Rick Abbott: ISPN President 2007–2008

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I was born on August 31, 1950 in Schenectady, NY, USA, the first boy born of my generation in both of my parent's families. Within months of my birth, my parents decided to give up promising careers in a large, multinational firm and moved us back to their Midwestern hometown of Decatur, IL, USA. Three brothers were born in short order followed by a sister.

Decatur was a very nurturing environment in which to grow up. It lay in the central part of Illinois, a rich farm country known as the land of Lincoln. My parents were both second-generation inhabitants of Decatur, and they could trace their central Illinois families back to the time of Abraham Lincoln. Many of the traditions of farm life were maintained in my own family's life. Family reunions were frequent and often held at cousin's farms in grassy parks next to fields where corn was just breaking the soil. We would all bring tables on which mountains of food would be laid. The afternoon was filled with play and, as we got older, we were treated with rides on the tractor. My youth was very much about valuing family, friends, and community. Our week was centered on Sunday. After an early breakfast, there was a mad dash for the seven of us to dress and then walk to church. After service and socializing with friends over punch and cookies, we would go to my father or mother's parents for Sunday dinner, a weekly event lasting the entire afternoon. My great-grandmother, grandparents, aunts, and uncles would all sit at the table for hours in easy conversation, while my brothers and I would entertain ourselves with our cousins. Summer time was a

time for family, and commonly, the seven of us would load up the station wagon to head north or west for camping. By the age of eight, most boys in our community would join the Boy Scouts. Scouting became another important part of my life in Decatur. Its activities took me throughout the Midwest, and my later summers were in large part spent at their camps. It was in this organization that I had my first leadership experience. I was fortunate to attend the National Jamboree in 1964 and was awarded the Eagle Scout Rank the next year. This typical Midwest American experience instilled in me a sense of security and the value of friends and community. I could have had no better preparation to explore our greater world.

In 1968, I entered The Colorado College, a small liberal arts school in Colorado Springs, CO, USA. This was a time of torment in our country, and Colorado Springs was not spared. We had just experienced the assassinations of Robert Kennedy and Martin Luther King. My generation was in full rebellion and very inclined to take to the streets to voice our feelings. Colorado Springs was surrounded by military bases and served as a staging point for our soldiers preparing to go to Vietnam. Consequently, it received much attention from the anti-war movement. This reality combined with the natural beauty of the Rocky Mountains to divert my attention from studies. These diversions were not enough to affect my social life, however. I met my future wife, Lainy, during my junior year at Colorado College. We have been together ever since.

In the late 1960s, the government instituted the draft lottery in response to a perceived unfairness in our drafting of conscripts for military service. I remember sitting on the floor in my college dorm room as the numbers were drawn. I did not have to wait long; my birthday was the 11th number chosen. Several weeks after graduation from college, I received a draft induction notice. I chose to enter

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the Air Force where I was trained as a hospital laboratory technologist. It was during this time that my interest in medicine reemerged. During my childhood, my grandparents had groomed me for medicine, but their desire had never taken hold to a level that sustained my efforts during college. With my Air Force experience, I had a taste of what I could achieve in medicine, and desire drove me through the rehabilitation of my college transcript. I was accepted to Baylor College of Medicine in the spring of 1977 and graduated in 1980.

In 1975, after 2 years in the Air Force, I married Lainy solidifying a relationship that by that point had become a central pillar to my life. I was fortunate to have been stationed in Fort Worth, TX, USA, for my tour of duty as she was living in Dallas at the time. Both before and after our marriage, her love and company provided the needed counterbalance as I studied and worked to first gain the credentials needed to attain medical school admission and then to complete my medical education. After acceptance to Baylor, she maintained our home while earning the income needed to support us by catering and instructing in a cooking school, allowing me the space and time to learn. To this was added the additional challenge of two boys, Richmond and John. Richmond was born during my last semester in medical school while John was born during my fourth year of residency. I can only partially comprehend the sacrifices that this entailed, but I know that I will be forever in her debt. She has provided me with a safe harbor and has raised two accomplished sons who make us very proud (Fig. 1).

While I was a student at Baylor, it was recommended that I do a brief rotation in Neurosurgery in order to learn how to examine a patient with a neurological emergency. Following that advice, I chose it as my subspecialty rotation while on my clinical surgery rotation. The first morning I arrived, I was placed in an operating room where the patient was a teacher who had acutely lost her vision due to an olfactory groove meningioma. I watched all day as it was

removed, and when she awoke, her vision had been restored. I never looked back. Fate then took me to the operating room of Dr. Cheek, the man who molded my early medical career.

