



# ISPN

INTERNATIONAL SOCIETY FOR  
PEDIATRIC NEUROSURGERY

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## **ISPN Executive Board Members 2016-2017**

### **Newsletter, February, 2017**

#### **Presidential address (William Harkness)**

Dear ISPN member

Well, the New Year has started as 2016 finished, with a great deal of turmoil in the World! However, in the world of the ISPN it is business as usual! We have had two very successful teaching courses since Kobe and now have a full schedule for 2017. This means we are now actively looking for sites for our courses in 2018 and so if you would like to have a teaching course in your country please contact our educational chairs Federico di Rocco and Sandeep Chatterjee without delay.

As you will hear in this Newsletter the plans for our Annual Meeting in Denver are well advanced and the abstract site will be opening very shortly. It's time to start getting those research projects completed and ready for submission. This year we will be focusing on Neurotrauma and Epilepsy as our major themes but there will also be a focus on Global Children's Neurosurgery so we welcome presentations from Low Income and Low Middle Income Countries. Please, please, please encourage your trainees to submit abstracts and also do everything you can to assist your nursing staff to join the meeting, encouraging them to start looking for financial support in good time. For those that will require visas then asking for letters of invitation early will, I hope, simplify matters.

Our website is due to be relaunched in the coming months and I hope that you will find the changes brought in by Adrian Cacaes, working with our PCO Kenes, exciting. As well as an updated visual format I hope that you will find it easier to use and that you will explore the new features. Through the membership links you we see that we have updated the options and our Nursing and Allied Health Professional category will be up and running and well as the Candidate membership for those in training. Send in your applications for new membership now so that the supporting references can be gathered in good time for the Denver meeting, where they will be approved.

It's a great time of year in our garden in England with trees budding and flowers poking out of the soil. Snowdrops have just appeared and in the next few weeks we will have daffodils and bluebells. It is a time to be full of optimism and I feel just as optimistic about the ISPN for the year ahead!!

Best wishes  
William Harkness

### **Secretary address (Gianpiero Tamburrini)**

The working year of the Executive Board has started actively, following the past two years decision to have online discussions and voting on matters which remains unsolved at the end of the Annual Meeting.

Following are reported the first 3 months of ISPN Executive Board activity approvals:

- 1) To assign a budget to the Scientific Committee for an amount of 10.000 USD per year to be spent for the organization of the Scientific programme of the following year, in particular for the involvement of allied professional guests.
- 2) To increase the Education Committee budget from 50000 USD per year to 75000 USD per year with the possibility to roll over any unspent money to the next year at the discretion of the President and Treasurer
- 3) A Nursing and Allied Health Professionals Committee, with a representative voting at the Executive Board, preliminarily approved during the ISPN meeting in Kobe, will have dedicated annual subscription fees, that namely will be of 75 USD , reduced to 35 USD for members of LMIC
- 4) A reshaping of the actual Society website is in its final steps. Proposals have been sent to renew the design and in particular the logo. The approved new logo is reported below.



- 5) The mechanism of active membership renewal has been improved. In fact it will be implemented an online subscription system that will allow all active members to opt for automatic renewal of their membership, through a selected online payment (e.g. allowed credit card, paypal etc.)
- 6) In order to promote the position of Candidate members it has been voted and approved that Candidate members from next year will have free subscription to the Society and free access to our journal (Child's Nervous System during the whole period allowed for their Candidate membership.
- 7) It will be offered to all Low Income Countries applicants (LIC) the option to pay the full annual subscription fee to contribute to ISPN's educational efforts'. Also it will be offered each ISPN member the option to sponsor another member from LIC which will be unnamed

## **Treasurer news:**

The Society is in sound financial shape. We are quite dependent on the Annual Meeting and I would like to congratulate Professor Mami Yamasaki for doing an excellent job of running a fiscally responsible Annual Meeting in Kobe. A number of financial items were discussed at the most recent Executive Committee meeting:

- ISPN funds have been in two banks and the executive Committee decided to consolidate our banking with Sterling National Bank.
- Our Education Committee has a very busy annual agenda and our Executive approved an increase in the budget for their activity.
- We support International Travelling fellowships and two were approved at the recent meeting.
- 9 Scholarships to attend the Annual Meeting were awarded for the Kobe meeting
  - There has been some confusion about the reimbursement for scholarship recipients. Some people expected to receive the funds on site (in Kobe). We don't have a mechanism for doing that. The scholarship funds are distributed via wire after the recipient has attended the meeting.

