AMERICAN SOCIETY FOR PERIPHERAL NERVE

Newsletter



Spring 2010

President's Message

Dear Friends,

It is an honor to provide you with the "President's Message" for the latest version of the ASPN Newsletter. I appreciate the opportunity to be able to serve the society in this capacity and hope to help it flourish over the next year. The American Society for Peripheral Nerve was established on April 19, 1990 for the purpose of stimulating and encouraging clinical and basic science research in the field of neural regeneration and restorative neuroscience. The society was designed by our founding members to not simply be a group of plastic surgeons interested in peripheral nerve surgery, but instead as a collection of people with the common interest of advancing basic science and clinical investigations in this area. ASPN has grown from 21 founding members to over 200 people in 2010, including plastic and reconstructive surgeons, neurosurgeons, podiatrists, therapists, and basic and clinical scientists. The society has flourished under the guidance and leadership of our Past Presidents, which reads like a Who's Who in academic surgery including; Julia Terzis, A. Lee Dellon, Berish Strauch, H. Bruce Williams, Susan Mackinnon, Wyndell Merritt, Allen Van Beek, Saleh Shenaq, David Chiu, Nancy Mckee, William Kuzon, Keith Brandt, Steven McCabe, Maria Sieminow, Rajiv Midha, Greg Evans, Robert Russell, and Howard Clarke. Hopefully, we can continue to grow over the next 20 years.

Integration and Collaboration With Our Professional Partners:

ASPN originally held an independent meeting with a relatively small, but very interested and engaged group of attendees. The meeting was of



high quality with outstanding basic and clinical science presentations. However, it became difficult, even for our most committed members to be able to attend one additional meeting each year. Rather than experience a reduction in meeting attendance or even a potential decline in the quality of the meeting, the ASPN leadership chose to evolve and adapt to changing times and integrate our ASPN meeting with the existing American Association for Hand Surgery (AAHS)/American Society for Reconstructive Microsurgery (ASRM) Annual meetings. ASPN was fortunate to be able to join AAHS and ASRM to create one of the premier, comprehensive reconstructive meetings of the year, the AAHS/ASPN/ASRM Annual Scientific Meetings. In addition, ASPN was able to secure the highly desirable position in the middle of the other two meetings, to act as the glue holding the entire meeting together. It is quite clear that the ASPN has substantial scientific and clinical overlap with both AAHS and ASRM and as a result we have been perfectly positioned to provide an outstanding educational experience for those people attending this excellent reconstructive meeting. Over the past few years, our relationship with AAHS and ASRM has grown to produce a more cohesive and integrated educational opportunity for meeting

attendees where the leaders in the field of neural regeneration provide their cutting edge basic science research and clinical advances. This year, the AAHS/ASPN/ASRM Annual Meetings will be held from January 12 - 18, 2011 at the Ritz Carlton in beautiful Cancún, Mexico. Through the hard work of David Brown (2011 ASPN Program Chair), Jesse Jupiter (AAHS Program Chair) and Joan Lipa (ASRM Program Chair) and their program committees, the annual meeting will be even more integrated than in previous years with combined panels, scientific sessions, instructional courses and outstanding papers between AAHS and ASPN on January 14, 2010, as well as between ASRM and ASPN on January 16, 2010. On January 15, 2011, all three societies will combine their efforts for a wonderful program. We are delighted to be able to announce that this year's invited speaker for the Combined Day meeting will be Bob Woodruff, a person known to all of us, who can provide us with a firsthand account of the benefits of reconstructive surgery.

Partnerships

We are very pleased that our partnerships with ASRM and AAHS have been so productive for many years and continue to improve. I am also happy to say that our relationship with the leadership of the American Society of Plastic Surgeons (ASPS) and Plastic Surgery Education Foundation (PSEF) has never been stronger.

ASPN Representative to the ASPS/PSEF Board of Directors: We have been granted a Voting Seat on the ASPS/PSEF Board of Directors, a seat which is currently filled by Dr. William Zamboni. This has allowed us to be more integrally involved in the workings of the ASPS/PSEF and to ensure that our voice is heard. For a relatively small society, this has been very significant for us and greatly appreciated.

