The Annual AAP Section on Surgery Meeting was held on October 20 to 22, 2023 in Washington, D.C. This marked the 75th time that the AAP Section on Surgery has met. There was great education, networking, and advocacy. Our Chair, Dr. Cynthia Downard opened the program that was assembled by Program Chair, Dr. Jennifer Aldrink. The Program Committee did an excellent job of selecting outstanding Basic Science and Clinical Science Papers that were presented on Saturday and Sunday. There were also three outstanding symposia and we will review some of the concepts presented by our multi-specialty and collaborative presenters.
The 2023 Jens Rosenkrantz Resident Research Award and Chair’s Choice Winners

One highlight of the NCE Section on Surgery Meetings is seeing the fantastic research being done by trainees on both the basic science and clinical science fronts. This year’s work was similarly exceptional. The Program Committee led by Dr. Jennifer Aldrink selected the following 2023 Jens Rosenkrantz Resident Research Award Winners:

**Basic Science:** Kasra Khalaj, MSc, PhD - Human amniotic fluid stem cell extracellular vesicles rescue features of lung development in human hypoplastic fetal lungs. He is a research fellow at the Hospital for Sick Children and was mentored by Dr. Augusto Zani.

**Clinical Science:** William G. Lee, MD - Sex-based disparities in the management of pediatric gonadal torsion. This work was done at the Children’s Hospital Los Angeles, Keck School of Medicine, USC and was mentored by Dr. Lorraine Kelley-Quon.

**Advocacy Award:** Sinhu V. Mannava, MD - Bridging the provider knowledge gap: a toolkit on reproductive rights by the American Academy of Pediatrics (AAP) Section on Surgery (SOSu) and the American Pediatric Surgical Society. She is a Pediatric Surgery Research Fellow at Indiana University School of Medicine and was mentored by Dr. Leslie Knod.

**Poster:** Gwyneth Sullivan, MD, MS - Empowering pediatric surgeons to promote environmentally responsible operative room practices. She is a General Surgery Resident at Rush University Medical Center and was mentored by Dr. Mehul Raval.

The Jens Rosenkrantz Resident Research Awards were first handed out in 1985. Rosenkrantz was a pediatric surgeon and researcher who finished his career in Cincinnati. The awards are determined by the AAP Section on Surgery Program and Publications Committee. Many award winners have gone on to successful careers in pediatric surgery and we look forward to these award winners’ future careers.
Advocacy is at the core of the AAP’s work. This amazing two-hour session was given by leaders who represented the wide breadth of our surgical family in the field of advocacy. Bindi Naik-Mathuria from the AAP Section on Surgery moderated this remarkable session.

**Kris Jatana** from the Section on Otolaryngology spoke of his advocacy journey which began in 2010 after caring for a child who ingested a button battery. He outlined research on the topic including novel solutions to minimize injury. He highlighted the GIRC APP which allows care providers to upload patient data into an international registry. He also outlined the 2022 US Legislation: Reese’s Law which was galvanized by the death of a child who ingested a button battery. Reese’s mother, **Trista Hamsmith** was on the panel. Jatana then discussed how safer battery design will limit future injuries.

**Mark Del Monte**, the CEO of the AAP, presented an overview of the current challenges facing children in 2023. He highlighted how black and Hispanic children are disadvantaged and how these health disparities are driven by political determinants of health. He emphasized the need to make foundational changes in funding for children to secure the financial wellbeing of future generation. He urged us to use our voice to help children.

One clear example of this was **Ala Stanford** who took action to vaccinate people against COVID in her community of Philadelphia. This led to development of the Dr. Ala Stanford Center for Health Equity. Her tireless work led to her recruitment by the Biden Administration. Currently, she continues her work by addressing the roll out of formula during the recent nationwide shortage. She urged us to speak up and say something when we see bias.

**Peter Masiakos** then spoke about his journey as an advocate over 20 years which began with a fatal ATV crash involving a child. He worked with state legislatures to help define the safer use of ATVs. His tale involved law makers fighting back, but with the backing of a coalition he built, a law was successfully passed. Since the law’s introduction, there has been a 40% reduction in ED visits and a 50% reduction in severe TBI. This has saved $16M in acute care costs and $68M in overall costs, which has lead to more successes and passage of further legislation as he focused on other important topics.
Nothing is more important than the relationship between surgeons and anesthesiologists. This symposium included both specialties and focused on timely topics for all: pain management and reduction in narcotic use for our patients.

