

November 2001

Welcome of the new ISS/SIC President



Peter J. Morris

The Centennial Congress in Brussels has now been and gone. The meeting was a great success and it seemed to me that it typified what the ISS/SIC is about, in that the diversity of the lectures and symposia on a variety of disciplines in surgery provided a superb opportunity to update one's knowledge in fields other than one's own. For example, I attended a number of lectures and symposia which included the role of cytokines in surgical practice, the modern management of colorectal cancer, the evaluation on new technologies, and a fascinating session on virtual reality and robotic surgery. There were also two absorbing sessions in which the top marked abstracts competed for three prizes for the best paper. The jury comprised Sam Wells, Lloyd Nyhus and myself, and it was an extraordinarily difficult task to select the three best papers from an outstanding group of presentations. The results of our deliberations are given in this Newsletter. The Antoine Dépage Lecture, given just before the General Assembly by Sir Barry Jackson, was another marvellous contribution to the Congress as he traced the developments in surgery since the Society was founded 100 years ago.

Another very gratifying aspect of the Congress was the attendance of the five winners of the ISS/SIC Foundation Fellows from non-industrialised countries, as described in more detail also later in this Newsletter. They all enjoyed enormously the opportunity of attending the Congress, and I can only emphasise that it is important that our members continue to contribute to the Foundation, as this is such a worthwhile venture.

I have to admit that the physical facilities for the Congress were not ideal, particularly with respect to some of the breakout rooms but, on the other hand, being able to walk to the Congress Centre from the hotels was an enormous advantage. Plans are now well in hand for the Bangkok Congress to be held on August 24-28, 2003 and already it seems obvious that this will be an outstanding Congress, both scientifically and socially, with of course the opportunity for many of us to add on a holiday in that part of the world.

Finally, I am delighted to welcome Professor Felix Harder as the new Secretary-General and Professor Rüdiger Siewert, the previous Secretary-General, who is now President-elect and will take over from me as President after the Bangkok Congress. I am hoping that the three of us can drive the Society forward into this new century so that it becomes stronger than ever.

Peter J. Morris, FRS, FRCS President ISS/SIC

Report of the outgoing Secretary General, J. Rüdiger Siewert

Technische Universität München Presentation at ISW2001 in Brussels



J. Rüdiger Siewert

A new Century for the ISS: a new future?

We cannot start speaking about the future of the ISS before we have discussed the situation of the ISS at the present time. First of all, the most important development that the ISS has to face today is the disappearance of General Surgery, at least in the socalled first world countries, a trend that all the major national and international societies are now being confronted with. When the ISS was founded 100 years ago, surgery was one big entity and it was important to have one society that covered every aspect of surgery. But these days surgery is highly specialized and the different problems and specialized interests of surgeons are now represented by a great number of so-called "organ-specific" surgical societies. The main characteristic of modern surgery is that it now concentrates on areas that are getting more and more narrowed down and specific, and that surgical skills are mainly required for the treatment of diseases of particular organs. This has led to a very high degree of specialization such as heart surgery, endocrine surgery. GI tract surgery and so on. All of these fields are today independent entities and there is no reason to believe that this trend will not continue. Quite the contrary, progress in surgery will only be possible on the basis of these specializations. Last but not least the market, i.e. the patients, are asking for specialized surgery.

This development is typical, at least for all the developed nations in the western world, but also for an Asian country like Japan.

Another development and one that has gradually become a central issue

is the concept that surgery, as treatment for diseases of various organs, is nowadays only one among a whole range of other therapeutic options - e.g. interventional endoscopy, interventional radiology, radiation therapy or classical medication. This has made surgeons realize that a dialogue between surgeons specialized in the treatment of diseases of certain organs and their partners specialized in the interventional or conservative treatment of the same organs or of the same diseases is absolutely necessary. Typical for progress in these highly specialized fields is the creation of "horizontal networks" between surgeons and non-surgeons. A characteristic of the future will be that we will have to say farewell to the classical hospital structures in which surgery or internal medicine are separate departments and accustom ourselves instead to a problem-oriented approach requiring intensive interdisciplinary cooperation. The foundation of Cancer Centres in which a team of surgeons, oncologists and radiotherapists work together, or of Vascular Centres with cooperation between vascular surgeons, interventional radiologists and angiologists, or of Endocrinologic Centres etc. will be the typical developments of the future. They will occur, however, not only because that is the direction modern medicine is taking, but also because the patient desires a holistic attitude to the treatment of his illnesses. He wants the best treatment available, be it surgical, interventional or conservative. His problem has to be solved to his best advantage and to his complete satisfaction!

As a result of this it is only logical that the "organspecific surgical societies" should be increasingly interested in smaller symposia and congresses that concentrate on special topics and encourage the participation of all possible surgical and conservative partners. But the question must be raised whether the various highly specialized "organ-specific surgical societies" really have anything to say to each other. Is the heart surgeon, for instance, really interested in having a dialogue with the trauma surgeon or is the GI tract surgeon particularly keen on an exchange of ideas with the heart surgeon? I, however, am convinced that they have to communicate with each other. They have a lot of surgical problems in common. Among the problems they have in common are those posed by technological advance and the challenge of minimally invasive surgery, or those concerning the whole area of infections including sepsis, or post-operative intensive care, or transplantations - all of them are important and interesting for all surgeons.

