



JOINT SECTION ON TUMORS

Ronald E. Warnick, MD, Editor

Fall 1997

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It is an honor and privilege for me to take over as the Chair of this Section. Shortly after the recent AANS Meeting in Denver, a number of Executive Council members retired or changed portfolio after years of unselfish service. In addition, a number of young neurosurgeons were recruited to positions on the Executive Council. I look forward to working with the Executive Council and all members of the Section to continue to promote and nurture our subspecialty of surgical neuro-oncology. I would like to particularly welcome Joe Piepmeier to the position of Secretary-Treasurer; and acknowledge the great job Bill Chandler did during his tenure as Chair and thank him for his commitment and dedication.

The current rate of information accrual in the field of neuro-oncology is exhilarating. This is especially true as we get ever closer to a better understanding of the molecular and genetic changes associated with brain tumors and the potential treatments which emanate from this type of understanding. One of the most important jobs of our Section is to facilitate this type of cutting-edge work through information networking. This is accomplished through the Joint Tumor Section Scientific Program at each AANS and CNS Annual Meeting, and our Satellite Symposia, the next of which follows the AANS Meeting in April 1998 with Jim Rutka as the Scientific Chair. Another very important job is to recognize and support outstanding research in our field by the administration of numerous Awards and Research Grants by our Section. We thank the various donors who make our Awards and Grants program possible.

Currently there are a number of special projects the Section is undertaking. One is a book on the Essentials of Clinical Neuro-Oncology to be published by Thieme and co-edited by myself and Mitch Berger. In addition, the Glioma Outcome (GO) project sponsored by Rhone-Poulenc-Rorer is designed to facilitate collection of outcome data on patients with malignant gliomas. Both projects have just gotten underway.

A special thanks to all members of our Section for your support in helping the Joint Section on Tumors become a resource for you and your patients, who benefit from the exciting advances in neuro-oncology, and the collective efforts of many people dedicated to this subspecialty area.

In This Issue...

Preuss Resident's Research Award Paper	2	News Items	4
Mahaley Clinical Research Award Paper	2	CNS Annual Meeting Program	6
Young Investigator Award Paper	3	Joint Section Committee Reports	7
1997 PDP Course Schedule	3	Minutes of the Executive Council Meeting	8

MAHALEY CLINICAL RESEARCH AWARD PAPER

Safety and Efficacy of Malignant Glioma Radiosurgery: A Long-Term Perspective

Douglas S. Kondziolka, L. Dade Lunsford, Michael Bozik, John C. Flickinger

Methods: We evaluated results and selection factors for stereotactic radiosurgery in the management of patients with glioblastoma multiforme (GBM) or anaplastic astrocytoma (AA). Adjuvant radiosurgery was performed either “up front” (within eight months of diagnosis) or for recurrent tumor. We studied patient age, tumor volume, location, prior chemotherapy, type of prior surgery, and diagnosis. Selection factors were unchanged over the length of study.

Results: Over an eight-year interval, we performed gamma knife radiosurgery in 64 patients with GBM (mean age 51 years) and 43 patients with AA (mean age 36 years). Clinical and imaging follow-up was obtained in all patients. Initial cytoreduction was performed in 41 GBM and 19 AA patients. “Up front” radiosurgery after radiation therapy (60 Gy) was performed in 45 (70%) GBM and 20 (47%) AA patients. The mean volume at radiosurgery was 6 ml (GBM and AA), and the mean margin dose 15.5 Gy. Fifty-eight GBM patients had lobar tumors (91%) and six had deep tumors.

Among GBM patients, 34 had died and 30 were alive; of the 43 AA patients, 23 were alive. Median survival time after initial GBM diagnosis was 26 months (32 months in AA patients) or after radiosurgery 16 months (range 1-74 months), (21 months in AA patients). No survival difference was identified in patients who had prior intravenous chemotherapy ($p=0.97$). Age under 50 years, biopsy, and recurrent tumor were predictors of survival benefit. Forty-eight GBM (75%) and 31 AA (72%) patients had no further surgery performed; 22 patients underwent craniotomy and resection and 6 a second radiosurgery. There was no acute neurological morbidity after radiosurgery. Total volume radiation necrosis was found in one GBM patient (1.6%) and two AA patients (4.7%)

Conclusions: A marked survival benefit after radiosurgery was identified in patients with GBM and AA. This may be related to selection bias of smaller-volume tumors and patients who survived previous treatments, although no selection was made for location. Radiosurgery is a simple, safe and potentially effective adjuvant therapy that requires further comprehensive evaluation.