**Giorgio Veneziano** provided updates on some newer nerve blocks that may reduce the use of opioids, the increased interest in regional anesthesia in the NICU to reduce opioid exposure, and the current impact of infant spinal anesthesia in avoiding airway instrumentation, decreasing OR times, bypassing the PACU, and overall cost savings.

**Andrew Franklin** then introduced the novel field of pediatric perioperative medicine, which is patient and family centered, focused on variability reduction, and saves costs. He spoke on the basic building blocks of successful pediatric enhanced recovery after surgery pathways. Finally, he demonstrated how multidisciplinary care teams working in synergy can improve perioperative metrics for children.

**KuoJen Tsao** identified methods to determine current opioid prescribing practices and shared how his organization made dramatic changes to reduce opioid use. He described how cryo-analgesia in pectus surgery decreased postoperative opioid use and length of stay. These results have been replicated through a multicenter trial. Optimizing multimodal pain management has been an iterative process over the years, including the introduction of liposomal bupivacaine (Experal).

**Lorraine Kelley-Quon** then described the 3 pillars of opioid stewardship; recognize the risks of prescription opioid use, maximize non-opioid analgesics, and educate families on safe prescription, storage, and disposal. She highlighted how we as surgeons may not know that opioids are being prescribed for our patients. Through QI work, we can make a meaningful reduction in opioids after surgery.
One of the many strengths of the AAP is the ability to work with our colleagues and this was perfectly portrayed in this joint symposium focused on ovarian issues. Here, pediatric general surgeons shared the stage with our pediatric adolescent gynecology colleagues.

**Lisa Allen** provided an overview of benign and malignant ovarian lesions, emphasizing the need to have benign disease receive appropriately conservative management while malignant tumors receive appropriately aggressive management. She reviewed algorithms leveraging ultrasound and tumor markers that help with decision making. Lastly she outlined the importance of multidisciplinary discussions to further refine the decision making process.

**Barrie Rich** focused on malignant ovarian germ tumors. She highlighted that surgeons unfortunately have not done a good job in surgical staging with only 1 in 4 surgeons performing adequate staging leading to over and under staging of patients. She outlined the COG guidelines that currently provide best practices. Finally, she demonstrated that frozen sections is not a good means to guide therapy as it leads to incorrect diagnosis in more than 1 in 3 patients.

**Kate McCracken** introduced the audience to oncofertility whereby one saves or protects reproductive tissue so that individual can have children in the future. As the number of long term survivors increases, this issue will be even more relevant and patients increasingly are raising this issue. Patients at highest risk are those receiving alkylating agents (e.g. cyclophosphamide, cisplatin, carboplatin). She outlined how this is performed and that more than half of those enrolled have succeeded despite numerous barriers including affordability, availability, accessibility, accommodation, and acceptability.

**Christa Nagel** closed the session by reviewing the workup of an ovarian mass and reminded us that the ovary continues to be a frequent location for metastases and should be remembered. She reviewed some less common tumors such as borderline ovarian tumors, malignant stromal tumors (juvenile granuloma cell tumor, Sertoli-Leydig). Finally she introduced us to some novel techniques such as immunofluorescence that can demonstrate viability and help identify lymph nodes.
Salzberg and Ladd Award Presentations

The Section on Surgery had three Named Award winners. The first award of the meeting was the **Arnold M. Salzberg Mentorship Award**. The award is named after Salzberg, a pediatric surgeon who spent his 35 year career at the Medical College of Virginia. He is best remembered by his trainees for his humanity and unremitting devotion to patients and students. He was considered the “ultimate mentor” and his namesake award was first given in 1997. This year the Arnold Salzberg Mentorship award was bestowed upon **Dr. Geoffrey K Blair**. He did his training at the University of Toronto and the Hospital for Sick Children. He recently concluded a 4 decade career a the University of British Columbia and the BC Children’s Hospital from 1986 to 2018. He continues to educate medical students to this day. His nomination was supported by all of his past fellows who now work in Canada, US, Saudi Arabia, and Africa. His passion for teaching and mentorship was universally expressed by his trainees who strongly believed he was the individual most deserving of this award.

