Tumor EWS

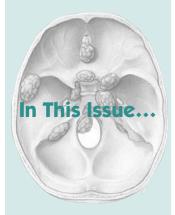




Spring 2003

AANS/CNS Section on Tumors

Editor: Gene H. Barnett, MD



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Chairman's Message

Participation Is the Secret of Success James T. Rutka, MD, PhD



I am a firm believer in the process of renewal and rejuvenation. I have been honored to serve as the chairman of the AANS/CNS Section on Tumors these past two years. With the publication of this newsletter, and

following the AANS Annual Meeting in San Diego April 27-May 1, 2003, I will be stepping down as chairman, and a new slate of Executive Committee members of the Tumor Section will be established. There can be no question that the Tumor Section has gained significant momentum over the past decade. The reason for the Tumor Section's success lies completely with the selection of capable committee members who have devoted themselves to advancing the cause of neuro-oncology in organized neurosurgery. Therefore, from the outset, I would like to thank all those currently on the Executive Committee of the Tumor Section for their unwavering support and help these past two years.

Accomplishments: A Select Review

We have been fiscally responsible in using available funds to promote neuro-oncology projects and programs that make a difference. Annually, we have made contributions to the Washington Committee for its ongoing activities that aid all of neurosurgery. Our activities have been reported regularly in our newsletter, in *Neurosurgery News*, and in the AANS *Bulletin*. Our Web site has been expanded and enhanced to inform members of current events

in neuro-oncology. Several Tumor Section committee members have supervised the writing of neuro-oncology special issues for Neurosurgical Focus, the Journal of Neuro-Oncology, and Neurosurgery. Membership in the Tumor Section is now provided to all residents in accredited neurosurgical training programs across North America. We held a successful Tumor Satellite Symposium last year in Chicago following the AANS Annual Meeting. We continue to have excellent working relationships with our many generous award sponsors including the Preuss Foundation, the American Brain Tumor Association, the National Brain Tumor Foundation, and the Farber Foundation. Select Review (www.neurosurgery.org/tumor/selectreview) remains a vital resource that provides expert analysis of contemporary articles in the neurooncology literature. Our bylaws have now been revised and amended, and will hold us in good stead as we move forward with new initiatives of the Tumor Section. Finally, a subcommittee of the Tumor Section is writing a document to be reviewed by the Society of Neurological Surgeons to provide accreditation for fellowships in neurosurgical oncology.

The Process Begins Anew May 1

In closing, I would especially like to thank Secretary-Treasurer Raymond Sawaya, MD, for making the job as chairman these past two years so enjoyable and easy, and immediate Past Chairman Joseph Piepmeier, MD, for providing me with an outstanding template to follow. The necessary process of renewal and rejuvenation will once again take place within the Tumor Section on May 1. Watch for great things to happen over the next two years!

Tumor Highlights at the 2003 AANS Annual Meeting



The 71st Annual Meeting of the American Association of Neurological Surgeons, themed "Cultural Connections: Bringing Global Perspective to Neurosurgery," will be held April 26-May 1, 2003, at the San Diego Convention Center. For the most up-to-date

program listings and registration information, check online at www.neurosurgery.org/aans/meetings/2003.

Saturday, April 26, 2003

8:00 AM-NOON

Practical Clinic 003. Peripheral Nerve Injuries, Entrapments and Tumors: Examination and Evaluation.

DIRECTOR: Eric L. Zager FACULTY: Allan H. Friedman, David G. Kline, John E. McGillicuddy, Rajiv Midha, Robert J. Spinner, Robert L. Tiel

1:00-5:00 PM

Practical Clinic 020. Neurosurgery: Nursing Management of Patients With Aneurysms, Brain Tumors, Epilepsy Surgery and ICP Monitoring DIRECTOR: Ellen Barker

FACULTY: Benjamin Carson, Diana L. Kraemer, Dianne Yasargil, M. Gazi Yasargil

Special Events

Sunday, April 27, 2003

OPENING RECEPTION 6:30–8:30 PM

Visit with colleagues and friends and enjoy the enticing flavors of many exotic ports of call in the Sails Pavilion at the San Diego Convention Center. The location highlights the views and splendor of San Diego Bay while the internationally flavored party features food from around the world. Funded in part by Codman & DePuy AcroMed, a Johnson & Johnson Company.

