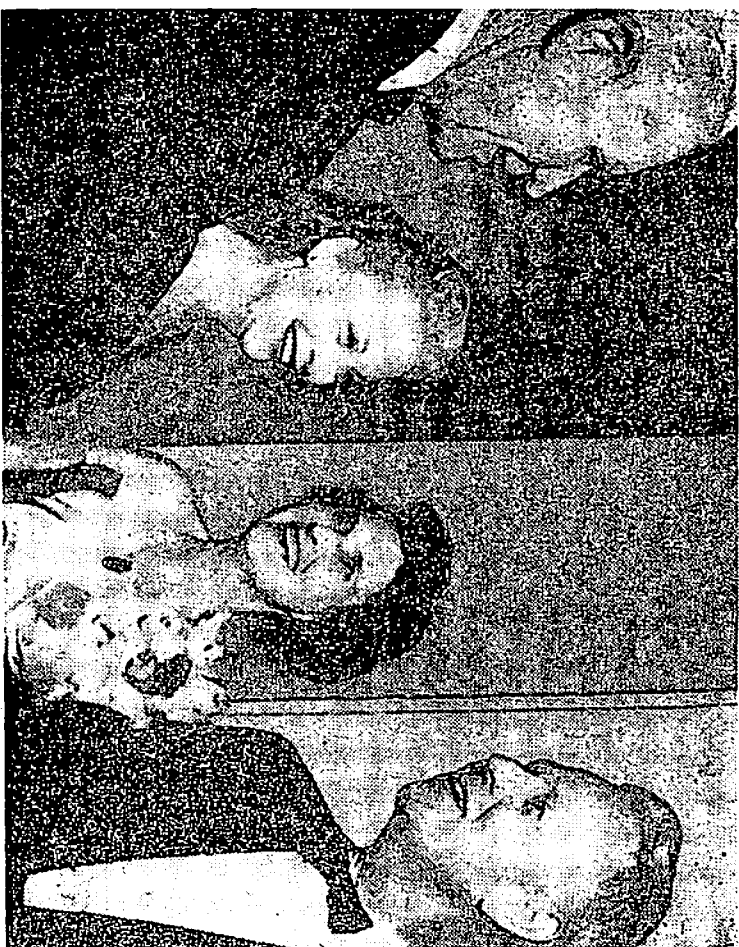
Santa Barbara News-Press, Nov. 29, 1959

Attack Kills L.A. Surgeon

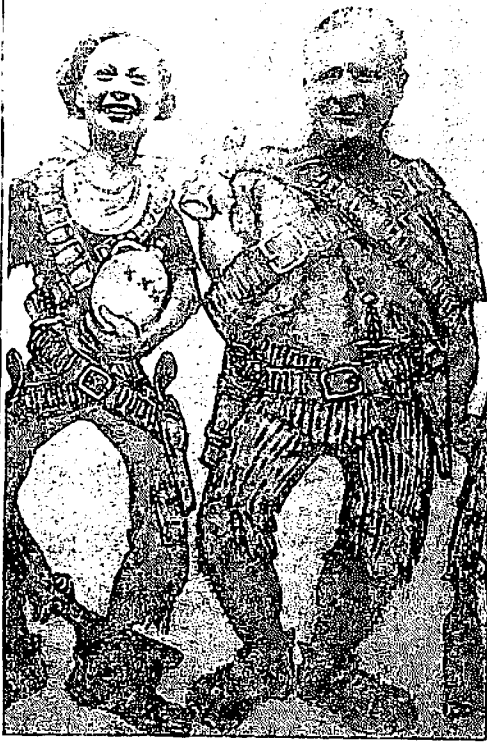
SHOALS, Ind. (AP)—A Los Angeles brain surgeon, who made a habit of returning to his native Martin county to hunt, suffered a fatal heart attack yesterday while hunting with a friend.

Dr. Rupert B. Raney, 59, who also was a neurologist, slumped over while hunting with Bernard Downey, a Loogootee businessman, about seven miles south of Loogootee in Martin county.

Dr. Raney was visiting his mother, Mrs. Frank Raney, who lives near Loogootee.



MR. AND MRS. Wesley Idol, couple at right, hosted a black-tie pheasant dinner party at the Bel-Air Bay Club to celebrate their 30th wedding anniversary. Among the guests offering congratulations were Dr. and Mrs. Rupert Ranney, at the left. Times photo by Wayne F. Kelly



A Costume Party

who disagree will be sympathetic to our point of view.

Personally, I am happy I was with Rupert in La Jolla when he was president of the Western Neurosurgical Society, in which he showed great interest, and was one among a few others for its formation. I was also happy to be with him at the meeting in Del Monte, when, for some inexplicable reason, I seemed to be closer in friendship and understanding with him than ever before.

To me his letter is "Rupert" and his photographs are "Rupert". He always supported the Round Robin Letter, which later seemed more appropriately entitled THE NEUROSURGEON, with enthusiasm and interest, and we are indebted to him for many of our enjoyable photographs. I believe the photograph with George Baker is so classically "Rupert" in his happy elements.

His passing is felt keenly by those of us who knew him over many years, and it seems so hard to believe. If such had to be, how fortunate for him that it occurred suddenly and without suffering, and in that Great Open Country of God's that he loved so much. Our great sympathy to Alta in her loss of a genuinely uncommon man, devoted and kind husband, and sincere friend.

Included next is a letter from Howard Brown, who also knew him well over the years and who was one of his really closest friends. His letter tells, I believe better than any, our real feelings in the passing of the first active member of the American Academy of Neurological Surgery.

HOWARD BROWN - December 8, 1959

I find this a very difficult letter to write as it concerns our first loss of a regular member of the American Academy of Neurological Surgery. We were all shocked by the sudden death of Rupe Raney on November 28th, 1959.

Rupe was doing one of the things that he loved best - hunting birds in Indiana, when he was stricken with a massive coronary thrombosis and died immediately.

I attended his funeral in Los Angeles, where a final tribute was paid to a great man by a host of his friends.

Alta went through this trying time with her chin up, like the good soldier she has always been. I know that the sincere sympathy of every member of the Academy is with her at this time.

There will never be another Rupert! We have lost a great friend - kind, generous, able and a leader in neurological surgery for many years.

He was a man who loved the outdoors and the hunting and fishing that he pursued to the final moments of his life.

His loss is a great one to all of us.

* * *

E. HARRY BOTTERELL - November 4, 1959

Bill Lougheed, my guest at Pebble Beach, returned bearing that magnificent Visitors' Book from the Academy. One and all, our Unit is most touched by the thoughtfulness and generosity of the Academy, who have added their lasting contribution to our Unit. My warmest thanks to you all.

It was sad for me and for Margaret to miss the meeting at Pebble Beach, but we had a bit more than we could handle this autumn, for I had been to Copenhagen to the Executive Meeting of the International Congress. In my view, this meeting constituted a major step forward in the understanding and mutual trust of neurosurgeons in many countries. This was almost entirely due to the superb fashion in which Paul Bucy

conducted the three long days of meetings, and I have never seen a Chairman perform more effectively and patiently.

Our daughter, Jocelyn Terell, spent the summer in London and met me at the London Airport when I was en route to Copenhagen, so we had a few days together in Copenhagen with Geoffrey Jefferson, Jim White, Wally Hamby and Barnes Woodhall, to mention but a few. In addition to all his other badges of merit, Wally Hamby established himself as the grand champion of the Tivoli Gardens and took on all comers at rifle shooting, breaking crockery and tolerance for Aquavit! Bill Lougheed returned with glowing accounts of the pleasure he had and the profit he derived from our meeting.

Comment:

It is always enjoyable to receive one of Harry's letters because they invariably are interesting and informative. All of us are pleased that the Visitors' Book presented by the Academy has been so warmly appreciated.

It is intriguing the way different abilities of our members manifest themselves. Wally does so many things well, it is not surprising that he is the male version of Annie Oakley.



Two Good "Shots"



Group at the Bar

* * *

I see by the paper that the concert we attended last night was a tremendous success. "Yes, I had no idea we enjoyed it so much at the time."

* * *

LYLE A. FRENCH - November 9, 1959

I was terribly sorry to leave the meeting at Del Monte after the second day. This necessitated missing the banquet as well as the following morning's papers, but there was no alternative.

As soon as I arrived back here in Minneapolis, the various former "residents in training" here at the University of Minnesota began arriving. As you know, we had a get-together for Dr. Peyton, primarily because of his anticipated retirement this next spring, but also simply to honor him as best we could. We had a one hundred per cent turnout of the former residents. This, of course, is not too large a group, there being only about 20 in all. He enjoyed the meeting very much, even though when he was first informed a few months ago that the meeting had been arranged, he stated, "I think I'll go hunting instead". A fellow has to know Dr. Peyton to appreciate his fundamental introversion and dislike for any eulogizing activity. He is so down to earth that he has always been pretty

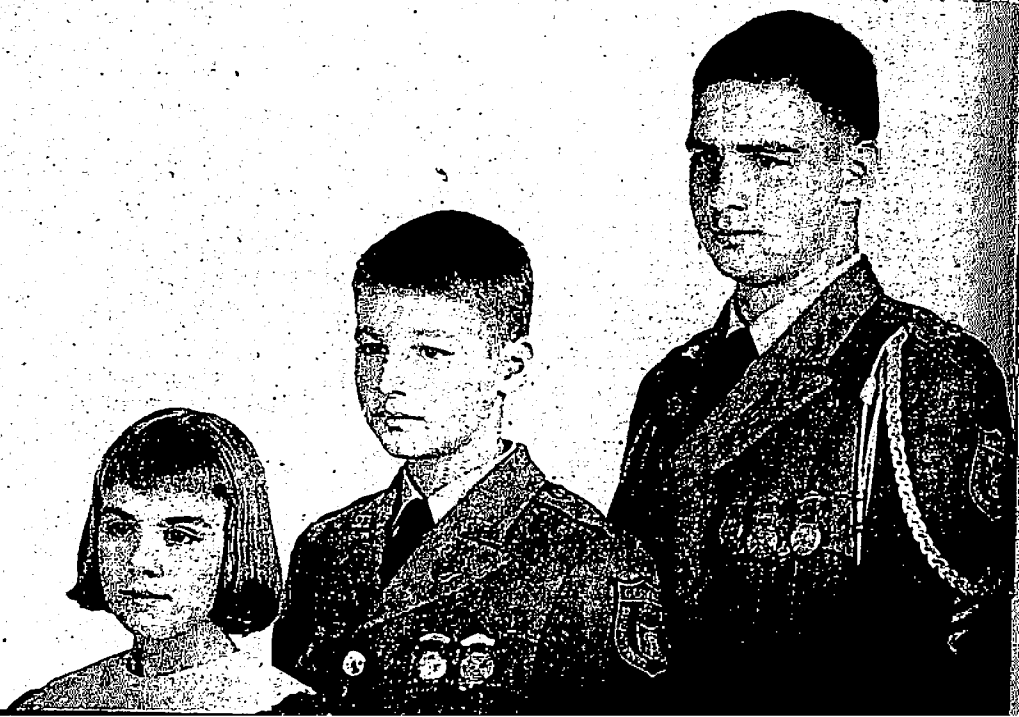
much against this sort of thing but once we got it started, he really entered into it and had a very, very good time.