The second award of the event was the **William E Ladd Medal** which was presented to **Mary Brandt**. She was introduced by **Diana Farmer** via a video introduction. In her speech that followed, Brandt focused on the topic of physician well being. She went through the stark data that indicates that we as surgeons are not doing well: high suicide rates, burnout, medical errors, divorce, alcohol abuse, and underutilization of medical screening. Brandt urged us to be bold and get to the root of the burnout crisis. She cited the moral distress that we experience by working in corporate setting that put profits first. She proposed that surgeons must prepare through encouraging compassion. Also, we must call out when things are not normal, such as working the day after being up all night. Lastly, she stated that we work not for the business leaders but for our patients and for each other.
2023 Stephen L Gans Visiting Professor: Dr. Richard Reznick

This year, the visiting professor was Dr. Richard Reznick. He completed his medical degree at McGill University and later graduated from the general surgery training program at the University of Toronto. He completed a Master of Education at Southern Illinois University then did a fellowship in colorectal surgery at the University of Texas in Houston. He has had an impressive career as an educator and physician, including recently serving as the 46th President of the Royal College of Physicians and Surgeons of Canada. He is also the former chair for the Department of Surgery at the University of Toronto. Currently, he is Professor of Surgery and Dean Emeritus, Faculty of Health Sciences Queen's University located in Kingston, Ontario, Canada.

He started his lecture with the important 1984 case of Libby Zion who died in part from lack of supervision and fatigue from a trainee. After her death, patient safety issues continued to rise, leading to worldwide changes in resident working hours. Many articles have been written on the conflict between wellness and competence. The dilemma lies in the resident's identity as a student who, while learning a craft, is also providing a service. The resultant lack of experience, which has recently been exacerbated by COVID-19, reveals the truth that our current training models are not based in evidence.

Reznick suggested that we need radically change the education paradigm. He helped lead a radical change at Queen's University through the introduction of Competency based medical education (CBME). This system is focused on learner outcomes and deemphasizes time-based education. The transformation in education was challenging and expensive, led to extra work, and required buy-in from stakeholders. Reznick and his team focused on diminishing wasted time and accelerating the pace of achieving competence. This led to some trainees finishing training earlier. As he looked back at this work, he concluded that educational change mandates leadership fortitude, costs money, and is usually met with resistance and turbulence. But once completed, there is collective pride and the reassurance that the change was well worth it.

Dr. Stephen L. Gans (1920-1994) trained in pediatric surgery with Willis Potts in Chicago, IL and finished in 1950. Gans practiced in Los Angeles for more than four decades. Gans is credited as being the key figure in launching the Journal of Pediatric Surgery which he perceived as vital to the advancement of pediatric surgery as a unique speciality. Gans also understood the importance of international collaboration and was the first president of the Pacific Association of Pediatrics Surgeon. A year after Gans passed away on August 1, 1994, the annual Section on Surgery Overseas Lecture was named in his honor.
The Chair’s Address

Our 61st chair, Dr. Cynthia Downard provided her Chair Address highlighting her Advocacy Journey. She talked about how we as pediatric surgeons have the unique opportunity to advocate for our patients and provided concrete examples of what she has done and what we all can do as we care for our patients. She outlined two simple steps that we can take. First, put up your hand and volunteer. This can be anything in your institution, or at a local level, national level, or international level. A journey begins with a single step. However, not only do you need to step up, you need to do something. What you do depends on many things but volunteering is meaningless if there is no end product that results. These two simple steps are often overlooked but is the basis for anyone interested in advocacy. This newsletter’s summary of the meeting highlights how the theme of advocacy was embedded throughout, including the addition of an advocacy themed Rosenkrantz Award this year.

As the Chair, Dr. Downard also thanked the amazing work done by Program Chair Dr. Jennifer Aldrink who assembled the symposia as well as chaired the committee that selected all of the outstanding clinical and basic science papers, posters, and presentations. This committee also selected the Rosenkrantz winners. Along with this work, Aldrink also submitted surgical topics that were presented to pediatricians that were deemed important for their practice.

Next, Dr. Downard acknowledged the tireless work of Vivian Thorne, the Section on Surgery Program Manager. Ms. Thorne is an invaluable resource and is integral to the SOSu’s functioning. She coordinates information from the AAP and provides it in a timely fashion to the section members and the Executive Committee. Dr. Downward also thanked past chair, Dr. Kenneth Gow for his continued work on the section’s newsletter, Operative Notes which helps to provide timely information to its members. Finally, she called up Dr. Saleem Islam to the podium for the ceremonial passing of the Rehbein Statue. This statue, provided to the section from Dr. Fritz Rehbein in 1966 has been passed down from each chair to the next. This year, Dr. Downard commissioned the creation of a special box that will safely house the statue. Both she and Dr. Islam invite you all to next year’s NCE in Orlando - September 27-29, 2024.