## **News from the Education Committee**

Federico Di Rocco, Lyon, France

Sandip Chatterjee, Kolkata, India

Following is the final report of 2016 concluded ISPN courses and the plan for courses during 2017  
2016 courses:

### **1. China**

July 2, Quanzhou

Local organizer: Dr Ma Jie

Topics: Malignant brain tumours

Sixty residents were selected from the various area of China. Twenty full trained neurosurgeons also attended this course.

### **2. Mexico**

July 7-9: Mexico

Local organizer: Tenoch Herrada and Jose Luiz Lozano

Topics: Spina bifida, Hydrocephalus, Posterior fossa tumors

### **3. Chile**

August 4-6, 2016

Local organizer: Dr. Sergio Valenzuela

Topic: Pediatric Neuro-oncology

Venue: Arseno Institute of Neurosurgery, Santiago, Chile

Around 100 attendants - mostly pediatric neurosurgeons, oncologists, pediatricians, more than 20 neurosurgery residents, nurses and others.

#### **4. India**

1-4 October 2016 with Indspn

Local organizer: Dr Venkata Ramana

Topics: Epilepsy, Vascular and Tethered Cord

In addition there were symposiums on Chiari malformation , Low grade glioma and Medulloblastoma

There were 139 participants . Residents were 39!, 40 were junior consultants and practising Neurosurgeons

#### **5. Thailand**

Oct 19-21, 2016.

Local organizer: Dr Siraruj Sakoolnamarka and Dr Sarun Nunta Aree

Topics : 1 congenital and development cranial and spinal disorders, 2. Neurooncology, 3 Pediatric Trauma, and emergency procedures.

60 peoples, many residents

#### **6. Myanmar**

5-6<sup>th</sup> November 2016

Local organizer: Pr Win Myaing

Topics : 1. Hydrocephalus, 2. Pediatric brain tumours (Special focus on craniophryangioma), 3. Pediatric head trauma, 4. Congenital anomalies

#### **7. Russia**

24-25 November 2016 with RSPN

Local organizer: Pr Serge Gorelyshev

Topics: acute hydrocephalus, trauma, hemorrhage, spina bifida, trauma, infection

#### ***2017 COURSES***

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1. March 30-31 April 1st, 2017 – Buenos Aires –  
Coordinator: Dr Graciela Zuccaro  
Istituto Raul Carrea  
Pediatric Neurooncology
2. May 12-14 – Shanghai–  
Coordinator: Dr Ma Jie  
Malformations (craniofacial, vascular, congenital...), midline tumors, spine
3. 7-11 June 2017 ; Combined ISPN-ESPN AfPNS course- Kwazulu-Natal  
Coordinator: Dr G Fieggen
4. August 10-12 2017 - Santaren, Brazil -  
Coordinator: Dr. Artur Da Cunha and Dr. Nelci Zanon, local co-ordinator: Dr. Erik Simoes.
5. September 7-10 2017, Malaysia  
Coordinator: Dr Azmin
6. Bielorussia ? To be confirmed

## News from the Liaison Committee

This year a number of colleagues expressed a keen desire to participate in the activities of the committee and given the increase in scope of these activities, we warmly welcome new committee members. These include Prof. Bengt Gustavsson from the Karolinska Institute in Sweden, Prof. Hakan Karabagli from Selcuk University, Konya, Prof. Kenichi Nyshiyama from the Brain Research Institute, University of Nigata, Prof. Peter Ssenyonga, Medical director at the Cure Children's Hospital of Uganda, Prof. Sergey Gorelyshev from the Burdenko Institute, Moscow. We hope to expand our reach and activities further this year.