Combined ASPN and PSEF Research Grant: All of us actively participating in basic science and clinical research have seen a steady decline in research funding during the late 90's and early 00's, and the rapid increase in funding over the past 3 years. With nearly \$1,000,000 of annual research funding, the PSEF is truly helping to support a wide range of basic science and clinical investigations. As part of this diverse research portfolio, they have provided matching funds to ASPN. ASPN has been the one of the beneficiaries of this generosity through our combined grant with the PSEF. This year, as in the previous year, we will be able to fund a research project with a total budget of \$10,000 (\$5000 from ASPN and \$5000 from PSEF) rather than the \$5000 we were able to fund in the past. Our current ASPN funds will make it possible for us to potentially add another funded grant to our research portfolio.

Stephen Mathes Reconstructive Symposium: ASPN has been an active participant and joint sponsor of the Stephen Mathes Reconstructive Symposium, sharing our knowledge and expertise with an outstanding faculty for the educational benefit of the many appreciative symposium participants. The meeting has been outstanding and I am happy that we were able to contribute to that success. Keith Brandt is the ASPN Co-Chair for the meeting and will be assisted this year by Greg Evans and Kevin Chung, who will be giving talks and performing cadaver dissections.

Plastic Surgery Education Network: ASPN has joined ASPS in the development of the Plastic Surgery Education Network (PSEN), a media-rich, educational portal to provide our members with a powerful, current, and contemporary educational tool. This is a very important educational initiative for our students, residents, fellows, and practicing reconstructive surgeons and we are happy to be able to help. Loree Kalliainen, MD, has generously accepted our invitation to guide this very important educational initiative for ASPN.

Although we are a relatively small group, we have made a very big impact in the field of neuroscience and peripheral nerve regeneration. We are very excited about the new relationships we have developed and the old relationships which we have enhanced, to be able to provide the optimal educational and research experiences for our membership. I look forward to a year of collaboration, strength in integration, and a continued focus on advancement of the field of reconstructive peripheral nerve surgery. I welcome you all to the 2011 AAHS/ASPN/ASRM Meeting at the Ritz Carlton in Cancún, Mexico. It will be fantastic.

Paul S. Cederna, MD FACS President

From The Editor's Desk

Welcome to the spring edition of the newsletter. I apologize for the tardiness of this issue. The newsletter should reflect the activities and the wide scope of interests of the ASPN members. We still need more participation of the members in the newsletter. Don't be bashful; if you have won an award, if you have a new surgical technique, if you have a paper published and want to share the findings with the members, please send the information to be included in the newsletter. The Boca Raton meeting was an astounding success thanks to the leadership of our past president Howard Clarke and the excellent work of the program chair Martjin Malessy. Thank you both.

The Cancún meeting promises to be an outstanding one. The location is superb and the competition will be how to keep the members in the lectures halls rather than the beautiful beach. Hopefully we will get the information and the sun at the same time.

Thank you all for your continued help. A special thank you is extended to Michelle Michelotti from the ASPN office for her limitless help and support in producing the newsletter.

See you in Beautiful Cancún!

Nash Naam, MD Editor <u>drnaam@handdocs.com</u>



AAHS/ASPN/ASRM 2011 Annual Scientific Meetings

American Association for Hand Surgery January 12-15, 2011 American Society for Peripheral Nerve January 14-16, 2011 American Society for Reconstructive Microsurgery January 15-18, 2011

The Ritz-Carlton Cancun, Mexico



Join us in Cancún – January 12-18, 2011!

The AAHS, ASPN, and ASRM Annual Scientific Meetings will be held at the Ritz Carlton in Cancún, Mexico. Attendees will experience the tranquil spirit of elegance and enchantment that only the Ritz-Carlton can offer – an inspiring setting for this educational and networking opportunity.



Abstract Information

ASRM – online abstract submission deadline is July 1, 2010. AAHS/ASPN – online abstract submission deadline is July 16, 2010.

Submit your abstract materials at: AAHS/ASPSN/ASRM Abstracts Online Submission American Association for Hand Surgery 847-228-9276 800-333-8835 contact@handsurgery.org www.handsurgery.org

American Society for Peripheral Nerve 847-228-3370 800-333-8835 contact@peripheralnerve.org www.peripheralnerve.org

American Society for Reconstructive Microsurgery 312-456-9579 <u>contact@microsurg.org</u> www.microsurg.org

Invitation to the ASPN 2011 Meeting Cancún, Mexico

As Program Director, I am pleased to invite all ASPN members and guests to our annual meeting next January at the luxurious Ritz Carlton Hotel in Cancún, Mexico. Several highlights of the meeting currently being planned will make it an excellent destination and meeting agenda:

> • 3 day meeting span with more complete integration and overlap with both AAHS and ASRM



meeting agendas.