PREUSS RESIDENT'S RESEARCH AWARD PAPER

Chromosome 11 Abnormalities Are the Most Frequent of Multiple Aberrations Detected in Pituitary Adenomas by Comparative Genomic Hybridization

Andrew K. Metzger, Gayatri Mohapatra, Yuriko Minn, Andrew M. Bollen, Charles B. Wilson, Burt G. Feuerstein

Background: Pituitary adenomas account for approximately 10% of intracranial tumors, but relatively few genetic aberrations have been detected in these tumors. Previously-used techniques are hampered by the inability to examine the entire tumor genome and may be insensitive to some aberrations such as gain of genetic material. We used comparative genomic hybridization to study 38 pituitary macroadenomas from 17 female and 21 male patients ages 31 to 74 years (median 57 years).

Methods: Following surgical removal, tumor tissue was flash-frozen. Total genomic DNA was extracted from tumor specimens and leukocytes of normal individuals, then labeled with green (FITC-dUTP) and red (Texas Red-dUTP) fluorochromes, respectively, by nick translation. Labeled tumor and control DNA samples were then denatured, hybridized to normal metaphase chromosomes, and analyzed with a quantitative image processing system. A change in the ratio of green to red signal was indicative of a copy number aberration (CNA).

Results: Of 38 adenomas, 20 (53%) contained CNAs. Multiple CNAs were present in 14 (37%) and the average number of aberrations was 4.5 (20/89). Gain of an entire chromosome was the most frequent type of aberration (42/89, 47%). The most frequent chromosome affected was 11 (9/38, 24%) and loss of all chromosome 11 material except for the 11q13 region was present in 4/38 (11%).

Conclusions: We conclude that genetic aberrations are more common in pituitary adenomas than previously reported and that a rearrangement of the 11q13 region may affect an oncogene important in the initiation or progression of these tumors.



YOUNG INVESTIGATOR AWARD PAPER

What Determines a Benign Glioma Phenotype?

N. Scott Litofsky, Mahesh B. Lachyrankar, Peter J. Quesenberry, Alonzo H. Ross, Lawrence D. Recht



Background: Increased proliferation and anaplasia are characteristics correlating with poor prognosis in gliomas. By contrast, relatively benign gliomas (juvenile pilocytic astrocytoma, ganglioglioma) have lower proliferation and more differentiation. Neurotrophin receptor expression in neural tumors (medulloblastoma, neuroblastoma) is associated with more differentiation and better prognosis. We hypothesized that gliomas induced to express neurotrophin receptors (TrkA) would display more benign phenotypes.

Methods: C6 glioma cells were transfected with TrkA genetic sequence (C6-TrkA). Truncated TrkA expressing only extracellular domain (C6-delta) served as control, as did C6. Only C6-TrkA cells were nerve growth factor (NGF)-responsive (but not NGF-dependent) *in vitro*. Twelve days after stereotactic implantation of each cell line, rat brains were examined histopathologically with stains

for hematoxylin and eosin, nestin, GFAP, PCNA (proliferation marker), and TUNEL (apoptosis marker). Other rats were sacrificed when moribund to measure survival time.

Results: C6 and C6-delta tumors were large and infiltrative. C6-TrkA tumors were smaller, with defined borders and less infiltration. PCNA staining was equivalent, but TUNEL staining was significantly increased in C6-TrkA tumors ($p < 10^{-10}$, one-way ANOVA on ranks). Median survival time of C6-TrkA rats (11 animals, >42 days) was significantly longer than the C6 (10 rats, 12 days) or C6-delta (7 rats, 9 days) group ($p < 0.001$, log rank test).

Conclusions: We conclude that TrkA overexpression induces a more benign glioma phenotype. In association with longer survival time, C6-TrkA tumors are less infiltrative and undergo apoptosis. Since C6-delta tumor survival is comparable to that of C6 tumors, immune mechanisms are not responsible. While exact mechanisms are uncertain, factors other than increased proliferation and anaplasia might underlie glioma aggressiveness.

Professional
Development
W I T H



THE AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS

Join Your Colleagues at These Remaining 1997 Courses!