Now we are back to our more usual routine. The winter seems well upon us, since we have had two pretty good snowstorms and the temperature is hovering at freezing or lower right along. Between the rather early winter, and the capabilities of the Minnesota football team, this looks like it is going to be a dreary, dreary season indeed.

Enclosed herein is a photograph of our three children. The oldest is now 17 and really quite a big fellow. He is six feet tall and weighs some over 200 pounds. Although I must admit he is more nimble with a fork than with his feet, he has just finished a pretty good football season and is looking forward to hockey. He plays goalie for the team and when he is covering the cage, there is not much room for a puck to get in. Eldridge is the second boy, and Barbara Gene is our daughter. Since the favorite sports of all three of them are skiing and skating, they are looking forward to a long, cold winter. It is interesting how one's idea of fun changes as one gets older!

To all the readers of The Neurosurgeon both Gene and I send our best holiday greetings.

P.S. - The French family has moved from Minneapolis across the Mississippi River to St. Paul. Our new address is: 85 Otis Lane, St. Paul 4, Minnesota.



Comment

There are few people in the neurosurgical world who have the genuine affection of their residents and associates as has Doctor Peyton.

Not too long ago I was in Chicago when it was about 3 degrees above zero; and for one not accustomed to this temperature and the rather brisk wintry winds, I can appreciate Lyle's comments about the winter in Minneapolis.

This is the first photograph the editorial board has received from Lyle and we must say that his children are most attractive. No doubt his oldest boy could be a great addition to the Minnesota football team as well as to their hockey team.

* * *

"Every little girl is in a hurry to grow up and wear the kind of shoes that just kill mother."

* * *

WINCHELL M. CRAIG - November 12, 1959

I am in receipt of your letter of October 29th regarding information for the Holiday Edition of THE NEURO-SURGEON. I thought you would be interested in the fact that I have recently been appointed Special Assistant to the Secretary for Health and Medical Affairs in the Department of Health, Education, and Welfare, and I am enclosing a copy of a news clipping which you can abstract for the information of the other members of the Academy. (See page 20)

I had definitely made up my mind to attend the Academy meeting but find that my duties again prevented me from attending.

Comment

It is interesting how Doctor Craig managed to keep busy after retiring from the chairmanship of the Department of Neurosurgery at the Mayo Clinic. I am sure all of us will feel a little happier about the Department of Health, Education, and Welfare when we realize he is there to advise them concerning many things in our interest.

* * *

Dr. Craig Named Cabinet Adviser

The White House today announced appointment of Dr. Winchell McK. Craig, 67, emeritus member of the Mayo Clinic staff and former Naval Reserve rear admiral as special assistant for health and medical affairs to the secretary of Health, Education and Welfare.

The internationally recognized neurosurgeon will be a policy adviser to Secretary Arthur S. Flemming and will make his home in Washington, D.C. The job pays \$20,000 a year.

President Eisenhower announced the appointment at a 9:30 a.m. (CST) press conference today. Secretary Flemming conducted swearing-in ceremonies today at 1:30 p.m.

Dr. Craig, head of the Section of Neurologic Surgery at the Mayo Clinic from 1946 to 1955, is professor emeritus of neurologic surgery in the Mayo Foundation.

The appointment was made by President Eisenhower and is subject to the approval of the Senate at the second session of the present Congress.

The post ranks next below that of the under secretary of the department and is defined officially as follows: "The special assistant for health and medical affairs reviews the health and medical programs of the department and advises the secretary with respect to the improvement of such programs and with respect to necessary legislation in health and medical affairs."

Dr. Craig, born in Washington Court House, Ohio, in 1892, attend-



DR. WINCHELL McK. CRAIG

ed the Culver Military Academy and Ohio Wesleyan University. He received the degree of doctor of medicine from the Johns Hopkins University in 1919, and from 1919 to 1921 was a resident in surgery in St. Agnes' Hospital in Baltimore.

Dr. Craig came to Rochester July 1, 1921, as a fellow in surgery of the Mayo Foundation. He was appointed a first assistant in neurology in 1924, and on April 1, 1926, he was appointed to the staff of the Mayo Clinic as a neurologic surgeon. He was head of the Section of Neurologic Surgery from 1946 to 1955, and he retired from active practice on July 1, 1957, after 31 years as a member of the staff.

In World War II Dr. Craig

served in the Medical Corps of the U.S. Navy and was the first reserve medical officers in the history of the U.S. Navy to attain the grade of rear admiral, to which he was promoted in 1945. He was given the honorary degree of doctor of science by Ohio Wesleyan University in 1937, and in 1946 he was elected president of the Society of Neurological Surgeons. In 1948 he was elected president of the Harvey Cushing Society and in 1953 he was president of the Association of Military Surgeons of the United States.

Since July 1959 Dr. Craig has been a field representative of the Council on Medical Education and Hospitals of the American Medical Assn., and has been actively engaged in that capacity up to the present. He will relinquish this work on assumption of his new post in the Department of Health, Education, and Welfare.

JOHN RAAF - November 12, 1959

A couple of days ago I received the enclosed from George Baker and am sending it on for the Round Robin Letter. Mike Mason said that he would shortly have some photographs finished which he took at the Rogue River Neurosurgical Society meeting. I'll send them on.

- - - - -

THE ROGUE RIVER NEUROSURGICAL SOCIETY

October 15-17, 1959

The annual meeting of the Rogue River Neurosurgical Society followed immediately upon the successful termination of the Academy meeting at the Del Monte Lodge. Our efficient and capable host, John Raaf, had organized the meeting in all details, including the scientific program on the clinical management of aneurysms. Dr. "Mike" Mason presented the history and arteriograms, and each neurosurgeon was given a chance to say what he would do and why. The treatment and postoperative follow-up study was then given in each case, and some real neurosurgical "pearls" were passed around for the benefit of all concerned.

George Baker, Spence Braden, Howard Brown, Ernie Mack, Francis Murphey, John Raaf and Al Uihlein represented the Academy, and the guests included Carl Mathewsen and Mike Mason.

The flight up the Pacific Coast to Gold Beach was delayed in San Francisco long enough for Howard Brown to retrieve his fishing rod and portable, fitted bar. This slight delay caused us to be fogged in at Eureka and required a special trip to Crescent City by airport bus and then on to Gold Beach in a U-Drive-It, arriving about 3:00 a.m.

With the battle cry of "Who's here" (Hoosier) at 7:00 a.m. the next morning, Raaf was able to count noses and got the party on the mail boat in good shape.

Glen and Bertie Bolton, the excellent caretaker, guide and cook for our party, met us at Crooked Riffle, and the boys were giving no strokes and taking no strokes from here



Rogue River X-Ray Conference



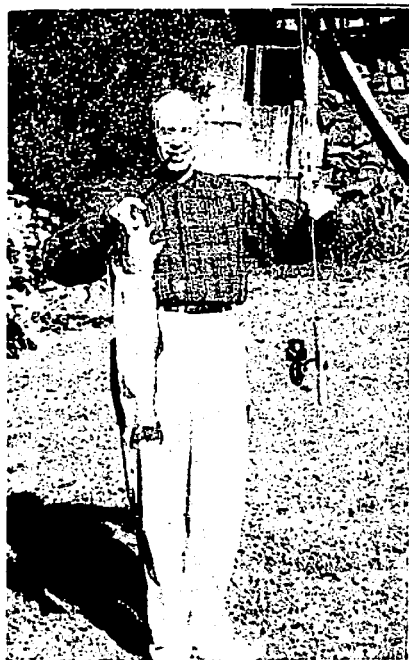
The Mayo Boys



Rogue River Roost



on out. The spin-fishermen and the fly-fishermen were making side bets and the annual piscatorial activities went into high gear. After three wonderful days on the river, Al Uihlein produced the winning fish - about 4-1/2 pounds of fighting, determined, sea-run steelhead. It was a beauty.



"Mad-dog" Murphey gave us all a bit of a scare on the second evening. All the fishermen had been picked up by boat just at dark, and returning to the cottage all were accounted for but "Murph." It was too dark to run the river by boat, so a searching party was organized to find him on foot. In the meantime, Francis, having been a Boy Scout in his youth, built a huge fire on the beach about a mile from the camp, and sent up smoke signals in all directions. He soon attracted the attention of a friendly St. Bernard dog who carefully guided him to safety. The barrel around the neck of the "Good Samaritan" had been drained completely and thoroughly. The enclosed picture may illustrate the kidness and excellent homing instinct of this famous breed of dogs.

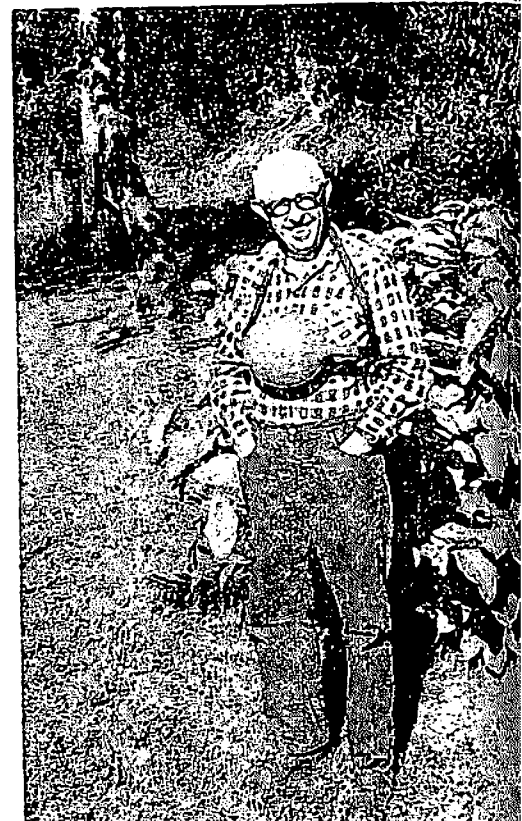




Supplies

The Fizz that Fizzes

Francis with the
St. Bernard Brandy Barrel



The Clubhouse Boys



The "Cleveland Indian"

Concentration



We all were naturally disappointed that some of the active members could not attend this year. It is to be regretted that one of the "complete anglers" was given a formal dress outfit rather than a new pair of waders for his birthday. We understand that he is now attending the opera regularly in Los Angeles and San Francisco, and his chances of ever wetting a line with this group again appears quite remote.

The return trip by plane was fogged in, so a bus ride into San Francisco for the majority of members was a necessity. In spite of fog and high water, no true fisherman could ask for more, and no better time both socially and scientifically could be given. Our sincere appreciation to our genial host, John Raaf, and his capable staff, and another historic milestone in the annals of this great society has been completed.

George Baker

Comment

George's report of the Rogue River Neurosurgical Society is interesting to all of us. As usual there were few dull moments during that occasion.

* * *

FRANCIS MURPHEY - November 16, 1959

It seems hardly possible that it is time for another holiday edition of THE NEUROSURGEON and that another year has passed without having anything solid to report in a scientific vein.

