

David O. Warner, M.D., Editor

Society of Neurosurgical Anesthesia and Critical Care Scientific Meeting. Las Vegas, Nevada, October 22, 2004.

This year, the Annual Meeting of the Society of Neurosurgical Anesthesia and Critical Care (SNACC) was held at the Flamingo Las Vegas Hotel (Las Vegas, Nevada), on Friday October 22, 2004. The meeting was attended by 219 SNACC members. During the premeeting Dinner Symposium on Thursday, October 21, Mervyn Maze, M.B. (Professor and Chair, Anesthetics and Intensive Care, Imperial College, London, United Kingdom), presented a lecture on the molecular mechanisms and neural substrates for the sedative and analgesic action of dexmedetomidine. Robert N. Sladen, M.B. (Professor and Vice Chair, Department of Anesthesiology, Columbia University, New York, New York), discussed clinical applications of dexmedetomidine, in particular for sedation of critically ill patients in the intensive care unit. The Dinner Symposium was supported by an unrestricted educational grant from Hospira, Lake Forest, Illinois

The program on Friday, October 22 covered a wide variety of topics, from new developments and ethical issues in stem cell research to the latest results of a large multi-center clinical neuroanesthesia trial, thereby again addressing the value of this Annual Meeting for all interested in neuroanesthesia and related research.

Basic Science Keynote Lectures

After a brief welcome address by the SNACC President Dr. Piyush Patel, M.D. (Professor, Anesthesia Services, VA Medical Center, San Diego, California), Evan Snyder, M.D., Ph.D. (Professor and Director of the Stem Cells and Regeneration Program of the Burnham Institute, La Jolla, California), gave an excellent lecture on the biology of stem cells, the various types of stem cells currently under study, and possible clinical applications. He showed that neuronal stem cells can migrate over large distances to areas of injured brain tissue, where their main role is to "orchestrate repair" rather than simply replacing the dead cells and differentiating into neurons. By acting as "homing" factors, chemokines probably play a large role in directing stem cells to the area of injury.

Patricia Churchland, B.Phil. (Chair, Department of Philosophy, University of California San Diego, San Diego, California), gave a historical and ethical overview in her lecture titled "Science, Religion & Stem Cells." She discussed the several slippery slope scenarios that over centuries have been put forward to ban new developments such as sanitation, vaccination, the end of slavery, or voting rights for women. As intended, her lecture sparked a lively debate, in which some SNACC members fully agreed with her points whereas others accused her presentation as being one-sided in favor of stem cell research. Dr. Churchland also addressed the role of California Proposition 71 in the upcoming elections.

Clinical Science Keynote Lecture

After an introduction by Stella C. Tommasino, M.D. (Assistant Professor, Department of Anesthesiology, University of Milan, Milano, Italy), Dr. Luciano Gattinoni, M.D. (Professor, Department of Anesthesiology and Critical Care, University of Milan, Milano, Italy), gave a lecture titled "Interaction of the Lung and Brain." A major problem in Neurointensive Care is that the needs of the brain and the lung may seem mutually exclusive; the interest of the lung may at times be best served by permissive hypercapnia, whereas the injured brain may benefit from normocapnia or brief periods of hypocapnia. He presented several options for mechanical ventilation to protect the brain and propagated the idea of applying negative intra-abdominal pressures to decrease intracranial pressure.

Young Investigator Reward

The SNACC Young Investigator Award was presented by Rona Giffard, M.D., Ph.D. (Associate Professor, Department of Anesthesia, Stanford University, Palo Alto, California), to Dr. Olaf L. Cremer for his work "Effect of Intracranial Pressure Monitoring and Targeted Intensive Care on Functional Outcome after Severe Head Injury." Dr. Cremer is a resident in Anesthesiology at the University of Utrecht Medical Center, Utrecht, The Netherlands. In this remarkable study, Dr. Cremer compared two trauma centers with very similar patient profiles but very different intensive care management. Intracranial pressure monitoring with cerebral perfusion pressure targeted care resulted in prolonged mechanical ventilation and increased levels of therapy intensity without evidence for improved outcome in comatose patients who survived beyond 24 h after severe head injury in comparison with supportive care without intracranial pressure monitoring. These findings suggest that it is acceptable to withhold intracranial pressure monitoring in the setting of a randomized controlled trial of intracranial pressure/cerebral perfusion pressure targeted treatment.