The issues outlined here are further complicated by the fact that congresses depend financially on industrial sponsoring and sponsors tend to follow the trend towards increased specialization. There are a large number of problem-oriented symposia and congresses taking place regularly and industry supports them enthusiastically. The pharmaceutical in-

dustry is, for instance, not particularly interested in supporting a purely surgical congress, but it is most certainly interested in supporting a disease-oriented one. An additional problem is that, despite the general trend toward globalisation, industry is organised on a national level. As a result industry has a lively interest in cultivating national opinion leaders and their congresses because they are advantageous for their national markets. It is the rare exception for industry to be interested in supporting an international congress with its anonymity and distance from the market. International congresses simply do not boost sales.

On the other hand, we should not forget that the problems touched on here are not relevant for the world as a whole. There are vast areas outside of conurbations where the need for General Surgeons is as large as ever. In these areas General Surgery is enormously important for the health care of a particular region. This very considerable group of General Surgeons also needs support so that the service they provide can reach or maintain a high standard. It is beyond the shadow of a doubt that a traditional international surgical society (like ours) takes special responsibility for representing the interests of those General Surgeons as well and providing them with the best that can be had in surgical education.

At present the budget of an international congress like ours now consists to a large extent of the participants' admission fees. This is an acceptable solution if many of the surgeons attending a congress see it as a means of deepening their surgical education and are prepared to pay for this service. But it is difficult to accept that speakers who hold the lectures at these congresses and thus provide the surgical education that others seek should be burdened with the same fees. What becomes obvious is that the budget available for a congress is very limited and whether or not it can be called a success depends on the number of paying participants - at least 2000 as in our case at present - it attracts.

So what now is the present situation of the ISS?

First and foremost the ISS has to be fully aware of where it stands in the present and it has to say goodbye to the old idea of a general surgical congress as its main goal. The ISS will have to face the fact that apart from its membership fees congresses are its most important source of income. That is why congresses have to be organised in areas from which a sufficient number of participants can be reasonably expected to come. Sightseeing trips to beautiful places are wonderful if you are going on a holiday, but they have to be avoided when considering the serious business of a congress. The ISS and, of course, its members as well, will have to learn to see

congresses as a business and not as a pleasant excursion.

So what will the future of the ISS be like? As far as its congresses are concerned, the ISS will have to be active on two levels:

- In the first place, it will have to do something for the General Surgeons and provide them with continuous surgical education of a high standard. Here postgraduate courses on important topics will be necessary. In addition the theoretical education of General Surgeons will have to be secured in so-called state-of-the-art panels.
- The ISS will have to attract the various organspecific surgical societies by providing them with an optimal organisational framework for their own organ-specific meetings. An example of particularly successful cooperation of this kind has been with the International Association of Endocrine Surgeons. So as to be able to provide a highly efficient organisational environment for world congresses, the ISS has to have its own office operating successfully so that confidence in its ability to organise congresses on a large-scale is maintained. The organ-specific surgical societies will have to see organisational and financial advantages for themselves when they agree to participate in an ISS world congress. They will have to be convinced, furthermore, that participating in a world congress is not only the cheaper solution, but also the more interesting one as, in the company of surgeons from many different fields, more opportunities for a stimulating exchange of ideas can be provided. They will need the conviction that it is important not only to keep their horizontal networks active, but also to establish new networks with surgical colleagues working in other fields. An International Surgical Week is an excellent idea - but an effort will have to be made to guarantee that it has a solid, practical basis. The philosophy of friendship alone will not be able to do the job.

So what is the future of the ISS?

I believe that the ISS is at present the only international society that is in a position to organise a large forum of communication for all surgeons regardless of their particular specializations. The ISS will play a central role in maintaining a fine balance between the demands made by the horizontal network, that means, the cooperation between surgeons and non-surgeons working in the same area, on the one hand, and the lively interest of all surgeons in basic surgical issues regardless of their area of specialisation, on the other. The future of the society will depend on its ability to manage this new role successfully.

Greetings from the incoming Secretary General, Felix Harder, Basel, Switzerland



Felix Harder

Originally, the ISS represented those surgeons who had an activity which at that time was broad by definition and covered all those activities that later on gradually became specialties, subspecialties and interdisciplinary, organ-centered activities. The degree of this ongoing subdivision with growing in-depth focus varies widely worldwide. The fact is that the face of general surgery is in a process of serious changes. An unanimously acceptable definition of general surgery seems to be unrealistic. The significance of general surgery is associated with specific regional or national prerequisites of general health care systems and needs of the population.

Specialization has contributed to the accelerated progress in surgery. Progress and specialization go hand in hand. Established results of progress in surgical diagnosis and treatment and in related research need not necessarily remain exclusively and indeterminately within highly specialized organizations that initiated the new contribution. Once standardized and established, some of it will find a broad general application. Besides ongoing progress linked to specialization it is speed in healthcare and interdisciplinarity that characterize modern surgery. Speed as a consequence of growing economic pressure (length of stay, brief patient-doctor contact, ambulatory care, short half-life of medical knowledge, rapid development of new technology) and interdisciplinarity due to the fact, that combined approaches have in many situations proven to be superior to exclusively surgical solutions.

It is only normal that among other changes in the perception and structure of surgery (quality of life issues of medical professions, general cultural changes, public expectations, information and demands of patients for "specialized surgery", cost) the development of numerous specialties in surgery must have a profound effect on the face of the ISS/SIC that was originally founded to embrace surgery as a whole.

