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News for members of the Western Neurosurgical Society

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The Western Neurosurgical Society

Spring newsletter

2021



Hyatt Regency Tamaya Resort and Spa Albuquerque, New Mexico

September 10-13, 2021

Dear WNS Members, Applicants and Guests:

Well folks, God was willing and the creek didn't rise, so we will have a physical in-person meeting of the Western in New Mexico in 2021. As the above picture suggests, we won't be in a metropolis like we were in 2019 but rather out a ways.

The Tamaya resort is 31.5 miles north of the Albuquerque airport on an ancient pueblo and travel to the resort is by rental car, Uber/Lyft (\$28-35) or Taxi (\$55) or limousine service (\$89; 1 888 644-4514). Self parking is free; valet is \$18 + tax/night; all parking is outside.

Our standard room rate is a friendly \$269/night for a 377 sq. ft. room with a patio or balcony with free wi-fi and a fridge. One or two kids can stay in room with you for \$294 and \$319 respectively (rollaway \$25/night in King/bedrooms only). One bedroom Executive suites (754sf) available for \$519 (plus \$25/night for each kid) and can accommodate 2 kids on a pull out sofa/bed or add a rollaway. All rooms are subject to a 14.875% local taxes fee. We have arranged for no resort fee.

Copy and paste the URL below into your browser to access the Tamaya room reservation process for our meeting.

https://www.hyatt.com/en-US/group-booking/TAMAY/G-WENN

Afternoon activities will be sightseeing, on-site tethered hot air ballooning, guided Hikes and biking with geologists and archaeologists, High altitude tram ride, Santa Fe and Albuquerque old town visits, Native American cultural visits, River meanders with Native American guide and chef, Horse riding and the usual Golf, Tennis and Swimming. Our Saturday night casual dinner may be at the Balloon Museum in Albuquerque (picture below).

The resort has a Camp Hyatt for kids aged 3 (if potty trained) to 12 with activities varying from arts and crafts to scavenger hunts, pool time, cultural activities, etc. Prices: Morning Session 9am - 12pm \$55; Morning

Session with Lunch 9am - 1pm \$65; Afternoon Session 1pm - 4pm \$55; Afternoon Session with Lunch 12pm - 4pm \$65; All Day Session with Lunch 9am - 4pm \$90; Evening Session with Dinner 5pm - 9pm \$65. A 10% gratuity is added to each session.

It will be great to see old friends in September after Zoom meetings for most of 2020. With vaccines being available to every one 12 and older now, we can enjoy a real Western meeting in September. We will be posting the meeting registration form shortly and will alert you all to that in another newsletter.

We don't believe there is an emoji for "at long last!".

Marco Lee, MD PhD Secretary/Treasurer



Call for Papers

We are happy to announce the first call for abstracts of papers to be presented at the Annual Meeting in New Mexico in September.

We are getting a late start for this call because of the shifting meeting limitations as the COVID pandemic winds down. We expect pretty much of a usual format of 12-15 minute presentations to a live audience in a convenient resort ballroom.

The instructions for submitting an abstract and the actual abstract submission forms are posted on the Western Website (westnsurg.org) in the Forms and Abstract Information menu item on the home page.

Deadline for abstract submission: July 1st.

As is our custom, two resident awards (clinical and basic science) will be given for the best papers presented by those in neurosurgery training programs in our catchment area states. Both awards include roundtrip travel for the winners and a guest, complimentary meeting registration for both and a complimentary room at the resort for 3 nights.

It is time to get it on at long last!

One of our own got severe COVID and survived!

Like a lot of us, I suspect, I was hoping that since there are so few neurosurgeons as compared to the population in general, no neurosurgeon I know would get a real case of COVID-19.

Well, the second shoe dropped when Jay Levy from Napa let us know about his saga with the virus plus a bout of Guillain-Barre. Here is his story:

Jay Levy here.

I had Covid, and because it was complicated by a neurological disease I'll tell the whole long story for the interest of CANS members.

I'm 86 years old, in good health, and did not retire from neurosurgery until I was 81 years old. I did my last surgery working as a locum's in North Dakota and retired in 2017 just before my house and property burned in the wild fire.

I'm now 86, and considered myself to be in fine health before any symptoms began.

On September 11 I had my annual influenza vaccination.

Two weeks later I began to notice weakness in my hamstrings and quadriceps on both sides.

The last week in September I had to walk off the golf course in the middle of a round because my legs were weak and I simply couldn't hit the ball.

