



# THE AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS

(FOUNDED AS THE HARVEY CUSHING SOCIETY IN 1931)  
22 SOUTH WASHINGTON STREET, SUITE 100, PARK RIDGE, ILLINOIS 60068  
(312) 692-9500

*File Spine Section*

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AANS  
CHICAGO, ILLINOIS

December 7, 1987

Stewart B. Dunsker, M.D.  
551 Abilene Trail  
Cincinnati, Ohio 45215

Dear Stewart:

I am sure that Dr. George Tindall and Dave Kline will be in touch with you regarding your excellent report and the Board's discussion of the Joint Section on the Spine which followed. George asked that I communicate with you some of our thoughts since he assigned me the task of reviewing this issue at the Long Range Planning Committee.

- (1) The AANS reaffirms its charge to the Joint Spine Section to proceed to study and implement methods to enhance neurosurgical training, research, and delivery of care in spine surgery.
- (2) The AANS again confirms the approval of the Task Force to carry out these efforts. It was the suggestion of the Long Range Planning Committee and the Board of Directors that appropriate individuals should be identified on the American Board of Neurological Surgery and the Residency Review Committee for Neurological Surgery to participate in the Task Force. It was also suggested that one or more members of the AANS or the Executive Committee of the Congress who had an interest in this problem might be identified and appointed to the Task Force. It is my own suggestion that you and Ed Connolly and George Tindall should identify these people and then proceed.
- (3) The Board approved of your plans to explore the possibility of changing the RRC requirements to include spinal surgery guidelines and also, of course, to encourage the program directors to develop spinal research, both basic and clinical, and enhance their patient care abilities with the development of appropriate faculty. In addition, the plan to proceed with courses at national and regional meetings was discussed and thought to be excellent.

- (4) The Association agrees with your plans to study the development of Spine Fellowships in neurosurgery. We would encourage you to define the appropriate content of a fellowship program, its length, possible impact on residency training; numbers of operations needed, particularly as it relates to stabilization procedures, costs and other issues you may deem important.

Other ideas that were presented at the Long Range Planning Committee which we would encourage you to consider were:

- (a) the Board of Directors also felt that the Task Force should seriously consider a method to identify the problems, such as a program director and/or member questionnaire identifying the numbers and types of cases currently being done, the direction and amount of spinal research, current use of instrumentation which I think you have already done, present relationships to orthopedic surgeons on a local basis, the identification of a faculty dedicated to research and teaching of spine surgery.
- (b) with the assistance of the Joint Education Committee, the Joint Spine Section and Public Relations, develop brochures for the public and the profession. They should relate the Neurosurgeon to spine management.
- (c) to saturate the market of "throw-away journal" articles by Neurosurgeons on the treatment of spinal diseases.
- (d) to consider developing a neurosurgery spinal publication which would be a state-of-the-art volume. It could be developed so it could be added to and subtracted from rather than having an expensive publication.
- (e) discuss the possibility of the development of Neurosurgery back pain clinics. These multi-modality clinics run by Neurosurgeons could be easily developed if the manpower and the interest are there.

We have some concerns that Neurosurgery may not have the manpower, energy, or perhaps enough interest to be totally successful with these plans but we should give it a good shot. As you and I have discussed in the past, we do not want to get bogged down by getting too narrow a focus but should proceed to progress in several different areas simultaneously.

The Task Force will clearly have the support of the large organizations, the AANS and the CNS.

Sincerely yours,

  
David L. Kelly, Jr., M. D.  
Secretary - AANS