



In This Issue...

1

Chairman's Message

3

Section on Tumors History Update
Research Subcommittee Report

4

Section on Tumors Awards
Committee Report

5

Immunotherapy Task Force Annual
Meeting Report
Editor's Corner

6

Society for Neuro-Oncology Update
Section on Tumors 2007 AANS
Annual Meeting Highlights

7

Section on Tumors Treasurer's Report
International Report: Italy
International Report: Japan

8

Washington Committee Report

9

First Section on Tumors/BrainLAB
International Research Fellowship
Awarded

Chairman's Message

Your Executive Committee Working for You!



Ronald E. Warnick, MD

This is my final Chairman's Message and I would like to highlight the accomplishments of the Section on Tumors Executive Committee members who have worked tirelessly on your behalf. Several new initiatives were introduced

at the start of my tenure two years ago. I would like to describe our progress in these areas.

Strategic Initiatives

1. **Increase relevance to community brain tumor neurosurgeons and encourage their membership in our Section.**

We recently launched the BrainLab Community Neurosurgery Award which is given to a neurosurgeon practicing in a nonacademic setting who submits the best abstract related to central nervous system tumors. The first recipient was Alfred Bowles Jr., MD, of Johnstown, Pennsylvania.

The Section organized a luncheon seminar at the 2006 Congress of Neurological Surgeons (CNS) Annual Meeting, "Clinical Trials and Outcomes Research: What Every Neurosurgeon Should Know." The presentations focused on the importance of clinical research and how community neurosurgeons could become involved in clinical trials and outcomes research.

The Academic-Community Alliance (ACA) is a network of academic and community practitioners committed to information exchange and care optimization. Over 200 neurosurgeons have joined the ACA and the first strategic planning meeting took place at the 2006 CNS Annual Meeting. The ACA is currently developing a Web-based communications system through the

new Section on Tumors Web site (www.tumorsection.org).

The 2007 Tumor Satellite Symposium (April 13-14, 2007) will feature a session, "The Academic-Community Alliance: A Cooperative Approach to Brain Tumor Therapy." There will be presentations by both academic and community ACA members who will describe how the ACA can be a vehicle for advancing clinical science and information exchange.

These activities increased the number of community neurosurgeon Section members. Over the past 18 months, 55 new Active Section members joined from the community resulting in a well-balanced Active member group (Academic 294, Community 271).

2. **Strengthen relationships with other national neuro-oncology organizations.**

North American Skull Base Society

The Synthes Skull Base Surgery Award was recently launched. It is given to a neurosurgeon who submits the best abstract related to skull base tumors. The first recipient was Theodore Schwartz, MD, of New York, New York.

The 2007 Tumor Satellite Symposium will include a session on skull base tumors that will feature seven abstract presentations on the surgical approaches and anatomic considerations of complex skull base tumors. Members of the North American Skull Base Society will be moderators and discussants at the session.

The Society of Neuro-Oncology

The Section on Tumors worked closely with members of the Society of Neuro-Oncology (SNO) to develop a manuscript, "GNOSIS: Guidelines for Neuro-Oncology: Standards for Investigational Studies," which will soon be published in the *Journal of Neuro-Oncology*. The

continued on page 2

guidelines are presented in a checklist format outlining the relevant sections for reporting a surgically-based therapeutic trial in neuro-oncology. The checklist can also be used as a framework from which to construct a trial.

The leadership of both the Section and the SNO agreed in principle to hold a joint scientific meeting in the Fall of 2009. We envision this meeting will offer a unique opportunity for education and collaboration between the two organizations.

The collaborative activities between our Section and other neuro-oncology organizations contributed to a 32 percent increase in adjunct (non-neurosurgeon) members since Spring 2005.

3. Broaden international representation to strengthen relationships with worldwide neuro-oncology organizations.

The AANS/CNS Section on Tumors/BrainLab International Research Fellowship was established to provide an opportunity for a neurosurgeon from outside the United States and Canada to perform clinical, translational or basic neuro-oncology research in a clinical or laboratory setting within the United States. The Section developed a list of investigators in the United States who are interested in sponsoring an international neurosurgeon. The first applications are being reviewed and the successful candidate will begin the research fellowship in July 2007.

The members of the Section on Tumors International Subcommittee have been active. The existing tumor guidelines were translated into Spanish and added to the members section of our Web site. For additional information, please see <http://www.tumorsection.org/membersonly/guidelines/index.htm>. Several international membership initiatives contributed to a 47 percent increase in international members since Spring 2005.

4. Ensure the future success of the Section on Tumors by developing the future leaders of our organization.

Thirteen new members were appointed to the Executive Committee and younger members were paired with more senior neurosurgeons to establish a one-to-one mentorship program. How did these future leaders fare?

Annual Program

The Section on Tumors scientific program for the 2007 AANS Annual Meeting was organized by Mark Johnson, MD, under the guidance of Peter Black, MD, PhD. Dr. Johnson has put together two unique and exciting afternoon programs including two sessions on modern controversies in the neurosurgical management of brain tumors: vestibular schwannoma and low grade glioma. A review of published literature will be presented so that attendees can see how experts in the field approach these controversial neurosurgical management scenarios.