The effects of these developments are clearly visible in large hospital structures, where traditionally surgery, medicine, radiology and others with their own specialties and subspecialties were strong parallel organizations or structures. Combined diagnostic and therapeutic principles necessitate close interdisciplinary interactions, cooperation right from the beginning when a patient is admitted. Take e.g. gastrointestinal cancer, vascular disease, breast cancer, just to name a few. Within established traditional structures that were introduced for teaching purposes, planning and utilization of hospital infrastructure as strong visible entities, a fine network has developed creating close links among disease- or organ-centered specialists. Whether these horizontal structures are recognized as independent, economically separate structures or more virtual, but equally well functioning networks is as guestion of interpretation, size, marketing and integration within larger. traditional structures.

The fact remains that these specialized, interdisciplinary centers do exist, that their importance will grow and that an organization such as the ISS/SIC must integrate and support these attractive expressions of modern surgery, facilitate the dialogue in appropriate structures, actively participate in progress and again take the lead as a true "multicultural society".

As the focus of interest tends to narrow down within interdisciplinary subspecialties, there is a certain risk of loosing sight of the general health problem a patient may face and also a danger to miss important developments, innovations in other specialties that no longer are primarily related to the own narrow specialty practiced. There are developments in molecular biology, technology, communication relevant to the practice of surgery in more than one subspecialty. Cooperation and harmonization, merging of interests cannot be neglected. There will also be progress in general areas belonging to the core of surgery, like infection control, shock, trauma reaction, nutrition of the surgical patient, immune defense, etc., that need to be updated and understood by every surgeon.

In all parts of the world there will remain a demand for some relatively common elective and emergency surgery of limited complexity, that may not be restricted to a single organ system. The demand for this type of broad general surgery for frequent pathologies is very different in various parts of the world.

Instead of quarrelling over the term of "general surgery", instead of trying to find one and only one definition for it, one should make an effort to understand whereto high quality surgery develops, who the interdisciplinary partners of specialized surgeons

are, how research and education, communication and access to knowledge and progress in the various presentations of surgery may be improved.

Highly focused specialists and their societies are necessary for progress. Some may be exposed to a danger of "splendid isolation". How can the urgently needed dialogue among highly specialized surgeons belonging to different specialties be improved? Where can the core of surgery as a vital base for every single surgeon, no matter of what specialization, be supported. It appears that an organization such as ISS/SIC that embraces integrated specialty societies and invites a various number of important participating societies has an obligation and is in a position to join in an effort to further develop the quality of surgery worldwide. This society itself is prepared to adapt to actual needs in order to meet the challenges of the changing face of surgery.

The ISS/SIC History Book & Order Form

- Text by R. Van Hee



Dorothea Liebermann-Meffert

At the occasion of the 100th anniversary congress of the Society in Brussels, an excellent monograph on the History of the Society has been edited by Prof. Dr. Dorothea Liebermann-Meffert, Germany in collaboration with Dr. Harvey White, UK.

This 388 pages book, published by Kaden Verlag in Heidelberg gives an outstanding overview of the weal and woe of the Society since its founding in 1902.

This history of onset evolution and actual place of the ISS/SIC is extensively discussed.

Moreover biographies of various congress presidents as well as of the most famous Board Members are presented.

A society that commemorates its first centennial has a long-standing history that merits reflection and dedicated study.

This is now possible thanks to this magnificent book produced by Mrs. Liebermann.

This book will represent a highlight in the library of each ISS/SIC member and will procure her/him many hours of interesting and joyful reading.

The ISS/SIC History Book can be ordered with the enclosed yellow order form at a price of USD 50.-/ Euro 55.- including postage.

The Centennial Congress in Brussels



Robrecht Van Hee

The Centennial Congress ISW2001 in Brussels, Belgium under the leadership of Sir Peter J. Morris as Congress President has attracted some 1'750 delegates. This congress included a number of Historical Sessions, superbly organized by the president of the LOC, Robrecht Van Hee, covering the subjects of "History and the future of the ISS/SIC" and "History of Surgery: the 20th Century" as well as the Antoine Depage Lecture on the subject of "One hundred vears of surgery 1902-2001" given by Sir Barry T. Jackson from UK which all were very well attended. Robrecht Van Hee has also organized an extraordinary Exhibition of Surgical Instruments showing ancient surgical equipment. Another highlight of ISW2001 certainly was the Grey Turner Lecture on "Progress in GI cancer management: challenges in the 21st Century" given by Lecturer Masaki Kitajima from Japan. An additional highlight included the La-



paroscopy Course with live video transmission which was held on Thursday and Friday of the congress week as a separate course at extra charge. Furthermore, for the first time two Free Paper Sessions including the 12 very best graded Abstract submissions were presented in the "Lloyd M. Nyhus Prize Session". The following presenting authors of these Abstracts have been awarded a diploma and prize money:

Arne Dietrich, Germany; Oliver Kisker, Germany; Wai Lun Law, Hong Kong; Thomas Mussack, Germany; Ikuo Nagashima, Japan; Tarou Nakano, Japan; Nahm-gun Oh, South Korea; Christina Schleicher, Germany; Jens Schneider, Germany; Ronald Sing, USA; Pieter Tanis, Netherlands; Wickii Vigneswaran, USA.

Apart from the high scientific standard the Social Events such as the Opening Ceremony, the Belgian Cultural Evening as well as the Closing Banquet at Concert Noble organized by our Belgian hosts headed by Robrecht Van Hee from Antwerp were highlight of the Congress. On Wednesday night the ISS/SIC Centennial Dinner was held at the beautiful Castle of "Groot-Bijgaarden", to which very distinguished guests - all actual and former ISS/SIC Committee Members, Grey Turner Lecturers, Prize Winners or Local Organizers of ISW and Honorary Members were invited. Thanks to the generosity of GlaxoSmithKline this special gathering was made possible.