In addition, we are delighted to be working in close liaison with the secretaries of the continental societies (Raji Mahmoud, secretary of CAANS, Javier Gonzales Ramos of FLANC, and our past president KC Wang as secretary of AASPN)

### **1. Support for GICS (Global Initiative for Children's Surgery)**

Children account for about 40 to 50% of the population in most LMIC, yet the surgical needs have not been clearly defined and there has not been a concerted action through existing initiatives in global health and in child health.

This initiative is driven by LMIC providers with the support of the RCS. Together, the group is developing priorities in training, infrastructure, service delivery and research.

Following an approach from GICS, ISPN has enthusiastically offered to participate through an executive decision by our immediate past president Graciela Zuccaro to provide financial support for a LMIC representative (Peter Ssenyonga from Uganda) to attend along with an ISPN representative (W. Harkness) to report to the executive board. This was enthusiastically led right from the outset by our now current president William Harkness, who attended both meetings through his own voluntary financial contribution . The GICS has had two meetings and a GAP analysis is in progress.



*GICS group photo at the Royal College of Surgeons. Our President William Harkness & Peter Ssenyonga seen at the top row,*



To achieve the President's objectives of GICS, the liaison committee will provide logistical support, including,

1. Development of an **International Survey** for evaluation of Infrastructure, Clinical Service Delivery and case mix, type of procedures performed, Education & Training and research in LMIC to support the President's goals for the GICS Project.
  2. **Collect and analyse LMIC data and provide results and analysis** to the President to report and make recommendations for paediatric neurosurgery at the GICS
  3. **Identify and support LMIC members** and welcome into the ISPN fold in every continent
  4. **Work to identify ways and means to bridge the gap** between needs and haves for clinical provision, training, infrastructure and research
- 2. ISPN Membership Drive,**
- a. Continental propagation of information about membership
  - b. Reduced fee for attendance to annual meetings, support for ISPN Courses, and propagation of the new executive decision to open the doors to member to sponsorship for LMIC ISPN annual registration
  - c. Support to identify ISPN invited speakers for national and regional meetings,
  - d. Liaise with paediatric units to collaborate in research, clinical trials, education
- 3. Global survey of paediatric unit facilities, with assessment of resources, manpower and extent of clinical practice**
- a. With the support of the paediatric committee of the WFNS, and continental societies (AANS, FLANC, CAANS, AASPN, ESPN), we aim to draw a world map of paediatric facilities and resources around the world.
  - b. Evaluate extent of facilities, manpower, availability of instruments, and allied specialities (oncology, radiation therapy, neurology, neurophysiology, maxilla-facial, plastics, spinal, vascular, pathology, etc)
  - c. Knowledge of facilities and resources in middle and upper income countries will help to make collaborative planning feasible between and within regions with LMIC for example.

*This important work is continuing.*

*The World Bank classifies countries into four income groups.*

	<i>GNI per capita Income in US\$</i>	<i>Number of States</i>	<i>Total LMIC &amp; HI</i>	<i>%</i>
<i>Low income countries</i>	<i>\$1025 or less.</i>	<i>31</i>		
<i>Lower middle income countries</i>	<i>\$1026 and \$4035.</i>	<i>52</i>		
<i>Upper middle income countries</i>	<i>\$4036 and \$12475.</i>	<i>55</i>	<i>138</i>	<i>63.6</i>
<i>High income countries</i>	<i>&gt; \$12476.</i>	<i>79</i>	<i>79</i>	<i>36.4</i>
<i>Total</i>			<i>217</i>	

*\*GNI= Gross National Income*

*\* While there are 195 countries the total of 217 reflects how the World Bank lists states and areas some of which are part of a country.*

*There are currently 138 countries listed as Low & Middle Income countries. A number of other factors play a significant role in considering the stage of development of a country including its size (small states), fragility and conflict situations(FCS), Highly Indebted Poor countries(HIPC), Least Developed Countries(LDC). Indeed, a total of 66 out of the 138 countries (47.8%) fall under one or more of these categories and these countries account for 30.4% of the world.*

