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president



Dear Colleagues:

This has been a remarkable year, during which our nation has been challenged, and during which physicians, as stewards of our profession and our field of transplantation, continue to endure important challenges. I believe we have made progress, but there is much to accomplish as we strive to deliver optimal transplant care, and to move transplantation forward. The Officers, Council, Committee Chairs, and ASTS members at large have dedicated themselves to accomplishing the hard work necessary for progress. Thank you for your dedication and efforts.

ASTS held a very successful 2nd Annual Winter Symposium, January 25-27, 2002 at the Eden Roc Resort on Miami Beach. This conference was organized by the ASTS Vanguard Committee under the leadership of Committee Chair Sandy Feng with the 2002 Winter Symposium Organizing Committee including Kim Olthoff, Jerzy Kupiec-Weglinski, David Geller, Abbas Ardehali, and Ken Drazan. More than two hundred registrants participated in this high quality, lively conference focusing on ischemia and reperfusion injury after transplantation (see article, page 11). I am pleased to announce that next year's ASTS Winter Symposium entitled "Tumors and Transplantation," will be held January 24-26, 2003, again at the Eden Roc. We very much look forward to this third annual event.

Our membership continues to grow under the capable guidance of Chair Doug Farmer and the ASTS Membership Committee. ASTS has been focusing on including more thoracic surgeons and candidate members this year and the fruits of our work are being realized. In addition, the ASTS accreditation programs are expanding under the leadership of Charlie Miller and the Education Committee and efforts on behalf of the ASTS Thoracic Committee,

chaired by Dave Follette to review heart and lung programs.

Bob Merion has continued to provide able guidance as Chair of the ASTS Informatics and Data Management Committee. The ASTS website has been further enhanced to include a job board accommodating curriculum vitae, including more timely and relevant information, as well as expanded links to relevant sites. Similarly, Mike Abecassis has worked with the CHIMERA editorial committee to enhance content, including regular Washington Updates, job board and committee updates. The CHIMERA is now available on-line, in addition to the print version.

The ASTS Standards on Organ Procurement Committee, chaired by Jean Emond, has conducted a survey seeking to establish guidelines for organ procurement team qualifications. Of the 276 programs receiving the survey, ninety-seven percent responded, and we are looking forward to the results.

The ASTS Awards program continues to grow, providing important recognition of our colleagues' accomplishments, and opportunities for the ASTS to advance educational and research aspects of our mission. Tom Peters has continued to provide organization and consistency to the program, as applications have increased in volume, and new award categories are proposed.

As this issue of the CHIMERA goes to press, the final touches for the American Transplant Congress (ATC), our joint annual AST/ASTS scientific meetings, are being addressed. We are indebted to the leadership provided by Jon Bromberg and Dick Thistlethwaite, ASTS representatives on the joint ATC Executive Planning Committee, as well as to the tireless efforts of all Joint Planning Committee members. I'm sure I speak for everyone in thanking this dedicated group for their efforts.

To enhance ASTS development, the Council has proposed the formation of The ASTS Foundation (*see article, page 10*). The ASTS Foundation will seek to expand ASTS ability to provide awards and fellowships, to conduct more studies, as well as other projects to benefit transplantation.

Another area of personal interest has been enhancing ASTS presence within the larger American surgical community. A productive dialogue with the leadership of the American Board of Surgery has been encouraging, and I am optimistic that we will soon announce more formal relationships between the ASTS and the ABS. On a similar note, Jim Schulak, ASTS President-elect, has begun similar, encouraging discussions with leadership at the American College of Surgeons. Additionally, our ASTS government relations program has continued to grow with the able guidance of ASTS legislative liaison Peter Thomas. We have been increasingly successful in advancing ASTS views on Capitol Hill, as well as various government agencies dealing with issues of concern to the transplant community. Study section reorganization at the NIH, organ donation bills, and reimbursement have been prominent topics this year. ASTS has also established an Ad Hoc Committee on reimbursement chaired by Mike Abecassis.

I hope you agree that this year has been productive for the ASTS. It has certainly been rewarding for me. I have enjoyed opportunities to speak with you, and I have valued your advice and guidance. Again, thank you for the privilege of serving as your President.

I look for ward to seeing you at the ATC in Washington D.C.