Guidelines

Steven Kalkanis, MD, worked on tumor guidelines under the mentorship of Mark Linskey, MD. Together they collected all existing tumor guidelines and posted these documents on our

new Section Web site. Dr. Kalkanis assumed a leadership role in the National Brain Metastases Guidelines effort by organizing a multidisciplinary scientific committee, soliciting industry sponsorship, and developing the specific clinical questions. The initial meeting of the scientific committee took place in late October 2006 at the Florida home of Beverly Walters, MD, who will function as a consultant. Completed guidelines are expected in late 2007.

Web site

The new and improved Section on Tumors Web site (www.tumorsection.org) was developed by Jonas Sheehan, MD, working with Gene Barnett, MD, FACS. The site provides members with reference material and current information about tumor-related activities. A forum was created within the members' section to allow communication between members regarding clinical questions, case reviews, and meeting information. The new Web site has proven extremely popular and has averaged 20,000 hits per month.

Other Notable Activities

Although it is not possible to mention every Section on Tumors activity, I would like to highlight two critical areas.

Membership

New membership initiatives resulted in 100 new Active members since Spring 2005, with overall Section membership up by 16 percent (not including resident members). Isabelle Germano, MD, FACS, (Membership Subcommittee) and Chris Phillips (AANS Membership Director), are credited for this record-breaking recruitment. I am confident that our strategic initiatives will translate into greater membership in all categories.

Tumor Satellite Symposium

Andrew Parsa, MD, PhD, (Scientific Program Committee) and Adele Johnson (AANS Meetings Department) worked tirelessly to organize the Seventh Biennial Satellite Symposium taking place on April 13-14, 2007 in conjunction with the AANS Annual Meeting in Washington, DC. The meeting will include several unique educational and interactive sessions including: international tumor presentations, skull base tumors symposium, luncheon seminars on adult and pediatric case studies, and a career development seminar. There will also be an opening reception for international members and Washington, DC neurosurgeons, as well as a one-of-a-kind reception in the Capitol Hill dining room.

Final Thoughts

None of these accomplishments would have been possible without the hard work of the 46 highly motivated volunteers that comprise the Section on Tumors Executive Committee. I would like to personally thank each Executive Committee member for his or her contributions over the past two years. You made my job easy!

I will soon hand over the reins of the Section to Michael McDermott, MD, who is the incoming chairman of the Section on Tumors. Dr. McDermott has been an active member of the Executive Committee and has done an outstanding job as secretary/treasurer over the past two years. I could not have done my job without him! The Section will be in good hands with Dr. McDermott at the helm.

Section on Tumors History Update

Section members interested in history will find useful information and links on the new Section on Tumors Web site (open the main page at www.tumorsection.org, then click on “Tumor Section Information” and then “History”).

In addition to an online version of the commemorative brochure from the Section’s 20th anniversary celebration, there are articles on the history of the Section, Section prizes and awards, and the printed handouts from special courses sponsored by the Section at AANS and CNS meetings between 1985 and 1991. The Section on Tumors history article contains a categorized bibliography of secondary sources on the history of brain tumor surgery with an emphasis on sources not accessible through *PubMed*, such as articles published before 1966 and book chapters. The bibliography includes 54 works on general brain tumor history, 20 works on glioma history, 19 on meningiomas, 19 on acoustic neuroma and cerebellopontine angle surgery, 38 on pituitary surgery, and 14 on pineal tumors.

There is also a page of links to neuroscience history sources on the Web, including search tools for medical history research (such as an online version of the Catalogue of the Surgeon General’s Library, a searchable index to 19th century medical journal literature), sources to download historical illustrations online (including the complete atlases of Vesalius, Eustachius, Albinus, and Cheselden), the full text of Fulton’s biography of Harvey Cushing, MD, and many more.



Many Section members will have seen the recently published biography of Dr. Cushing by historian Michael Bliss, PhD, “Harvey Cushing: A Life In Surgery” (Oxford, 2006), which is rewarding reading for both Cushing enthusiasts and for those who know little about him. Another important work on Cushing is scheduled to be published in Spring 2007, “The Legacy of Harvey Cushing: Profiles of Patient Care,” edited by Aaron A. Cohen-Gadol, MD, and Dennis D. Spencer, MD (Thieme, 2007). This lavishly illustrated book will contain Cushing’s detailed personal summaries (with photographs) of the clinical course of dozens of his patients – the reader practically looks over Cushing’s shoulder as he encounters a bewildering panoply of advanced pathology unmatched in modern neurosurgical practice. Introductions to several chapters were written by Section on Tumors members, summarizing Cushing’s experience with specific tumor types such as pituitary tumors and meningiomas. The hundreds of photographs in this book simply must be seen to be believed.

Fred G. Barker II, MD

Research Subcommittee Report

Donald M. O’Rourke, MD



The Section on Tumors Research Subcommittee recently reviewed grant applications for the 2006 National Brain Tumor Foundation (NBTF) Translational Research Grant Award for the best translational research proposal submitted by a practicing neurosurgeon within six years of completing residency. There were 12 applications this year; a significant increase from last year. Proposals that bring novel laboratory research findings to clinical trial (or vice versa) are preferred.