NREF "FUN" DRAISER 8:30-11:00 PM

The Neurosurgery Research and Education Foundation is putting the "fun" back in fundraiser! Rock the night away during NREF's second annual fundraiser with music of the 1960s, 1970s and 1980s performed by Roz and the Wrecking Crew. Dance or relax and enjoy light hors d'oeuvres, desserts and an open bar. The NREF Fundraiser will be held at the San Diego Marriott Hotel & Marina, immediately following the Opening Reception. Funded in part by Guilford Pharamaceuticals.

Sunday, April 27, 2003

8:00 ам-ноон

Practical Clinic 026. Skull Base Tumors: Treatments and Complications CO-DIRECTORS: William T. Couldwell, Gail L. Rosseau FACULTY: Ossama Al-Mefty, Ghassan K. Bejjani, Derald Brackmann, Tetsuo Kanno, Jacques J. Morcos, Madjid Samii, Laligam N. Sekhar, Helmut Bertalanffy

8:00 AM-5:00 PM

Practical Clinic 032. Update on Tumors for the General Neurosurgeon DIRECTOR: Jeffrey N. Bruce

FACULTY: Ossama Al-Mefty, Michael W. McDermott, Thomas C. Origitano, Joseph M. Piepmeier, Corey Raffel, Jack P. Rock, James T. Rutka, Raymond Sawaya

Monday, April 28, 2003

Breakfast Seminars

7:30-9:30 AM

107. Malignant Brain Tumors: State-of-the-Art Treatment

MODERATOR: Mitchel S. Berger

PANELISTS: Edward H. Oldfield, Andrew T. Parsa, Manfred Westphal

109. Advances in the Management of Pediatric Brain Tumors

MODERATOR: Corey Raffel PANELIST(S): TBA

110. Pituitary Tumors: State-of-the-Art

MODERATOR: Gail L. Rosseau PANELISTS: William T. Couldwell, Rudolph Fahlbusch, Daniel F. Kelly, Martin H. Weiss

113. Comprehensive Approaches and Risks to the Treatment of Spinal Cord Tumors

MODERATOR: Paul C. McCormick
PANELISTS: Neil Arthur Feldstein, Barth E. Green, Georges Fischer

118. State-of-the-Art Treatments for Low-Grade Gliomas

MODERATOR: Joseph M. Piepmeier

PANELISTS: Saleem I. Abdulrauf, Peter McL. Black, James T. Rutka

119. How I Do It: Skull Base Tumors

MODERATOR: Ossama Al-Mefty

PANELISTS: Tetsuo Kanno, Jacques J. Morcos, Laligam N. Sekhar

1:00-2:45 PM

Tumor Section Executive Council Meeting

Scientific Session I

2:45-5:15 PM

MODERATORS: Theodore R. Jacobs, Gail Rosseau

2:45-3:15 PM

Invited Lecture: Biology and Adjunctive RX of Gliomas SPEAKER: Andrew H. Kaye



Photo courtesy of the San Diego Convention and Tourism Bureau.