Marc I. Lorber, M.D. President



ASTS Committee updates:

Bylaws Committee

The ASTS Bylaws Committee, Chaired by John Roberts, will be presenting three items for the Membership to vote upon at the April 30, 2002 ASTS Membership Business Meeting during the American Transplant Congress at the Marriott Wardman Hotel, Washington, DC. They include:

- 1. Formation of a permanent Committee on Cellular Therapeutic Transplantation: This Committee will have nine members with three year terms that are staggered so that a third of the committee's terms end each year.
- 2. Making the Vanguard Committee a permanent committee: There shall be a Vanguard Committee consisting of nine members, each to serve three years. Two members shall be candidate members and seven shall be regular members of the ASTS, but who have been members less than five years at the time of their appointment. The chairperson shall be a regular member. Three new members will be appointed each year to replace the three outgoing members. Candidate members will be in an advisory capacity.
- 3. Amend Article IV: Section 7 so that Candidate Members will pay no dues instead of 50% 50%

Thoracic Committee:

David Follette, ASTS Thoracic Committee Chairman reports:

I'm very pleased to report that the 2nd annual symposium held in conjunction with the STS was extremely well received. We had over 100 participants during the first two sessions. There was some attrition there after because of conflicts that were unavoidable. The panel discussion hour was lively and I believe that all of the participants in the symposium had a very worthwhile experience, I'm looking forward to receiving the evaluations. In fact, Fred Grover and I will continue to co-chair the session next year. Any ideas that you have for topics would be most appreciated by the both of us.

On behalf of increasing heart transplant donation, are progressing well. Bruce and Jim Kirkland recently met in Washington DC with NIH. Bruce has an excellent proposal that will hopefully get under way this summer. This has formulated many of the suggestions of the Crystal City conference into a prospective trial format looking at aggressive heart monitoring selective interpretation of echoes in a prospective trial. I'm very excited and appreciative of Bruces' efforts.

The fellowship-training program continues to progress. We have several additional applications that will be forward to the education committee. Also, the membership committee reported a continued enthusiasm amongst thoracic surgeons to join the society.

The biggest area of concern that was discussed was over the proposed changes in HCFA reimbursement for car-

diothoracic transplantation. This will be across the board for all thoracic transplant procedures. These include -11.31% drop for heart -5.58% single lung and -7.2% double lung and a -16.32% drop for heart lung transplantation. These potential changes in thoracic reimbursement are of great concern to the council and all of us on the thoracic committee. The President, Marc Lorber and I will be working very closely with Tim Gardener, President of the ATS and Bill Baumgartner, President of the STS, to pull our joint legislative resources together and make a real effort to evoke some change in this particular area. I would encourage all of you to write letters to your congressmen and senator's regarding these proposed reductions which will have substantial effects on all thoracic transplant surgeons.

The thoracic committee and counsel our working very hard to ensure that the training and education goals are met. Not only for the fellowship training program but also for continuing education. Your input and suggestions would be appreciated by all. Please don't hesitate to contact any members of the thoracic committee that you may have.

ASTS

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for their support



2002 has already seen a good deal of activity on several issues of importance to ASTS members. ASTS is continuing to play a leadership role on a number of critical transplant-related policy initiatives, as detailed below.

Organ Donation Legislation

After months of work, Senator Bill Frist (R-TN) introduced S. 1949, the Organ Donation and Recovery Improvement Act, on February 14, 2002. Senators Christopher Dodd (D-CT), Tim Hutchinson (R-AR), James Jeffords (I-VT), and Mike Enzi (R-WY) joined Senator Frist as original cosponsors of the bill. Among other things, the bill:

- · Creates an Interagency Task Force on Organ Donation and Research to improve the coordination and evaluation of federally supported or conducted organ donation efforts and policies, as well as basic, clinical, and health services research;
- · Grants the Secretary of Health and Human Services the authority to award grants to non-profit private entities and states to carry out studies and demonstration projects to increase organ donation rates, including living donation. This section of the bill specifically refers to

research on issues related to presumed consent as well as financial disincentives. ASTS repeatedly emphasized the importance of these two areas of research to Senator Frist's office, which helped contribute to the inclusion of this language in the final bill; (\$5 million is authorized in FY 2002 for these grants and "such sums as may be necessary" from FY 2003-FY 2006);

- · Grants the Secretary the authority to award grants to OPOs to establish programs that coordinate organ donation activities of eligible hospitals and qualified OPOs (\$3 million authorized in FY 2002, "such sums as may be necessary" from FY 2003-FY 2006);
- · Directs the Secretary, acting through the director of the Agency for Healthcare Research and Quality ("AHRQ"), in consultation with the administrator of the Health Resources and Services Administration, to