Congratulations to Amy Heimberger, MD, for being selected the 2006 recipient of the NBTF grant award. Dr. Heimberger’s project, “Determining the Natural History of Immunological Responses in GBM Patients” has significant translational importance and will evaluate how regulatory T cells (T_{regs}) influence immunological activity in GBM patients. The funded project will examine whether T_{regs} are preferentially affected by radiation, surgical resection and chemotherapeutics, and whether T_{regs} are differentially affected compared to other immunological effector cells. This work is particularly relevant since Dr. Heimberger’s group recently completed a Phase II immunotherapy trial in which GBM patients were vaccinated against the EGFRvIII oncogenic peptide; and vaccinated patients showed a prolongation in time to tumor progression and overall survival compared to historical controls. Translational studies such as the proposed work by Dr. Heimberger and colleagues will have increased importance, as immunotherapies are increasingly combined with cytoreductive surgery and adjuvant chemoradiation in GBM patients.

Section on Tumors BrainLAB International Research Fellowship

The AANS/CNS Section on Tumors is pleased to announce the establishment of a new international research Fellowship. Additional information about the Fellowship can be found at:

www.tumorsection.org/professional/fellowships_research.html

Section on Tumors Awards Committee Report



The 2006 CNS Annual Meeting in Chicago displayed the depth of neuro-oncology research throughout the Section on Tumors. Many outstanding investigators were recognized for their contributions to neuro-oncology research. Awards were presented for abstracts ranging from basic science to translational and clinical areas of brain tumor research. Photos of the award recipients can be seen on the Section on Tumors Web site at: www.tumorsection.org/awards/2006chicago.htm.

Two new Section awards: the BrainLab Community Neurosurgery Award and the Synthes Skull Base Award were introduced at this meeting. The new awards recognize contributions from neurosurgeons working in the community and in skull base surgery, respectively. Each award carries a cash prize of \$1000 and is limited to members of the Section on Tumors. All eligible members are encouraged to submit abstracts for these awards.

BrainLab Community Neurosurgery Award

The BrainLab Community Neurosurgery Award is awarded at the annual meetings of the AANS and CNS. This award is given to a neurosurgeon practicing in a nonacademic setting with the best abstract related to central nervous system tumors. Michael McDermott, MD, and Ronald Warnick, MD, secured this award given through the generosity of BrainLab, Inc. Alfred Bowles Jr., MD, was presented with the first BrainLab Community Award at the 2006 CNS Annual Meeting for his presentation, "High Frequency, Low Temperature Radio-surgery: Adjunct for Brain Tumor Resections".

Synthes Skull Base Surgery Award

The Synthes Skull Base Award is awarded to an attending neurosurgeon, resident or fellow within the Section on Tumors who submits the best abstract related to skull base surgery. This award is given at the annual meetings of the AANS and CNS. Franco De Monte, MD, FACS, chair of the Skull Base Subcommittee, secured this award through a generous contribution from the Synthes Corporation. The first Synthes award was presented at the 2006 CNS Annual Meeting to Theodore Schwartz, MD, for his abstract, "Endoscopic, Endonasal Extended Transsphenoidal Transplanum Transtubarculum Approach for Resection of Suprasellar Lesions."

Farber Award

The Farber Award is presented at the annual meetings of the AANS and the Society for Neuro-oncology (SNO) in alternate years with the awardee presenting at both meetings the year the award is granted. Sponsored by the Farber Foundation, the recipient is selected by the presidents of the two organizations based on nominations from the leadership of both societies. The award recognizes the most promising investigators achieving significant results early in their careers.

The 2006 Farber Award winner is Paul Mischel, MD, from the University of California – Los Angeles, recognizing his significant

contributions to the understanding of malignant gliomas. Dr. Mischel will present at the 2007 AANS Annual Meeting.

Preuss Award

The Preuss Award, sponsored by the Preuss Foundation, is given at both the AANS and CNS annual meetings to a young scientist investigating brain tumors, within ten years of training, who has submitted the best basic science research paper. James Waldron Jr., MD, from the University of California – San Francisco was the 2006 CNS Annual Meeting Preuss Award winner for his presentation, "Akt/PKB Activation Facilitates Immune Escape in Glioma Patients".

Mahaley Award

The Mahaley Award is given at both the AANS and CNS annual meetings to a neurosurgery resident, fellow or attending who submits the best clinical study in neuro-oncology. At the 2006 CNS Annual Meeting, David Mathieu, MD, from the University of Pittsburgh was recognized for his presentation, "Gamma Knife Radiosurgery for Malignant Melanoma Brain Metastases".

American Brain Tumor Association Young Investigator Award

The American Brain Tumor Association (ABTA) Young Investigator Award is given at both AANS and CNS annual meetings to a young faculty member involved in neuro-oncology research who has demonstrated outstanding potential for future basic science research. The applicant must have completed training within six years. The 2006 CNS Annual Meeting recipient of the ABTA Young Investigator Award was Clark Chen, MD, PhD, from Massachusetts General Hospital for his abstract, "An siRNA-based Approach to Characterize Brain Tumor Resistance to Radiation Therapy".