Minimally Invasive Neurosurgery:
Neuroendoscopy – Hands-On
November 14-15 • Cleveland, OH
Chairman: Alan R. Cohen, MD

Stereotactic and Imaging-Guided
Neurosurgery
November 7-8 • San Francisco, CA
Chairman: Philip L. Gildenberg, MD, PhD

1997 Reimbursement Update
for Neurosurgeons
October 24-25 • Philadelphia, PA
November 16-19 • Maui, HI

A Proactive Approach to
Managed Care: Strategies & Solutions
November 7-8 • Palm Beach, FL

Neurosurgery Review
by Case Management:
Oral Board Preparation
November 9-11 • Houston, TX

For more information, call the AANS Professional Development Department at (847) 692-9500, or email us at info@aans.org.

IN BRIEF...

National Brain Tumor Foundation

Clinical Research Grants

As part of its commitment to funding studies through the Brain Tumor Clinical Trial Consortia, the National Brain Tumor Foundation recently granted two \$25,000 awards to the following researchers:

David M. Louis, MD, Associate Professor of Pathology at Massachusetts General Hospital and Harvard Medical School, for his research on "Clinical Correlations of Glioblastoma Genetic Subsets."

Tom Mikkelsen, MD, Senior Staff Director, Tumor Invasion and Molecular Therapeutics, Henry Ford Hospital, Detroit, for his research on "A Comparative Study of Image Analysis in Brain Tumor Clinical Trials."

Teleconference Series

The National Brain Tumor Foundation and Cancer Care, Inc., are sponsoring a three-part teleconference series for brain tumor patients, their families and friends. The first teleconference "Clinical Trials and Treatment Updates" will be presented by Terri Armstrong, RN, MS, neuro-oncology nurse practitioner and Mark Gilbert, MD, Co-Director of the Brain Tumor Center at Emory University Medical Center on October 22, 1997. For more information contact NBTf at (800) 934-2873 or Cancer Care at (800) 813-4673.

New Patient Guide

The National Brain Tumor Foundation has recently published a new 49-page pediatric brain tumor guide entitled "Understanding and Coping with Your Child's Brain Tumor." This new guide is free for patients and can be obtained by calling NBTf at (800) 934-CURE (2873).

Society for Neuro-Oncology

The Society for Neuro-Oncology is hosting its Second Annual Scientific Meeting, October 31 through November 2, 1997, in Charlottesville, Virginia. For more information contact Jan Esenwein by phone (713) 745-2344, by fax (713) 794-4999 or by e-mail at esen@audumla.mdacc.tme.edu.

American Brain Tumor Association

Lucien J. Rubenstein Memorial Awards

Two medical students were the most recent recipients of the American Brain Tumor Association/Lucien J. Rubenstein Memorial Award. University of Illinois student Paul Kim worked under the guidance of Joseph Moskal, PhD, at the Chicago Institute of Neurosurgery & Neuroresearch, on "Inhibition of Integrin-Mediated Glioma Invasion by Antisense B-1,2-N-acetyl-D-glucosaminyltransferase (GnT-I) Gene Transfection."

Thomas Beers, mentored by Bertrand Liang, MD, at the University of Colorado, earned the award for his work on "Cloning and Characterization of Mitochondrial Escape Genes in Human Gliomas."

The Association's Medical Student Summer Fellowship program is intended to plant the seeds of neuro-oncology interest in bright, motivated students early in their careers.

Young Investigator Award

At the April 1997 Meeting of the Joint Section on Tumors in Denver, Roberta Glick, MD, presented the American Brain Tumor Association Semi-Annual Young Investigator Award to N. Scott Litofsky, MD, of the University of Massachusetts Medical Center. Dr. Litofsky, Assistant Professor of Neurosurgery, was honored for his abstract "What Determines a Benign Glioma Phenotype?"