Our project of surgery under extreme hypothermia (10° centigrade) and cardiac arrest is proceeding at a snail's pace and whether we will ever get this show on the road remains to be seen.

From the standpoint of travel, things have been considerably better. The yearly trip to Montana with George Baker and Henry Schwartz was a huge success even though the fish didn't cooperate too well.

The meeting of the Academy at Del Monte was one of the best, and I would like to congratulate all of the West Coast contingent for a superb effort.

John Raaf's Rogue River Neurosurgical Society meeting was called to order by the host the day after the Del Monte meeting, and after another hair-raising encounter with Highway #1 in a fog. As usual, we were overwhelmed with hospitality, gin fizzes and food. It is worth noting that Uihlein was the champion, that the spin-fishermen licked the fly-casters and that I was left on the river at night. To make matters worse, I was somewhat shaken to find after several hours I was finally missed by the cook!

Comment:

See the report of George Baker referable to the Rogue River and some of Francis's behavior, and also the subsequent letter from Ernie Mack.

* * *

"When it comes to spreading gossip it seems like the female of the species is much faster than the mail."

"Husband hunting is probably the only sport in which the animal that gets caught has to buy a license."

* * *

BENJAMIN B. WHITCOMB - November 16, 1959

It was most disappointing to both Peggie and me that we should miss the exotic Academy meetings at Pebble Beach. Bill Scoville has filled us in on many of the details, and I am sure it was an excellent party.



Looking Pleasant

All past residents of Bill German were invited to the Congress of Neurological Surgeons in Miami this year since Bill was the honored speaker and at the same time celebrating his sixtieth birthday, and it seemed appropriate that his past residents assemble to pay him homage. The maestro did his usual excellent job, and his talks were delightfully amusing and instructive. Two special dinners were held - one for Louise Eisenhardt by all those who had worked with her in the Tumor Registry. This included a veritable army from far and wide which pleased Louise no end, and announcement was made at this party of her portrait which is to be completed soon. The other dinner was for Bill German by his former residents and house staff of whom there were some 30 present. Announcement was made of a portrait of Dr. German to be commissioned by this group, (provided they could get the subject to sit long enough), and it proved a rather delightful reunion.

This was my first experience at a Congress meeting, and I was most interested at the excellent organization of the entire affair. Although established principally for the younger neurosurgeons, the topics selected are those which present problems to us all and are thoroughly discussed by authorities with discussion limited to formal questions presented to panels. We can be justly proud that three of the authorities selected this year - Woodhall, Rasmussen and Sweet - are professors from our membership. Our secretary was also present to help in the Bill German celebration. I came away with the feeling that the Congress is doing a necessary job for the younger neurosurgeons and is doing it well.

A Nice Group



Comment:

It seems to me the Congress of Neurological Surgeons has done something admirable in honoring prominent neurosurgeons in the country. It also must have been a very fine experience for Bill German to celebrate his 60th birthday with his former residents. He is undoubtedly one of the outstanding men in our field with a personality and character setting him apart from most others. It is particularly fitting that Louise Eisenhardt should also be honored and a portrait completed for her. She has been the guiding light of The Harvey Cushing Society for many years and has served in all of the offices. The Academy continues to stand high with Woodhall, Rasmussen, and Sweet selected by them as their authorities.

* * *

BARNES WOODHALL - November 16, 1959

Thank you for your beautiful Mission post card. I am enclosing two photographs as you have requested. The one with Betsy is self-explanatory. The other was taken in a Munich beer hall at a party of the International Congress of Surgery. The beauty in the foreground is Betsy; you recognize Mike and Diane DeBakey, and the silly looking couple with gray hair is us'ns. There was a Russian around but he did not like photographers. Betsy spent the summer at the University of Paris and met us in Copenhagen for the Neurosurgical Congress meeting, and



then we went on to Paris and Munich - London, Goose Bay and home. Bo is going into his M. A. as a nuclear physicist, helped build a swimming pool reactor last summer and broke his hand. The Continent seemed full of businessmen and hard work and driving optimism. The doctors somehow all seemed depressed. Having lost all ambition also, I am now, as Ehrlich pointed out long ago, free to study cancer. The drugs are potent but normal brain and spinal cord tissue are very sensitive as well.



A Big Occasion

Fran and I are looking forward to the spring meetings on the coast. I regret that we could not manage the Academy meeting, but we are in a transitional period in our school and things just piled up too high. You will be pleased to know that my Army-VA and Labor Medical Clinic on Bogue Bank, North Carolina, is now fully equipped and I hope to retire there shortly.

Comment

What a beautiful daughter and how proud Fran and Bob must be. She looks just like Fran in those days we were struggling through medical school. Years ago, when I went to Heidelberg, I remember how much I loved Munich and the beer halls. I recall vaguely, as I am sure many others may more clearly, the Lowenbrau Keller in Munich, and additional delightful spots. I hope the communists have not wrecked all of such beauty over there, but from what I hear West Germany is thriving.

* * *

"A parking space is that area which disappears while you are making a U-turn."

"The trouble with life is that by the time you know how to play the game you are too old to make the team."

* * *

ERNEST W. MACK - November 17, 1959

Just a brief letter for the Neurosurgeon, and also to send to you a number of photographs which I took at Pebble Beach, and some that I took later at the Rogue River. There is one picture in particular, of Murphey and Uihlein, sitting at a table in a restaurant which was taken at 2 a.m. after they had



consumed all the martinis by 9 p. m. and had not been able to get another drink and were confronted with the prospect of driving another two hours before getting to bed -- and they don't look very happy, as you can see.

This year's trip to the Rogue was memorable, in particular, since that intrepid traveler and woodsman, Murphey, managed to escape us at dusk one night and after being lost for some time in the woods and being beset by two hungry Labrador dogs (which he fought off in good style) was found, slowly making his way through the wilderness towards the Crooked Rifle Lodge.

I have just come from the hospital where I was confronted with a problem which I am sure we must expect to see not too infrequently with continued use of urea and its remarkable brain shrinking properties, an anterior communicating aneurysm (upon which I had operated several days ago) did very well for three or four days and then commenced to get increasingly drowsy and somnolent and this morning I evacuated a sizable subdural hematoma over the frontal region at the site of the operation. I presume this is probably going to be almost unavoidable unless some method of controlling the amount of brain shrinkage can be devised.

I recently saw a rather interesting problem which presented some diagnostic difficulties, and which perhaps occurs more frequently than we appreciate in traumatic cases. The problem at hand was a young, husky male who was proceeding to administer a wife-beating while under the influence of alcohol, and during this episode his son took a 22 rifle and shot his father in the head. Interestingly enough, the wound of entrance was in the external auditory meatus, so that there was no external wound, and the bullet which apparently did not have too much velocity lodged in the petrous pyramid causing, of course, a compound injury. When seen by us, primarily, he was in good condition, having a spinal fluid leak from the ear which spontaneously ceased within a few hours. During the first 24 hours his condition was remarkably good, he presented no serious neurologic findings and was under the usual management regime. Much to our surprise, 48 hours later he developed a right hemiplegia and aphasia without any signs of increased intracranial pressure. Our primary thought was that perhaps he had developed an intracerebral hematoma or that he had developed edema, or even had developed a subdural. However, much to our surprise, on investigation it was disclosed that he had developed a thrombosis of the internal carotid artery at the level of its passage into the skull and to date this has not responded to the usual methods of treatment at

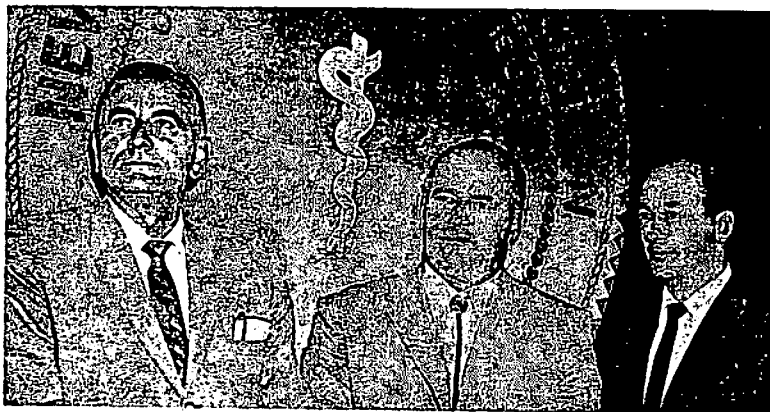
hand. I feel that this complication probably, in severe trauma to the head, occurs more often than is appreciated and can only be disclosed by increased use of arteriography such as is now taking place. In this connection, I was interested to note the other day in recapitulation of our management of traumatic cases, which is a fairly sizable service since we are resident on Highway 40, that the number of exploratory burr holes performed by us in head injuries has almost gone to the zero level with the increased usage of arteriography. We now routinely, on all cases who do not show adequate response within a reasonable period, carry out bilateral carotid angiographic studies by percutaneous methods and are therefore able to have a diagnosis and undertake treatment in a much more reasonable way than was possible under the old regime of exploratory burr holes.

Comment

We are indebted to Ernie for some excellent photographs shown in this edition of The Neurosurgeon. We feel as Ernie does about the use of arteriography. Once it can be done easily and the technique as well as routine worked out, it will prove particularly valuable in the visualization and diagnosis of subdural hematomas.

Note the photograph of Ernie we discovered in Scope Weekly.

Three Nevada State Officers



NEWLY ELECTED officers of the Nevada State Medical Association pose in front of the organization's emblem. (Left to right) Dr. Wesley W. Hall, president-elect; Dr. Ernest W. Mack, president; and Dr. William A. O'Brien III who was re-elected to serve his ninth term as secretary-treasurer. The three physicians are from Reno.



Smiles That Make Us Happy

C. HUNTER SHELDEN - November 18, 1959

Betty and I enjoyed the meeting in Pebble Beach, and it seemed to me that it was one of the most enjoyable programs that we have ever had. Kay and Ed Morrissey deserve a great deal of credit, particularly, for the outstanding dinner and the banquet arrangements.

There is little of note here at this time from a medical standpoint. However, I would like to re-emphasize the suggestion which I made at the meeting with respect to some type of method whereby everyone would be expected to submit a title for a paper at least once every two years. This would be a distinct help to the Program Chairman and would allow him to select a well-coordinated group of papers at a date early enough to allow those who have their papers selected, more time to prepare the material for presentation. Possibly, this suggestion can be discussed further at our next meeting.

Comment

Hunt's comments about the meeting in Pebble Beach seem to represent the thoughts of all who were there. It was a gala occasion. All of us must sympathize with the program chairman. I believe he must combine some of the magical qualities of Houdini to coax papers out of reluctant neurosurgeons. The idea that one is expected to submit a

paper at least every two years might represent a custom which could prove helpful.

* * *

"There seems to be plenty of money in this country but everyone owes it to everyone else."

"Money may not buy happiness, but with it you can be miserable in comfort."

"He lost a fortune over night; he went to bed feeling like a million and woke up feeling like two cents."