Integra Award

The Integra Foundation Award is given at both the AANS and CNS annual meetings for the best research or clinical paper submitted investigating benign brain, spinal or peripheral nerve tumors. Manish Aghi, MD, from Massachusetts General Hospital received the award in Chicago at the 2006 CNS Annual Meeting for his abstract, "High Incidence of Obesity and Obesity-Related Postoperative Complications in Male Meningioma Patients".

Through sponsoring agencies, the Awards Subcommittee is pleased to be able to continue to support excellence in both clinical and basic science research involving tumors of the central and peripheral nervous system. All of our awards require that the recipient be an active, international or resident member of the Section on Tumors; and each award is given to a recipient only once. At the 2007 AANS Annual Meeting in Washington, DC, the Mahaley, Preuss, ABTA Young Investigator, Farber, Bittner, Integra Foundation, BrainLab, Synthes and Journal of Neuro-Oncology awards will be presented. Details on awards criteria can be found on the Section on Tumors Web site at www.tumorsection.org/awards/awards.htm.

Jeffrey Bruce, MD

Immunotherapy Task Force Annual Meeting Report



In recent years there has been increased interest in the development of immunologic strategies for the treatment of brain tumors. It is evident by the many questions, inquiries and contacts from patients, physicians, and neurosurgeons that there is an urgent need to coordinate and disseminate current information and ongoing research in this field. Even within the scientific community, many do not know what current studies are underway, the results of ongoing trials, what immune parameters should be monitored in these clinical trials, whether these studies should be multi-center trials, and what further pre-clinical work needs to be done.

Several researchers and clinicians involved in neuro-oncology thought this need could be met via a focused research group. The Immunotherapy Task Force, (an international multi-disciplinary group) has been organized to facilitate communication among researchers – both basic science and clinical – and to coordinate multi-center collaborative research efforts. It is a “grass roots” group; everyone is welcome and invited to join and participate. The members include both clinicians (e.g. neurosurgeons, neurologists, pathologists, radiation oncologists) and basic scientists working in the field of neuro-oncology. Since the group began in 2000, there are now over 75 members.

The Immunotherapy Task Force was organized to bring people in the field together for education and research, and to evaluate the need for an Immunotherapy Consortium. The meetings are organized into three parts: Invited Lecturer (previous lecturers have included Darell Bigner, MD, PhD, and Edward Oldfield, MD), Research Talks (oral presentations), and Round Table Discussion.

There are three meeting goals: first, to present and evaluate the novel and current laboratory and clinical research in the field of brain tumor immunotherapy in order to coordinate and disseminate current information and ongoing research in the field. Second, to come to a consensus regarding what clinical endpoints and immune system monitoring parameters should be evaluated in clinical studies. The last goal is to evaluate the need and timing for an Immunotherapy Consortium to develop multi-center clinical trials.

As a result of the growing interest and promising early results in this exciting and changing field, a special issue of the *Journal of Neuro-Oncology* was dedicated to clinical and basic research in brain tumor immunotherapy. The articles were authored by leading researchers in the field of brain tumor immunotherapy, most of whom are members of the Immunotherapy Task Force. The issue was dedicated to one of our great past teachers, Stephen Mahaley Jr., MD.

The fifth annual meeting of the Immunotherapy Task Force was held in conjunction with the Society of Neuro-Oncology (SNO) meeting in Orlando, Florida on November 16, 2006. This meeting was co-sponsored by the Section of Tumors and SNO. Over 50 people attended and there were 13 oral presentations (see list on the Section on Tumors Web site at the following link:

www.tumorsection.org/professional/taskforce.htm). This meeting was international and represented many areas of brain tumor immunotherapy research.

As a result of the enthusiasm regarding immunotherapy research, Kevin Lillehei, MD, has organized an annual Brain Tumor Immunotherapy Symposium at the Givens Institute in Aspen, Colorado, the first of which was held in August 2006. This meeting, sponsored by the Section on Tumors, enabled researchers and clinicians to further discuss immunotherapy topics and to develop collaborations.

The Immunotherapy Task Force is an open group and anyone with an interest in the field or an interest in attending the next Immunotherapy Task Force Meeting, should please contact me at: rpglick@hotmail.com.

Roberta P. Glick, MD

Seventh Biennial Satellite Symposium April 13-14, 2007

To view the meeting program schedule and highlights, see:

www.tumorsection.org/tumorprogram07.pdf

Editor's Corner



The Section on Tumors would like to take this opportunity to thank our donors and sponsors for their generosity and support of the Section on Tumors Awards and other educational programs:

Accuray
American Brain Tumor Association (ABTA)
Baxter
Bittner Family
BrainLAB, AG
Cytoc
Elekta
Farber Foundation
Integra Foundation
Journal of Neuro-Oncology (Springer Publishing)
MGI Pharma
National Brain Tumor Foundation (NBTF)
Preuss Foundation for Brain Tumor Research
Schering-Plough
Stryker
Synthes CMF

Linda M. Liaw, MD, PhD

Society for Neuro-Oncology Update

The 11th Annual Society for Neuro-Oncology (SNO) Scientific Meeting was held on November 16-19, 2006 at the Peabody Resort in Orlando, Florida. Frederick Lang Jr., MD, designed an exciting program for the meeting, consisting of an overview of the role of stem cells in brain tumors. In addition, two concurrent sessions, one on the current state of clinical research in neuro-oncology and the other on grantsmanship, were offered. At the main meeting, plenary sessions highlighted adult and pediatric clinical research, as well as results of basic science research in areas of cell biology, experimental therapeutics, angiogenesis, and molecular/genetic characterization of tumors. Concurrent sessions also focused on radiology, epidemiology and quality of life. Roberta Glick, MD, organized a very successful immunotherapy symposium at the SNO meeting supported by the Section on Tumors.