In July 2019 I had a decompressive laminectomy at L3 for spinal stenosis with symptoms that were mostly weakness of the L4 and L5 innervated leg muscles and little of the usual pain.

For this reason I contacted my surgeon and a lumbar MRI was done the following week with no evidence of recurrent stenosis.

This was during the Covid epidemic and no one had seen me to examine me.

The second week of October I saw my family practitioner and we decided that I could very well have Guillain Barre syndrome with symptoms of ascending weakness with minimal sensory loss.

An EMG was scheduled for the next week for 21 October.

At that time I could still ambulate and could climb two flights of stairs but with severe muscle fatigue

On Sunday the 18th I happen to use my pulse oximeter and it read 90 instead of the usual 97.

As usually happens when physicians are trying to treat themselves I thought this was a mechanical failure and not pertinent.

Monday I was confused and Tuesday I really could not think straight, but with no fever, no pulmonary symptoms of any sort and on Wednesday the 21st the day my EMG had been scheduled I had to go to the hospital for confusion and increasing weakness.

When they examined my lungs prior to admission there were abnormal findings and I was taken to the emergency room for a chest x-ray which revealed a Covid type pneumonia.

I saw this x-ray and it looked pretty serious to me.

That is the last thing I remember the five weeks.

Because I had Covid the thought of Guillain Barre was ignored and I was sent home.

By the time I got home, a 15 minute ride, I was unable to walk and it was necessary to get help and carry me into my home in a chair.

An ambulance was called and I was returned to the hospital and placed in ICU.

During five weeks in the acute-care hospital including ICU time, I was intubated for a week and subsequently had a tracheostomy placed.

It's difficult to say how much Covid symptoms were involved in my treatment but clearly the tracheostomy was required because of ascending paralysis.

I did have the usual prescribed treatment for Guillain Barre.

The first memory I have after seeing my chest x-ray on 21 October was being wheeled into the acute rehabilitation units on the last day of November.

At that time I had marked atrophy of my hand muscles but had recovered reasonable strength in my upper extremities and the tracheostomy had been removed.

At that time, however, I was unable to move my lower extremities.

I was in the hospital rehabilitation for a month, and then skilled nursing rehabilitation for two months

Now, with April Fools Day approaching, over five months after Guillain Barre onset, and over four months after exacerbation by Covid I have had gradual improvement every day and am now able to ambulate short distances with ski poles.

My grip strength is now 91 pounds, up from 51 pounds when I first left the acute hospital and though I sometimes use a wheelchair or a walker I am totally independent in all of my dressing and bathroom needs.

I intend to recover and go back to the golf course, but will just have to be patient and see how long that takes.

A friend of mine from Arkansas told me he knew I would get well because he described me as being "tough as woodpecker lips".

I offer this long story because the rapid exacerbation of my weakness related to the onset of the Covid virus infection might be of interest to neurological surgeons.

Also, my ultimate good recovery, particularly at my age, is encouraging.

Jay Levy

Jay's long suffering wife Jodi had a miserable 5 months as one might imagine and was unable to visit Jay or even communicate with him during his extensive ICU stay. She was alone at their home for 4 months but like most neurosurgeon's wives, she toughed it out and kept the home fires burning until her man came home.

Member Candidates

The 2021 WNS meeting is on and will be in person! After a year plus of lockdowns and zooming, I am looking forward to this meeting and seeing all of you in person. I hope you feel the same way and will join us in New Mexico on September 10-13. You can reserve a room at the hotel now via the link noted above.

Registration for the meeting instructions will be in forthcoming and you will be able to register as a guest. Feel free to list me as your inviter.

All information regarding membership can be found on our website (www.westnsurg.org) and feel free to email me with any questions (jdye@llu.edu).

For our current members.

Please consider contributing to the strength and diversity of our society by forwarding one or two names of colleagues who you think would be a good fit for the Western. You can email me your suggestions directly at jdye@llu.edu.

Thank you and I look forward to seeing all of you at this year's meeting!