- "develop scientific evidence in support of efforts to increase organ and tissue donation and improve the recovery, preservation, and transportation of organs and tissues" (\$5 million authorized in FY 2002, "such sums as may be necessary" from FY 2003-FY 2006);
- · Tasks the Institute of Medicine ("IOM")to "conduct an evaluation of the organ donation practices of organ procurement organizations, states, other countries, and appropriate organizations that have achieved a higher than average organ donation rate;"
- · Authorizes the Secretary to award grants to states, transplant centers, and qualified OPOs for payment of travel and subsistence expenses incurred by living organ donors (\$5 million authorization, "such sums as may be necessary" from FY 2003-FY 2006);
- · Directs the Secretary to create

ASTS will continue to work with all stakeholders involved to move forward with enactment of a meaningful bill this year.

an advisory task force to "study state registries and make recommendations to Congress regarding such registries," which is to convene no later than 6 months after enactment of the bill; and

· Directs the Secretary to "establish and maintain a registry of individuals who have served as living organ donors for the purpose of evaluating the long-term health effects associated with living organ donations."

ASTS sent a letter of support to Senator Frist following the introduction of his bill. ASTS also recently sent a letter of support to Senator Dick Durbin (D-IL), the primary sponsor of S. 1062, the Donor Outreach, Network, and Timely Exchange Act. Both bills share many of the same provisions, including the organ coordinator grant program and the federal payment for travel and subsistence expenses incurred during live organ donation.

The primary difference between the two bills is the issue of organ donation registries. S. 1062 creates a "National Organ and Tissue Donor Registry Resource Center," which is designed to help states establish registries and also develop a standard model for state registries. The bill authorizes \$5 million for the resource

center and \$10 million for grants or cooperative agreements to states to support the development, enhancement, expansion, and evaluation of state organ and tissue donor registries. The bill does not establish a national registry, which is historically the most controversial aspect of the registry issue.

Senator Frist and his staff are not convinced that the evidence exists regarding the effectiveness of registries. As was stated above, his bill establishes an advisory committee to study this question and to report to Congress on the usefulness and success of organ donor registries and potential roles for the federal government to play in encouraging and improving such programs.

ASTS has not placed a high priority on the issue of registries, and has conveyed this message to both Senator Frist and Senator Durbin's offices. ASTS will continue to work with all stakeholders involved to move forward with enactment of a meaningful bill this year.

Medicare Physician Payment Update

The Centers for Medicare and Medicaid Services (CMS) implemented cuts in Medicare payments to physicians by 5.4% in calendar year

2002. Although Congress was unable to reach agreement on a bill that would have reduced the impact of this scheduled cut at the end of 2001, it did direct the Medicare Payment Advisory Commission (MedPAC) to make recommendations to Congress on how to modify or replace the existing physician fee schedule formula, which relies on the "sustainable growth rate," ("SGR") and produced this large cut in physician fees.

At its January meeting, MedPAC approved three recommendations, which will be included as part of its March report to Congress. Those recommendations include:

- 1. Repealing the SGR system and requiring that the HHS Secretary update payments for physician services based on the estimated change in input prices for the coming year minus a "productivity adjustment" based on estimates of productivity increases resulting from new technology, etc.;
- 2. Revising the productivity adjustment so that it is based on a broader array of factors that affect productivity; and
- 3. Updating payments for physician services by 2.5% in 2003.

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The president's budget contains \$25 million for the Division of Transplantation at the Health Resources and Services Administration (HRSA), a \$5 million, or 25%, increase over FY 2002.

Both CMS and the Congressional Budget Office have estimated that this proposal would cost approximately \$127 billion over ten years, which makes it less likely that a legislative proposal that fully reflects MedPAC's recommendations will be enacted into law this year, especially given that the administration is supportive of remedies that are budget neutral. That said, organized medicine is going to continue to try and secure a legislative remedy to this problem and progress is being made. A number of hearings on this issue have already occurred.

ASTS Comments Regarding OPO Recertification Rule

On December 28, 2001, CMS published an Interim Final Rule regarding the certification of organ procurement organizations (OPOs). The Interim Final Rule recertifies all 59 existing designated OPOs through July 31, 2006. Such OPOs must meet the standards for a qualified OPO within a four-year period ending December 31, 2001 and have current agreements with the Secretary of Health and Human Services that are scheduled to terminate on July 31, 2002.

The impetus for the Interim Final Rule was the passage of the Organ Procurement Organization Certification Act of 2000 (P.L. 106-505). The statute directed the Secretary of Health and Human Services to develop

improved performance measures for certifying and re-certifying OPOs by January 1, 2002. CMS, however, failed to develop these standards by the congressionally-mandated deadline, which necessitated this Interim Final Rule.