5:00-5:15 PM

715. Gamma Knife Radiosurgery for Brain Metastases: Tumor Number Impacts Survival Period but Not Cause of Death

Masaaki Yamamoto, Toshifumi Kamiryo, Mitsunobu Ide, Bierta E. Barfod, Yoichi Urakawa

DISCUSSANT: Michael L. J. Apuzzo

Scientific Session II 2:45–5:15 PM

MODERATORS: Gene H. Barnett and James T. Rutka

2:45-3:00 PM

716. Magnesium Efficacy in a Rat Spinal Cord Injury Model

Diana B. Wiseman, David Lundin, Jiegang Zhou, Adam Lipson, Alexis Falicov, MD, Christopher I. Shaffrey DISCUSSANT: Michael G. Fehlings

3:00-3:15 PM

717. Primary Bony Tumors of the Spine in a Pediatric Population

Jeremy D.W. Greenlee, Albert J. Fenoy, Kathleen A. Donovan, Yutaka Sato, Patrick W. Hitchon, Arnold H. Menezes DISCUSSANT: Christopher I. Shaffrey

3:15-3:45 PM

Invited Lecture: Pineal Tumors

SPEAKER: Nicolas de Tribolet

4:45-5:00 PM

722. Surgical Outcomes in 99 Axillary Nerve Injuries and Tumors *Judith A. Murovic, Daniel H. Kim, Robert L. Tiel, David G. Kline*

DISCUSSANT: David G. Kline

Tuesday, April 29, 2003

Plenary Session II

10:00-10:15 AM

757. Intratumoral and Peritumoral Convection-Enhanced Delivery (CED) of IL13-PE38QQR, a Recombinant Tumor-Targeted Cytotoxin, in Recurrent Malignant Glioma—Phase I Trial

Sandeep Kunwar, Michael D. Prados, Fred F. Lang, Christina K. Fleming, PhD, Kenneth Aldape, Phil H. Gutin, PhD, Joseph M. Piepmeier, Mitchel Berger, Michael McDermott, Raj K. Puri DISCUSSANT: Edward H. Oldfield

AANS/CNS Section on Tumors

MODERATOR: Michael W. McDermott

2:45-3:30 PM

Special Symposium: Advances in Molecular Neurosurgery

MODERATORS: Abhijit Guha, Peter B. Dirks SPEAKERS: TBA

SPECIAL AWARDS

3:30-3:45 PM

2:45-5:30 PM

Preuss Award

RECIPIENT: Markus Bredel

Young Investigator Award

RECIPIENT: Moneeb Ehtesham

Mahaley Award

RECIPIENT: Marcus L. Ware

Scientific Session

3:45-3:57 PM

818. Impact of DNA Topoisomerase IIalpha Expression on Outcome in Childhood High-Grade Gliomas

Markus Bredel, Ian F. Pollack, Ronald L. Hamilton, Peter Birner, Johannes A. Hainfellner, Josef Zentner

continued on page 6

Awards Report: Preuss, Mahaley, and Young Investigator Awards Announced

Michael W. McDermott, MD

The Scientific Program Committee has selected the Preuss, Mahaley and Young Investigator awards for the upcoming 2003 AANS Annual Meeting. Presentations of the awards, along with certificates, will be made from 3:30 to 3:45 p.m. at the AANS/CNS Section on Tumors program on Tuesday, April 29. Each recipient will present the core of his or her work in a 10-minute platform presentation following the awards presentation.

The Preuss Award winner is Markus Bredel, MD. Dr. Bredel's presentation is entitled "Impact of DNA Topoisomerase II-Alpha Expression on Outcome in Childhood High-Grade Gliomas." The Awards Committee would like to thank the Preuss Foundation for their ongoing support of this award.

The Mahaley Award winner is Marcus Ware, MD. Dr. Ware's presentation is entitled "Surgical Resection and Brachytherapy for Recurrent Atypical and Malignant Meningioma." The Awards Committee would like to thank the National Brain Tumor Foundation for their continued support of this award.

The Young Investigator Award winner is Moneeb Ehtesham, MD. Dr. Ehtesham's presentation is entitled "Induction of Glioblastoma Apoptosis Using Neural Stem Cell Mediated Delivery or TRAIL." The Awards Committee would like to thank the American Brain Tumor Foundation for their continued support.