Basic Research Fellowships

The American Brain Tumor Association is committed to eliminating brain tumors by funding basic research. The ABTA Fellowships are \$50,000 awards, payable over two years. Applications are now available for the 1998-2000 awards. Qualified applicants are MDs within two years of residency completion or PhDs early in their careers. If you are interested in obtaining an application, contact the ABTA office at (847) 827-9910 or e-mail your application request to info@abta.org.

continued on page 5

Basic Research Fellowship recipients of the 1997–1999 awards are:

Richard Chung, MD, PhD
Massachusetts General Hospital
“Genetic Chemotherapy for Malignant Glioma”

Justin Hanes, PhD
Johns Hopkins University
“Intracranial Cytokine Delivery by Biodegradable Polymer Microspheres for Treatment of Brain Tumors”

Michael Parr, PhD
Dana-Farber Cancer Institute
“Targeted Gene Therapy in Gliomas Using an E2F-Responsive Adenoviral Vector”

Gordon Watson, MD, PhD
Bowman Gray School of Medicine
“Radiosensitization of Glial Tumors via Genetic Manipulation of hsRad51”

Howard Weiner, MD
New York University
“Role of DDR/CAK, A Novel Cell Adhesion Receptor Tyrosine Kinase, in Pediatric Brain Tumors and Normal Brain Development”

Radiation Therapy Oncology Group

The Radiation Therapy Oncology Group (RTOG) is a multi-centered collaborative effort which provides both resources and support for participating institutions. The neurosurgical section is committed to expanding its efforts in developing multi-center protocols. Protocols generally, but not necessarily, involve radiation therapy as an adjunctive treatment and can be directed toward primary and metastatic intracranial or spinal tumors. Any neurosurgeons interested in becoming more involved in this should contact:

Dennis Bullard, MD, Chairman
Neurosurgical Section, Radiation Therapy Oncology Group (RTOG)
Raleigh Neurosurgical Clinic, Inc.
3700 Barrett Drive
Raleigh, NC 27609
(919) 785-3400
(919) 783-7778 (fax)

Central Brain Tumor Registry

Summer Fellowship Announcement

The Central Brain Tumor Registry of the United States (CBTRUS) invites applications for a \$5,000 Summer Fellowship Award to study the epidemiology of brain tumors. Research may involve analysis of existing data or design of a pilot project to test new hypotheses. Applicants must be enrolled in a graduate level, post-doctoral or fellowship (MD) program. Work must be conducted in the United States under the direction of a sponsoring epidemiologist or neuroscience researcher. Preference will be given to students working with senior investigators who have publications and grants in brain tumor research. The Fellow is expected to produce a final report to CBTRUS by October 1, 1998. Any publications resulting from this work should contain an acknowledgment of CBTRUS support. The application deadline is January 15, 1998, with selection by April 1, 1998. The award is to be used in the three-month period from June 1, 1998 to August 31, 1998. Application forms may be obtained from CBTRUS at 3333 W. 47 Street, Chicago, IL 60632, by telephone at (630) 655-4786 or e-mail at cbtrus@aol.com.



TUMOR-RELATED HIGHLIGHTS OF THE CNS ANNUAL MEETING

New Orleans, Sept. 27 - Oct. 2

Practical Clinics

Saturday, Sept. 27 • Sunday, Sept. 28

001 Intracranial Microsurgical Anatomy

Course Director: Albert Rhoton

011 Cranial Navigation

Course Directors: Isabelle Germano, Barton L. Guthrie

015 Transsphenoidal Surgery

Course Directors: Warren Selman, Mary Louise Hlavin

016 Temporal Bone/Acoustic Surgery

Course Director: Steven Giannotta

030 Stereotactic Radiosurgery

Course Director: Douglas Kondziolka

035 Anterior Skull Base Operative Approaches

Course Directors: Harry R. Van Loveren, Jeffrey Keller

General Scientific Session I

Monday, Sept. 29, 7:30 a.m. - 12:00 noon

Controversies in Neurosurgery

Intracranial Metastatic Tumor Management:

The Case for Resective Surgery, Raymond Sawaya

The Case for Radiosurgery, Eben Alexander

Monday Luncheon Seminars

12:00 noon - 2:30 p.m.