New ISS/SIC Honorary Members

The following distinguished members were conferred at the Opening Ceremony ISS/SIC Honorary membership in view of their merits and extraordinary services rendered to the Société:

- · John Alexander-Williams, UK
- Lloyd M. Nyhus, USA





John Alexander-Williams Lloyd M. Nyhus

Prize Winners 2001

The following prize winners were honored during the Opening Ceremony at ISW2001:

SIC Prize: Russell Strong, Australia
 Danis Prize: Paul Louis O. Broos, Belgium

• Leriche Prize: Felix Eastcott, UK





General Assembly on Wednesday, August 29, 2001

Summary of the Minutes of the General Assembly (GA) of ISS/SIC

16.30 at the Brussels Convention Center

DECISIONS ONLY

(detailed minutes are published on the ISS/SIC Web Page: www.iss-sic.ch)

Members present including complete Executive Committee: 149

1) Call to order:

President S.A. Wells calls the meeting to order; no changes in the agenda; the minutes of the GA 1999 are approved.

2) Report by the Secretary General

Report by referring to the distributed yellow booklet. Actual membership: 2'703 Active Members, 661 Senior Members and 22 Honorary Members.

295 new members are approved by GA.

Two new Honorary Members:

John Alexander-Williams, Birmingham, UK and Lloyd M. Nyhus, Chicago, USA

were already honored at the Opening Ceremony of the Congress

The outgoing & incoming National Delegates/Representatives are named and approved

		Outgoing	New
	Australia	Leigh W. Delbridge	lan R. Gough
	Belgium	Robrecht Van Hee	Donald Clayes
	Cuba	Alejandro	Gilberto
		Garcia Gutierrez	Pardo Gomez
	France	Abe Fingerhut	Edouard P. Pélissier
	Great Britain	John F. Clegg	Anthony Watson
	Hungary	Jozsef Sandor	Jozsef Faller
	Lebanon	Antoine Ghossain	Jean Biagini
	Netherlands	Dirk J. Gouma	Hugo Obertop
	New Zealand	Graham Hill	John Albert Windsor
	Switzerland	Jean-Claude Givel	Andras Bodoky
	Thailand	Anek Kasatri	Wora-Urai Nopadol

Note: Anthony Watson has had to step down as National Delegate for Great Britain, for health reasons shortly after the General Assembly meeting, and following a ballot of the UK delegates, Thomas W.J. Lennard has been elected as the Great Britain delegate.

3) World Journal of Surgery

The report by the Editor in Chief and the publisher's report are approved. New Editorial Board members according to list is approved by GA.

4) Report by the General Treasurer

The General Assembly approves:

- Society Accounts: losses 1999 of US\$ 6'484.76 and 2000 of US\$ 8'534.65
- The loss of the Vienna Congress to be charged to the Acapulco Congress Fund which reduces assets to USD 59'460.83.
- The written Auditing Reports 1999 and 2000.
- The budgets 2001 and 2002 with profits of US\$ 7'000.- and 8'000.-
- Annual dues for 2002 and 2003 at USD 120.-

5) Report Postgraduate Courses

Information about past courses and next Course in Cuba.

6) Report by the Strategy Committee

Information about the activities and results.

7) Schedule of future Congress sites

- a) Confirmed by contract:
- 2003, 40th Congress of ISS/SIC in Bangkok, Thailand (August 24 to 28)
- b) Confirmed but not yet contracted:
- 2005, 41st Congress of ISS/SIC in Durban, South Africa
- 2007, 42nd Congress of ISS/SIC in Montréal, Canada
- 2009, 43rd Congress of ISS/SIC in Adelaide,

8) Report by the Secretary-Treasurer of ISS-Foundation

Nomination of the 2 Theodor Kocher Benefactors (\$10'000.- donation):

- Mr. Jim and Mrs. Kay Mabie, Chicago, USA
- Mrs. Joan B. Kroc, USA

The five travel scholars are awarded:

- Emmanule A. Maeh, Zaria, Nigeria
- Alexander Julianov, Stara Zagora, Bulgaria
- Anjali Mishra, Lucknow, India
- Htek **Myek**, Madalay, Myanmar (Burma)
- Sarder Nayeem, Dhaka, Bangladesh

L. M. Nyhus introduces J. L. Grosfeld, Minneapolis, USA as new Secretary-Treasurer ISSF

Conferment of National Section Awardees The Australian Chapter presents two awardees.

- Andrew Biankin, Sydney and
- Stanley **Sidhu**, Sydney

10) Retirement of outgoing Officers

- Past President Alastair R. Brown, Sydney, Australia
- General Treasurer Lars-Ove Farnebo, Stockholm, Sweden
- Councilor Raj M. Nambiar, Singapore

11) Election of new Officers confirmed by GA

 J. Rüdiger Siewert, Munich, Germany as President elect 2001-2003 and

Congress President at the 40th World Congress of Surgery

- Felix Harder, Basel, Switzerland, Secretary General
- Kerstin Sandelin, Stockholm, Sweden, Councilor
- Hugo Obertop, Amsterdam, The Netherlands, Councilor

12) Election of Vice Presidents for the Congress 2003 confirmed by GA

- Vithaya Vathnophas, Bangkok, Thailand (ISS/SIC)
- · Masayuki Imamura, Kyoto, Japan (IAES)
- Kenneth D. Boffard, Johannesburg, South Africa (IATSIC)
- Peter B. Soeters, Maastricht, The Netherlands (IASMEN)
- Kerstin Sandelin, Stockholm, Sweden (BSI)

13) Election of ISS/SIC Program Committee for ISW2003 by GA

All members of the Executive Committee are confirmed to serve in the ISS/SIC Program Committee.