* * *

EBEN ALEXANDER, Jr. - November 18, 1959

I am afraid at this moment I do not have adequate pictures for THE NEUROSURGEON, but I hope we will have our Christmas Card with pictures of the children ready soon and will send them to all members of the Academy.

The meeting of the Academy at Pebble Beach was the high spot of this year, not only a pleasant place where we were well treated in every regard, but a fine scientific meeting. The golf course beat most of us down pretty badly, and we are still trying to recover from the humility of that situation.

The "Pause That Refreshes"



After having seen Claude Bertrand use his stereotaxic instrument for pallidotomy and thalamotomy, we have finally obtained one here and this is certainly bringing order out of what seemed to me previously to be a mixture of luck and chaos. I am quite enthusiastic about this particular apparatus and the technique employed, and I believe it will add a great deal to the treatment of Parkinsonism and involuntary movements.

The points which Frank Nulsen gave at the meeting about the ways in which to avoid complications in the use of Holter valves are most valuable. For the benefit of those who were not there, the use of about 100 cc of carbon dioxide to do "bubble studies" prior to doing operations for hydrocephalus and to obtain some estimation of the thickness of the cortex as well as to see if there is any lesion inside, has benefited our patients a great deal. Carbon dioxide is absorbed so quickly, especially if one uses 100% carbon dioxide, that one can proceed with the shunt operation that day or the next day without fear of air embolus. We hope to describe this a little more in detail, but if there are any questions about it, I shall be glad to answer any inquiries concerning this.

Comment:

The little I know about stereotaxic instruments would lead me to believe that that devised by Claude Bertrand is the best of the lot. The results of the procedure remain contradictory, but no doubt in a few more years evaluation will be appropriate.

Unfortunately, as far as I am concerned, even though the various types of valves for treatment of hydrocephalus by ventricular vascular shunts hold some promise, I do not feel they represent the appropriate answer and something better will have to be found.

* * *

A young man walked into a hotel elevator and began trying to impress the pretty operator. Moving closer, he said: "I'll bet all of these stops and starts make you mighty tired." "No, I don't mind the stops and starts," she replied, "but I do get tired of all the jerks."

"Forbidden fruit is responsible for many a bad jam."



THEODORE RASMUSSEN - November 20, 1959

The coming issue of the Round Robin will doubtless be full of praise for the way in which the California group handled the meeting at Pebble Beach, and also for the gorgeous surroundings. I want to add our sentiments to those of the others. It is easy to see why so many people consider Del Monte Lodge the ideal place to hold a meeting. We are all greatly indebted to the California group. A smoothly run, pleasant meeting such as this invariably means lots of hard work beforehand. Many thanks and congratulations to all concerned.

Some of the California Group



Here at the Institute things have settled down into our normal routine again, following the Twenty-fifth Anniversary celebration on October 6th and 7th. Our final census showed that 88 former Fellows returned for the occasion, and some 25 States, 5 Canadian Provinces and 12 other countries were represented. If those who returned enjoyed the proceedings half as much as those of us here in Montreal, then the occasion was a complete success.

The proceedings actually spread out before and after the official days of the meeting, and most of the group stayed on for the Thursday affairs, which consisted of an afternoon program in which some of Doctor Cone's former Residents and Assistants talked about his teachings, and in the evening Professor Dorothy Russell gave the Annual Fellows' Lecture on "Reflections on Neuropathology".

Honorary Degrees were presented by McGill to Dorothy Russell, and George Chorobski, and Doctor Penfield gave the Convocation Address.

An important part of the Quarter Century Celebration was the Annual Hughlings Jackson Lecture, the twenty-fifth in the series, which was given by Herbert Jasper on "Evolution of Concepts of Cerebral Localization Since Hughlings Jackson".

We are all enjoying having Bill Feindel back in the fold; he is busily engaged in getting his program on radioactive localization studies and studies on cerebral circulation transferred from Saskatchewan here.

With best regards to you Dave, it was certainly nice to see you back in Montreal,

Comment

As Ted has written so well, the Twenty-fifth Anniversary celebration of the opening of the Montreal Neurological Institute on October 6, 7, and 8 was a memorable occasion, and arranged with that additional touch and formality done so well by the Canadians. Jean Saucier's talk on "The Evolution of Neurology in Montreal" had the rare brilliance and wit that only the gifted possess. Ed Boldrey's talk "In Neurosurgery, This Interests me Most", was outstanding. When one can write and talk like that he has treasures that have by-passed most of us.

For those of us who were present in our training at the first opening ceremonies of the Montreal Neurological Institute, this was quite an especial occasion. There were many present I hadn't seen for years. The Institute has grown into a place of renowned neurological and neurosurgical training. I was also impressed with the excellent graduate course in Neurological and Neurosurgical Nursing. This indeed should fill a great need for neurosurgeons throughout the world. It was a real thrill to see old friends and to meet people like Dorothy Russell. The hospitality was most gracious.

* * *

"As every parent knows, out of the mouths of babes come words we shouldn't have said in the first place."

"Mixed company is what you are in when you think of a story you can't tell."

* * *

R. GLEN SPURLING - November 23, 1959

Your card reminding me of the new issue of The Neurosurgeon just came, and it stimulated me to drop you a few lines which I am afraid are not particularly newsworthy.

Perhaps the news of the most general interest is that the second volume of the "History of Neurosurgery in World War II" will be off the press and ready for distribution before Christmas. Those of you who contributed to this volume and others that have a special interest in the nostalgic aspect of our military service will find, I believe, this second volume to be extraordinarily interesting. The reason that I dare brag on it is that Barnes Woodhall really did most of the editing.

Since I am on the subject of books, I might say that for the past year I have devoted most of my spare hours to revising for a sixth edition my "Practical Neurological Diagnosis." The manuscript was sent to the publisher on my 65th birthday, and the page proof has just gone back to the printer. It should be ready for distribution in January. It is a rather radical revision, and I hope it proves to be worthwhile for medical students and the young men coming along in neurosurgery and neurology. I would warn your readers that if they are ever tempted to write a book, suppress it quickly! It is a difficult and often thankless task.

Recently on one of my trips to Boston I spent a most enjoyable morning with Bert Selverstone reviewing his work on the coating of aneurysms. I am tremendously impressed with it as a very practical method. As luck would have it, soon after I returned I found a nice aneurysm of the middle cerebral in the dominant hemisphere which we were able to coat with his technique and the patient recovered uneventfully. Certainly the aneurysm that we were dealing with could never have been handled by clipping because of its very broad base. Incidentally, I found Bert's set-up to be a most active and stimulating one. I am sure he is one of our most talented young neurosurgeons.

Comment:

The volumes of the "History of Neurosurgery in World War II" contain valuable information concerning neuro-surgical experiences and techniques for this rather specialized type of neurosurgery. As mentioned in the last number the list of the authors reads like a membership roster of the Academy. Even though Doctor Spurling finds revision of his textbook tedious and perhaps often exasperating, the reward is well worthwhile, for it is the best of its kind presently available. Ever since Bert Selverstone gave his paper on the coating of aneurysms, I have believed this should be the answer to a great portion of inoperable blisters on the cerebral vessels. Barnes Woodhall was the first to give a paper on this subject and procedure.

* * *

"A college education is something that enables you to work for someone who hasn't any education at all."

"We are sure our suits last 25 years. We have been in the business 25 years and nobody has ever come back for a second suit."

* * *

ALFRED UIHLEIN - November 24, 1959

The Pebble Beach meeting was most delightful and the Program Committee is deserving of commendation for such a superb program of diversification and interest appeal. Even the late-nighters were at it bright and early each day. This is a compliment in itself.

The meeting was climaxed for some of us with a not-to-be-forgotten meeting of the Rogue River Neurosurgical



Society admirably planned by our genial and tolerant host John "Who's There" Raaf. Our trip from Monterey to Gold Beach got off to a good start after a happy sendoff by Hunt and Betty Shelden. Shortly after takeoff we were told that we would have to circle the next airport for 20 minutes to consume fuel as we were overloaded. It is interesting we were permitted to take off overloaded but were not permitted to land. Despite delays of rain, fog and all of those interesting tricks of nature, we arrived at the Crooked Riffle Lodge ready to get the fishing lines wet. The meeting was well attended though for a while we thought we had lost Murphey to the "wild dogs" of Agnes. President John and Mike Mason kept us on our toes by presenting some very excellent clinical material on the management of some difficult intracranial aneurysms. We all told John how he should have handled his problems. After riding for 10 hours embryo-fashion in a Greyhound bus, some of us arrived in San Francisco where George Baker and I were finally able to get on an airplane and head for home, arriving 24 hours later than we had hoped. The old adage still holds, "When you have time, fly."

Last spring Ione and I visited several neurosurgical centers in Europe. We enjoyed our trip immensely. I had the pleasure of watching various types of stereotaxis being employed.

John Gillingham has modified the technic of Guiot of Paris and has had some interesting clinical results. The new neurosurgical institute in Edinburgh at the Western Hospital which will replace the neurosurgical service of the Royal Infirmary should be ready for inauguration around the first of the year and will be dedicated by Professor Dott and his staff. The two operating room suites are unique in that they are completely spherical in shape and the ceilings are filled by a battery of lights and large viewing panels, permitting observation and monitoring during neurosurgical procedures.

A Merry Christmas to the Academy families from the Uihleins and good wishes for the New Year. We will be closing out the old and ushering in the New Year skiing at Porcupine Mountain. "Ski-Heil."

Comment

It was unfortunate the weather was so unkind for those members of the Rogue River Neurosurgical Society who were able to attend the fall meeting. Nonetheless, from the photographs which have been included for the interest of all of the members of the Academy, it would seem that "a good time was had by all."

The trip of Ione and Al to Europe with a good look at all of the important neurosurgical centers must have been quite stimulating. I wish I could have seen the spherically shaped operating suites. This would seem to me an ideal arrangement. We are indebted to the Uihlein's for the excellent photograph taken in Naples.

* * *

"The reason history repeats itself is that most people weren't listening the first time."

"An efficiency expert is a man smart enough to tell you how to run your business and too smart to start his own."

* * *

GEORGE L. MALTBY - November 25, 1959

I did want to wish all the members and their wives and families a very Merry Christmas. Secondly, both Sim and I want to say how much we enjoyed the meeting in Del Monte.

I thought it was one of our better meetings, both scientifically and from a social point of view. The West Coast group certainly have done a great job, and we in New England have a lot to live up to. I thought that Ed Boldrey's presidential address was outstanding. Both of us also would like to welcome the new members into the Academy. Again, we want to send Holiday greetings to everyone, and we are all looking forward to seeing you in New England next year. Sim and I will be holding open house in Maine, both before and after the meeting, and hope that any or all who can make arrangements to come up this way for golf, boating, or just looking at the Maine coast may do so.

Comment:

As George can appreciate, we have included the Presidential Address, and this will make it in the form of a permanent record for the Academy.

All of us I am sure welcome the new members of The American Academy of Neurological Surgery, William H. Feindel of Montreal, and John W. Hanberry of San Francisco. We hope their membership will afford them much pleasure and stimulation and that they will contribute greatly to the progress and value of the society.