• Early meeting adjournment each day to allow for family and beach time in the afternoons.

Confirmation of Invited Primary Speaker Bob Woodruff. A highly acclaimed network reporter, Bob was injured when an IED exploded under his armored vehicle during an assignment in the Middle East when he was imbedded with US troops, reporting on the war. He sustained multiple injuries, and required significant reconstructive surgical procedures to restore his function and esthetics. He and his wife, Lee, have chronicled their trials and tribulations throughout this ordeal in a best-selling book, and will share with us their first-hand experiences with undergoing the types of reconstructions we provide to our patients daily.

• The typical high-quality programming, paper sessions, panels and instructional courses you have come to expect from the ASPN.

We look forward to your presence and participation in ASPN 2011!

David L. Brown, MD Program Director



NOW ACCEPTING ABSTRACTS 2011 Annual Scientific Meetings Cancún, Mexico

SUBMISSION DEADLINE: JULY 16, 2010

VISIT WWW.PERIPHERALNERVE.ORG TO SUBMIT YOUR ABSTRACT TODAY!!

DEADLINE FOR SUBMISSION IS **JULY 16, 2009**. PLEASE SPREAD THE WORD AND ENCOURAGE YOUR COLLEAGUES TO SUBMIT AN ABSTRACT

Report from the Program Chair of the 2010 Annual Meeting

In Summer of 2009, 90 papers were submitted, which set the start for the 2010 ASPN Annual meeting. The scientific committee judged each paper on its scientific originality and quality. Sixty-four papers were selected for a five minute podium presentation; two were qualified as outstanding and eighteen poster presentations were admitted. The usual format of past ASPN meetings was that papers concerning completely different topics were presented mixed and each presentation was followed by 1-2 minutes discussion.

For the 2010 meeting, a different format was chosen. Six scientific paper sessions were formed, each with a theme; papers covering similar topics were grouped in that thematic session. Each scientific paper session contained three blocks of 3-4 papers that were presented one after the other. Subsequently, these blocks were followed by ten minutes of discussion with the presenters. The discussion was moderated by experts in the field of the session theme. This meeting format appeared very rewarding. It not only facilitated those ASPN attendees with the attendees of ASRM or AAHS, to pick their field of interest, but also contributed to strong in-depth discussions. The role of the invited speakers (see below) as moderators was also new for the ASPN meeting and contributed significantly to lively discussions. Throughout the entire meeting, the number of attendees (in total 150) during the paper sessions was high, and surely more than usual. It is

only fair to say that the unusual cold Florida weather (wind, rain, +/- 30 degrees Fahrenheit) might also have contributed to the enthusiastic participation at the meeting. After all, golf trips were cancelled and sunbathing and swimming were not optional.

In view of the high scientific level; however, this cannot have been the only explanation for the high number of attendees. Two papers were selected for the outstanding podium presentation in the joint AAHS/ASPN/ASRM joint session. Marda Parkins, MD MS and Rahul Kasukurthi, BA, did an excellent job and ASPN can very be proud of their high quality contributions to the joint meeting.

The 2010 ASPN meeting theme was Regeneration. Three experts in the field from Europe were invited to share their knowledge with the ASPN attendees. Gennadij Raivich, MD DSc from London gave a beautiful survey covering the current knowledge concerning axonal regeneration. Joost Verhaagen, PhD from Amsterdam gave an excellent talk in which he showed how axonal regeneration can be stimulated with gene therapy, but also which hurdles still have to be overcome before clinical application of this promising technique becomes available. Finally, Giorgio Terenghi, PhD from Manchester gave a very nice overview of his approach to stimulate regeneration with artificial nerve tubes. It was a great bonus that all three invited speakers contributed as

moderators and actively participated in lively discussions.

At the 2010 meeting, the "Peanuts and Posters" presentation was reintroduced. This session was surely one of the pearls of the meeting. After a one minute introduction by the poster presenter, good in depth scientific discussions in an animated atmosphere were held. This session even showed that science and humor can walk hand in hand. Seven instructional courses were organized during the meeting all of high educational value. Summarizing it can be concluded that the ASPN 2010 meeting was well attended and served as a platform for interactive scientific exchange of knowledge. The new format worked out well and was truly appreciated. Last but not least, it was a great pleasure to meet so many friends, colleagues and new faces sharing the same passion for the peripheral nerve.