	<i>Number States</i>	<i>of Total LMIC/World</i>	<i>%</i>
<i>Fragility and Conflict Situations (FCS)</i>	<i>35</i>		
<i>Highly Indebted Poor countries (HIPC)</i>	<i>39</i>		
<i>Least Developed Countries (LDC)</i>	<i>48</i>	<i>138</i>	<i>47.8</i>
<i>Individual Country (in one or more groups)</i>	<i>66</i>	<i>217</i>	<i>30.4</i>

**In the future, we hope to engage further with the FLANC (The Latin-American Federation of Neurosurgical Societies), with the Continental Association of African Neurosurgical Societies and the Asian-Australasian Congress of Neurosurgical societies to define better resources in each continent.**

#### **4. Guideline Task Group:**

- a. The Initial meeting of a task group to look at existing Guidelines and critically appraise them was held at Izmir and was followed by a presentation by Tony Figaji detailing intent in streamlining guidelines and making them relevant to geographical regions with limited facilities and resources as well.
- b. The committee hopes to look and evaluate the possibility of members setting up a group tasked with evaluating national and international guidelines and how best to homogenise these. Further details will become available later.
- c.

#### **4. Projects currently underway include the following:**

1. List of Liaison contacts to national, regional and continental neurosurgical societies in every continent.
2. Collaboration with SIOP (International Society of Paediatric Oncology) / SIOP-E Brain Tumour Group (BTG) and Collaboration with ISPNO
3. Survey of Global resources

#### **5. Invitation to participate:**

*The Liaison Committee would welcome more volunteers, to assist with its several activities and objectives. Please let us know if you are interested.*

#### **Continental Representatives:**

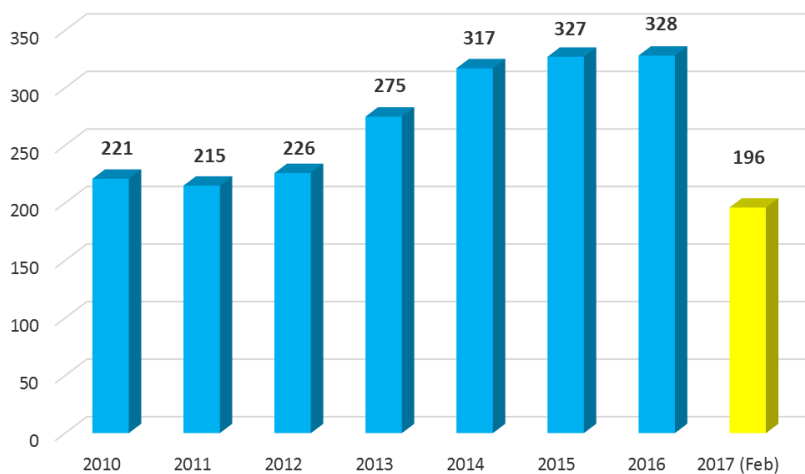
<i>Africa</i>	<i>Anthony Figaji</i>	<i>South Africa - Africa</i>
<i>Africa</i>	<i>Peter K Ssenyonga</i>	<i>Uganda - Africa</i>
<i>Africa</i>	<b><i>Raji Mahmoud</i></b>	<i>Nigeria- Secretary of CAANS</i>
<i>America Central</i>	<i>Adrian Caceres</i>	<i>Costa Rica – Central America</i>
<i>America Latin</i>	<i>Artur da Cunha</i>	<i>Brazil - Latin America</i>
<i>America Latin</i>	<i>Javier Gonzalez Ramos</i>	<i>Argentina - Secretary of Paediatric Chapter of FLANC</i>
<i>America North</i>	<b><i>Zulma Tovar Spinosa</i></b>	<i>USA – North America</i>
<i>Asia</i>	<i>Kenichi Nishiyama</i>	<i>Japan- Far East Asia</i>
<i>Asia</i>	<b><i>Kyu-Chang Wang</i></b>	<i>South Korea -Secretary of AASPN</i>
<i>Asia</i>	<i>Robert Chan</i>	<i>Taiwan – Far East Asia</i>
<i>Asia</i>	<i>Sandip Chaterjee</i>	<i>India - Asia</i>
<i>Australia</i>	<i>Charlie Theo</i>	<i>Australia - Australasia</i>
<i>Europe</i>	<i>Bengt Gustavsson</i>	<i>Sweden – Europe</i>
<i>Europe</i>	<i>Desiderio Rodrigues</i>	<i>UK- Europe</i>