* * *

"The gentleman solemnly walking along the railroad tracks had had a little too much too drink. After a while he said to himself, 'This is the longest stairway and the lowest banister I have ever seen.'"

"Nothing makes the good old days better than a poor memory."

* * *

ARTHUR A. WARD, Jr. - November 27, 1959

The delightful meeting at Del Monte should have rejuvenated me but, with three of us there, everything was so piled up by the time I got back that I have not seen daylight yet.

In addition to expressing my thoughts that this was one of the more stimulating meetings which we have had, I would like the group to know how much it meant to my chief resident,



Award Winner and Sponsors

Jack Stern, to receive the honor of the Academy Award and the privilege of attending the meeting. I assume that he has officially thanked the Secretary but this cannot convey the stimulation and inspiration which he got from attending the meetings and the opportunity of meeting our illustrious members who previously were only names to him. This is really a tremendous experience for a young man at this critical stage of his career and, having now seen the consequences in one instance, I can assure the group that this is one of the finest things they can do and that it adds immeasurably to the prestige of the organization.

Unusual clinical conditions seem to come in batches. In the last few weeks, we have had two instances of spontaneous epidural hematomas in the upper thoracic region; the first obviously came as a complete surprise but, when we got the second one two weeks later, the boys had this as their primary diagnosis pre-op. Fortunately both of the patients are doing quite well.

We are still working very hard trying to make a success of our new University Hospital. It is filling up rapidly and should be going more smoothly by the time we have the pleasure of hosting the Senior Society out here next spring. We all look forward to seeing many of you at that time.

Comment:

Much credit must go to Arthur for suggesting and guiding his chief resident, Jack Stern, in the completion of

a first rate paper. His two cases of spontaneous epidural hematomas are rare birds indeed, and rarer still to find them doing well and without paraplegia. John Raaf, I know, has also had a few cases of this sort.

Arthur's new neurosurgical set-up in the new University Hospital should be an excellent one. Incidentally, among other things he was elected president of the Electro-Encephalographic Society, something a bit unique for a neurological surgeon.

* * *

Husband to wife: "I took an aptitude test this afternoon; it's a good thing I own the company."

Two business men at luncheon in an expensive restaurant: "Let's go Dutch, you use your expense account and I'll use mine."

* * *

STUART N. ROWE - November 30, 1959

I believe we should all extend our thanks to those whose efforts were responsible for the recent profitable and most pleasant meeting at Pebble Beach. The program was very well organized, the local arrangements resulted in very comfortable and smooth-running scientific meetings and highly enjoyable social events. Even the weather cooperated, and the golf course was certainly one of the most scenic in the world even if it was far from the easiest.

While at the Academy meeting I missed a get-together of the Philadelphia Neurosurgical Society and the Pittsburgh neurosurgeons here in Pittsburgh in connection with The Pennsylvania State Medical Society meeting. Apparently the arguments were so vigorous and so enlightening concerning a few neurosurgical subjects, such as aneurysms, that it was unanimously agreed that a meeting in March would be desirable, and this has been set up for Hershey, Pennsylvania, which is a sort of a central point of the State. It seems apparent that neurosurgeons are a gregarious lot and that an increasing number of local societies is almost inevitable. Probably I can report more about this Pennsylvania organization in the Spring issue of "The Neurosurgeon."

In thinking about the program for the coming year I wondered if one or two panel discussions on some large subject might not be worthwhile. Perhaps some assessment of our joint experiences with chemopallidectomy would be interesting. Stereotaxic methods is another subject which might bear discussion. Finally, I wonder if enough time has elapsed since our last session about brief technical notes to justify repetition of this feature, which was rather popular on several programs in the past.

Comment

As usual Stuart has written an interesting and thoughtful contribution to "The Neurosurgeon". We will await his report about the Pennsylvania Neurosurgical Meeting in the Spring number of "The Neurosurgeon". I thought the idea of brief technical notes most enjoyable. It is something which seems unable to find a place in the larger meetings and yet is after all of great interest.

* * *

"A man is known by the company he thinks nobody knows he is keeping."

* * *

GEORGE S. BAKER - November 30, 1959

I would like to send my contribution for the current holiday edition of "The Neurosurgeon" and I feel above all that I should be very grateful to the Academy for the way in which they have honored me by electing me president for the year 1960. I want to take this opportunity to congratulate the officers during the past year and also the outgoing committee members for the excellent job which they did in arranging the meeting in Pebble Beach and for the manner in which they have conducted their over-all activities.

It seems that we as a group have come a long way since that very small but competent gathering that toured the French quarters in New Orleans in 1939. It is obvious that since that time we have grown in stature and national and international recognition, and I think this is for the good of us all.

I have submitted a list of the permanent committees to Bob McLaurin as secretary, and I am sure he will submit this to you in the near future. I feel that we all should prepare

now for the meeting in Boston next year, and it would seem obvious that the older members should try to prepare a clinical paper if they are not carrying on research, and the younger men should come on with the research to be assisted by the program that the Boston neurosurgeons will supply as well.

The interest in the Academy Award should continue to be of the fine and outstanding quality that we have been privileged to have in the past, and I hope that there will be a good selection of papers to choose from.

I think we as an organization should cooperate with the International neurosurgical group for their meeting in Washington in 1961, and by electing to eliminate our active program for that year we have of course taken care of the situation quite well.

I am very much in favor of increasing our honorary membership as well as increasing our active membership group for the future. The capable and outstanding young men should be brought to our meetings and should be proposed in a manner that would lend credit to our organization and carry on when the older group are not as active.

Comment:

George has mentioned several important items referable to the Academy. Obviously, it is necessary now to send in material for the meeting in Boston next year. The Program Committee will need all the assistance possible. The Academy Award has demonstrated its importance and should be supported strongly. The thought has occurred to some of us that it might be an idea to make this the "Memorial Academy Award". In this way it could be a tribute to the members of the Academy who have left us. Contributions could be made to the "Memorial Academy Award Fund".

We should, as George has indicated, increase our Honorary Membership, and I for one hope the Executive Committee will get the necessary paper work completed for such an increase. As George has also stated, we should increase our active membership. There are many capable and outstanding men eligible for the Academy. The Membership Committee should be enthusiastically supported in this regard and a concerted effort made to bring such qualified men to the meetings and for consideration.

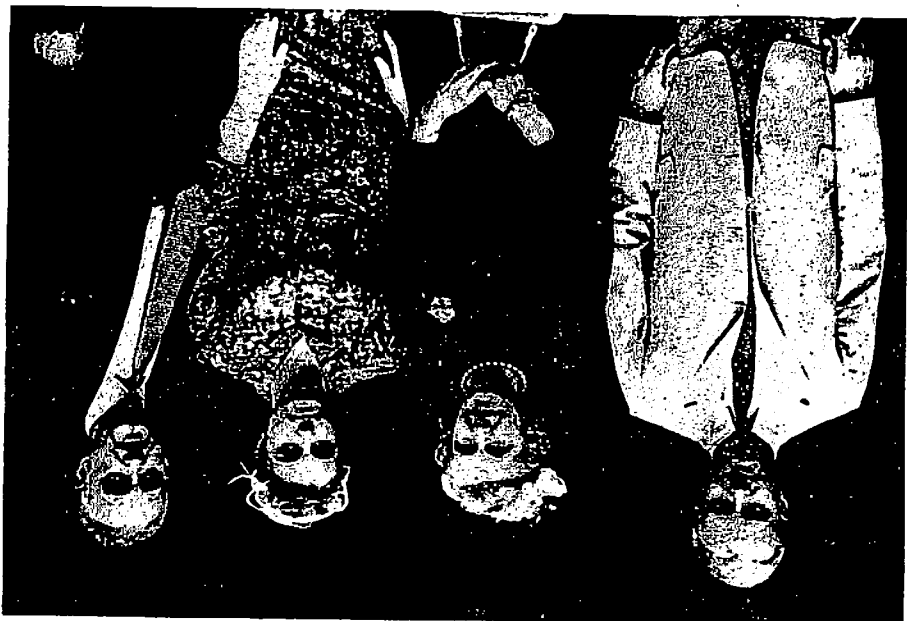
* * *

Mary Grace Greenwood was presented at Houston on November 7th. She is studying at Duke University majoring in political science. It is easy to understand how fathers can be so bursting with pride when they have such beautiful daughters. It would appear to your reporter that neurosurgeons are particularly blessed with most attractive children.

Debutante Mary Grace with Proud Papa Jim



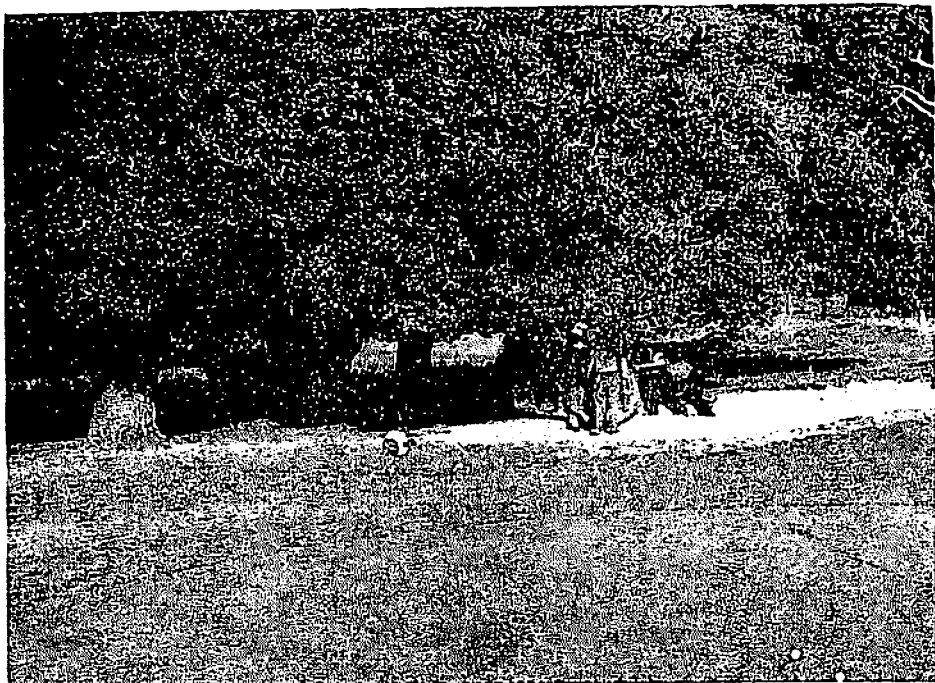
I have delayed answering your appeal, waiting to get some Kodachromes processed into black and white so I can give you a few pictures for a change. The first one represents the Hamby family in one of its rare moments when all of us were housed under the same roof momentarily this summer. The little old-type characters of course are Hellyn and me. While the healthy looking pair are our children, Marcia and Barney. Marcia is living in California now and recently married a nice young Scotsman out there who runs restaurants. Barney is a Sophomore at Colby College in Waterville, Maine. The self-conscious looking cigarette in his hand represents a moment of luxury intervening between training periods for football and hockey, which are his great interests.