A manuscript, "GNOSIS: Guidelines for Neuro-Oncology: Standards for Investigational Studies-Reporting of Surgically-Based Therapeutic Clinical Trials," has been accepted for publication in the *Journal of Neuro-Oncology*. This manuscript was a direct result of the educational efforts by members of the Section on Tumors. The paper highlights the challenges of these studies, and by presenting standardized reporting guidelines, will hopefully assist in the accurate interpretation of results. The guidelines are presented in a checklist format outlining the relevant sections for reporting surgically-based therapeutic trials in neuro-oncology.

Additional checklists are provided pertaining to specific therapeutic approaches, such as convection enhanced delivery, gene therapy, brachytherapy, interstitial chemotherapy, and immunotherapy. The checklist can also be used as a framework from which to construct a trial and may assist neurosurgical investigators as they plan studies. We hope that this will be a useful tool for members of the Section.

Preliminary discussions with the leadership of the Section on Tumors and the SNO have begun on the design and development of a follow-up to the very successful registry – the Glioma Outcomes Project (or GO). The GO project documented patterns of care for patients with malignant glioma in the pre-Temodar era. The next project under development, GO-2, will allow the opportunity to capture current patterns of care, now that Temodar chemotherapy is the standard. In addition, there will be an opportunity to prospectively collect details of surgical aspects of care, especially the use of functional mapping, diffusion tensor imaging (DTI), neuro-navigation, and intra-operative MRI. Plans include the incorporation of volumetric analyses of tumor resection. In addition to the patient questionnaires about symptoms and quality of life, a caregiver questionnaire will also be added to assess the needs of patients and families dealing with a new diagnosis of glioblastoma. Details regarding funding for this endeavor will be explored over the next six months.

Susan M. Chang, MD

Section on Tumors 2007 AANS Annual Meeting Highlights

The Section on Tumors has planned one of its most exciting scientific programs ever for the 2007 AANS Annual Meeting in Washington, DC. This year's program will highlight how clinical and translational science in neuro-oncology is being applied in clinical practice to improve patient outcomes. The two-day Section on Tumors program will feature an update on clinical trials and the presentation of awards. This year, we have more Section awards for scientific and clinical investigative studies than ever before. In addition, cutting-edge clinical and scientific abstracts will be presented, as well as two mini-symposia involving top experts in the field of neuro-oncology.

The symposium on the first day will focus on one of the most critical objectives for the tumor neurosurgeon, i.e. maximizing the extent of tumor resection. An international panel of experts will discuss the evidence that increasing the extent of resection improves outcome for many types of central nervous system tumors and will describe how pre-operative and intra-operative imaging can be used to increase the amount of tumor resected while minimizing post-operative morbidity. The use of pre-operative functional MRI (fMRI) and diffusion tensor imaging (DTI), as well as the use of intra-operative frameless navigation systems and intra-operative MRI will be discussed. Other cutting edge methods, such as real-time intra-operative updates to accommodate for brain shift and identify residual tumor, the use of intra-operative brain stimulation to identify subcortical white

matter tracts, and the advent of intra-operative fluorescent agents to maximize the resection of malignant gliomas, will also be presented. The international expert panel of speakers will include Ray Sawaya, MD, Linda Liau, MD, PhD, Christopher Nimsky, MD, PhD, and Walter Stummer, MD.

On the second day, the Section on Tumors symposium will feature lively debates on two modern controversies in the neurosurgical management of brain tumors. First, the pros and cons of radiosurgery versus surgery for the treatment of vestibular schwannomas will be debated by two of the world's experts in this area, Madjid Samii, MD, PhD, and L. Dade Lunsford, MD. Then, Peter Black, MD, PhD, and William Friedman, MD, FACS, will square-off to discuss whether early aggressive resection or observation/biopsy/adjunctive therapy should be used in the initial treatment of low-grade gliomas. A review of the published literature and illustrative case presentations will be provided, so that attendees can see how experts in the field approach these controversial neurosurgical management scenarios.

The upcoming Section on Tumors Program at the 2007 AANS Annual Meeting promises to be a dynamic and informative session that will be held in one of our nation's premier cities, Washington, DC. Make your plans to attend the Section on Tumors symposia during the meeting.

Mark Johnson, MD, PhD

Section on Tumors Treasurer's Report



Planning and budgeting is very nearly complete for this year's Section on Tumors Satellite Meeting being held in conjunction with the 2007 AANS Annual Meeting. Andrew Parsa, MD, PhD, and Ronald Warnick, MD, Michael McDermott, MD, and AANS staff conducted monthly phone conferences for six months to budget for the meeting. The budget's goal is to break-even on revenue and expenses. Attendance figures look strong to date, so we are in a good financial position for a successful meeting.