14) Confirmation of Officers

Ronald K. Tompkins, Editor in Chief of WJS and Peter J. Morris, President of ISS/SIC, are confirmed for the next period, 2001 - 2003.

15) Address of the new Society President

Peter J. Morris gives a short speech about the ISS/SIC and its future role in the generality of surgery.

16) The Congress in Bangkok, Thailand in 2003

LOC President Arun Pausawasdi and LOC Secretary Anek Kasatri report and welcome all participants. The Royal College of Surgeons of Thailand (RCST) will join International Surgical Week ISW2003 as a co-host. J.R. Siewert, Germany, is confirmed by GA as President of the 40th Congress of ISS/SIC and Chomchark Chuntrasukul, Bangkok, is confirmed by RCST as President of the 28th Annual Congress of RCST.

18) Varia

No items

For the minutes Victor Bertschi, Administrative Director

Composition of the ISS/SIC Executive Committee 2001-2003 at a Glance

President: Sir Peter J. Morris, UK

President elect & Congress

Councilors:

President ISW2003: J. Rüdiger Siewert, Germany (New)

Past President: Samuel A. Wells Jr., USA
Secretary General: Felix Harder, Switzerland (New)
General Treasurer: Emanuele Lezoche, Italy (New)
Editor in Chief WJS: Ronald K. Tompkins, USA

Jorge Cervantes, Mexico Yoshiki Hiki, Japan

Hugo Obertop, Netherlands (New) Kerstin Sandelin, Sweden (New)

The Executive Committee likes to extend its thanks to the outgoing members Alastair R. Brown (past President), Lars-Ove Farnebo (General Treasurer) and Raj M. Nambiar (Councilor) for their support and merits during their service in the past years.

The Bangkok Congress 2003







Arun Pausawasdi

At the Brussels Congress, the Thai delegation has presented the new contracts between ISS/SIC and the BITEC Convention Center as well as with the Local Organizing Committee (LOC). Both contracts and the revised congress budget are approved by the Executive Committee and the documents have been countersigned by the various parties. The preparatory works for the Bangkok Congress are progressing well and it is hoped that ISW2003 will attract a large number of delegates. This as more since the Royal College of Surgeons of Thailand (RCST) as a co-organizer will include its 28th annual meeting in ISW2003 and the fact that Thailand is a very attractive destination. The dates for this venue have been set to August 24-28, 2003 and the deadline for the submission of abstracts will be December 13, 2002.

Please mark these dates already now in your agenda. ISW2003 Congress President will be J. Rüdiger Siewert from Germany whereas the RCST Congress President will be Chomchark Chuntrasakul of Thailand

On Thursday, August 30, 2001 during the ISW2001 a Program Committee Meeting of the Bangkok Congress has been held and the format and details for the organization were informed to the representatives of the various Integrated and potentially Participating Societies. Societies interested in taking part in ISW2003 as a Participating Society are requested to forward a first draft of sessions to be organized to the Administrative Office by the end of 2001. The next meeting of the ISW2003 Program Committee will be held on March 9, 2002 where a first draft of the Preliminary Program will be elaborated. It is planned to mail out only a limited number of the Preliminary Program but to emphasize promotion through advertisements in surgical journals and electronic media by referring to the ISS/SIC web page for detailed information. The entire Abstract Process will be handled by e-mail only through an Abstract Form specially provided on our homepage. Details regarding the submission of Abstracts as well as all developments and information in regard to ISW2003 will be published on our homepage: www.iss-sic.ch.

Welcome to the new General Treasurer



Emanuele Lezoche

At the General Assembly during the Brussels Congress Emanuele Lezoche from Rome, Italy has taken over the office as the General Treasurer of the ISS/SIC. Supported by the Administrative Office, the new Treasurer is enthusiastic in keeping the ISS/SIC finances well balanced. He is happy to report that the annual dues which remained since 1993 at USD 120.- were voted by the members at the General Assembly to remain for another period (2002/2003) in the same amount.

Invoices 2002 dues

Enclosed you are receiving the invoice for ISS/SIC Membership dues of the year 2002. Our new General Treasurer, Emanuele Lezoche will be very pleased with your immediate payment thus avoiding high costs for the dispatch of reminders. Therefore, please help the Society in keeping the expenses low.

News from the ISS-Foundation



Joan B. Kroc



Jim & Kav Mabie

Lloyd M. Nyhus, outgoing Secretary-Treasurer of the Foundation, reported to the Business Meeting of the ISS during the Brussels Centenary Congress several items of interest. Since our last congress in Vienna in 1999, the Foundation has received major financial support (Theodor Kocher Benefactor) from lay friends. Having heard of our various programs supporting young surgeons from the developing world, Joan B. Kroc (co-founder of the McDonald's Corporation) and Jim and Kay Mabie (philanthropists of the Chicago region) donated sufficient funds to qualify for the Theodor Kocher Award. The Board of Directors of the ISS Foundation and Presidents A. Brown, P. Morris and S. Wells sent notes of appreciation to these very special friends.

Our five 2001 Travel Scholars to the Brussels Congress were very attentive to the many scientific sessions. Each received a cash award and certificate of participation. The scholars traveled from Bangladesh, Bulgaria, India, Nigeria and Myanmar. We will hear more details of their experiences later.