The Hambys

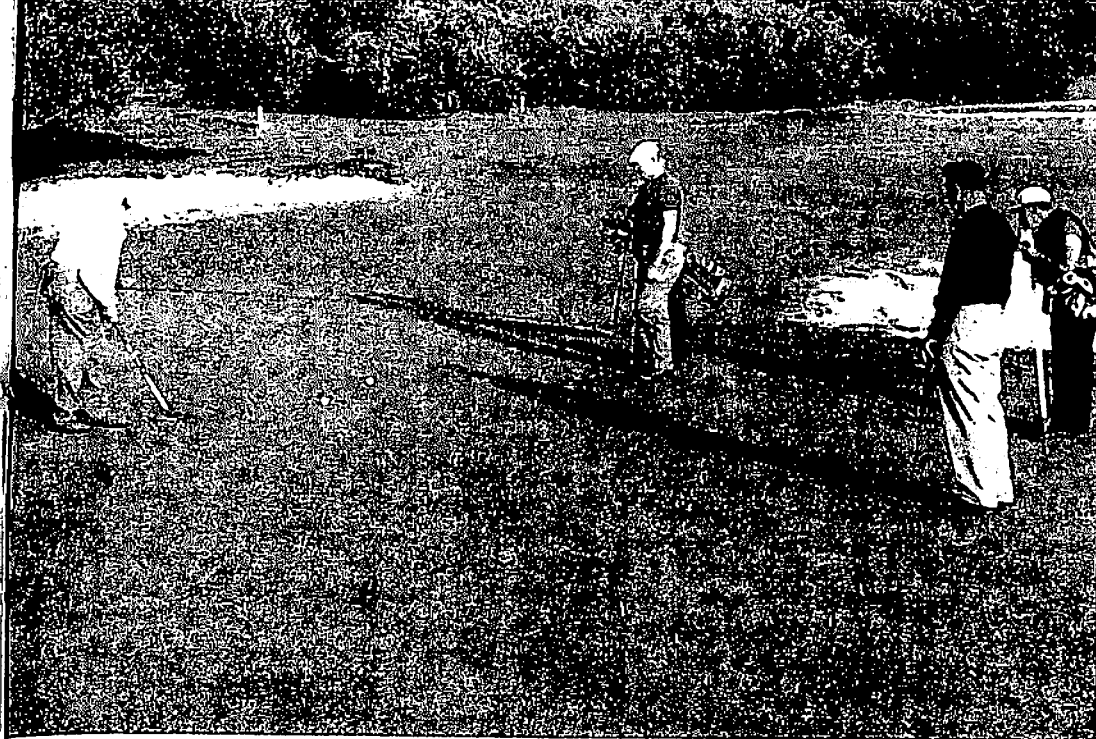
After the very fine meeting at Pebble Beach, which I considered an outstanding one in our history, I rented a golf cart and toured the course with camera, seeing many amazing sights in addition to the beauties of the course. Picture 2-(on the following page) is a very rare recording. I am sorry that

I was not able to get closer to the scene of action here because it was a classic. Four very fine golfers had approached this green ignoring sand traps on each side of it and all four of them got in the traps. Ed Morrissey was so concerned about his shot that he came tearing down the hill in his red electric wagon, ran over the lip of the sandtrap and did a belly-whopper down into the fine white beach. These carts are amazingly heavy and this candid shot shows five men and a boy trying to push it out. The golf balls near the pin I regret to say are recoveries from the trap.



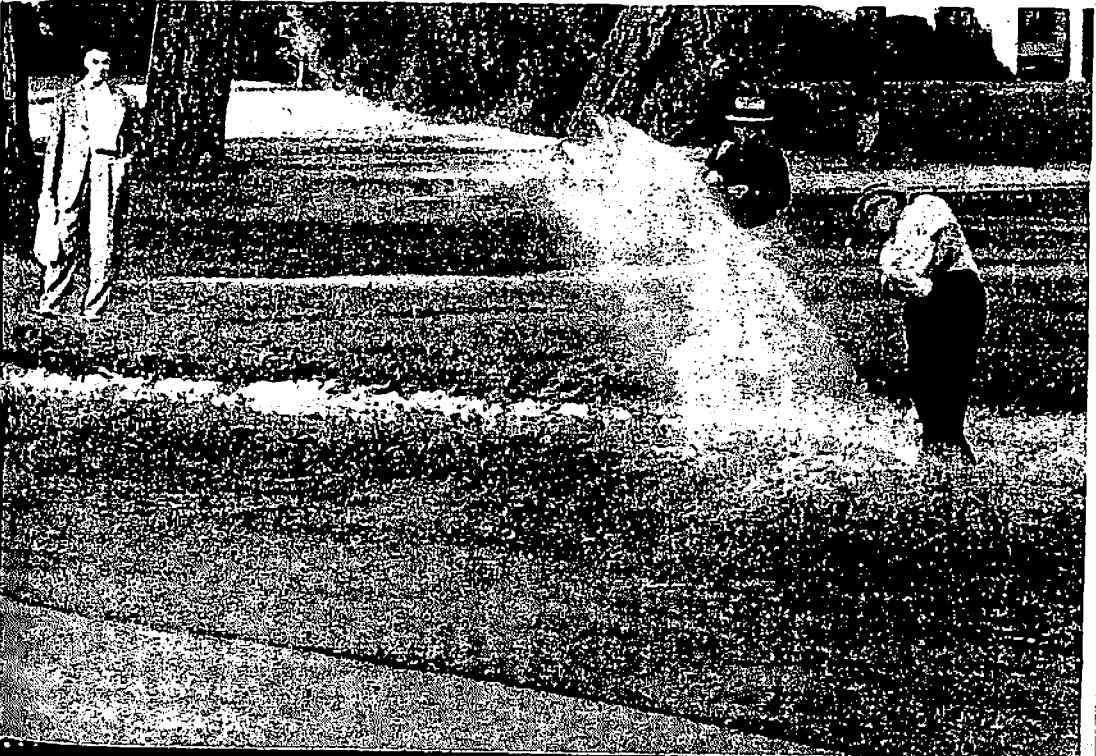
Cart in a Sand Trap

Shot number 3 (on the next page) shows Jim Greenwood running up his putt, and if I am not mistaken, it ran just a little past. Aidan Raney looks on with great interest, and Ed Morrissey with a resigned air surveys from the right. I believe Hunter Shelden was off the picture at the right still belaboring his ball out of the fine white sand.



On the Green

Ernie Out of the Sand



Not everyone I saw happened to be hitting out of the sand but I must have been preoccupied with the material, since I had been in so many of them the day before. Picture 4 (on preceding page), shows Ernie Mack's fine form in blasting his out on 18.

After the meeting I had the pleasure of visiting with Rupe Raney and sitting in on a Clinic at the V. A. Hospital in Long Beach. They gave us a real morning with aneurysms and cerebrovascular malformations.

On returning home I had the opportunity of removing a beautiful little malformation in the right parietal lobe without too much difficulty, but although the lesion was quite far back, the patient has more parietal lobe deficit than I like. It is only a week since operation and he may recover a considerable amount (I hope).

Thanksgiving went by without casualties here with a bright, dry day. We got a couple of inches of snow overnight so I suppose Buffalo is bedding down for the winter. Should any of you people start East or West, Buffalo is a convenient way-station, advantage of which can be taken with a little forethought. Hellyn and I would be very happy to have you drop off and say hello.

Comment:

We are indebted to Wally for a fine photograph of his family, a distinguished group to say the least. His photographs of the "Golfing Afternoon" are important contributions to the history of the Academy and The Neurosurgeon.

* * *

"Nothing damages a car more than attempting to trade it in."

"Matrimony was probably the first union to defy management."

After following a woman driver who had her hand stuck out from the car for about six blocks, a man pulled up alongside of her and said: "For heaven's sakes, lady, if you are going to turn, turn." "Who's turning?", she replied. "I'm drying my nails."

J. LAWRENCE POOL - December 2, 1959

As usual it was mighty nice to hear from you. Angeline and I were most disappointed that we had to miss the wonderful meeting at Del Monte, especially as we had worked so hard at golf all this summer with Pebble Beach in mind. While my eardrum trouble did not permit the trip, I am at least happy to have participated by contributing to the cost of O. P. M. (Other peoples' Martinis).

As for news here we continue our interest in aneurysm surgery with the usual alternation of runs of good luck with bad. I still practice enthusiastically the routine use of temporary Mayfield clips prior to uncovering all aneurysms, with no fatalities in 10 successive aneurysms. The one time I failed to use this technique for what looked like an easy anterior communicating aneurysm it ruptured prematurely before being exposed, and this patient is still in rough shape although slowly improving.

The other matters in which I am still greatly interested, as you may have gathered, are the prevention of cardiac difficulties during intracranial surgery, and the study of cerebral vasospasm associated with aneurysms. So far, however, we have no spectacular answers to these two problems.

We hope and expect to see you all at the Cushing Meeting this April,

Comment

We were sorry to miss Angeline and Larry at Del Monte, but one cannot go to all of the meetings. We will look forward to seeing them at the Harvey Cushing Meeting at San Francisco along with many other members of the Academy.

The problem of aneurysms continues to absord us all and is responsible, I am afraid, for many gray hairs.

* * *

DEAN H. ECHOLS - December 2, 1959

The spring and fall meetings of the American Board of Neurological Surgery and other factors have certainly cut down on my attendance at the Academy meetings in the past few years. Fran and I had an almost perfect record of attendance

the first 15 years and should soon be back on the track. Our youngest daughter goes away to college in September.

A few months ago we had the unusual experience of getting away with a craniotomy on a small boy with hemophilia complicated by subdural hematoma. He had experienced several serious bleeding episodes from minor wounds and was under the care of our hematologist. The subdural hematoma was spontaneous (? aneurysm). After he had been in coma for one week and had been given tremendous quantities of antihemophiliac plasma, the pediatricians and hematologists said the time had come for a burr hole. This was done but only part of the liquid and solid clot could be removed. The scalp wound oozed for days. Temporary improvement was replaced by coma so we turned a flap after many more infusions of plasma. The clot was chiefly anterolateral to the temporal and frontal lobes. The scalp continued to ooze, became infected, and eventually the bone flap was removed. The boy is now flat-headed but perfectly well and back in school.

The above mentioned happy episode was more than compensated for by a fatal outcome in a case of pseudotumor. The obese young mother of four children had little more than choked disks and bilateral abducens palsy. The diagnosis was suspected and confirmed by spinal air injections. Good filling of small ventricular system. At the time of subtemporal decompression (right) the dura was so tense that the ventricle was tapped. Only a few cubic centimeters of clear fluid were obtained. The brain herniated alarmingly when the dura was opened. Urevert was given and we sat down to watch the brain. In about 40 minutes the herniation increased, the cortical veins began to burst, and the cortex ruptured. The brain pulsated eventually after removing much of it, but it took a long time to control the bleeding. The patient died 24 hours later. Autopsy disclosed no good explanation for the death. The dural sinuses were patent.