101/102 Lateral Ventricular Tumors: Approaches and Pitfalls

Moderator: Albert Rhoton

Speakers: Jeffrey Bruce, Timothy George, Joseph Piepmeier

103/104 Tumors of the Posterior Skull Base and Tentorium

Moderator: Donald Wright

Speakers: Kevin Gibbons, Gregory Thompson, Jon Robertson

105/106 New Concepts in Cranial Stereotaxis

Moderator: Richard Bucholz

Speakers: Barton Guthrie, Gene Barnett, John Adler

107/108 Strategies in Genetic Treatment of Neurologic Diseases

Moderator: Robert Martuza

Speakers: Edward Oldfield, James Markert, Keith Black

109/110 How I Do It: Third Ventricular Tumors

Moderator: Michael Levy

Speaker: Ivan Ciric

119/120 Pineal Region Tumors: Approaches from Open to Endoscopic

Moderator: Leslie Sutton

Speakers: Alan Cohen, David Frim, Marion Walker, Jeffrey Bruce

125/126 How I Do It: Pediatric Brain Tumors

Moderator: Richard Ellenbogen

Speaker: R. Michael Scott

Joint Section on Tumors Session

Monday, Sept. 29, 2:30 - 5:30 p.m.

Contemporary Management of Cerebral Malignancies

Tuesday Luncheon Seminars

12:00 noon - 2:30 p.m.

201/202 Deep Seated Tumors of the Middle Fossa and Their Approaches

Moderator: Dennis Spencer

Speakers: Tae Sung Park, Harry Van Loveren, Prem Pillay

203/204 How I Do It: Meningioma

Moderator: Michael McDermott

Speaker: Peter McL. Black

205/206 Acoustic Tumors: From Radiosurgery to Microsurgery

Moderator: Steven Giannotta

Speakers: Robert Wilkins, Antonio De Salles, Howard Eisenberg

207/208 Cavernous Sinus Tumors: Indications and Outcome

Moderator: Vinko Dolenc

Speakers: Takanori Fukushima, Mitesh Shah, Gail Rosseau

209/210 Consultant's Corner: Management of Astrocytomas

Moderator: Michael Salzman

Speakers: Philip Gutin, Jeffrey Olsen, Emily Friedman

221/222 Management of Posterior Fossa Tumors

Moderator: James Rutka

Speakers: Corey Raffel, Bruce Kaufman, Liliana Goumnerova, Gary Simonds

Joint Section on Tumors Session

Tuesday, Sept. 30, 2:30 - 5:30 p.m.

Advances in Brain Tumors

Special Course II

Tuesday, Sept. 30, 2:30 - 5:30 p.m.

Extraordinary Care at the Extremes of Life - How Do You Decide?

Pediatric Malignant Tumors, Leland Albright

Adult Malignant Tumors, Edward Laws

General Scientific Session III

Wednesday, Oct. 1, 7:30 a.m. - 12:00 noon

Neurosurgery 2000

Malignant Gliomas: Past, Present, Future Strategies, Keith Black

Wednesday Luncheon Seminars

12:00 noon - 2:30 p.m.

301/302 Brain Metastasis: From Surgery to Radiosurgery

Moderator: Raymond Sawaya

Speakers: Henry Brem, Eben Alexander, Robert Coffey

303/304 How I Do It: Pituitary Tumors

Moderator: Mitchel Berger

Speaker: Edward Laws

305/306 Cranio-Orbital Surgery

Moderator: Donlin Long

Speakers: John Delashaw, Joseph Maroon, Linda Sternau

307/308 Approaches to Tumors of the Third Ventricle

Moderator: Joao Lobo Antunes

Speakers: John Stugar, N. Scott Litofsky, William Couldwell, Kevin Lillehei

309/310 Petroclival and Clival Tumors

Moderator: Donald Becker

Speakers: William Monacci, Christopher Getch

General Scientific Session IV

Thursday, Oct. 2, 7:30 a.m. - 12:00 noon

Controversies in Neurosurgery

Primary Brain Tumors

Moderator: Mitchel Berger

The Case for Resective Surgery, Joseph Piepmeier

The Case for Biopsy and Adjuvant Therapy, Daniel Silbergeld

Benign Tumors of the Cavernous Sinus

Moderator: Gail Rosseau

The Case for Radical Resection, Laligam Sekhar

The Case for Conservative Debulking/Adjuvant Therapy, Robert Ojemann

JOINT SECTION ON TUMORS AFTERNOON SESSIONS AT THE CNS ANNUAL MEETING

Monday, September 29, 1997

Contemporary Management of Cerebral Malignancies

- 2:30 - 2:45 PM Functional MRI, Optical Imaging, and PET in Management of Brain Tumors
John Mazziotta
- 2:45 - 3:00 PM Brain Tumor Vaccines: Promise and Pitfalls
Chris Wheeler
- 3:00 - 3:30 PM Open Papers
- 3:30 - 4:00 PM Coffee Break/Exhibits
- 4:00 - 5:30 PM Open Papers and Oral Posters