Jay L. Grosfeld

Dr. Nyhus introduced Professor Jay Grosfeld to the assembly as the new Secretary-Treasurer of the ISSF. Dr. Grosfeld is currently Chairman of the Department of Surgery and Chief of the Section of Pediatric Surgery, Indiana University School of Medicine, Indianapolis, Indiana. He is well known as a superb pediatric surgeon, medical administrator and surgical scientist. We are very fortunate that he has accepted this important role within the ISSF.

Dr. Nyhus thanked the General Assembly of the ISS for allowing him to serve the organization in several important roles for over 14 years.

Needless to mention that contributions towards the ISSF are appreciated and welcome at any time and in any amount in order to support young surgeons from less fortunate countries. Explanation towards the cause and goals of the ISSF can be taken from the enclosed ISSF Folder.

2001 Travel Scholars pose with L.M. Nyhus and A. R. Brown



Feelings of the 2001 ISSF Travel Scholars

This is indeed a great honor and privilege for me to write about our feelings on behalf of the International Society of Surgery Foundation's Travel Scholars of the year 2001.

My heartiest thanks to Mr. Alastair Brown, the President of ISSF, Professor Lloyd Nyhus, the immediate past Secretary-Treasurer of ISSF and the other members of the Board of Directors of the ISS Foundation on behalf of Emmanuel A. Ameh, a pediatric surgeon from Nigeria, Htek Myek, a general surgeon from Myanmar, Alexander E. Julianov, a general and oncological surgeon from Bulgaria, Anjali Mishra, an endocrine surgeon from India, and myself, Sarder A. Nayeem, general and laparoscopic surgeon from Bangladesh, for giving us an invaluable opportunity to attend the Centennial 39th World Congress of Surgery organized as the International Surgical Week, ISW 2001. in Brussels.

This is certainly a noble endeavor on the part of the ISS Foundation to give this great opportunity to the young surgeons from the developing countries. As you may understand, at the beginning of a surgical career it is not very easy for a young surgeon from a developing country to be able to attend such a congress on his/her own. ISS Foundation has given us such an opportunity to go, to see, to learn and to carry back home the knowledge we have gathered here in this greatest meeting of the most reputed surgeons from all over the world.

We have met, we have talked, we have learned and we have exchanged ideas with the teachers and the teachers of the teachers in the world of surgery. We strongly believe that we shall be able to contribute from this unforgettable experiences to the best of our abilities in our respective fields of surgery in our own countries.

We specially thank Prof. Lloyd M. Nyhus for being with us all the way in extending tremendous co-operation and encouragement.

Finally we thank the organizers of this International Surgical Week 2001, for holding a very successful and fruitful meeting in Brussels this year.

Dr. Sarder A. Nayeem MBBS, Ph.D., FACS Consultant Surgeon

Japan Bangladesh Friendship Hospital Dhaka, Bangladesh

News from IAES

The IAES conference in Brussels was once again a success with excellent papers, symposia, and lunche- on panels. Eminent talks were given by the Peter Heimann lecturer Aidan Carney, and the State of the Art lecturer Henning Dralle, as well as by Bruno Niederle presenting an important event from the history of endocrine surgery. Including the free paper and poster sessions the program was indeed a manifestation of inspiration and commitment of our members, who had submitted so many excellent abstracts. This commitment has continued to make the biennial IAES meetings of great value for all endocrine surgeons, and made them contribute to raise the quality of endocrine surgery as clinical discipline.

As active endocrine surgeon one should not miss the IAES meetings. We have to be very grateful to Professor Jean-Paul Squifflet who took care of the local organization and arranged the IAES banquet.

The next conference is planned for August 2003 in Bangkok, and all our members already now have to initiate work that could be presented at that meeting. If you have any program points you want to have discussed in Bangkok, please notify the IAES secretary/treasurer.

The IAES has continued to stimulate worldwide education, by supporting the Postgraduate Course in Endocrine Surgery in Lucknow, India, coming November. Leigh Delbridge and Peter Goretzki will be the special IAES representants this year, and contribute with several talks. The original IAES Postgraduate Course in Endocrine Surgery, which has been initiated and efficiently run by Sten Lennquist, is now taken over by Malcolm Wheeler. The next meeting will be in southwest France, September 16-20, 2002.

The IAES has also come far in creating internet teaching in Endocrine surgery in collaboration with Web Surg (run by Jacques Marescaux). Most chapters of endocrine surgery have been written already, and work now remains to make the contributions fit the internet media. To that will be added appropriate illustrations and video sequences, done by a professional team from Web Surg, and this will certainly increase the quality of the presentations. The IAES is also developing an active web site within the ISS, with interesting Case presentations and hopefully discussions and interaction with our members.

The IAES membership number has continued to increase and we now count over 400 members. We want to have reached altogether 500 members when we meet in Bangkok. We hope all members will continue to influence colleagues, also the younger ones in training, to join our organization.



Jon A. van Heerden

In Brussels Professor Jon van Heerden was officially thanked for his great commitment and outstanding organisatory skill as president of the IAES. Many good things were really achieved, and a number of new members were stimulated to join the IAES, under his very efficient leadership. Leigh Delbridge was also officially thanked for his great contributions as council member, and Jacques Marescaux was nominated as the successor.



Shiro Noguchi

The new IAES president, Professor Shiro Noguchi was introduced to the membership, and was warmly welcomed. Professor Noguchi, who is well known by most members, is going to be President over the Bangkok conference. He will certainly be of great value for the organization, and help increase interaction with Asian colleagues.

We all look forward to meet, if not earlier, in Bangkok August 2003.