<i>Europe</i>	<i>Matthieu Vinchon</i>	<i>France - Europe</i>
<i>Europe</i>	<i>Sergey Gorelyshev</i>	<i>Russia – Eurasia</i>
<i>Middle East</i>	<i>Hakan Karabagli</i>	<i>Turkey – Middle East</i>

## **News from the Membership Committee**

D.S. Kim, Seoul, Korea

Membership has had a strong start in 2017, with 196 members having renewed their membership and paid dues for 2017 already.



Over 51% of 2016 members have already settled their dues payments for 2017 and the call for dues process continues to encourage the remaining members to renew membership. In addition, members from previous years are encouraged to rejoin the society and 7 new membership applications have already been approved this year to date.

Membership continues to represent a cross section of the globe with members from 38 countries. Including 17 members from LMIC countries.

Country	members
<b>United States of America</b>	<b>56</b>
<b>Japan</b>	<b>24</b>
<b>Brazil</b>	<b>14</b>
<b>UK</b>	<b>9</b>
<b>India</b>	<b>8</b>
<b>Canada</b>	<b>8</b>
<b>South Korea</b>	<b>7</b>
<b>Argentina</b>	<b>6</b>
<b>Germany</b>	<b>5</b>
<b>Turkey</b>	<b>4</b>
<b>Egypt</b>	<b>4</b>
<b>Australia</b>	<b>4</b>
<b>China</b>	<b>3</b>

Country	members
<b>Israel</b>	<b>3</b>
<b>Chile</b>	<b>3</b>
<b>Indonesia</b>	<b>3</b>
<b>Mexico</b>	<b>2</b>
<b>The Netherlands</b>	<b>2</b>
<b>New Zealand</b>	<b>2</b>
<b>Finland</b>	<b>2</b>
<b>Russian Federation</b>	<b>2</b>
<b>Denmark</b>	<b>2</b>
<b>Saudi Arabia</b>	<b>2</b>
<b>Italy</b>	<b>2</b>
<b>Others (14)</b>	<b>19</b>



## Senior Members

It is also communicated the final approval of the following senior members: Dr. Thomas G. Luerssen, Dr. W. Jerry Oakes, and Dr. Juan Martinez-Lage, all fulfilling the required criteria.

## Membership Developments

Five membership developments have been proposed to and approved by the ISPN Board:

**1. Candidate membership rendered free of charge**

This category for, neurosurgeons in training or recently graduated, already exists, however this will now be zero charge, with online access to the journal only. A trainee declaration form will be requested from applicants for this category

**2. 2 new Nursing and Allied Health Professionals Categories will be added**

- Full fee 75 USD
- Reduced fee 35 USD for members of LMIC

Both categories will receive the online journal only, and supporting documents will be required from applicants

**3. Providing members with the option to sign up for automatic renewal by credit card**

Members will be able to sign up for automatic renewal, so they no longer have to remember to renew each year. A tick-box option for automatic renewal will be inserted in the application/renewal forms.

At the beginning of November each year, members selecting this option will receive an email informing them that their credit card will be charged, if no notification to cancel is received from the member, the payment will be processed and membership renewed.

In cases where credit card details have expired or are no longer valid, ISPN Membership will contact the member. For those renewals completed successfully, members receive an automated payment receipt and a thank you email.

Automated renewal will not be offered for Candidate members or any categories where membership status needs to be checked each year.

**4. Providing members from LMIC with the option to pay full price to support ISPN efforts**

A new category will be added to the application and renewal form, whereby members from LMIC will be able to select to pay the full fee in order to contribute to the societies activities.

**5. Giving members the option to sponsor another ISPN member in a developing country**

Once again an additional field will be added to the membership process, providing the option to add an anonymous membership donation of \$100. Each donation would be used directly to pay for membership of a new ISPN members in a LMIC

Members will receive an automated receipt and a thank you for their support.