Tuesday, September 30, 1997

Advances in the Treatment of Brain Tumors

- 2:30 - 2:45 PM Gene Expression Profiling - Implications in Future Classifications of Brain Tumors
Stan Nelson
- 2:45 - 3:00 PM Using Molecular Classification of Brain Tumors to Guide Treatment
Timothy Cloughesy
- 3:00 - 3:30 PM Open Papers
- 3:30 - 4:00 PM Coffee Break/Exhibits
- 4:00 - 5:30 PM Open Papers and Oral Posters

JOINT SECTION COMMITTEE REPORTS

Bylaws Committee Report

Jack Rock, MD

The bylaws have been revised and updated. Copies will be submitted for the membership. There are no new issues to report.

Guidelines Task Force Report

Mark Rosenblum, MD

The Low-Grade Glioma Guidelines are currently under review. The final draft has been through the group as of July 1997.

Dr. Bernstein will update the committee on the current status.

Membership Committee Report

Michael McDermott, MD

All inquiries regarding Joint Tumor Section membership can be directed to:

UCSF-Neurosurgery
533 Parnassus Avenue, U-126
San Francisco, CA 94122-2722
Phone: (415)-476-5252
Fax: (415)-476-7965
Email: mcdermottm@neuro.ucsf.edu

Program Committee Report

Jack Rock, MD

Each Joint Section is provided with two afternoon sessions at the CNS Annual Meeting in New Orleans (see left). The Tumor Section will be focusing on "Contemporary Management of Cerebral Malignancies" on Monday. This session will highlight presentations by John Mazziotta, "Functional MRI, Optical Imaging, and PET in Management of Brain Tumors," and Chris Wheeler, "Brain Tumor Vaccines: Promise and Pitfalls." There will also be open papers and posters at this session.

The Joint Section's second session will be on Tuesday and is entitled, "Advances in Brain Tumors." This session focuses on the principles of cDNA microarrays and their use for gene expression profiling, and the implications of gene expression monitoring for diagnosis and management of brain tumors. Stan Nelson will discuss, "Gene Expression Profiling - Implication in Future Classification of Brain Tumors," and Timothy Cloughesy will present on "Using Molecular Classification of Brain Tumors to Guide Treatment." There will also be open papers and posters.

The Programs Committee is currently working on the Satellite Symposia, which will follow the AANS Annual Meeting in April, and the Section Program for the AANS Annual Meeting.

MINUTES OF THE EXECUTIVE COUNCIL MEETING

Joint Section on Tumors
April 14, 1997 ♦ Denver, Colorado

The Executive Council of the Joint Section on Tumors was called to order at 1:20 p.m. In attendance at the Meeting were Chairman Bill Chandler, Mark Bernstein, Eben Alexander, Mitch Berger, Peter Black, Bill Couldwell, Nick de Tribolet, Roberta Glick, Kevin Lillehei, Paul Kornblith, Tim Mapstone, Nelson Oyesiku, Jack Rock, Mark Rosenblum, Jim Rutka, Ray Sawaya, Mike Walker, and Ron Warnick. Regrets had been received from Drs. Kaye, Laws, Piepmeier, and Thomas.

Minutes

The minutes of the Executive Council Meeting held at the CNS Meeting in Montreal, Quebec on September 30, 1996, were accepted as written.

Treasurer's Report

The Section continues to be in stable financial condition with total assets of about \$179,000 as of December, 1996. Unfortunately, a detailed breakdown of the revenues and expenses associated with the Satellite Symposium in Montreal has not been received.

Awards Committee

The winner of the Mahaley Award at this Meeting is Dr. Douglas Kondziolka. The winner of the Preuss Award is Dr. Andrew Metzger. The Young Investigator Award was given to Dr. Scott Litofsky. The NBTf Grant was awarded to Dr. Roberta Glick. Dr. Chandler assigned various members of the Council to present the Awards.

Bylaws Committee

Dr. Rock has spoken to Dr. John Popp and Dr. Richard Jackson (AANS Bylaws Committee Chairman) and been informed that AANS Bylaws would cover all situations specific to the Joint Sections. The AANS should be notified of all changes in Committee Chairpersons and Officers.

