This year, the Annual Meeting of the Society of Neuroanesthesia 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 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.
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, University 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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