Göran Åkerström Secretary/Treasurer

News from IATSIC

Dear IATSIC Members

The executive of IATSIC would like to extend their sincere condolences and support to the many thousands of individuals and families whose lives have been devastated by the attacks on New York and Washington. Our thoughts are with you at this challenging time.

PRESIDENT'S REPORT





Ken D. Boffard

Stephen A. Deane

Thank you to all our members for such a successful meeting in Brussels. The sessions were the best attended of any IATSIC meeting to date, and seemed to cover the varying needs of all the members. There is no doubt that particularly successful were the joint sessions, held together with AAST, FELAC, ISBI and IASMEN, and we plan to explore this further.

The Scientific Committee has already been established and is planning the Scientific Programme for the meeting in Bangkok in 2003. The programme will have its main emphasis on the challenges facing the provision of trauma care with a large focus on partnerships and collaborations.

Preliminary discussions have already occurred with a number of organisations to have joint involvement with the programme. This includes the Royal College of Surgeons of Thailand and the Thailand representatives of the AO Orthopaedic group. There is also a strong interest in involving the cardio thoracic fraternity in joint sessions.

We had a very successful and productive Annual General Meeting (AGM) in Brussels. A copy of the minutes and full details will be circulated in a separate mailing. Listed are the new Executive Committee members approved at the AGM.

President: Stephen Deane (Sydney, Australia)
Secretary / Treasurer: Ari Leppäniemi (Helsinki, Finland)

President Elect:

Past President: Ken Boffard (Johannesburg.

South Africa)

Ron Maier (Seattle, USA)

We extend a sincere thanks to two Executive Committee members who have completed their term of office. Professor Gene Moore has served six years in the various roles as President and been greatly responsible for improving the quality of the Scientific Programme at our biennial meetings. A special thanks also goes to Professor Jan Goris who leaves the executive after four years as Secretary / Treasurer. His commitment to this role and his organisational skills have been invaluable to the Society.

A new Committee was formed at the AGM with the view of reporting back in Bangkok. The aim is to produce an outline of potential optimal / minimal standards in the world of trauma care. This will include guidelines for individuals and groups trying to develop trauma systems and care in resourced challenged countries.

The Definitive Surgical Trauma Care (DSTC) Course continues to expand and gain support. DSTC Committee plans to focus on the standardisation of the DSTC core syllabus and the essential requirements for IATSIC endorsement. There are a number of Courses planned both this and next year. The DSTC manual has been produced and is near ready for publication.

The National Trauma Management Course (NTMC) still remains part of the IATSIC portfolio. A further Course was held in Coimbatore in Southern India on the 28th and 29th September 2001 and a total of 140 Doctors attended. Another Course is scheduled for December this year in India and a further three Courses are planned for 2002.

The IATSIC Administrative Office is now fully established. Please send all suggestions for any of the Societies activities or Committees to the IATSIC Office. Further details regarding membership applications or Course details should also be directed through the Office.

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Stephen Deane and Ken Boffard attended the American College of Surgeons meeting in New Orleans, and the warmth and close relationship with which we were received, and the acceptance of IATSIC were very encouraging.

IATSIC is an organisation which has a major role to play in the management of Trauma across the world,

it is uniquely placed to support all our members, irrespective of the sophistication of their countries, with courses tailored to the local needs, and acts a major co-ordinating network across the world.

Finally, we would like to say to our US members and all the emergency services associated that we are with you in this incredible time. You have our sympathy and our support. We think of you and feel for you. May you come through this resolute and strong.

Yours with best wishes

Professor Kenneth Boffard Past President Professor Stephen Deane **President**

News from IASMEN



Peter B. Soeters

The origin of IASMEN dates back to the time when surgeons learnt that many of their patients died of undernutrition, but made techniques available that could adequately nourish these patients even when the gut was not accessible or only partly accessible.

Already Ambroise Pare noted that undernourished patients healed less quickly or even died of minor trauma. The first surge in interest was spurred by the development of techniques and equipment to feed patients artificially. These techniques are now widely available and part of routine in many hospitals. The field has moved forward and in the last decade research has greatly improved our understanding of nutritional requirements in different clinical conditions. Adapted formulae have come available that help to improve the immune response of the body during trauma and disease. Furthermore our understanding of the regulation of the response of the body to disease has improved, allowing the development of therapies directed at improving the response to disease, or directed at inhibiting inflammation in organ disease like Crohn's disease or Rheumatoid

Despite these developments undernutrition is still prevalent in most of our hospitals, and we still do only poorly understand why some patients respond adequately to their disease and some do not. Genetic predisposition is a new issue which will have to be taken into account in this respect and which will occupy an increasingly important position in the near future in the programs and research in the nutrition and metabolic field.

IASMEN symposia at the ISS/SIC meeting in Brussels 2001

Also other societies (IATSIC, ISBI) are interested in Nutrition and Metabolism. We therefore chose to organize joint symposia. Two of the IASMEN symposia were joint symposia, organized together with ISBI and IATSIC, two with EAES, and one with FELAC.

Steve Lowry was invited to highlight the relevance of modulators in the response to disease and the

possibilities to improve the course of disease by influencing these modulators as invited lecturer for the Patiño lecture. Henrik Kehlet was the key-note speaker during the joint symposium with EAES. He highlighted potential measures to limit the extent of surgical trauma and to accelerate postoperative recovery.

IASMEN officers

During the ISS meeting in August in Brussels 2001 Akira Okada, Osaka, Japan was appointed as new IASMEN president, replacing Peter B. Soeters who was appointed as ISS vice-president for the Bangkok congress 2003. Jaime Escallon, Bogota, Colombia was appointed as IASMEN president-elect and Ken Fearon, Edinburgh, UK as IASMEN secretary.