Justin Dye

Chairman, Membership Committee

WNS Members in Print (Journals followed: AANS journals, CNS journals, Spine, SNI)

JNS-Peds January 2021

Richard G. Ellenbogen Expansile duraplasty and obex exploration compared with bone-only decompression for Chiari malformation type I in children: retrospective review of outcomes and complications

JNS-Peds March 2021

Jason S. Hauptman Predictors of fast and ultrafast shunt failure in pediatric hydrocephalus: a Hydrocephalus Clinical Research Network study

JNS-January 2021

Gary K. Steinberg Pregnancy after direct cerebral bypass for moyamoya disease

JNS-March 2021

Andrew S. Little Preoperative embolization versus no embolization for WHO grade I intracranial meningioma: a retrospective matched cohort study

Michael W. McDermott Hyperostosing sphenoid wing meningiomas: surgical outcomes and strategy for bone resection and multidisciplinary orbital reconstruction **Andrew S. Little** Early postoperative MRI and detection of residual adenoma after

transsphenoidal pituitary surgery

Frank P. K. Hsu Endoscopic versus nonendoscopic surgery for resection of pituitary adenomas: a national database study

Andrew S. Little The endoscopic endonasal eustachian tube anterolateral mobilization strategy: minimizing the cost of the extreme-medial approach **Martin H. Weiss** Letter to the Editor. Gamma Knife radiosurgery for Cushing's disease after prior resection

JNS April 2021

Michael T. Lawton Clip retraction of the tentorium: application of a novel technique for tentorial retraction during supracerebellar transtentorial approaches **Sharona Ben-Haim** Pregnancy and parental leave among neurosurgeons and neurosurgical trainees

JNS-May 2021

Linda M Liau, MD, PhD Developing a Professionalism and Harassment Policy for Organized Neurosurgery

Mitchel S. Berger and Michael W. McDermott A Safe Transitions Pathway for postcraniotomy neurological surgery patients: high-value care that bypasses the intensive care unit

Gary K. Steinberg Direct versus indirect bypass procedure for the treatment of ischemic moyamoya disease: results of an individualized selection strategy

JNS-June 2021

Mitchel S. Berger Triple motor mapping: transcranial, bipolar, and monopolar mapping for supratentorial glioma resection adjacent to motor pathways

Michael T. Lawton Contralateral interoptic approach to paraclinoid aneurysms: a patient-selection algorithm based on anatomical investigation and clinical validation

Michael T. Lawton The middle communicating artery: a novel fourth-generation bypass for revascularizing trapped middle cerebral artery bifurcation aneurysms in 2 cases

Gary K. Steinberg Treatment of posterior circulation fusiform aneurysms **Gerald A. Grant** Long-term follow-up of neurosurgical outcomes for adult patients in Uganda with traumatic brain injury

JNS-Spine January 2021

Praveen V. Mummaneni, Mitchel S. Berger Consensus-based perioperative protocols during the COVID-19 pandemic

JNS-Spine February 2021

Praveen V. Mummaneni Is the Goutallier grade of multifidus fat infiltration associated with adjacent-segment degeneration after lumbar spinal fusion?

JNS-Spine March 2021

Praveen V. Mummaneni The impact of increasing interbody fusion levels at the fractional curve on lordosis, curve correction, and complications in adult patients with scoliosis

Praveen V. Mummaneni Long-term radiographic outcomes of expandable versus static cages in transforaminal lumbar interbody fusion

JNS-Spine May 2021

Jay D. Turner Impact of dual-headed pedicle screws on the biomechanics of

lumbosacral junction multirod constructs

Praveen V. Mummaneni The minimally invasive interbody selection algorithm for spinal deformity

Praveen V. Mummaneni Impact of surgeon and hospital factors on surgical decision-making for grade 1 degenerative lumbar spondylolisthesis: a Quality Outcomes Database analysis

JNS-Spine June 2021

Laura A. Snyder, Volker K. H. Sonntag, Jay D. Turner Perioperative and swallowing outcomes in patients undergoing 4- and 5-level anterior cervical discectomy and fusion

Jay D. Turner Coronal balance with circumferential minimally invasive spinal deformity surgery for the treatment of degenerative scoliosis: are we leaning in the right direction?

Neurosurgical Focus January 2021

J. Patrick Johnson Video-assisted thoracoscopic image-guided spine surgery: evolution of 19 years of experience, from endoscopy to fully integrated 3D navigation

Neurosurgical Focus March 2021

Linda M. Liau Neurosurgeons in 2020: the impact of gender on neurosurgical training, family planning, and workplace culture **Sharona Ben-Haim** History of Women in Neurosurgery (WINS)

Neurosurgical Focus April 2021

Jason S. Hauptman Hydrocephalus treatment in patients with craniosynostosis: an analysis from the Hydrocephalus Clinical Research Network prospective registry Richard G. Ellenbogen, Gerald A. Grant, Nathan R. Selden Dural augmentation approaches and complication rates after posterior fossa decompression for Chiari I malformation and syringomyelia: a Park-Reeves Syringomyelia Research Consortium study