The effect of the Interim Final Rule is to extend certification to all OPOs for four years without requiring compliance with the improved standards CMS is still developing, a result that ASTS views as a missed opportunity. The failure by CMS to develop these standards is especially troubling given representatives from Association of Organ Procurement Organizations met with CMS in January, 2001 to discuss a set of proposed OPO performance standards. ASTS expressed these views to CMS in comments submitted in February in response to the Interim Final Rule.

ASTS will also submit formal comments to CMS on the new performance standards as soon as they are published by CMS as a proposed rule.

President Bush Releases FY 2003 Budget Proposal

On Monday, February 4, President Bush released his fiscal year (FY) 2003 budget proposal to Congress. In general, while the president's budget contains large increases in defense spending and for other activities related to

the ongoing war on terrorism, it tries to hold all other federal spending to a 2% increase. However, since other priorities of the Bush administration not related to defense receive increases of more than 2% in this budget, the shortfall must be made up by either level funding or cutting funding for some existing programs.

Although many interest groups have, therefore, seen their priority programs cut under the president's budget, we are happy to report that programs of importance to ASTS members fared relatively well in this difficult budget environment. Even with President Bush's efforts to constrain spending, the federal government will run a deficit of approximately \$106 billion in FY 2003. Following are funding levels for programs of importance to ASTS members.

Health Resources and Services Administration

The president's budget contains \$25 million for the Division of Transplantation at the Health Resources and Services Administration (HRSA), a \$5 million, or 25%, increase over FY 2002. According to the HHS budget documents, the increase will be used "to support the Secretary's Gift of Life Donation Initiative, a variety of donation awareness efforts, the network that manages the distribution of organs throughout the United States,

ASTS will continue to advocate for its members' interests as the 107th Congress moves forward.

and vital data collection that guides community leaders and policy makers."

As you know, organ donation and transplantation initiatives are an important healthcare priority of this administration. Congress has increased funding for this account the past two years, so there is a good chance that Congress will include this \$5 million increase as part of the total appropriation for HRSA. Please note that this increase is separate from whatever funds Congress might authorize as part of a comprehensive organ donation bill. Those authorized funds would most likely be subject to next year's appropriations process, since it is unlikely that Congress will pass an organ donation bill in time for Congress to appropriate those authorized funds this year.

National Institutes of Health

The president's budget contains \$27.432 billion for the NIH, an increase of \$3.702 billion, or 15.7%, over FY 2002. This is the fifth year of the five-year effort to double the NIH budget and accomplishes this bipartisan goal in a timely manner. Of the increase, almost \$1.8 billion is earmarked for bioterrorism activities, while \$629 million is earmarked for cancer research, which represents a continuing strong inflow of funding for cancer research.

The National Institute of Allergy and Infectious Diseases received \$3.999 billion, an increase of \$1.457 billion, or 57.3%, over FY 2002. Additionally, the National Heart, Lung, and Blood Institute received \$2.798 billion, an increase of \$217 million, or 8.4% over FY 2002.

FY 2002 Appropriations Enacted into Law

Last December, Congress included \$19,992,000 for the Division of Transplantation at the Health Resources and Services Administration for fiscal year (FY) 2002, which ends on September 30, 2002. There was no report language accompanying the final bill, which means that the report language accompanying the House and Senate-passed bills remain in The House and Senateapproved committee reports directed HRSA to use the additional funding to focus on: media advertising and best practices demonstrations designed to increase the number of annual organ donations; education of the public and health professionals about organ donations and transplants; and increased behavioral research to better target and increase the effectiveness of public awareness campaigns.

Congress included \$22.888 billion for the National Institutes of Health in FY 2002, an increase of \$324.2 million over the president's

request and the House-passed bill and \$329.2 million less than the Senate-passed amount. The conference agreement includes \$2,576,125,000 for the National Heart, Lung and Blood Institute instead of \$2,547,675,000 as proposed by the House and \$2,618,966,000 as proposed by the Senate.

Outlook

Given that 2002 is an election year and that the federal government is returning to an era of budget deficits rather than budget surpluses, 2002 promises to be an extremely contentious year where controversial legislation becomes gridlocked. However, this also generates an environment where issues like organ donation legislation have a good chance of being enacted into law, since lawmakers will be looking to move forward on issues where there is a broad, well-defined consensus. ASTS will continue to advocate for its members' interests as the 107th Congress moves forward. 🥦

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Jeremy Allen, Legislative Director,
Powers, Pyles, Sutter & Verville, P.C.