The Farber Award will be announced at the meeting, while the deadline for the Translational Research Grant Award has been extended to May 30.

We hope to see you at the meeting!

ACOSOG Targets Malignant Solid Tumors

Anthony L. Asher, MD, FACS

The American College of Surgeons Oncology Group (ACOSOG) is the newest of 10 cooperative groups funded by the Cancer Treatment Evaluation Program (CTEP) of the National Cancer Institute. It is the only cooperative group whose primary focus is the surgical management of patients with malignant solid tumors.

The group was initially based at the American College of Surgeons office in Chicago. In January 2001, the group moved its operations to the Duke University Medical Center and since then, ACOSOG has developed a strong working relationship with the Duke Clinical Research Institute.

This Clinical Trials Group Is Unique

As a clinical trials group, the ACOSOG possesses a number of unique characteristics that deserve emphasis: First, unlike other cooperative groups, the primary leadership of ACOSOG derives from surgical specialties. Second, ACOSOG seeks to be inclusive and surgeons are encouraged to participate in surgical trials regardless of their practice setting or geographic location. Finally, ACOSOG is committed to educating surgeons about the correct conduct of clinical research and the importance of adhering to the principles of good clinical practice as they relate to human subjects.

The Clinical Trial Development Center for ACOSOG is represented in the aggregate by 10 Organ Site Committees (OSC). These committees are composed of surgeons, medical oncologists, diagnostic radiologists, radiation oncologists, nurses, patient advocates, biostatisticians, and ethicists. The individual organ site committees are led by smaller working groups, which set policy for and direct the activities of each OSC. Suggestions for a clinical trial usually come from a member of an OSC. Both academic and community based surgeons may propose trials to an OSC.

Neurosurgery's role within ACOSOG has expanded rapidly over the last few years. The Brain/Central Nervous System Organ Site Committee (Brain/CNS OSC) of ACOSOG was formed in 1999 by the ACOSOG group chair, Samuel H. Wells, MD. The Brain/CNS OSC is charged with developing and implementing cooperative, multi-institutional trials for the treatment of brain tumors. From 1999 to 2002, Edward R. Laws, MD, chaired this committee. Under Dr. Laws' leadership, a working group was created that included specialists from neurosurgery, medical oncology, radiation oncology, radiology, neuropsychology, and nursing. A mechanism for developing brain tumor related clinical trials was also put into place and the brain group's first clinical protocol was submitted to CTEP.

Z0300 Protocol Is Activated

Since February 2002, Anthony Asher, MD, has chaired the Brain/CNS Organ Site Committee. The Brain/CNS group has just opened its first protocol, Z0300 (SRS vs. SRS + WBRT for patients with one to three brain metastases). This protocol is presently being activated at more than 30 institutions nationally and patient accrual has begun. The Brain/CNS Organ Site Committee is actively developing other concepts for CTEP submission. Although the

group's unique mandate is the development of surgically oriented, phase III multi-institutional brain tumor trials, phase II surgical concepts are also under development.

The AANS/CNS Section on Tumors is well represented in the leadership structure of the ACOSOG Brain/CNS Organ Site Committee. Neurosurgeons from academic and community institutions in the United States and Canada have positions in the working group. In addition to protocol development and expanding the slate of open brain tumor trials, major objectives of the Brain/CNS working group include educating neurosurgeons about ACOSOG and developing a network of member physicians across North America and Europe.

In summary, ACOSOG represents an unprecedented opportunity for neurosurgeons and other physicians to investigate important clinical questions related to brain cancer in the setting of cooperative, multi-institutional trials. Additionally, because of the inclusive mission of ACOSOG, a unique opportunity exists to foster interaction between individuals in a variety of practice settings.

Interested neurosurgeons are encouraged to learn more about ACOSOG and consider participating in this group. For general information on ACOSOG, individuals can access the group's Web site at www.acosog.org, or contact Dr. Asher at by e-mail at asher@cnsa.com. Information regarding the group's open NCI protocol is available from Tracy Kerby at kerby001@surgerytrials. duke.edu, or (919) 668-8588.