Dr. William Cheek was the surgeon in chief at Texas Children's Hospital and the director of pediatric neurosurgery there. Shortly after I met him, he was also appointed as acting chairman for the neurosurgery residency program at Baylor. One day as I scrubbed with him, I mentioned my interest in neurosurgery. As we talked of my plans, I shared my concern about needing more exposure to medicine in general and that I was considering which electives during my fourth year of medical school would best prepare me for a career in neurosurgery. He recommended that I finish medical school in 3 years and complete my general education in medicine as an intern mentioning that it was better to be paid to learn rather than to pay. I followed his advice and was accepted into the neurosurgical residency program. Bill continued to guide my development. He taught me the challenges and delights of helping children with neurological illnesses. He showed me the rewards of dealing with complicated, seemingly refractory problems that these children can sometimes develop. He showed me his approach to families with devastating problems. At the time, he was quite active in the politics of pediatric neurosurgery, and his junior partner, Jack Laurent, was also becoming active. I lived their lives vicariously as I listened to them talk of their meetings in Cairo, Budapest, Peter Island, and the Barbados. I was also greatly influenced by Robert Grossman who became chairman during my second year of residency. At the time, he was studying how best to exploit the surgical anatomy when operating. Much time was spent during his surgeries studying and drawing anatomy. As a consequence, I benefited by understanding the anatomical underpinnings of the most basic of surgical techniques we employ. Over 40 voluntary faculty members also blessed our program. This gave me an exposure to many approaches to the problems typically encountered in neurosurgery, but I always found myself making my way back to the pediatric neurosurgery offices at Texas Children's so I could spend time with Bill. I had learned that Bill had something special that I did not feel when working with the rest of the faculty at Baylor. He loved his specialty, spoke of his colleagues in pediatric neurosurgery constantly, and was energized to advance pediatric neurosurgery, both in his academic work and by devoting time to its causes. During my fourth year as a neurosurgery resident, I decided to commit to pediatric neurosurgery. I was speaking with Jack about my future and he asked whether I would like to see a failed back or a failed shunt come through my office door. For me, there was only one answer. Bill arranged for me to travel to see Fred Epstein in New York. Fred had just decided to

Fig. 1 From left to right, John, Rick, Lainy, and Richmond Abbott

establish a fellowship in pediatric neurosurgery, and I was fortunate to be accepted for training. I entered into this training in July of 1986, completing it a year later.

Part of my fellowship year was devoted to the development of a program to manage children with cerebral palsy. This program grew rapidly affording me the opportunity to stay on with Fred and his associate, Jeffrey Wisoff at New York University. Working with these two gentlemen not only gave me the unique opportunity to gain further clinical skills but also to be mentored by Fred in my political development. I was able to travel widely during my fellowship to witness unique treatments of childhood spasticity and to meet leaders in the field such as Warrick Peacock and Marc Sindou. I was introduced to many more leaders of pediatric neurosurgery when we hosted the International Society for Pediatric Neurosurgery in New York at the end of my fellowship year. In 1989, Fred invited me to attend the American Society for Pediatric Neurosurgery's annual meeting. It was exciting for Lainy and me to attend and experience the comradery of the group. I began to understand the closeness of pediatric neurosurgery. Two years later, I interviewed for membership in the American Society of Pediatric Neurosurgeons, and I can still remember Don Reigel grilling me. He didn't ask questions about the science of pediatric neurosurgery. Rather, all his questions were about how I intended to use my membership to support the growth of our specialty. He left no misunderstanding about what the duties of an academic pediatric neurosurgeon in North America were—I would always devote my energies to furthering our specialty. It was about that time that I also became active in the International Society of Pediatric Neurosurgery (ISPN). Friendships made through colleagues and volunteer work in education resulted in early appointments to posts in the American Association of Neurological Surgeons/Congress of Neurological Surgeons (AANS/CNS) Joint Section for Pediatric Neurosurgery and the International Society for Pediatric Neurosurgery. Many weekends were sacrificed to society work during this period. Talks were prepared for educational courses hosted by the ISPN. I developed our website using software I had purchased for my practice. In 1998, I was appointed scientific chairman for the ISPN and

organized my first meeting in 1999 in Salt Lake City. I was privileged to participate in three meetings and greatly enjoyed the experience. The Office of the Treasurer followed and, after a year break, I received the great honor of being named president-elect of the ISPN at the meeting in Taipei in 2006. During this period, I also became a director for the American Board of Pediatric Neurological Surgery, the chairman of the AANS/CNS Joint Section for Pediatric Neurosurgery, and a member of the executive council of the American Society for Pediatric Neurosurgery. I learned that our specialty's continued development relies on the hard work of volunteers and that we owe a great deal to such individuals.

For the past 20 years, I have witnessed an incredible maturation in our field and in the societies of pediatric neurosurgery. Our meetings have become increasingly complex with large number of attendees and budgets in the hundreds of thousands of dollars. In North America, our fellowship training programs now seek accreditation by an established council, and our trainees can be certified. The training of pediatric neurosurgeons has become the model for subspecialty training for other subspecialties in neurosurgery. Children's hospitals in the USA now demand either board certification or eligibility for certification by the American Board of Pediatric Neurological Surgeons for candidates applying for privileges to practice neurosurgery in their institutions. This has all been extremely rewarding for me to see having known personally most of our specialty's fathers who fought hard for this.

I have been fortunate that fate has dealt me the challenges and experiences that it has and has allowed me to be in the right places at the right time. My wife and family have nurtured me, provided security to allow me to grow, and love to strengthen me during times of doubt. The Air Force showed me that medicine was a field I loved. A single surgery showed me that neurosurgery could make time stand still. Bill Cheek focused my career goals, first to neurosurgery and then to pediatric neurosurgery. Fred Epstein put the fire in me to champion our specialty and its unique responsibility to children by becoming involved in our specialty's politics. I have been blessed and am truly thankful for it.