The financial statements for the period ending December 31, 2006 have been received and our financial position is strong compared to prior years. Membership revenue was up in 2006 compared to 2005, and again year-to-date for 2007 compared to 2006. Exhibitor fees, contributions, and sponsorships are up significantly for the 2007 Tumor Section Satellite Meeting compared to the 2005 meeting, which can be attributed to the efforts of Dr. Parsa, the 2007 Satellite Meeting chairman.

Support for our other major educational effort this past year, the Brain Metastases Guidelines Project, is also strong. We express our gratitude to the major commercial partners who supported this effort. The Section on Tumors also provided a financial backing for this worthwhile educational effort. Fundraising efforts were undertaken by Steven Kalkanis, MD, Drs. McDermott and Warnick. A full-page ad to acknowledge the support from commercial partners will run in an upcoming issue of the *Journal of Neuro-Oncology*.

Michael W. McDermott, MD

International Report: Italy



The 55th Italian Neurosurgical Society Annual Meeting took place in Sorrento on November 19-23, 2006. The meeting was held in conjunction with the Neurosurgical Society of Turkey, and many colleagues from Turkey contributed to the meeting's success. Topics included were vascular diseases, tumors, and degenerative diseases of spine.

The Italian neurosurgical community is excited about the upcoming 56th Italian Society of Neurosurgery Annual Meeting that will host the Congress of Neurological Surgeons (CNS) in Rome on June 24-27, 2007 and the subsequent Brain Tumor Satellite Symposium (the 2nd Neuro-oncology Update), which is scheduled to take place in Arezzo on June 28-30, 2007. The Section on Tumors has been actively involved in the organization of the satellite meeting, and there will be participation of many of the Section on Tumors International Members. We anticipate an exciting scientific program, great participation, and last, but not least, a phenomenal social program.

For a list of the upcoming meetings in Italy see this link on the Section on Tumors Web site: www.tumorsection.org/news/meetings.htm.

Francesco DiMeco, MD

International Report: Japan



Temodal® Capsule (temozolomide) was approved for release in Japan on September 15, 2006. Many patients were waiting for this approval, and improvement in survival rates of malignant brain tumor patients in Japan is expected as a result. A clinical trial of IL13-PE38QQR for recurrent malignant gliomas was started. The first GBM patient in Japan was treated safely with this modality and is currently being followed.

The Seventh Annual Meeting of The Japanese Society of Molecular Neurosurgery was held in September 2006 in Tokyo, Japan. Various gene therapy strategies for brain tumors were reported, including herpes simplex virus type I expressing IL-12, WT1 vaccino-therapy, and mutant HSV vectors with a Musashi-promotor. Key topics of current Japanese molecular brain tumor research include: neurofibromin, peptidyl-poly(cis/trans)-isomerase Pin1, MGMT, sodium mercaptoundecahydrododecabonate (BSH), PTEN/Akt pathway, SNAI1, E-Cadherin, and proteomic profiling.

The 65th Annual Meeting of the Japanese Neurosurgical Society was held in October 2006 in Kyoto, Japan. The main theme of this meeting was "A Reappraisal of Japan." Many neurosurgeons from all over the world, including the United States, were invited as lecturers. Symposium topics included: the current situation and prospects for an operating room support system, skull base surgery and quality of life (QOL), pituitary and craniopharyngioma surgery, the current status and future treatments for malignant glioma, stereotactic radiosurgery and long-term outcome, and surgery for the brainstem lesions.

Recent and upcoming meetings in Japan can be seen on the Section on Tumors Web site at the following link www.tumorsection.org/news/meetings.htm.

Fumio Yamaguchi, MD, PhD

Washington Committee Report



Several current issues under discussion by the Washington Committee may be of interest to Section on Tumors members:

Medicare Physician Payment Update/ Sustainable Growth Rate (SGR) Formula

Since 2002, Congress has had to take legislative action each year to avoid automatic, formula-driven Medicare physician payment cuts under the controversial Sustainable Growth Rate (SGR) formula. During the lame-duck session, Congress intervened once again, passing the Tax Relief and Health Care Act of 2006 (TRHCA), which prevented the scheduled five percent cut, freezing payment rates at 2007 levels. Unfortunately, Congress paid for this with gimmicky financing and now all physicians face a 10 percent cut in 2008. Further, the future forecast has worsened. According to the April Medicare Trustees Reports, from 2007 through 2015, physician's Medicare reimbursement will be cut by approximately 37 percent, while at the same time their practice costs will rise at least 22 percent. Although the 5 percent cut was averted, neurosurgeons nevertheless face an additional 3 percent cut in 2007 due to the five-year review of work relative values, changes in the formula for valuing practice expenses and reductions in imaging payments. While there is widespread bipartisan support in Congress for "fixing" the physician payment formula, repealing the SGR formula and replacing it with an inflation-based methodology, costs are approximately \$200 billion, seriously compromising the likelihood of wholesale repeal of the SGR in the current budget environment.