The 2004 Distinguished Service Award was presented to James E. Cottrell, M.D. (Professor and Chair, Department of Anesthesiology, SUNY Downstate Medical Center, Brooklyn, New York). Dr. Cottrell is the immediate Past President of the American Society of Anesthesiologists (Park Ridge, Illinois) and founder of both SNACC and the *Journal of Neurosurgical Anesthesiology*. He is the author of many authoritative publications in the field of Neuroanesthesiology.

The Distinguished Teacher Award was presented to Audree A. Bendo, M.D. (Professor, Department of Anesthesiology, SUNY Downstate Medical Center, New York, New York), for her ever-stimulating and excellent way in teaching young professionals the ins and outs of neuroanesthesia. Dr. Bendo pointed out that she, in turn, had had a magnificent teacher in Dr. James E. Cottrell, the recipient of this year's SNACC Distinguished Service Award.

In the afternoon SNACC Annual Meeting attendees had the choice to attend one of the two parallel sessions.

In the **Problem Based Learning Discussions**, Martin Smith, M.D. (Director of Neurocritical Care, The National Hospital for Neurology and Neurosurgery University College, London, United Kingdom), presented an interactive session about the management of head injury. Lorri A. Lee, M.D. (Assistant Professor, Department of Anesthesiology, University of Washington, Seattle, Washington), spoke on perioperative visual loss, especially in the prone position, and the precautions that can be taken to minimize risk. At the end of the session, Lisa Wise-Faberowski, M.D. (Assistant Professor, Department of Anesthesiology, Duke University Medical Center, Durham North Carolina), discussed the fluid administration protocols and medical treatment of a child with diabetes insipidus after brain surgery.

In the **Hands-on Workshops**, attendees had the opportunity to get a hands-on introduction on how to use transcranial Doppler (taught by Arthur M. Lam, M.D., Professor, Department of Anesthesiology and Neurologic Surgery, University of Washington, Seattle, Washington, and Christian Werner, M.D., Professor and Chair, Department of Anesthesiology, University of Mainz, Mainz, Germany), vascular ultrasound (T. Andrew Bowdle, M.D., Ph.D., Professor, Department of Anesthesiology, University of Washington, Seattle, Washington), and transthoracic echocardiography (Donald C. Oxorn, M.D., Associate Professor, Department of Anesthesiology, University of Washington, Seattle, Washington) in their clinical settings.

Throughout the entire day, a total of 102 **Scientific Posters** were presented in the Poster Area. Each investigator was given the opportunity to present his or her work to a moderator experienced in that particular field of research.

The afternoon session concluded with a presentation of the results from the **Intentional Hypothermia for Aneurysm Surgery Trial (IHAST)**, followed by a panel discussion moderated by Dr. Piyush

Patel. The IHAST study was a multicenter, prospective, randomized, partially-blinded clinical trial in 1001 patients investigating whether mild intraoperative hypothermia (33.3°C) in ruptured intracranial aneurysm surgery would improve neurologic outcome compared with intraoperative normothermia (36.7°C). Michael M. Todd, M.D. (IHAST Coordinator, Interim Head, Department of Anesthesia, The University of Iowa, Iowa City, Iowa), presented the main results showing that there was no difference in neurologic outcome between the two groups. Of all the Intercurrent Events, only the incidence of bacteremia and the length of intubation showed a statistical difference. Bradley J. Hindman, M.D. (IHAST Data Safety and Monitoring Board Member, Professor, Department of Anesthesia, The University of Iowa, Iowa City, Iowa), gave detailed background information about the safety aspects and monitoring of intercurrent events in this trial. E. Sander Connolly, M.D. (Assistant Professor, Department of Neurologic Surgery, Columbia University, New York, New York), and S. Claiborne Johnston, M.D., M.P.H. (Professor, Department of Neurology, Univer-

sity of California, San Francisco, California), pointed out the strengths and weaknesses of the study in a search for an explanation of the negative results. Basil Matta, M.B., F.R.C.A. (Clinical Director of Perioperative Care, Addenbrooke's Hospital, Cambridge, United Kingdom), considered the results from a neurosurgical point of view. The reported 10% major neurologic operative complication rate and the 30% perioperative worsening are not good outcomes for grade I-II patients in this era. A substudy of IHAST has investigated long-term neurocognitive outcomes, but these data were not yet available.

After a lively discussion between the panel and the audience, the Annual Meeting concluded with a wine and cheese reception. The Society will reconvene at the 2005 Annual Meeting on October 21 in New Orleans, Louisiana.

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