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American Transplant Congress

It is with great pleasure that the American Society of Transplant Surgeons (ASTS) and the American Society of Transplantation (AST) invite you to attend the American Transplant Congress, the Third Joint American Transplant Meeting. The continuing enormous success and overwhelming attendance of the first two joint meetings confirms that this educational event is the premier annual meeting in the field of basic and clinical transplantation science and medicine.

his year ATC moves to Washington, DC and a larger venue, The Marriott Wardman Park Tower Hotel. The meeting will take place completely in the Marriott and will have ample room for exhibits and an expanded poster area. A cyber cafe will be the focal point of the exhibit/poster area. A popular addition to last year's meeting, a review/update course on Friday and Saturday, will again be offered. This year, the update course will be more focused and concentrate on new experimental and clinical approaches to modulation of the immune response. A symposium designed especially for nurses and coordinators will take place on Saturday afternoon, as well as separate pre-meeting symposia on pediatric transplantation, stem cell biology, anti-microbial resistance and retransplantation. On Sunday, Monday and Tuesday, during the meeting itself, invited experts will present in-depth reviews and scientific symposia for both the clinician and basic scientist. The ever popular, "What's Hot, What's New" will be the feature presentation on Wednesday, the final day of the meeting. On all days of the meeting, controversial topics and new developments will be the focus of the sunrise symposia. Video sessions, which were a well-received addition last year, will again be included. With the single larger venue, the site of all oral presentations will be convenientlylocated, making it far easier for attendees to move among concurrent sessions.

This year we are fortunate to have Francis Collins, the director of the human genome project, as our distinguished state-of-the-art speaker. We also anticipate a major U.S. government figure to deliver a health care public policy address.

Please note that this year's meeting is scheduled for April 26 - May 1, a few weeks earlier than in the past. None-the-less, we have been able to maintain an abstract deadline (November 28, 2001) similar to last year's. Abstracts will once again be published in the supplement to the joint ASTS/AST journal, the American Journal of Transplantation (AJT).

We hope that you will join us in Washington, DC for what we believe will be a stellar educational event in transplantation.

Mark L. Barr, MD David M, Briscoe, MD Jonathan S. Bromberg, MD, PhD J. Richard Thistlethwaite, Jr., MD, PhD

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ASTS Members Business Meeting

The American Society of Transplant Surgeons will hold its annual ASTS Members Business Meeting on Tuesday, April 30, 2002 at 5:45 p.m. at the Marriott Wardman Hotel, Washington, DC. This is the site of the American Transplant Congress (ATC) for 2002.

The agenda for the meeting will include reports from ASTS Committees as well as the Treasurer's report, vote for vacancies on Council, formation of ASTS Foundation and other business. The meeting will be conducted by ASTS President Marc Lorber.



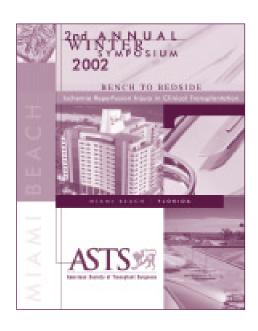
Formation of ASTS Foundation

The American Society of Transplant Surgeons' (ASTS) Council has proposed the formation of an ASTS Foundation. The purpose of the Foundation would be to expand the Society's ability to provide awards and fellowships, conduct more studies and projects and other endeavors to enhance the education and efforts of transplant surgery for the benefit of patients, surgeons, physicians, scientist and the transplantation community.

The Foundation would be a non-profit organization separate from the ASTS. The bylaws have been drafted and provide for the ASTS Council to be the Council of the Foundation to provide continuity and avoid duplication of efforts. The Foundation will seek funding to support its activities. A copy of the proposed Foundation Bylaws can be found at the ASTS website by clicking onto "Proposed Foundation Bylaws" on the homepage. The website is at www.asts.org

ASTS Members will be asked to vote for approval of the establishment of the Foundation at the next ASTS Members Business Meeting to be held Tuesday, April 30, 2002 at 5:45 pm during the American Transplant Congress at the Marriott Wardman Hotel, Washington, DC.

ASTS 2nd Annual Winter Symposium



he 2nd Annual ASTS Winter Symposium was held January 25-27, 2002 at the Eden Roc Resort and Spa, Miami Beach, Florida. Over two hundred people attended the conference which focued on "Bench to Bedside: Ischemia /Reperfusion Injury in Clincial Transplantation"



Panel Members, Anthony D'Alessandro, Edward Alfrey, Igal Kam, Ronald Busuttil, and Charles Miller participate in discussion at the ASTS 2nd Annual Winter Symposim.