IASMEN will continue to promote interest among surgeons in the field of Nutrition and Metabolism to learn more about the pathogenesis of depletion, the purpose of the stress response, and to promote therapeutic approaches to support and treat our patients. Joint symposia with the other societies are foreseen

Peter B. Soeters, M.D., Ph.D. Past President of IASMEN Academic Hospital Maastricht University of Maastricht The Netherlands

Email: PB.Soeters@AH.UNIMAAS.NL

News from BSI



Raimund Jakesz and Kerstin Sandelin

Breast Surgery International celebrated its second anniversary during ISW in Brussels with a four day program that encompassed various aspects of benign and malignant breast diseases. The first Umberto Veronesi lecture BSI entitled "What should surgeons know about breast cancer" highlighted the meeting and was superbly given by the new President Roger Blamey from UK. The topic is of great importance as breast surgery has become part of interspeciality network during diagnosis, treatment and follow up of breast cancer. Many surgical societies have breast sections that promote training and development of the skills required for a breast surgeon. There are also ongoing plans for setting up standards for multidisciplinary care and evaluations of these units. There is still lack of consensus about the adequate prerequisites that a surgeon involved with breast disease should have. BSI with its international faculty can play an important role in addressing these issues.

The two symposia on advanced breast cancer dealt with locoregional recurrences and locally advanced breast cancer in the developing countries. Both gave much insight in the differences in spectra of breast cancer from the one hand that of a chronic disease to palliation for inoperable cases.

The BSI dinner was greatly enjoyed in a warm and informal atmosphere. Some 50 members participated and shared experiences and good food. Thank you Justus Apffelstaedt for the arrangements of this occasion!

The BSI business meeting reported on the constitution which were revised and approved by the membership, the statement of account which is satisfactory and plans for the Bangkok meeting. BSI has been approached by the local organizing committee for planning a postgraduate course in conjunction with the meeting. The one day ultrasound seminar was very well attended and may be incorporated in

future BSI meetings. BSI's membership list has grown and includes >100 members! Raimund Jakesz from Austria was unanimously elected President-elect

All moderators, panelists and participants should be commended for making the BSI program successful and you are urged to continue your efforts and participate actively in Bangkok 2003!

On behalf of BSI council. Kerstin Sandelin Secretary BSI

Report on the 52nd session of the Western Pacific Regional Committee of the World Health Organisation

10-14 September 2001



Raj M. Nambiar

This five day meeting was held at the Empire Hotel and country Club at Brunei Darussalam. The proceedings followed after an opening ceremony at the International Convention Centre attended by the Sultan of Brunei, Director General of WHO, Regional Director, Health Minister and representatives of 33 participating Governments in the region and representatives of International non-Government organisations.

The Director General WHO in her opening address spoke of the need for improving health globally as a critical element in the fight against poverty and outlined the coordinated efforts of Government and WHO and the ability of WHO and its regional structure to respond to regional priority.

The Regional Director, Dr. Shigaro Omi explained the key points in his report for discussion:

- Combating Communicable Diseases: The total eradication of poliomyelitis in the Western Pacific region was a landmark achievement. Strategies for reducing sexually transmitted diseases notably HIV infection and AIDS and prevention and control of tuberculosis were outlined.
- 2. Building Health Communities and population: This included the integrated management of childhood diseases, and non communicable diseases as a result of life style changes (prevention and control of tobacco use) improving diet and becoming physically active and promoting mental health
- Strengthening regional health system: focus on sound legislature, support of essential drugs, strengthening drug policies and food safety
- Reaching out was directed to use of traditional medicine with evidence basis and promotion of open learning methods.

Report by Raj M. Nambiar, Singapore

A surgeon's guide to writing and publishing

Edited by M. Schein, J.R. Farndon and A. Fingerhut the textbook "A surgeon's guide to writing and publishing" has been published by Blackwell Science. The aim of this guide is to inform surgeons on "all they ever wanted to know about publishing but never dared to ask". This book includes over 30 contributions from leading surgical authors, many of whom are editors of renowned surgical journals. After reading this book, one should be better informed and more successful in writing, publishing and editing. The 288 pages strong book can be ordered at USD 37.-/EURO 43.-/GBP 25.- (incl. p&p) at the following internet site: www.tfmpublishing.co.uk/tfmp medical coming.htm#Publish Surgeons

Information from the Administrative Office

Membership Application Form

As one of the enclosures you will receive an application form for ISS/SIC Membership which you are kindly requested to hand over to your colleague in order to join the ranks of ISS/SIC. As you know, the ISS/SIC depends more than ever on the recruitment of young surgeons in order to maintain the membership at high level. These membership application forms shall be supported by two ISS/SIC members and be sent to the corresponding National Delegate for approval.

Homepage

Any news regarding the Society such as the actual set up of the Executive Committee, Congress Information or other activities are published on our website at http://www.iss-sic.ch

Enclosures:

- Invoice ISS/SIC Membership dues 2002
- ISS-Foundation Folder
- ISS/SIC Membership Application Form
- ISS/SIC History Book Order Form
- Information leaflet on ISW2003 & Order Form

Seasons Greetings

The End of the year is approaching quickly and the Executive Committee members as well as the ISS/SIC staff at the Administrative Office in Switzerland send you the very best Season's Greetings and are looking forward to a prosperous and fruitful year 2002.



Staff at ISS/SIC Administrative Office Victor Bertschi, Marianne Bertschi, Chris Storz, Sabine Biaggi, Stefanie Kluser, Anuschka Gassler