In addition to the above, the membership committee continues to look for ways to drive membership growth and satisfaction, including sending a periodic (e.g. every 3 months) letter of satisfaction of their new membership as well as asking for suggestions about improvement of their position.

More detailed reports and updates will continue to be provided to the EB along with further recommendations for membership development

## **News from the Scientific Committee**

Anthony Figaji, Cape Town, South Africa

For 2017: To reconstitute the scientific committee with a new chair, vice chair and increased members of the committee to ensure geographic diversity. In so doing, we intend also to reduce the number of abstracts that each reviewer will have to handle in the tight window between the abstract submission deadline and the deadline for acceptance letters to be sent. This will also enable us to ensure that each abstract is reviewed by at least 3 reviewers. Because the meeting is in Denver we will temporarily expand the committee with several US-based reviewers.

The planned abstract timeline is as below:

Submission Deadline: 3 April, 2017  
Extended Deadline: 17 April, 2017  
Reviewing Process: 21 April – 2 May, 2017  
Tentative Scientific Program: 4 – 15 May, 2017  
Acceptance Letters: 22 May, 2017  
Registration Deadline: 2 June, 2017

Submission to CNS is usually around 30 June. The deadline will be confirmed later in April.

The Focus areas for the 2017 meeting are Epilepsy (because of the strength of the hosts and president) and Neurotrauma (the subject of the ChNS special annual issue). I am editing the annual issue and authors are currently working on their contributions. Neuro-oncology will be kept as a focus area because of the fast pace of research and innovation in this area.

Printed posters worked well in Kobe so we will continue this. Senior members of the ISPN engaged with poster presenters and the latter felt that attention was paid to their work. Given the number of abstracts received in Kobe (and hopefully for Denver also) we have an unprecedented number of abstracts being accepted – many of them excellent studies that simply cannot be included in the oral presentations because of time. In the past, electronic posters have been lost on the broader audience, so we are making a concerted effort to give them due attention. For Denver, Mike Handler has a great space for posters so all that is for us to do is to ensure that our senior members remain committed to engaging with the poster presentations.

We will continue the ideas that worked well in Kobe. For the Clash of the Titans we are considering a session on programmable shunts. If you have any ideas of suggested speakers or other topics, let us know. The wrap up sessions worked well and we will be prevailing on the senior members of the community to perform this function for sessions throughout the meeting. In Kobe we trialled the idea of inviting a very senior member of the community (in that case Jim Rutka) who has not held a

senior office in the ISPN/ESPN as a way of honouring their contributions to the ISPN and broader pediatric neurosurgery communities over many years. We will continue this for 2017 and 2018.

Finally, we are looking at options for automated response systems (ARS) for voting at the meeting, preferably via individual cellphones. If this works we may be able to enhance the interactive nature of some of our sessions and it may be of use for the business meeting.

Francesco and I aim to meet with the conference chair, president and president-elect at least once face to face before the meeting, and we will also meet via online conference calls.

## **News from the Annual Meeting Chair**

Michael Handler, Denver Colorado

We are working diligently to prepare for the Annual Meeting, which will be held in Denver, USA on October 8-12, 2017. Special topics for the meeting will include Epilepsy Surgery, Neuro-Oncology, and Neurotrauma/critical care. We will have a special epilepsy surgery symposium on Saturday and Sunday the 7<sup>th</sup> and 8<sup>th</sup>, and a nursing symposium on Sunday the 8<sup>th</sup>. I would like to reiterate that the city of Denver is a welcoming, safe and vibrant place, with a diverse international population. It has a lively, large and walkable downtown. It was voted the “best city to live in” this year, by *U.S. News & World Report*. Many of Denver’s best restaurants and attractions, including world class museums and the performing arts complex, can be reached on foot from the hotel. Colorado is one of the most beautiful places in the USA and is home to some of the most famous national parks, and this is one of the best times of year to visit Colorado and take advantage of the beauty of the state.

Recent events in the US may make it more cumbersome to enter the country for some. I will happily work with any of you to support applications to enter the US to attend the meeting. We will spare no effort to make your visit to Colorado an unforgettable one and invite you to join us in a program that will further all of our efforts to better the care we give to our young patients.