Also included in the TRHCA, is a new quality reporting system, which will give a 1.5 percent bonus payment for those physicians who report certain quality measures between July 1 and December 31, 2007. While at present this pay for reporting system is voluntary, organized neurosurgery did not support the legislation because the quality program is extremely burdensome and will likely do very little to actually improve quality. Initially, the Centers for Medicare and Medicaid Services (CMS) is required to build on the existing Physician Voluntary Reporting Program (PVRP), which was launched earlier this year as an opportunity to test data collection and reporting methods before tying Medicare reimbursement to a physician quality reporting program. Starting in July 2007, physicians can qualify for the 1.5 percent bonus payments if they report to CMS on at least three of the program's quality measures for at least 80 percent of the cases in which the measures apply. Several measures, including antibiotic and VTE prophylaxis, are applicable to neurosurgery. In 2008, CMS has broad authority to implement a quality reporting program that could potentially become mandatory pay-for-performance (P4P). Although the legislation states that CMS will select measures that have been developed under a consensus-based process and adopted or endorsed by a consensus organization, the AANS and CNS are concerned that this language is too vague and gives CMS free reign over the selection

of measures without much oversight, direction and input from physicians.

The Washington Committee, working with the Alliance of Specialty Medicine, the American College of Surgeons, and the American Medical Association, will continue to educate Congress about the problems with the Medicare physician payment system and voice its concerns about the quality reporting program, in an effort to implement significant changes to this legislation. In addition, organized neurosurgery will continue to voice its opposition to mandatory P4P and P4P provisions that are punitive, meaning doctors reporting will incur a freeze or slight payment increase, while those not reporting will incur a payment cut.

Institute of Medicine (IOM) Calls for Phasing-in Pay for Performance (P4P)

A new report from the IOM indicates that Medicare's current fee-for-service payment system does little to promote quality improvements and calls upon the United States Department of Health and Human Services (HHS) to replace it with a P4P approach. According to the IOM, because P4P is still largely untested, it should be phased-in, so that involved parties can build on successful efforts and avoid unintended negative consequences.

The IOM recommends that for an initial period of three to five years, Congress should reduce base Medicare payments across the board and redirect that money toward strong performers. At the same time, efforts should be made to evaluate other ways to fund bonus payments that could be used over the longer term. Many large, institutional health care providers and organizations that already have the capability to participate in the P4P system should be required to do so as soon as the system is launched, the report adds. On the other hand, small practices could participate voluntarily for the first three years, at which time the HHS Secretary should decide whether to implement broader mandatory participation. The effect of the recent resignation of CMS Director, Mark McClellan, MD, who pushed for implementation of P4P remains to be seen.

CPT Coding for Stereotactic Radiosurgery (SRS)

Various third party payers refuse to recognize the role of neurosurgeons in SRS, the role of SRS for certain indications, and the appropriateness of treating multiple lesions. A white paper describing the role of the neurosurgeon in SRS by Gene Barnett, MD, and other members of the Stereotactic Radiosurgery Task Force was published in the January issue of the *Journal of Neurosurgery*. In addition, the Task Force is considering revisions to coding for SRS and will be surveying neurosurgeons to identify the frequency of various SRS procedures and the effort required for completion.

continued on page 9

First Section on Tumors/BrainLAB International Research Fellowship Awarded

The Section on Tumors is pleased to announce that Kazuhiko Kurozumi, MD, from Okayama, Japan has been awarded the first Section on Tumors/BrainLAB International Research Fellowship for his research proposal entitled "Glioma Extracellular Matrix Modulation to Enhance Oncolytic Viral Therapy". This fellowship will provide Dr. Kurozumi with the necessary funding to spend one year in the laboratory of E. Antonio Chiocca, MD, PhD, who is Professor and Chairman of the Department of Neurosurgery at Ohio State University. Dr. Chiocca, who is a member of the Section on Tumors Executive Committee, is an international expert on oncolytic viruses and will sponsor Dr. Kurozumi during his year in the United States.

This international research fellowship was the brain-child of Ronald Warnick, MD, current chairman of the Section on Tumors, who wanted to develop a program that would increase the opportunities for neurosurgeons from outside North America to come to the United States for the specific purpose of undertaking research in neurosurgical oncology. From the beginning, the AANS administered the fellowship and the invaluable guidance of Michele Gregory and Terri Bruce was critical to the ultimate success of the program. Equally important, BrainLAB AG (a German company that develops surgical image-guidance and stereotactic radiosurgery systems) agreed to fund the fellowship through an educational grant. Alessandro Olivi, MD, a Section on Tumors Executive Committee member, presented the proposal to Paolo Jelmoni, director of Marketing for BrainLAB AG. Stefan Vilsmeier, president and CEO of BrainLAB AG, approved the request and provided the necessary funding; without which this fellowship would never have succeeded.

To the delight of all involved, grant proposals were received from 14 applicants worldwide, including Australia, China, Germany,

Italy, Jordan, Japan, Serbia, Sudan, Taiwan, and The Netherlands. Applications included a five-page research proposal, responses to several questions about future plans of study and the importance of the fellowship in the applicant's career, as well as letters of recommendations. In addition, a letter of support from a sponsor in North America was an important part of the application. All the proposals were carefully reviewed and independently scored by members of a scientific review committee, consisting of Drs. Warnick and Lang, Alessandro Olivi, MD, Howard Weiner, MD, Linda Liao, MD, PhD, and Jeffrey Bruce, MD. Applications were judged based on the novelty and scientific merit of the proposed study, the credentials of the applicant, and the support provided by the accepting sponsor. All the reviewers universally agreed that the quality of the applications was outstanding, particularly for such a new fellowship. In addition, the spectrum of proposals was impressive, which included basic science, translational and clinical projects.