See you in Cancún!

Martijn Malessy, MD

Scientific Program Chair 2010

Past President's Report



The past year has proven both exciting and challenging for ASPN; exciting new developments and themes were presented at our Annual Meeting in Boca Raton; Challenges in coming to grips with a new administrative framework.

While the weather in January in Florida was not as warm as we might have liked, meeting old friends and sharing new ideas was as stimulating as always. Several new initiatives were tested at the 2010 meeting including guest speakers from a specific geographical region. Our intention in inviting Gennadij Raivich, MD, DSc; Joost Verhaagen, PhD: and Giorgio Terenghi, PhD was to encourage participation from our European colleagues and to bring us up to date on the status of nerve regeneration from a basic physiology and tissue engineering perspective. The combined AAHS/ASPN/ASRM presentation on health care in Haiti presented by Stephen Sullivan, MD and Evan Lyon, MD (Partners in Health)proved to be the best received event of the entire meeting and timely as given the earthquakes in Haiti. I am pleased to say that each of the societies made a donation on your behalf to Partners in Health.

In addition, Martijn Malessy, our Program Chairman, did a super job of arranging the free papers into thematically related groups to facilitate the discussions, which were very

On the administrative side, we now obtain our administrative support through the American Society of Plastic Surgeons. This has proven a difficult transition, largely because we had become so used to having our needs provided by individuals who had worked with us so for long. We have ironed out many of the bumps in the administrative process over the last year, and I remain confident that we will move forward in a more effective and productive fashion. animated. I would encourage future organizers to carry this arrangement forward in future meetings. Finally, the poster and beer session was a great success for all who attended It has been my very great pleasure to serve as President of this Society and I look forward to being able to assist in any way possible with the future growth and development of an organization devoted to a wonderful and varied group of individuals.

Howard M. Clarke, MD PhD FRCS (C) FACS FAAP

Professor of Surgery University of Toronto Hospital for Sick Children Toronto, Canada

Images from the 2010 meeting



Dr. Clarke, ASPN president, gives the presidential speech



Drs. Clarke and Malessy welcome one of the guests



Drs. Midha and Tung sharing in the fun



Bill Zamboni, MD President of ASRM and Bob Russell, MD our past president



Nash Naam, MD with Chris Novak, PT, CHT, PhD



Having fun at the outdoor reception with President Elect Paul Cederna



Outdoor reception



Presidents of AAHS, ASRM and ASPN



One of the interactive sessions of the meeting

ASPN 2011 Invited Speaker





Bob Woodruff joined ABC News in 1996 and has covered major stories throughout the country and around the world for the network. He was named co-anchor of ABC's *World News Tonight* in December 2005. On January 29, 2006, while reporting on U.S. and Iraqi security forces, Woodruff was seriously injured by a roadside bomb that struck his vehicle near Taji, Iraq. Woodruff is back at work reporting for ABC News shows on a variety of international and national stories with his "Bob Woodruff Reports" unit. He has continued to cover stories that focus attention on the needs of veterans from the Iraq and Afghanistan wars. He is also the anchor of a new weekly news program "Focus Earth with Bob Woodruff" which runs on the new Discovery Channel, Planet Green.

In February 2007, Woodruff and his wife Lee released *In an Instant: A Family's Journey of Love, Courage, and Healing*, their personal memoir about Woodruff's recovery after his attack in Iraq and the medical and family support that helped him heal.

In April 2008, Woodruff won a Peabody Award for Wounds of War -The Long Road Home for Our Nations Veterans, a series of reports that aired on ABC. He is also the recipient of the Daniel Pearl Award for Courage and Integrity in Journalism. He has received numerous awards and citations from organizations around the country for his work on behalf of the wounded veterans.

Previously the anchor of the weekend edition of *World News Tonight* and one of ABC News' top correspondents, Woodruff has covered major stories both in the United States and overseas. His reports from New Orleans in the aftermath of Hurricane Katrina helped focus the nation's attention on the building tragedy there. He was ABC's lead correspondent on the Asian Tsunami, reporting from Banda Aceh, Indonesia and Sri Lanka. Woodruff has covered the entire so-called "axis of evil," the nuclear showdown in Iran, and in June 2005 he got unprecedented access to the secretive country of North Korea. In the last presidential election he reported on the campaign of Senator John Edwards. He has also reported extensively on the continuing unrest in Iraq from Baghdad, Najaf, Nassariya and Basra. During the initial invasion, Woodruff reported from the front lines as an embedded journalist with the First Marine Division, 1st Light Armored Reconnaissance Battalion.