I still like the decompression-compression operation for tic douloureux but now call it "manipulation of the sensory root." Between July 10, 1953 and December 13, 1956 I persuaded 18 patients to gamble on the new operation. In October 1959 I personally had a telephone conversation (as I do every October) with every one of the 18 and learned that all are well and working. The original operation has stood up perfectly in 15. Two had recurrence of pain within the first year and returned for root section. One had recurrence

after 4 years and was again "manipulated" at his insistence. The average follow-up on the 15 "cures" was 4.2 years in October. Ten have patches of numbness on the face. Five have none. Two have negligible paresthesias. One old lady, who has considerable numbness, complains bitterly of "crawling". The average duration of the disease in the 18 was 7 years - the shortest being 1.2 years.

I still do root sections for those that demand it but try to sell "manipulation" to almost everyone. To date there have been no failures of the manipulations done since the above mentioned series but tic douloureux seems to be vanishing and I have not done more than a dozen in the past three years.

At operation under local I expose the root as in preparation for sectioning. The root is lifted up at its dural foramen and the ganglion is distended by injecting novocain.

Recently I removed a gliomatous optic nerve tumor which was causing blindness and proptosis in a child. At a second operation the intracranial portion of the nerve was removed. It looked normal grossly and microscopically. Neuro-pathologist Lowenberg-Scharenberg at the University of Michigan recently published the "fact" that polar spongioblastomas of the optic nerves and chiasm are oligodendrogliomas.

Comment

The time spent by our members in the Spring and Fall meetings of the American Board of Neurological Surgery represents a significant contribution to neurological surgery.

Dean's description of his experience with a case of subdural hematoma in a hemophiliac was most interesting. I don't recall anyone else describing such an ordeal, which fortunately, must be uncommon.

These pseudo-tumors, or I should say their etiology, have never been satisfactorily explained to me. They are very distressing.

It must seem to all of us the procedure of "manipulation of the sensory root", as Dean has chosen aptly to term the procedure, has changed much of the concept of the surgical approach to the problem. The reason for tic douloureux remains as puzzling as ever.

Insofar as the gliomas of the optic nerve are concerned, I thought the paper given in Toronto on the subject by Sir Geoffrey Jefferson outstanding.

* * *

"Families used to be considered shiftless if they lived from payday to payday - now they wish they could."

"All you have to do to live beyond your means nowadays is to pay your bills."

* * *

DONALD D. MATSON - December 7, 1959

Anyhow, I played the Pebble Beach course without losing a ball in the ocean! I can hardly wait for the next meeting out there to try again. I hope Academy golfers will plan to play TheCountry Club course here next October. Many a good golfer has been made humble on occasion, and your correspondent consistently, by the problems it offers.



The Matson Children

We have recently operated upon our second patient with a pituitary adenoma appearing, or at least becoming locally symptomatic, 2 - 3 years after bilateral adrenalectomy for Cushing's disease. In each case, the stigmata of Cushing's syndrome were relieved by bilateral removal of hyperplastic adrenals. Subsequently, headaches, visual loss, amenorrhea and hyperpigmentation led to the diagnosis of pituitary tumor. Each case has had a destroyed sella turcica and a large adenoma which has been classified histologically as a chromophobe tumor. This last tumor had escaped well out into the frontal and left middle fossae and actually was the largest pituitary adenoma I have personally ever seen. We have knowledge now of 17 of these tumors appearing over the world in the last few years. Whether this tumor is created by the altered endocrine environment resulting from adrenalectomy or whether a small pituitary adenoma already present is excited to rapid growth is of great interest. Both of our patients have done well so far. This has never been seen in Cushing syndrome associated with a tumor of the adrenal gland. It looks as though if we could only be smart enough to tell when Cushing's syndrome was associated with hyperplasia rather than adrenal tumor on the basis of some chemical study, it would be preferable to explore the pituitary primarily and leave the adrenals alone. Certainly all patients who have had adrenalectomy for Cushing's disease should continue to have visual fields and skull x-rays checked regularly.

It becomes increasingly apparent to me as my experience as Secretary of the American Board of Neurological Surgery increases and my contacts with many men in training now and recently throughout the country broadens, that the dignity of the training institution, the volume of clinical material available and the length of the training program are all secondary in importance to the ability and willingness of the responsible staff members to spend time and effort in directing, correlating and stimulating the efforts of the trainee. Perhaps the greatest fault in the overall post-graduate education of neurosurgeons today in my opinion is the tendency to add more men to clinical services than can be given proper opportunities, responsibilities and individual attention for satisfactory training. Unless the heads of the various approved training centers realize and accept themselves the major responsibility for certifying the adequacy of the training of all men in their own programs, the standard of neurosurgical practice in the country is bound to fall off.

In addition to routine clinical practice and research, there must be time for teaching at the bedside, in the clinic, in

the operating room and in specific conferences and teaching exercises. It does not seem to me desirable for our profession nor fair to the individuals involved to take on "pairs of hands" that cannot be carried through a proper and thorough training.

Comment

Don has written the perfect paragraph about the training program in neurological surgery. I also believe that a resident should have an opportunity to spend 4 to 6 months in other prominent centers in order to learn something about what each does best. Additionally, an opportunity to spend a year abroad with a similar idea in mind should prove most advantageous. Once the resident has gone out into the world, either in private practice or in the "Ivory Tower League" of the full time teaching career, that opportunity becomes less possible. Don has taken over the position of secretary of a most important organization and something which will require even more of his valuable time.

* * *

"Lots of mothers think the vehicle with the best pick-up is the school bus."

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

* * *

ROBERT G. FISHER - December 11, 1959

I have undertaken here a rather extensive problem of carotid artery thrombosis and thrombendarterectomies, and we are delighted with the results that we have been getting so far. We have been doing more and more patients with all sorts of transient symptoms, transient headaches, transient visual disturbances, and you know all the rest of the great number of symptoms that may accompany this problem. Our results so far have been impressive although we haven't followed them long enough to know what we really are doing.

We are doing sympathectomies and after having talked with Francis Murphy about this, I am fully convinced that this is far more gratifying than any surgery of brain tumors or surgery of hydrocephalus, or all the other problems that we get ourselves into. It has been a great deal of fun.

We are looking forward to the meeting this fall, and if anybody would like information about what pleasures New Hampshire can afford after the meeting, we will be delighted to indicate this to them and we would be delighted to see any of the members after the meeting. There are quite a number of facilities, and while people are in this section of the country it might pay them to go on and see some of the other parts of New England.

Comment

The problem of carotid artery thrombosis and thromboendarterectomies seems to have raised its troubled head to the neurosurgical world. Again, it will be interesting to find out what the appropriate answer may prove to be. Of course, if we can devise a solvent to take internally, and that will be as pleasant as a Scotch and soda, a solvent which will wash the appropriate collection of cholesterol away, we would have the answer and the Nobel Prize.

Bob's paper "Carotid Artery Thrombosis in Persons 15 Years or Younger", J.A.M.A., August 15, 1959, was most interesting. I think he should be congratulated on the good work he did as Editor of the recent volume "Clinical Neurosurgery" published by The Williams & Wilkins Company, 1959, and which contains the edited proceedings of the Eighth Annual Meeting of the Congress of Neurological Surgeons held in San Francisco in 1958. I think it is also important for us to point out that this volume is dedicated to A. Earl Walker who was the honored guest and speaker at this meeting. Bob's biographical sketch of Earl is an excellent one and would be appreciated by all of the members.

* * *



I am sorry for the somewhat belated letter written a few days after getting home from the Clinical Meeting of the A. M. A. in Dallas where one of the radiologists and I had an exhibit upon Positive Contrast Ventriculography. While there I got to take part as a last minute replacement for someone from Baltimore in a trans-Atlantic C. P. C. conference with a group from Glasgow. The case that we had to work upon turned out to be an obscure granulomatous infection of the chest with multiple intracranial granulomas. At the time of autopsy the lesions were thought to be neoplastic but upon histological study they were seen to be caused by some type of fungus. Before returning to work I came by Austin where I gave four lectures to one of the Law School classes upon head injuries, injuries of the spine and spinal cord, and of course herniated intervertebral discs.

This year has sped by faster than any I can remember. The year has had several high points but nothing really outstanding beyond having a son start into medical school. There have been some changes in our Department at the school with Ira Jackson going on a part-time basis. The budget for the Surgery Department did not provide enough funds to add another neurosurgeon, as we had planned, but I hope that we may be able to do so two years from now. There will soon be some minor remodeling of the hospital to provide more private and semi-private beds. On account of insufficient appropriations we have had some staff beds that have never been opened and two of these wards are being made over to provide private space which has never been quite adequate. No one has wished to assume the responsibility of paying for indigent patients to be sent here, and there has been very little increase in the hospital appropriation during the past few years, although a considerable number of beds have been added. There are plans for a new building to provide animal quarters and experimental laboratories, both of which are badly needed. The Out-Patient Clinic is to be remodeled and enlarged and two of the older buildings for patients are to be remodeled and air-conditioned.

In its session earlier this year, the legislature authorized a third state-supported medical school to be located in San Antonio, but made no appropriation toward its planning or construction. Austin had strongly competed for such a school and there certainly would have been some advantages to having it there with the main University. With this advance

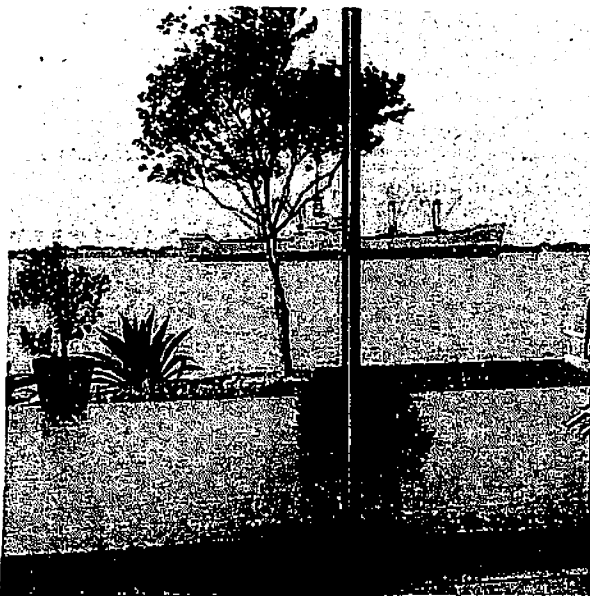
designation of San Antonio, doubtless it is hoped that the city or county there will develop a new hospital with sufficient clinical material for a new school which will then be constructed. I am sure that neither the state or the university wish to run a general hospital on account of the expense and hope to duplicate the situation which exists in Dallas where the teaching is done in a city-county hospital. At this time the financial support of the present two schools is somewhat inadequate and there are not a sufficiently large number of well qualified Texans making application to justify a third medical branch to be supported by the state.

Next week I will be leaving with our three boys for the first deer hunt that any of us have ever taken. After Christmas I will go to Indiana for a short visit and will return January 2. After living here in the South for more than twenty years, I have no wish to wade through the snow again.