\$15K NBTF Translational Grant Deadline Extended to May 30

The deadline for the National Brain Tumor Foundation Translational Research Grant Award is extended to May 30, 2003.

The \$15,000 grant will be awarded through the AANS/CNS Section on Tumors to the best translational research proposal on brain tumors.

Preference is given to proposals that will bring novel laboratory research findings to clinical trial. Applicants must be practicing neurosurgeons within the first six years of their careers. Each application is strictly limited to five pages with the following format:

- Introduction
- Preliminary Data
- Study Design/Data Analysis
- Budget
- Justification

More information is available at www.neurosurgery.org/tumor/awards.html.

Radioimmunotherapy for Malignant Glioma

Claudia Goetz, MD, and Klaus Tatsch, MD

n cooperation with the Department of Nuclear Medicine, the effects of intralesionally applied radioimmunotherapy are under investigation. According to the study protocol, this additional therapeutic option is offered to patients suffering from a malignant glioma. Of particular interest are side effects and survival after nearly total tumor resection, conventional radiotherapy, and additional radioimmunotherapy with 131-I-labeled tenascin-antibodies.

The Study

Inclusion criteria are: Primary supratentorial malignant glioma (histology confirmed), small tumor remnant (thickness < 1 cm), completed conventional radiotherapy, Karnofsky score > 70, no other malignancy, and confirmed tenascin-expression.

Exclusion criteria are: Persistent wound healing problems or skin lesions, patent connection between resection cavity and CSF space, or major internal disease.

Radioimmunotherapy is applied three times at intervals of six weeks. Prior to each treatment MRI, FDG-PET and FET-PET are obtained to document the actual state.

After completion or treatment, an MRI is repeated in threemonth intervals and PET scans are repeated in six-month intervals.

The Results

So far treatment results are encouraging: Compared to a historical control group, survival is prolonged. Quality of life during treatment was good. Rare acute side effects following treatment were headache, seizures and transient worsening of pre-existing neurological symptoms. Late side effects were skin necrosis and, in one of the patients treated, a delayed aphasia probably due to a vascular lesion.

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Second Annual Meeting of ASNO in Korea

Shin Jung, MD

The second meeting of the Asian Society of Neuro-oncology (ASNO) will be held on Jeju Island, Korea, Dec. 4-6, 2003.

The president of the meeting is Professor Jong-Hyun Kim, Samsung Medical Center. The Asian Society of Neuro-oncology was organized last year, and the first meeting was held in Kumamoto, Japan, last November.

Phase III Study Uses 5-ALA to ID Malignant Gliomas

Walter Stummer, MD, and Jörg-Christian Tonn, MD

phase III randomized trial studying safety and benefit using fluorescence-guided resections of newly diagnosed malignant gliomas with 5-aminolevulinic acid (5-ALA) is being conducted at 15 neurosurgical centers in Germany.

As the body's own metabolite in the heme bioysnthesis pathway, 5-ALA, itself a colorless precursor, induces synthesis and accumulation of strongly fluorescent prophyrins within malignant glioma tissue. Pilot work had demonstrated fluorescence to be highly specific for malignant glioma tissue, highlighting solidly proliferating and infiltrating tumors of intermediate-to-high cellular density. Resection of fluorescing tissue appeared to be directly linked to patient survival.¹

With standard surgical microscopes modified for intraoperative fluorescence visualization, the phenomenon is being exploited for improving intraoperative delineation and resection of marginal tumors. The study, which is sponsored by the Medac Company in Wedel, Germany, is designed for obtaining drug approval within the European community.

Patients eligible for surgery and potential resection of contrast-enhanced tumors are randomized to receive either standard microsurgical resection and radiotherapy, or fluorescence-guided resection and radiotherapy in this open-label trial. The randomization procedure balances for age, Karnofsky status, proximity of tumor to eloquent brain regions and surgeon performing the procedure to minimize bias.