Neurosurgical Focus May 2021

Praveen V. Mummaneni

An analysis of tumor-related potential spinal column instability (Spine Instability Neoplastic Scores 7–12) eventually requiring surgery with a 1-year follow-up

Neurosurgery January 2021

Philipp Taussky, MD Endovascular Thrombectomy for Pediatric Acute Ischemic Stroke: A Multi-Institutional Experience of Technical and Clinical Outcomes Gary K Steinberg, MD, PhD Incidental De Novo Cerebral Microhemorrhages are Predictive of Future Symptomatic Macrohemorrhages After Surgical

Revascularization in Moyamoya Disease

Melanie Hayden Gephart, MD Commentary: Predicting Postoperative Outcomes in Brain Tumor Patients With a 5-Factor Modified Frailty Index

Michael W McDermott, MD A Prognostic Gene-Expression Signature and Risk Score for Meningioma Recurrence After Resection

Anand Veeravagu, MD, John Ratliff, MD Commentary: The Enforceability of Noncompete Clauses in the Medical Profession: A Review by the Workforce Committee and the Medico-legal Committee of the Council of State Neurosurgical Societies

Neurosurgery February 2021

Richard G Ellenbogen, MD, Gerald A Grant, MD, Nathan R Selden, MD, PhD
Occipital-Cervical Fusion and Ventral Decompression in the Surgical Management of
Chiari-1 Malformation and Syringomyelia: Analysis of Data From the Park-Reeves
Syringomyelia Research Consortium

Neurosurgery March 2021

Sharona Ben-Haim, **MD** Congress of Neurological Surgeons Systematic Review and Evidence-Based Guideline on Neuroablative Procedures for Patients With Cancer Pain

Lee A Tan, MD Commentary: Failure Types and Related Factors of Spinopelvic Fixation After Long Construct Fusion for Adult Spinal Deformity

Neurosurgery April 2021

Nader Pouratian, MD, PhD Congress of Neurological Surgeons Systematic Review and Evidence-Based Guidelines for Deep Brain Stimulations for Obsessive-Compulsive Disorder: Update of the 2014 Guidelines

Mitchel S Berger, MD Functional Outcomes and Health-Related Quality of Life Following Glioma Surgery

John R Adler, MD The Zap-X Radiosurgical System in the Treatment of Intracranial Tumors: A Technical Case Report

Mitchel S Berger, **MD** Letter: The European and North American Consortium and Registry for Intraoperative Stimulation Mapping: Framework for a Transatlantic Collaborative Research Initiative

Neurosurgery May 2021

Lee A Tan, MD Cerebrospinal Fluid-Venous Fistulas: A Systematic Review and Examination of Individual Patient Data

Steven Giannotta, MD Stereotactic Radiosurgery for Atypical (World Health Organization II) and Anaplastic (World Health Organization III) Meningiomas: Results From a Multicenter, International Cohort Study

Michael T Lawton, MD Spetzler-Martin Grade III Arteriovenous Malformations: A Multicenter Propensity-Adjusted Analysis of the Effects of Preoperative Embolization Nader Pouratian, MD, PhD Electrocorticography During Deep Brain Stimulation Surgery: Safety Experience From 4 Centers Within the National Institute of Neurological Disorders and Stroke Research Opportunities in Human Consortium Linda Liau, MD, PhD Developing a Professionalism and Harassment Policy for Organized Neurosurgery

Neurosurgery June 2021

Mitchel S Berger, MD The Relationship Between Stimulation Current and Functional Site Localization During Brain Mapping

Praveen V Mummaneni, MD, Lee A Tan, MD Smoking Is an Independent Risk Factor for 90-Day Readmission and Reoperation Following Posterior Cervical Decompression and Fusion

Michael T Lawton, MD Spetzler-Martin Grade III Arteriovenous Malformations: A Comparison of Modified and Supplemented Spetzler-Martin Grading Systems

Lee A Tan, MD Commentary: Baseline Frailty Status Influences Recovery Patterns and Outcomes Following Alignment Correction of Cervical Deformity

Michael T Lawton, MD Propensity-Adjusted Comparative Analysis of Radial Versus Femoral Access for Neurointerventional Treatments

John R Adler, MD In Reply: The Zap-X Radiosurgical System in the Treatment of Intracranial Tumors: A Technical Case Report

The Spine Journal August 2020

Anand Veeravagu, John K. Ratliff A predictive-modeling based screening tool for prolonged opioid use after surgical management of low back and lower extremity pain

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