Education Committee

Dr. Alexander updated the group that the project to get a listing of neuro-oncology references on CD-ROM was progressing slowly but that, in fact, putting this information on the Internet might be a preferable and more easily-updatable format.

International Committee

Dr. de Tribolet was in attendance but no specific report was submitted.

Membership Committee

Dr. Lillehei brought a list of six candidates for Active Membership, one for International Membership, and 14 for Resident Membership. The upturn of activity was felt in part to be due to the mailout

Dr. Lillehei sent to Program Chairmen and Residents and it is felt this should be done with some regularity.

Membership Services Committee

Dr. Rutka submitted a detailed list of services the Joint Section provided to its members including listing of officers, research awards, sources of research funding in neuro-oncology, fellowships in neuro-oncology, and meetings of interest.

Newsletter

Dr. Piepmeier was not in attendance but was thanked for the excellent job he has done over the last two years.

Nominating Committee

Dr. Black reported that the Nominating Committee had submitted the name of Joe Piepmeier as the next Secretary/Treasurer and Mark Bernstein as the next Chairman and the mail vote resulted in election by acclamation of these two candidates.

Program Committee

Dr. Berger was thanked for his efforts on the Program for the current Meeting. Keith Black is responsible for the Program at the CNS in 1997 and was not in attendance today and did not submit a report. Drs. Bernstein and Chandler will contact him to make sure everything is on track for the CNS Meeting in New Orleans. Dr. Lillehei has agreed to take care of the Program for the AANS '98 and Jack Rock for the CNS '98.

Research Committee

Dr. Glick reported that the simplest way to find brain tumor study protocols was on the Internet—at Physicians On Line Center Watch and the NIH Home Page. Dr. Warnick reported on the questionnaires on neuro-oncology research opportunities, which were mailed out to all North American neurosurgery residents and neurosurgery Program Directors. Response has been good but results will not be analyzed in detail until about 70 percent of Program Directors and 40 percent of residents have been heard from.

Task Forces

Guidelines

Drs. Rock and Bernstein updated the group on the progress with the low-grade glioma guidelines which they have been working on behalf of the Joint Tumor Section. After years of work, the report is in its final editing stages and will soon be ready for scrutiny by the Joint Tumor Section Executive Council and the appropriate bodies from the other organizations (i.e. AAN and ASTRO).

continued on page 11

APPLICATION FOR MEMBERSHIP



Joint Section on Tumors of The American Association of Neurological Surgeons and Congress of Neurological Surgeons



Name: _____

Home Address: _____

Home Phone Number: _____

Business Address: _____

Business Phone Number: _____

Fax Number: _____

E-mail: _____

I wish to apply for:

Active Membership International Membership Resident Membership*

*If applying for Resident Membership please have Program Director forward confirmation of your resident status.

Program: _____

Director: _____

Year of anticipated completion: _____

Are you a member of:

The American Association of Neurological Surgeons? Yes No

Active Active (Foreign) Active (Provisional) Associate

Candidate International Associate Honorary Lifetime

Congress of Neurological Surgeons? Yes No

Active Honorary International Resident Senior

Please list any membership in other Neurological Societies: _____

(continued)

APPLICATION FOR MEMBERSHIP

(continued)

Are you currently involved in active brain tumor research?

Clinical: Yes No

Basic: Yes No

Special areas of interest: _____

Suggestions on Section activities that would be of benefit to you: _____

Please send your complete application and curriculum vitae to:

**Michael W. McDermott, MD
University of California, San Francisco
533 Parnassus Ave., U-126
San Francisco, CA 94122-2722**

1998 CNS Satellite Symposium

At a Meeting yesterday, attended by Drs. Bernstein, Chandler, Laws, Lillehei, Rutka and Sawaya, plans for the 1998 Satellite Symposium after the AANS Meeting in Philadelphia were discussed. Dr. Rutka is the Scientific Program Chairman, and tentative topics include Epidemiology and Outcomes, Functional Mapping, and Molecular Neuro-Oncology. A local arrangements person in Philadelphia was suggested (Dr. D. Laske). The format will be similar to the Chicago and Montreal Symposia. Dr. Sawaya was again thanked for his excellent efforts with the Montreal Symposium.