We are all fine and busy with one thing and another. I am enclosing a photograph taken through our living room doors. This was taken by Margaret recently and shows a freighter going out through the ship channel.

Comment:

Sam has obviously been very busy, as seems to be true with all of us. It is apparent that those on the full time basis of neurosurgery have their great difficulties with appropriations and support. His medical school is fortunate in having a person who gets along so well with people under trying circumstances. I am sure that when Margaret and Sam look out through their beautiful living room window, many of the difficulties neurosurgically and otherwise become far less important than might otherwise be the case.



THE ACADEMY AWARD WINNERS

Paul M. Lin	1955
Hubert L. Rosomoff	1956
Byron C. Pevehouse	1957
Norman Hill	1958
Jack Stern	1959

* * *

THE NEUROSURGEON AWARD WINNERS

Edwin B. Boldrey.	1955
Georgia and John Green	1956
Dean Echols	1957
Arthur R. Elvidge	1958
John Raaf	1959

The Neurosurgeon Award for 1959 has gone to John Raaf. John, one of the Founding Members, has shown a continued loyalty and interest in the Academy. The meeting which Lorene and John hosted in 1949 in Portland, Oregon will long be remembered as one of our very best. Additionally, John has contributed liberally to The Neurosurgeon, has missed few if any meetings, and has presented many interesting papers. Among the many deserving of The Neurosurgeon Award for the year 1959 he stands out above the rest.

* * *

"Experience: A form of knowledge acquired in only two ways - by doing and being done."

"The dictionary is the only place where success comes before work."



MEMBERSHIP ROSTER

1959 - 1960

"PAST PRESIDENTS CLUB"

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

PAST VICE-PRESIDENTS

1941	Francis Murphey	1951	Henry G. Schwartz
1942	William S. Keith	1952	J. Lawrence Pool
1943	John Raaf	1953	Rupert B. Raney
1944	Rupert B. Raney	1954	David L. Reeves
1946	Arthur R. Elvidge	1955	Stuart N. Rowe
1947	John Raaf	1956	Jess D. Herrmann
1948	Arthur R. Elvidge	1957	George S. Baker
1949	F. Keith Bradford	1958	Samuel R. Snodgrass
1950	David L. Reeves	1959	C. Hunter Shelden

PAST SECRETARY-TREASURERS

Francis Murphey	1938-39-40
A. Earl Walker	1941-42-43
Theodore C. Erickson	1944-46-47
Wallace B. Hamby	1948-49-50
Theodore Rasmussen	1951-52-53
Eben Alexander, Jr. . . .	1954-55-56-57-58

The American Academy of Neurological Surgery

FOUNDED OCTOBER 28, 1938

HONORARY MEMBERS — 3

	ELECTED
Sir Geoffrey Jefferson Department of Neurosurgery The Royal Infirmary Manchester 13, England	1951
Dr. R. Eustace Semmes 101-B Baptist Medical Bldg. Memphis 3, Tennessee	1955
Dr. R. Glen Spurling 405 Heyburn Bldg. Louisville 2, Kentucky	1942

DECEASED MEMBERS — 4

Dr. Winchell McK. Craig (Honorary) Rochester, Minnesota	1942
Dr. O. William Stewart (Corresponding) Montreal, Quebec	1948
Dr. W. Jason Mixter (Honorary) 3-16-58 Woods Hole, Massachusetts	1951
Dr. Rupert B. Raney (Active) 11-28-59 Los Angeles, California	1939

SENIOR MEMBERS — 1

Dr. Olan R. Hyndman Veterans Administration Hospital Iowa City, Iowa	1941
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ACTIVE MEMBERS — 69

Dr. Eben Alexander, Jr. Bowman Gray Sch. of Medicine Winston-Salem 7, No. Carolina	Betty 521 Westover 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 15 Common Street Dedham, Massachusetts	1951

	ELECTED
Dr. William F. Beswick 685 Delaware Avenue Buffalo 9, New York	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. E. Harry Botterell Medical Arts Building 280 Bloor Street, West Toronto 5, Ontario	Margaret Apt. 601, 150 Balmoral Avenue Toronto, Ontario, Canada 1938
Dr. Spencer Braden 1130 Hanna Building 14th & Euclid Avenues Cleveland 15, Ohio	Mary 2532 Arlington Road Cleveland Heights, Ohio Founder
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 384 Post Street San Francisco 8, California	Dorothy 127 San Pablo Avenue San Francisco, California 1939
Dr. Harvey Chenault 177 North Upper Street Lexington 6, Kentucky	Margaret 2105 Nicholasville Road Lexington, Kentucky 1949
Dr. Donald F. Coburn 411 Nichols Road Kansas City 12, Missouri	Max 5255 Ward Parkway Kansas City 12, Missouri 1938
Dr. Edward W. Davis 806 S. W. Broadway Portland 5, Oregon	Barbara 1714 N.W. 32nd Avenue Portland 10, Oregon 1949
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 3503 Prytania Street New Orleans, Louisiana	Fran 1428 First Street New Orleans 13, Louisiana Founder
Dr. Arthur R. Elvidge Montreal Neurological Institute 3801 University Street Montreal 2, Quebec	1465 Bernard Avenue, West Outremont, Quebec, Canada 1939

		ELECTED
Dr. Theodore C. Erickson University Hospitals 1300 University Avenue Madison 6, Wisconsin	Emily 531 N. Pinckney St. Madison 3, Wisconsin	1940
Dr. Joseph P. Evans 950 East 59th Street University of Chicago Clinics Chicago 37, Illinois	Hermene 1234 East 56th Street Chicago 37, Illinois	Founder
Dr. William H. Feindel University Hospital, Dept. of Neurosurgery Saskatoon, Saskatchewan, Canada		
Dr. Robert G. Fisher Hitchcock Clinic Hanover, N. H.	Constance 11 Ledyard Lane Hanover, New Hampshire	1957
Dr. John D. French The Medical Center University of California Los Angeles 24, California	Dorothy 1809 Via Visalia Palos Verdes Estates, California	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 2020 15th Avenue South Birmingham 5, Alabama	Peggy 4227 Altamont Road Birmingham 13, Alabama	1947
Dr. Everett G. Grantham 405 Heyburn Building Louisville 2, Kentucky	Mary Carmel 410 Mockingbird Hill Road Louisville 7, Kentucky	1942
Dr. John R. Green 550 West Thomas Road Patio A, Suite 202 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 700 North Michigan Avenue Chicago 11, Illinois	Jennie 2129 Central Park Evanston, Illinois	1942
Dr. Wallace B. Hamby 140 Linwood Avenue Buffalo 9, New York	Hellyn 70 Windsor Avenue Buffalo 9, New York	1941
Dr. Hannibal Hamlin 270 Benefit Street Providence 3, Rhode Island	Margaret 270 Benefit Street Providence, Rhode Island	1948

Dr. John W. Hanbery Clay and Webster Sts. San Francisco 15, California		
Dr. Jess D. Herrmann 525 Northwest Eleventh Street Oklahoma City 3, Oklahoma	Mary Jo 1604 Glenbrook Terrace Oklahoma City 14, Oklahoma	1938
Dr. Henry L. Heyl Hitchcock Foundation Hanover, New Hampshire	Katharine Norwich, Vermont	1951
Dr. William S. Keith Toronto Western Hospital 399 Bathurst Street Toronto 2B, Ontario	Eleanor 55 St. Leonardi Crescent Toronto 12, Ontario, Canada	Founder
Dr. Robert B. King 150 Marshall Street Syracuse 10, New York	Molly 2 Clara Road Fayetteville, New York	1958
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) Bramhall Field Falmouth Foreside, 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 102 Interstate Bldg. 540 McCallie Avenue Chattanooga 3, Tennessee	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
Dr. William F. Meacham Vanderbilt Hospital Nashville 5, Tennessee	Alice 3513 Woodmont Blvd. Nashville 12, Tennessee	1952
Dr. John M. Meredith 1200 East Broad Street Richmond 19, Virginia	Etta 3 Greenway Lane Richmond, Virginia	1946

ELECTED

Dr. Edmund J. Morrissey 450 Sutter Street, Suite 520 San Francisco 8, California	Kate 2700 Vallejo Street San Francisco 23, California	1941
Dr. Francis Murphey Suite 101-B, Baptist Medical 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 2691 Landon Shaker Heights 22, Ohio	1956
Dr. Guy L. Odom Duke Univ. School of Medicine Durham, North Carolina	Suzanne 2812 Chelsea Circle Durham, North Carolina	1946
Dr. J. Lawrence Pool 710 West 168th Street New York 32, New York	Angeline Closter Dock Road Alpine, New Jersey	1940
Dr. Robert Pudenz 744 Fairmount Ave. Pasadena 1, California	Mary Ruth 3110 San Pasqual Pasadena 10, California	
Dr. John Raaf 1010 Medical Dental Building Portland 5, Oregon	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. 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 316 West Junipero Street Santa Barbara, California	Marjorie 595 Picacho Lane, Montecito Santa Barbara, California	1939
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

	ELECTED
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	Emily 334 No. Steele Road West Hartford, Connecticut 1944
Dr. C. Hunter Shelden 744 Fairmount Ave. Pasadena 1, California	Elizabeth 1345 Bedford Road San Marino, California
Dr. Samuel R. Snodgrass John Sealy Hospital Univ. of Texas Medical Branch Galveston, Texas	Margaret 1405 Harbor View Drive Galveston, Texas 1939
Dr. Hendrik J. Svien 200 First St. S.W. Rochester, Minnesota	Nancy 827 Eighth Street, S.W. Rochester, Minnesota 1957
Dr. Homer S. Swanson 384 Peachtree Street, N. E. Atlanta 3, Georgia	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. A. Earl Walker Johns Hopkins Hospital Division of Neurological Surgery 601 N. Broadway Baltimore 5, Maryland	Terrye 6007 Lakehurst Drive Baltimore 10, Maryland 1938
Dr. Exum Walker 423 Baptist Professional Bldg. Atlanta 3, Georgia	Frances 1819 Greystone Road, N.W. Atlanta, Georgia 1938
Dr. Arthur A. Ward, Jr. Division of Neurosurgery University Hospital, Rm. BB-671 Seattle 5, Washington	Janet 3922 Belvoir Place Seattle, Washington 1953
Dr. Thomas A Weaver 146 Wyoming St. Dayton 9, Ohio	Mary 103 Beverly Place Dayton 19, Ohio 1943
Dr. W. Kasley Welch 4200 E. Ninth Ave. Denver 20, Colorado	Elizabeth 2432 So. Birch Street Denver, Colorado 1957

Dr. Benjamin B. Whitcomb
85 Jefferson Street
Hartford 14, Connecticut

Margaret
38 High Farms Road
West Hartford, Connecticut

ELECTED

1947

Dr. Barnes Woodhall
Duke Hospital
Durham, North Carolina

Frances
4006 Dover Road, Hope Valley
Durham, North Carolina

1941

PAST MEETINGS OF THE ACADEMY

Hotel Peabody, Memphis, Tennessee	April 22, 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
Hart Hotel, Battle Creek, Michigan	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