As the first awardee of this fellowship, Dr. Kurozumi, who is a graduate of the Department of Neurological Surgery in Okayama University, will receive a stipend of \$50,000 that will be used to provide travel expenses and salary support for a period of one year. His fellowship will commence on July 1, 2007. Dr. Kurozumi will be required to submit a written mid-year Progress Report in January 2008 and, at the completion of the project, a written Summary Report describing the results of his study. He will also present an oral summary of his project at either the AANS or CNS annual meetings upon completion of his fellowship year.

The Section on Tumors would like to thank all those who have worked so hard to make this fellowship possible. It is anticipated that this fellowship will continue well into the future and will become a source of increased international opportunity and collaboration between members of the Section on Tumors and outstanding neurosurgeons from around the world. Applications for next year's award are due on November 15, 2007. Interested applicants can obtain applications and details regarding the submission process through the Section on Tumors Web site (www.tumorsection.org), by contacting Terri Bruce by e-mail (tlb@aans.org), or by writing to AANS, 5550 Meadowbrook Drive, Rolling Meadows, IL 60008-3852 U.S.A.

Frederick Lang Jr., MD

Washington Committee *continued from page 8*

New Codes for Convection-Enhanced Delivery (CED)

A new set of category III tracking codes for the surgical placement of a CED catheter became active July 1, 2006:

0001T: Stereotactic placement of infusion catheter(s) in the brain for convection enhanced delivery of therapeutic agent(s) including stereotactic planning and burr hole(s).

The Washington Committee strongly urges that neurosurgeons performing these procedures use these tracking codes to facilitate CMS recognition of CED as a legitimate treatment modality deserving of a separate category I code.

In addition, CMS activated the following ICD-9 codes on October 1, 2006:

- 01.26: insertion of catheters into cranial cavity or tissue
- 01.27: removal of catheters from cranial cavity or tissue
- 01.28: stereotactic placement of intracerebral catheter(s) via burr hole(s) for convection enhanced delivery

Andrew E. Sloan, MD

Section on Tumors Members Receive Discounted Subscription Rate for Journal of Neuro-Oncology

As a member benefit, Section on Tumor Members receive a 63% discount on the annual subscription rate for the *Journal of Neuro-Oncology*. To subscribe, see (www.tumorsection.org/jointsectionorderform.pdf) for a printable subscription form.

AANS/CNS Section on Tumors

5550 Meadowbrook Drive
Rolling Meadows, Illinois 60008-3852

FIRST CLASS
U.S. POSTAGE
PAID
Des Plaines, IL
Permit No. 329

AANS/CNS Section on Tumors Leadership 2006-2007

Chairman	Ronald E. Warnick, MD	Alejandra Rabadan, MD
Secretary-Treasurer	Michael W. McDermott, MD	David G.T. Thomas, MD
Past-Chairman	Raymond Sawaya, MD	Manfred Westphal, MD, PhD
Advisory Board	Ossama Al-Mefty, MD	Fumio Yamaguchi, MD
	Mitchel S. Berger, MD	Joseph M. Piepmeyer, MD
	Peter McL. Black, MD, PhD	
	William T. Couldwell, MD, PhD	
	Edward R. Laws Jr., MD	
	Robert A. Morantz, MD	
	Mark L. Rosenblum, MD	
	Gail L. Rosseau, MD	
	James T. Rutka, MD, PhD	
	Jeffrey N. Bruce, MD	
Awards Committee	E. Antonio Chiocca, MD, PhD	
Bylaws	Anthony L. Asher, MD	
Community Collaborative Initiatives		
Education	Jeffrey N. Bruce, MD	
	Frederick F. Lang Jr., MD	
Guidelines	Mark E. Linskey, MD	
	William T. Couldwell, MD, PhD	
	Steven N. Kalkanis, MD	
	Jeffrey J. Olson, MD	
	Nelson M. Oyesiku, MD, PhD	
History	Frederick G. Barker II, MD	
International	Francesco DiMeco, MD	
	Hee-Won Jung, MD	
	Andrew H. Kaye, MD	
		Journal of Neuro-Oncology Representative
		Medical Neuro-Oncology Member Services
		Susan M. Chang, MD
		Gene H. Barnett, MD
		Jonas M. Sheehan, MD
		Isabelle M. Germano, MD
		Linda M. Liau, MD, PhD
		Raymond Sawaya, MD
		Membership Newsletter Nominating Program
		2005 CNS
		2006 AANS
		2006 CNS
		2007 AANS
		2007 CNS
		Research
		Basic and Translational Clinical Trials
		Immunotherapy Task Force
		Skull Base Surgery
		Washington Committee
		Young Neurosurgeons Committee
		Donald M. O'Rourke, MD
		Michael A. Vogelbaum, MD
		Roberta P. Glick, MD
		Franco DeMonte, MD
		Andrew E. Sloan, MD
		Andrew T. Parsa, MD, PhD