Members of the program organizing committee lead by ASTS Vanguard Committee Chair, Sandy Feng, are Abbas Ardehali, UCLA School of Medicine; David Geller, University of Pittsburgh Medical Center; Jerzy Kupiec-Weglinki, UCLA Department of Surgery; and Kim Olthoff, University of Pennsylvania Hospital.

Presentations will be available on the ASTS website at www.asts.org and include New Molecular Concepts in Ischemia / Reperfusion; Molecular Mechanisms of Ischemia Reperfusion: Bench to Bedside; Frontiers in Donor Management; Minimizing Injury, Maximizing Clinical Impact of Outcome Ischemia / Reperfusion Injury and Potential Solutions; Ischemia Injury and Marginal Donors: At What



Cost? and Future Direction of Ischemia / Reperfusion Injury.

Over fifty poster presentations were available for viewing throughout the meeting and six oral poster presentations we conducted. In addition, thirteen companies had exhibits on display during the symposium.

The Eden Roc Resort and Spa, located on oceanfront property overlooking Miami Beach provided an enjoyable setting for the evening events which included a dinner with a Latin Flair on Friday and a casual fun evening bar-b-que with activities for children and parents on Saturday.

ASTS President Marc Lorber moderates session on "The Frontiers of Donor Management."

ASTS would like to thank the following companies for their support of this event:

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Axcan Scandiphram

In Memory of Dr. Robert J. Corry

ASTS was saddened to learn that Dr. Robert J. Corry died suddenly at his home in Pittsburgh on Monday, February 11, 2002. Dr. Corry served the ASTS in many important capacities, including President in 1986-87. He was also a Past President of UNOS, the former Chair of Surgery at the University of Iowa, and among the international thought leaders in Pancreas Transplantation. Until his death, he served as Professor of Surgery and of Pancreas Director Transplantation at the University of Pittsburgh. Dr. Corry will be remembered as a distinguished colleague, a scholar, teacher and friend of ASTS. He will be deeply missed.

A press release from the University of Pittsburgh follows:

Robert John Corry, M.D.

Robert John Corry, M.D., was professor of surgery and director of the pancreas transplant program at the University of Pittsburgh Thomas E. Starzl Transplantation Institute and between 1999-2000, was one of four vice presidents of the medical staff at **UPMC** Presbyterian. He came to University Pittsburgh in 1994 from the University of Iowa Hospitals and Clinics following an 18-year tenure at that institution that included 10 years as its chief of surgery. Dr. Corry was well respected by both his peers and patients. At the University of Pittsburgh he established a pancreas transplant program that quickly became one of the nation's most active and which achieved among the best survival rates

3rd Annual ASTS Winter Symposium

"TUMORS AND TRANSPLANTATION"

January 24-26, 2003 Eden Roc Resort and Spa Miami Beach, Florida

Information on program, registration and poster abstracts will be available in the near future.

of any other program in the United States. He enjoyed a rich and distinguished career that included leadership positions with the most prestigious national and international transplant societies and organizations. As an academic scholar, he contributed numerous articles to the scientific and medical literature and was a regular presenter at medical and surgical meetings around the globe.

Dr. Corry's research and clinical interests included exploring methods to control rejection and induce tolerance, identifying ways to expand the donor pool, such as using organs from older donors, and working to develop policies for broader sharing of pancreases within the United States.

Dr. Corry was born Dec. 3, 1934 in Cleveland, Ohio. He graduated Magna Cum Laude from Yale University in 1957 and received his medical degree from **Johns** Hopkins University in 1961. Dr. Corry completed an internship in pediatrics and surgery at John Hopkins between 1961 and 1963 before going to the Peter Bent Brigham Hospital Massachusetts General Hospital at Harvard University to complete a residency and fellowship in surgery.

His academic career began at Harvard in 1968, and by 1972, he was an assistant professor of surgery there. In 1973, he joined the faculty of the University of Iowa College of Medicine as associate professor of surgery and became director of transplantation at the University of Iowa Hospitals and

Clinics and the VA Medical Center, lowa City. He was promoted to professor of surgery in 1976 and chief of surgery in 1982, positions he held until arriving at the University of Pittsburgh.

