

Evolution of the Society for Vascular Surgery

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In December of 1945 Dr. Ross Veal and six other surgeons met in Hot Springs, Virginia at the Southern Surgical Association to discuss the formation of an organization devoted to vascular surgery. Surgical approaches to cardiovascular disease were in their infancy and there was great excitement around the surgical treatment of vascular problems. In 1937 the first Patent Ductus Arteriosus was successfully ligated; in 1944 coarctation of the aorta was successfully repaired. In 1945 the first systemic/pulmonary shunt for Tetralogy of Fallot was performed by Alfred Blalock; and in 1945 the first successful division of a vascular ring was accomplished. The Heart-Lung machine, while not perfected in humans, had been used successfully in the animal laboratory of John Gibbons. There was great optimism about the future of surgical treatment of vascular diseases and a clear understanding that scientific rigor and high standards would be necessary for this potential to be reached.

A second organizing meeting was held in July of 1946 where the name of the society was agreed upon and the society's first president, Alton Ochsner, was elected. The first scientific meeting of the society was scheduled to occur one day before the meeting of the American Medical Association on June 8, 1947 at the Dennis Hotel in Atlantic City.

There were 31 founding members of the society, including two honorary members, Rudolph Matas and John Homans. While many of these individuals had roots in Boston, Baltimore, Chicago and New Orleans there was broad geographic representation which included both full-time academic and private practitioners. Only the two honorary members focused primarily on what we now consider vascular disease; most of the others were actively involved in general and cardiac surgery. Although the initial society membership was small, its goal was to be inclusive and its meetings were scheduled to coincide with the AMA to attract as many interested physicians as possible.

For the first several decades of its existence, the Society for Vascular Surgery held one-day meetings in conjunction with the American Medical Association (AMA) annual meeting. Papers included a mix of clinical and laboratory investigations and ran the gamut of cardiac, arterial and venous disease. At the

humans, Ochsner's presidential address was on Venous Thrombosis. Papers were presented by Blalock on his shunt, Gross on correction of aortic coarctation, and DeBakey on the effect of localized sympathetic blockade on the arterial circulation. This mix of topics continued through the 1960s and 70s although the number of cardiac papers diminished significantly toward the end of the latter decade. The last paper devoted specifically to cardiac disease was presented in the early 1980s.

Membership was expanded to 150 in 1957 and to 250 active members in 1963, where it remained until the new millennium. In 1966 the Society for Vascular Surgery separated its meetings from the AMA to begin the tradition of joint meetings with the North American Chapter of the International Society of Cardio Vascular Surgeons. Each organization was responsible for a day and a half program which ran consecutively. Many members remember changing over their badges after the lunch meeting on the second day. The relationship between the Society for Vascular Surgery and the North American Chapter of the International Society of Cardio Vascular Surgeons continued to flourish over succeeding decades. In 1971 the president and secretary of the International Society of Cardio Vascular Surgeons were made members of the Society for Vascular Surgery Council, and subsequently a Joint Council of the two organizations was formed. In the 1980s the two societies founded a journal dedicated exclusively to vascular diseases. The *Journal of Vascular Surgery* has become the premier journal in vascular surgery worldwide and is one of the most important and enduring contributions to vascular surgery made by the joint societies.

There were seven objectives outlined by the society's founders:

- 1) Promote study and research in vascular disease
- 2) Define the role of surgery in these diseases
- 3) Standardize methods of management
- 4) Standardize nomenclature
- 5) Promote teaching of vascular disease to trainees
- 6) Encourage special training in vascular disease
- 7) Hold annual meetings

These objectives have continued to guide the development of the Society for Vascular Surgery to this day. The annual meeting has become the premier venue in North America for presentation of clinical and basic research in vascular disease. The Lifeline Foundation was established to promote and fund vascular research. This is now the responsibility of the American Vascular Association. The efforts of the Lifeline Foundation and AVA established a successful partnership with National Institutes of Health to fund young surgeon scientists in vascular research, summer research fellowships for medical students and travelling fellowship programs that promote the interchange between vascular surgeons around the world.

Society committees have addressed standards of management and nomenclature for venous and arterial diseases and have recently focused on standards and credentialing in catheter based interventions. In 1973 Dr. Wiley Barker's presidential address first directly raised the question of certification in vascular surgery. This was the beginning of a three-decade long effort that resulted in establishment of vascular fellowships, certification in vascular surgery in the mid 1980s and most recently, a Primary Certification in Vascular Surgery, an integrated residency program beginning from medical school dedicated to vascular surgical training, and a Vascular Surgery Board.

Vascular surgery has continued to evolve in the six decades of the Society for Vascular Surgery's existence. The specialty has separated from cardiac surgery; the role of the non-invasive vascular laboratory has increased; issues of venous disease management have come back to the fore; and medical management of vascular disease is increasingly important. The endovascular revolution has fundamentally changed both the scope of the specialty and our approach to education of both trainees and surgeons in practice. Societal and economic pressures on vascular surgeons have increased.

To respond to these changes, the Society for Vascular Surgery also has changed. In 2000, discussions began in the Joint Council about creating a more focused organization which could serve as the voice for vascular surgery in North America. This ultimately led to the conjunction of the American Association of Vascular Surgery (formerly North American Chapter of the International Society of Cardio Vascular Surgeons) and the Society for Vascular Surgery into one larger society, retaining the name Society for Vascular Surgery. This single society, which was formed in 2003, remains true to the goals of the original Society of Vascular Surgery and seeks to implement them through a coordinated, centrally administered program. The current Society for Vascular Surgery is a complex organization; a far cry from the 31 founding members who gathered in Atlantic City in 1947. The national meeting is a week long, not a one-day affair. Yet the goals of the Society for Vascular Surgery and its dedication to education research and advancement in the field of vascular disease remain unchanged. The Society for Vascular Surgery has grown to a premier vascular organization dedicated to progress in vascular disease and is well situated to advance these goals in the decades to come.

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