Before moving to New York in 2002, Woodruff worked out of ABC News' London Bureau. After the September 11 attacks, he was among the first Western reporters into Pakistan and was one of ABC's lead foreign correspondents during the war in Afghanistan, reporting from Kabul and Kandahar on the fall of the Taliban. His overseas reporting of the fallout from September 11 was part of ABC News' coverage recognized with the Alfred I. duPont Award and the George Foster Peabody Award, the two highest honors in broadcast journalism. He was also a part of the ABC News team recognized with an Alfred I. duPont award for live coverage of the death of Pope John Paul II and the election of Pope Benedict XVI.

Before becoming a journalist, Woodruff was an attorney. But in 1989, while teaching law in Beijing, he was hired by CBS News to work as a translator during the Tiananmen Square uprising and a short time later he changed careers. As ABC's Justice Department correspondent in Washington in the late 1990's, Woodruff covered the office of Attorney General Janet Reno, the FBI and ATF. In 1999, he reported from Belgrade and Kosovo during the NATO bombing of Yugoslavia. Since then he has reported extensively on Europe and the Middle East.

Prior to joining ABC News, Woodruff was a reporter for KCPM-TV, the NBC affiliate in Redding, California, from 1991-92; for the CBS affiliate WTVR-TV in Richmond, Virginia from 1992-94; and for KNXV-TV, the ABC affiliate in Phoenix, Arizona from 1994-96. He joined ABC News in 1996, based in the network's Chicago Bureau. Woodruff has a law degree from the University of Michigan Law School and a BA from Colgate University. He is married and has four children.

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Council Member-at-Large Martijn Malessy, MD <u>malessy@lumc.nl</u>

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ASPN 2010 New Members

<u>ACTIVE</u>

Antonio Merolli, MD Justin Brown, MD Roberto Martins, MD Linda Dvali, MD Robert R. Hagan, MD Riccardo Giunta, MD Ziv Peled, MD Raymond Tse, MD FRCSC Timothy Best, MD Michael L. Novikov, MD

CANDIDATE

Wilson Z. Ray, MD Christopher Williams, MD

ASPN Future Meetings

2011 Annual Meeting January 14 -16, 2011

Ritz Carlton Cancun Cancún, Mexico

2012 Annual Meeting

January 13 - 15, 2012 Red Rock Casino Resort Las Vegas, Nevada

2013 Annual Meeting January 11-13, 2013

Naples Grande Resort Naples, Florida

2014 Annual Meeting

January 10-12, 2014 Grand Hyatt Kauai, HI

The ASPN Council and 2009 Annual Meeting Program Committee would like to thank the following companies for their support and participation:

Accutome AM Surgical Angiotech Aptis Medical AREX USA Ascension Orthopedics ASPS ASSI- Accurate Surgical Auxilium Auxilium Auxilium Asogen Biomet Trauma Checkpoint Surgical, LLC Cook Medical Covidien Elsevier Hand Rehabilitation Foundation Hologic Integra Leica Microsystems Linear Medical Solutions Mayo Clinic-Muscular Education Medartis Medical Comminications Media ''CME Corner'' Medical Modeling Inc. Medlink USA, Inc. Meisner Gallary Micrins Microsurgery Instruments, Inc. MMI NeuroMetrix Novadaq Technologies Orthoscan OsteoMed Quality Medical Publishing RGP Dental, INC. Skeletal Dynamics Small Bone Innovations Spectros Corporation Stryker Stryker Surgical Acuity Synovis MCA Synovis Surgical Innnovations Synthes CMF Toby Orthopaedics, LLC TriMed, Inc ViOptix Wound Care Technologies, Inc.

How we touch our patients' lives

In the News:

Plastic surgeon **Ziv Peled**, **MD**, wrote *JMHPN* about a young male patient whom he saw in consultation at the request of orthopedist Eric Fulkerson, M.D. "This patient was helping his uncle on Christmas Eve by cutting a tarp, using a meat cleaver. He placed the cleaver blade side up near where he was subsequently hanging lights when he slipped, falling on the blade with his left foot. He suffered a near complete amputation of the foot with a cut coronally through the calcaneus and talus just proximal to the distal calcaneal edge and continuing nearly completely through to the dorsum.