Thieme Neuro-Oncology Book

Drs. Bernstein and Berger have been approached by Thieme to essentially co-edit a book on "Pearls of Neuro-Oncology", ie. a text with a lot of illustrations, line diagrams, and bulleted "pearls." Dr. Bernstein approached the group to see if there would be interest in such a book and in making it a project of the Joint Tumor Section (with an anticipated publication date of 1999). There was very positive feeling about this and Dr. Bernstein will take this forward to Ms. McCracken, the Project Editor, at a meeting planned for later this day. Drs. Bernstein and Berger will start on an outline and request input of ideas and manuscripts from members of the Joint Section in due course.

Glioma Outcomes Project

Drs. Laws, Rock, Walker and Bernstein have been to a meeting sponsored by Rhone-Poulenc Rorer, which has included other neuro-oncologists and an outcomes expert from the University of Massachusetts, about a project sponsored by RPR using an instrument for assessing outcomes in the care of patients with malignant gliomas. A draft of the instrument was circulated. It was noted that the brand name of "Gliadel" appeared in the questionnaire and this was felt to be unacceptable to the Executive Council Members but that if this were changed, then this project would be well worth pursuing and being endorsed by the Joint Section on Tumors. Dr. Bernstein will take this concern forward to Scott Brady, the RPR Manager in charge of this project.

AACR Meeting

Dr. Black briefly reported on the Joint AACR/Joint Tumor Section Conference to be held in San Diego the second week of June which looks like it will be an excellent Meeting.

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Public Pages have been made available to each Section on the NEUROSURGERY://ON-CALL® Web site. If anyone wishes to post something on our Section's public pages he/she simply needs to contact Jim Rutka at (416) 813-6425.

CPT Does

Dr. Laws had asked Dr. Bernstein to pursue the possibility of getting add-on CPT codes vis-a-vis implantation of Gliadel wafers and Dr. Couldwell was asked to look into this. There was general agreement that this should be pursued only if it is for generic implantation of a treatment, not specifically Gliadel. Dr. Couldwell will pursue this.

Young Neurosurgeons' Committee

Dr. Nelson Oyesiku announced that at tomorrow's Young Neurosurgeons' session he would arrange for one of the moderators, or perhaps the speaker, Dr. Laws, to announce the benefits of membership in the Joint Tumor Section. He was thanked for his efforts. Our Membership Committee Chairman, Dr. Lillehei will attempt to secure the requisite number of application forms by tomorrow.

Journal of Neuro-Oncology

Dr. Kornblith announced that the Society of Neuro-Oncology is definitely planning to proceed with its own journal to be edited by Darrell Bigner. This will put further pressure on the JNO which is, at present, quite expensive. Various strategies to help protect the JNO were discussed. One option is to increase the yearly JTS membership dues and make subscription to the JNO part of the membership package. However, it is estimated that a minority of Joint Tumor Section members currently subscribe to the JNO. Dr. Kornblith will formulate a questionnaire assessing the membership-at-large's views on this and then Dr. Bernstein will send this out to the membership.

Genetic Vector Registry

Dr. Timothy Ryken attended briefly and made a plea to develop a registry (probably on the Internet) of genetic vectors, of which there are a significant number which would not be widely known as they have not been published yet. He was given full endorsement by the Joint Tumor Section. He will send a letter requesting this information to Neurosurgery Program Chairs who will hopefully pass it on to the appropriate neurosurgeons.

Referral Guidelines

Dr. Herbert Oestreich from the Guidelines Committee of the AANS made an unannounced appearance to request representation from our Section to get involved in developing guidelines for patient referrals to neurosurgeons for primary care physicians and HMOs. This stems from a recent issuing of such guidelines in Florida by orthopedic surgeons suggesting that the only role for a neurosurgeon in spinal surgery is for biopsy or resection of the spinal cord. Drs. Bernstein, Couldwell, Rock and Rosenblum all volunteered but only Drs. Bernstein and Couldwell were definitely able to attend a Meeting of representatives of all Sections later this same day.

Thanks to Bill Chandler

Dr. Bernstein, on behalf of the entire Executive Council, thanked Bill Chandler for the excellent job he has done as Chairman of the Joint Section.

The Meeting adjourned at 3 p.m.

Respectfully submitted,

Mark Bernstein, MD, FRCSC
Past Secretary-Treasurer
Chairman
AANS/CNS Joint Section on Tumors

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