In addi-

tion

University Surgeons, the American Surgical Society, the International College of Surgeons and International Pancreas and Islet Transplantation Association. served as president of the American Society of Transplant Surgeons from 1986-87 and of the United Network for Organ Sharing (UNOS) from 1989-1990. For these and numerous other organizations, Dr. Corry served on committees that dealt with various concerns, including professional education, practice and ethical standards and topical research endeavors. Since 1995, Corry also served on the board of direcfor tors Pittsburgh Chapter of TRIO, Transplant Recipients International Organization.

American Medical Association, the

Transplantation Society, the Society of

Dr. Corry was a fixture at national and international medical meetings. If he was not chairing a session, he himself was presenting new data. Over the span of his career, he presented more than 125 times at such meetings and was invited to give an additional 200 lectures at other universities or before regional, state or local groups. He authored or coauthored more than 200 peerreviewed journal articles, 150 scientific abstracts, 70 poster presentations and 36 textbooks or book chapters. 58

t o oversee-ing very busy surgical and transplant programs, Dr. Corry was an active member of more than 30 professional societies and organizations, including the Association for Academic Surgery, the

JOB BOARD

The ASTS Job Board is enhanced further by the addition to the ASTS website, www.asts.org, of CV's of ASTS Candidate Members. This is in an effort to facilitate the interactions between graduating fellows and transplant programs with junior position openings. To access the CVs go to the www.asts.org, log into the Members Only section and click on Upload/download files.

THE CENTER FOR SCIENTIFIC REVIEW

(CSR) at the NIH is expanding and reorganizing its scientific review structure into four Divisions, including a Division of Clinical and Population-based Studies. CSR is seeking a Director for this division with experience and knowledge in clinical research and/or behavioral and social science, who can serve as an effective liaison with these research communities. This is a senior executive level position. For more information, please see ad at http://www.csr.nih.gov/employment, or contact Ms. Pam Sullivan, SullivanP@csr.nih.gov

UNIVERSITY OF MICHIGAN MEDICAL CENTER TRANSPLANT DIVISION

The Department of Surgery, Section of General Surgery, has an opening for a faculty position at the Assistant or Associate Professor level. This academic position is research oriented with clinical and teaching responsibilities emphasizing renal and pancreas transplantation. Applicants must have completed a residency and be eligible for board certification in General Surgery. Applicants should have completed an ASTS-approved transplantation fellowship, or should have equivalent experience, in kidney and pancreas transplantation as well as experience with laparoscopic donor nephrectomy. Experience or interest in pancreatic islet cell transplantation is desired. All inquiries should be directed to: Michael W. Mulholland, M.D., Ph. D/ Professor and Head, Section of General Surgery, University of Michigan Medical Center, 1500 E. Medical Center Drive, 2920 Taubman Health Care Center, Ann Arbor, MI 48109-0331. The University of Michigan is a non-discriminatory/Affirmative Action Employer and strongly encourages females and minorities to apply.

TRANSPLANT SURGEON POSITION

in beautiful Portland, Oregon. Legacy Health System is searching for a Kidney and Pancreas Transplant Surgeon to join our growing program. The multi-disciplinary team offers a variety of approaches to maximize donor potential, including the use of minimally evasive donor nephrectomy. Legacy Good Samaritan Hospital, the site of our Transplant Services, is the regional leader in laparoscopic surgery. The successful candidate will be MD or DO, with current Oregon medical license and eligible for LPH medical staff privileges; minimum of one year formal transplant fellowship at a transplant program meeting UNOS membership cirteria in renal and pancreas transplantation. Experience or proficiency in laparoscopic live donor organ procurement; with board certification or eligibility by either the American Board of Surgery, American Board of Urology or the American Board of Osteopathic Surgery. The mission of our Transplant Program is to provide responsive, state-of-the-art, prompt and efficient kidney transplant services, offering a choice to patients in metropolitan Portland, the state of Oregon, and SW Washington communities. Legacy Health System is a regional leader in nephrology care, endocrine and diatebes management, advanced surgical practice and biomedical research. We have performed 67 kidney tansplants to date in 2001, and have 175 patients in the evaluation phase for living donor or cadaver transplants. Legacy Health System is a five-hospital system based in Portland, Oregon and the largest health system in the state, providing a comprehensive array of specialty services to the citizens of the Pacific Northwest. Included among these are a Level I Trauma Center, an advanced minimally invasive surgery program, a large cancer program, one of the larges heart surgery programs in Oregon, and complete women's and children's services. Legacy has also invested heavily in research and education, supporting a substantial research program and over a dozen residency programs, a number of which are affiliated with Oregon Health Sciences University. Portland presents urban amenities in attractive and affordable living environment within a 90-minute drive of the spectacular Cascade Mountains, high desert or Pacific Ocean. The temperate four-season climate, spectacular views and abundance of cultural and outdoor activities, along with five-star restaurants, professional sporting attractions, outstanding schools, and a growing economy make the Northwest the best place to live, work and play. AA/EOE Contact: Deborah Akins, Physician Recruiter, Legacy Health System, 1120 NW 20th, Suite 111, Portland, OR 97209. Call toll free: 866-888-4428, Fax: 503-415-5801, Email: dakins@lhs.org, www.legacyhealth.org.