Dr. Fulkerson took him to the OR for a debridement and placement of an external fixator. At that time, the posterior tibial vessels were ligated. He was subsequently taken to theOR for a second procedure in which the external fixator wasremoved, ORIF performed of the necessary bony structures, and multiple flexor tendons repaired. I was then asked to see him for possible nerve repair as he had cut all of the nerves providing sensation to the bottom of his foot, essentially rendering that foot useless unless sensation could be restored. I performed this repair with neurotubes to bridge the nerve gaps several days later and recently saw him in the office for his three month follow-up. He walks normally now, withoutany assistive devices. He already has protective sensation to the bottom of his foot and sensation is gradually returning overall. At just past three months, given the severity of his nerve injuries, he is ahead of schedule in terms of return of function and should continue to do well." Dr. Peled adds: "I think that this type of case illustrates the quality of doctors andnurses as well as staff (in general) at John Muir Health – and specifically the trauma teams."





Congratulations!!!

Dr. Gregory Borschel was awarded the C. James Carrico, MD FACS, Faculty Research Fellowship for the Study of Trauma and Critical Care by the American College of Surgeons.

<u>**Dr. Susan Mackinnon**</u>, our past president, was the invited science speaker at the 90th annual meeting of the American Association of Thoracic Surgeons. She discussed the research that facilitated the introduction of nerve transfer techniques







Sunday, May 23, 2010





ELLIS' LONG ISLANDER OF THE WEEK DR. KAVEH ALIZADEH

As president of the Long Island Plastic Surgical Group, Kaveh Aliza-deh is plenty busy. He oversees a five-office practice that handles everything from complex reconstructions to cosmetic touch-ups. But he's always made time for heart-wrenching pro-bono cases, often from the most desperate corners of the world. Afghan refugee camps, the Haitian earthquake, downtown Tehran. On Thursday, it was a curious 12-year-old boy from North Iraq who picked up an IED on a road and wondered what it was - until it blew up in his face. The boy lost an arm and an eye, and has severe scarring on his face and a badly mangled leg. Suddenly, all da bady mangled leg. Suddeniy, he's on his way to recovery. "Like all these efforts," Alizadeh said, "it required a number of people from all walks of life coming together. The solders in Iraq who knew about the boy. The Global Medical Relief Fund. The people at North Shore University Herpital who immediate University Hospital who immediately said 'yes.' The surgical team. And one charming, resourceful kid who was just a little too curious for his own good. He'll be OK now."

What's New in Peripheral Nerve Surgery and Research

OUTCOMES OF A MULTICENTER TRIAL OF DECOMPRESSION OF CHRONIC TIBIAL NERVE COMPRESSION IN DIABETICS WITH NEUROPATHY

A.LEE DELLON, MD, PhD,¹ VICKI L. MUSE, RN, BSN, CDE,² D. SCOTT NICKERSON, MD,³ et al⁴

¹Johns Hopkins University, ²Dellon Institute for Peripheral Nerve Surgery, ³ Northeast Wyoming Wound Clinic

NeuropathyRegistry.com

is a multicenter study to evaluate outcomes from surgical decompression of chronic compression of the tibial nerve and its branches at the ankle and foot in patients with neuropathy. 37 surgeons contribute to this registry.

INCLUSION CRITERIA:

1) Diabetic patients with symptomatic neuropathy who were in good glycemic control and had not responded to neuropathic pain medication.

- 2) There was sufficient blood supply (ABI ≥ 0.7)
- 3) There was no pedal edema.
- 4) Nerve compression was determined by the presence of a positive Tinel sign over the tibial nerve in the tarsal tunnel.
- 5) All surgeons used the same surgical technique to decompress the four medial ankle tunnels. *

POPULATION:

Study includes, as of July 1, 2007, 628 patients, of whom 211 had a second, contralateral, foot decompressed, for a total of 839 operations.

DATA ANALYSIS:

Kaplan-Meier proportional hazard analysis was applied to prospectively collected data. These data were reviewed retrospectively for this study.

CONCLUSIONS:

Decompression of the tibial nerve in patients with diabetic neuropathy, in whom tibial nerve compression is identified by the presence of a positive Tinel sign over the tibial nerve in the tarsal tunnel, results in 1) decreased pain, 2) increased sensation, 3) prevention of amputation, 4) prevention of ulceration in those patients with and without a history of previous ulceration, and 5) reduces hospitalization for treatment of foot infection.