Primary endpoints are the fraction of patients with early postoperative MRI scans devoid of residually enhancing tumor, and progression-free survival at six months. Secondary endpoints include overall survival, toxicity, and neurological condition. So far, 290 patients have been randomized. An interim analysis is scheduled for fall of this year, when 310 patients complete their six-month follow-up visits.

Apart from information concerning the safety and benefit of using 5-ALA for enhancing resections, the study may well provide data on a high level of evidence for resolving the basic neurosurgical controversy of whether maximal cytoreductive surgery is beneficial. In this study, two sets of patients with different degrees of resection are anticipated, which are balanced according to the known prognostic variables. Differences in outcome would then depend on differences in the completeness of surgery.

1) Stummer et al: J Neurosurg 93:1003-1013, 2000

Contact:

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Editor's Corner

Gene H. Barnett, MD

n this issue of the newsletter, James Rutka, MD, reviews the accomplishments of the AANS/CNS Section on Tumors during his tenure as chairman. Michael McDermott, MD, outlines the awards given out by the section in the past year, and Anthony Asher, MD, gives us an update on the American College of Surgeons Oncology Group activities as they pertain to brain tumors.

We also have international updates from South Korea and Germany.

Ab Guha, MD, has put together a stimulating brain tumor program for the upcoming meeting of the American Association of Neurological Surgeons (AANS) in San Diego. The schedule of these events is provided for your review.

As always, if you have content for this newsletter, please contact me:

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See you in San Diego!

Tumor Highlights continued from page 3

3:57-4:09 PM

819. Surgical Resection and Brachytherapy for Recurrent Atypical and Malignant Meningioma

Marcus L. Ware, David A. Larson, Penny Sneed, William Wara, Michael W. McDermott

4:09-4:21 PM

820. Induction of Glioblastoma Apoptosis Using Neural Stem Cell Mediated Delivery of TRAIL

Moneeb Ehtesham, Peter Kabos, Mervin A.R. Gutierrez, Nancy H.C. Chung, Thomas S. Griffith, Keith L. Black, John S. Yu

4:21-4:33 PM

821. Symptoms and Quality of Life After Large Unilateral Vestibular Schwannoma Surgery

Keyvan G. Nicoucar, John-Paul Vader, Nicolas de Tribolet

4:33-4:45 PM

822. Imaging Convection-Enhanced Delivery (CED) of a Recombinant Chimeric Protein Composed of Transforming Growth Factor (TGF)-alpha and a Mutated Form of the Pseudomonas Exotoxin Termed PE-38 (TP-38) for the Treatment of Malignant Brain Tumors John H. Sampson, David Reardon, Gamal Akabani, Williams Roger, Allan H. Friedman, Henry Friedman, Sandeep Kunwar, Steve Marcus, Ira Pastan, Darell D. Bigner

4:45-4:57 PM

823. Hospital and Surgeon Caseload and Outcome After Craniotomy for Brain Tumor in the United States, 1996-2000

Frederick G. Barker

4:57-5:09 PM

824. Enhanced Drug Delivery to Primary Brain Tumors by Activation of Potassium Channels in a Human Brain Tumor Xenograft Model Keith L. Black, Mamatha K. Rao, Leonid Groysman, Asha Das, Nagendra S. Ningaraj

5:09-5:21 PM

825. Brain Tumor Growth in Mice Is Inhibited By Blockade of Epidermal Growth Factor Receptor (EGFR) but Not EGFRvIII With a Selective EGFRTyrosine Kinase Inhibitor

John H. Sampson, Darell D. Bigner, Chris Learn, Allan H. Friedman, Henry S. Friedman, John B. Pracyk, Greg J. Riggins, Gary E. Archer, Roger E. McLendon, Amy B. Heimberger

5:21-5:33 PM

826. Perioperative ACTH Changes Predict Outcome Following Transsphenoidal Microsurgery for Cushing's Disease

Thomas N. Pajewski, Edward R. Laws

Tumor Section Reception is in the Convention Center following the program.