MULTI-ORGAN TRANSPLANT FELLOWSHIP

The Division of Transplantation at the University of Cincinnati, Department of Surgery is seeking a highly motivated individual for its ASTS approved transplant fellowship beginning July 1, 2002. The fellowship is a two-year program with training in kidney, pancreas, liver transplantation, and hepatobiliary surgery. Training in laparoscopic living donor nephrectomy (> 70/yr) will be provided. Training in islet isolation and clinical islet transplantation is available, but optional for the fellow. Participation in ongoing clinical research projects in one of the four areas will be supported: laparoscopic nephrectomy, islet transplantation, clinical immunosuppression, and post transplant malignancy studies involving the Israel Penn International Transplant Tumor Registry. Interested individuals should contact: E. Steve Woodle, M.D., Director, Division of Transplantation, Department of Surgery, The University of Cincinnati, 321 Albert Sabin Way M.L. 0558, Cincinnati, Ohio 45267-0558, Fax: (513) 558-7040, Phone: (513) 558-6001, Email: woodlees@uc.edu

PROGRAM DIRECTOR OF RENAL TRANSPLANTATION

The University of South Alabama is seeking a Transplant Surgeon or Transplant Urologist to assume the reigns of a rapidly growing kidney transplant program in Mobile, AL. We are a fully staffed program with a dedicated transplant team and excellent inpatient and outpatient facilities. We have performed 75 transplants during our first 3 years of operation and have 200 patients on our waiting list. There are nearly 3000 dialysis patients in our area and the prospects for growth are obvious. Candidates must be able to qualify under UNOS guidelines as the primary transplant surgeon. Responsibilities will include performance of transplants, pre and post transplant care, teaching, and supervision of students and house staff. Interested candidates should send current CV to: Barry Browne, M.D., 2451, Fillingim St, 10F, Mobile AL 36617, Phone: 251-471-7542, Fax: 251-471-7020, email: bbrowne@jaguar1.usouthal.edu USA is an affirmative and equal opportunity employer.

THREE POSITIONS AVAILABLE WITH A LARGE PHARMACEUTICAL COMPANY

in the NE area (USA). The Department is Molecular/Cellular Immunology. The positions require Ph,D, minimum of 3 years post doctoral experience in: T-Cell Immunology (regulation and signaling, human) for position #1; Immunoregulation (human/murine models) for position #2; cell based target validation in human primary immunocyte models for position #3. Contact: Shirley J. Casanas, Mankuta / Gallagher and Associates, 8333 W McNab Road, Suite 231, Ft. Lauderdale, FL 33321. 1-800-797-4276 x 1012 or 954-720-9645, Fax 954-720-5813 scasanas@mankutagallagher.com website: www.mankutagallagher.com \$\mathfrak{M}\$

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Contact Phone: Symma Finn 305-567-9888

Contact Fax: 305-567-1317

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April 22-24, 2002

6TH INTERNATIONAL CONFERENCE ON MALIGNANCIES IN AIDS AND OTHER IMMUNODEFICIENCIES:

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Bethesda, MD

Contact Phone: 301-496-6711 Contact Fax: 301-496-0826 Contact Email: jquinn@mail.nih.gov

April 27 - May 1, 2002

AMERICAN TRANSPLANT CONGRESS

Washington, DC

Contact Phone: 856-439-0880 Contact Fax: 856-439-1972 www.ATCmeeting.org

JUNE 2002

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THE AMERICAN SOCIETY FOR ARTIFICIAL INTERNAL ORGANS 48TH ANNUAL CONFERENCE

New York, NY

Contact Phone: 561-391-8589 Contact Fax: 561-368-9153 Contact Email: info@asaio.com Contact Website: www.asaio.com

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XIX INTERNATIONAL CONGRESS OF THE TRANSPLANTATION SOCIETY

Miami, FL

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ASTS THIRD ANNUAL WINTER SYMPOSIUM

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