Wednesday, April 30, 2003

Breakfast Seminars

7:30-9:30 AM

301. How I Do It: Acoustic Tumors

MODERATOR: Madjid Samii

PANELISTS: Derald Brackmann, Shigeaki Kobayashi, Kalmon D. Post

314. Management of the Difficult Meningioma

MODERATOR: Jacques Brotchi

PANELISTS: Ossama Al-Mefty, Armando Basso, Akira Hakuba, Gail L. Rosseau

318. Anatomy, Surgical Treatments and Risks of Third Ventricle Tumors MODERATOR: Michael L. J. Apuzzo

PANELISTS: Jeffrey N. Bruce, Douglas S. Kondziolka, Marc P. Sindou

TUMOR POSTER VIEWING

2:00-2:45 PM

Thursday, May 1, 2003

Breakfast Seminar

7:30-9:30 AM

412. The Spectrum of Adjuvant Therapy for Brain Tumors

MODERATOR: James T. Rutka

PANELISTS: Henry Brem, Michael W. McDermott, Edward H. Oldfield, Jun Yoshida

Moved? New E-mail? Notify AANS, CNS

and ABNS of changes to your contact information online. Go to www.neurosurgery.org/directory, enter your name, click the "update your listing" button, and follow the instructions to quickly and easily update your listing for all three organizations at once.



Application for Membership

AANS/CNS Section on Tumors



Eligibility: Members of the AANS and/or CNS who have demonstrated a special interest in tumors of the nervous system.

I. Biog	raphical:			
(A)	Name:			
(B)	Home Address:			
(C)	Office Address:			
	Phone:	Fax:		
(D)	E-Mail (Required):			
☐ A	gory of Membership Requested: .ctive			☐ Adjunct ns.
III. Mem	nbership, Certification and Practice:			
(A)	Are you certified by the American Board of Neurological Surgery? \Box Yes \Box No			
(B)	For Resident/Fellow Applications-Expected Training Completion Date (month/year)			
(C)	Are you a member of			
	1. American Association of Neurological Su	argeons?	☐ Yes	□ No
	2. Congress of Neurological Surgeons?		☐ Yes	□ No
(D)	Are you currently involved in brain tumor re Clinical- ☐ Yes ☐ No	esearch? Basic-	☐ Yes	□ No
Suggesti	ons on Section activities that would benefit you	1:		
	Signature of Applicant	_	Date	_

Please return completed application and curriculum vitae to:

Ronald E. Warnick, MD
University of Cincinnati Medical Center
222 Piedmont Ave. #3100
Cincinnati, OH 45219
Phone: (513) 558-3179 Fax: (513) 558-0886 E-mail: nsgymd@mac.com

AANS/CNS Section on Tumors

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Ronald E. Warnick, MD

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Gene H. Barnett, MD

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Frederick J. Lang, MD

Nominating

Joseph M. Piepmeier, MD

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Linda Liau, MD

Guidelines

Jeffrey Olson, MD

Program

Ab Guha, MD

(AANS San Diego 2003)

International

Jun Yoshida, MD Jorg Tonn, MD Shin Jung, MD Carlos Carlotti, MD Education

Nalin Gupta, MD

(Satellite Symposium)

Isabelle Germano, MD

(Neurosurgical Focus)

Antonio Chiocca, MD

(J Neuro-Oncology)

Anthony Asher, MD

(Select Review)

Corey Raffel, MD

(Exam Questions, Abstract Grading)

Jeffrey Bruce, MD

(Neuro-Oncology Update Course)

Don O'Rourke, MD

(J Neuro-Oncology)

Young Neurosurgeons Peter Dirks, MD

Washington Committee

Lawrence Chin, MD