



# ORACLE

To further the achievements of women practicing thoracic surgery by providing mutual support and facilitating professional advancement

## President's Corner

By Mercedes K.C. Dullum, MD



WTS had another very exciting and productive year in 2003. Thanks to all the efforts by our previous officers and enthusiastic members, WTS has firmly established itself as a leader in the Thoracic Surgery community. Many of our members now serve on major committees and taskforces in our societies, including Carolyn Reed's recent appointment as Vice Chair of the American Board of Thoracic Surgery.

At the 40th Annual STS business meeting in San Antonio, many new women were accepted in to membership: 18 new full members, 7 candidate members, and 1

international member. There are now 42 women in Thoracic Surgery residencies out of the approximately total 340 residencies.

In mid-November 2003, WTS leadership held a strategic planning retreat in Washington, D.C. Our intent was to identify the 2004 initiatives for the WTS. During the meeting, the group evaluated the mission of WTS in order to identify the gaps, opportunities, and the best areas to focus the members' attention on during 2004. The following themes emerged during the first day that crossed all four of WTS' goals: value, mentoring, outreach, professional advancement, networking and the website.

These ideas were distilled into two initiatives that would have the most impact and either directly or indirectly further advance all four goals. Action plans were created for: **Mentoring Plan** and **Website** development.

The **Mentoring Plan** will be focused on those individuals who will be completing their residency programs. This will be a near term goal and additional initiatives will be created to expand this focus going forward. Cynthia Herrington

(Herri011@umn.edu) is the Chair of the Mentoring Committee

The current **WTS Website** ([www.wtsnet.org](http://www.wtsnet.org)) has undergone tremendous change since its inception. The efforts for 2004 will allow us to add greater value to our members from a content and navigation perspective. Shauna Roberts (RobertsSh@genesishhealth.com) is our web site editor and chair of the Web Site Committee.

Our general membership meeting at the STS was very well attended and the minutes can be obtained on the web site. New officers were elected and the members voted to make a contribution of \$10,000 to the Thoracic Surgery Foundation for Research and Education, earmarked for the Nina Starr Braunwald Fund. This represents an amount equivalent, based on our membership, to the cumulative per-member amount contributed by the Society of Thoracic Surgeons to the Foundation since its inception.

We look forward to an exciting year of growth and development for the Women in Thoracic Surgery

## Mentoring Program

By Cindi Herrington, MD

Mentoring has been a focus for the Women in Thoracic Surgery since its inception. Active mentoring is one of the four objectives of our mission statement, and is one of the initiatives that came from our strategic planning retreat (November, 2003). Our ideal is to ultimately have a program that spans from early education (high school/college) to retirement. We will begin with women in CVTS training and in their first few years of practice. The program objectives include:

- (1) identifying Women in Thoracic Surgery members who want to become a mentor,
- (2) identifying women presently in CVTS training, and offering them Women in Thoracic Surgery membership,
- (3) adding a resident mentorship page to the website that will list mentors, potential job opportunities, and grant opportunities, and finally,
- (4) writing a "survival guide" for cardiovascular and thoracic surgery / as we progress in each of these areas, the results of our improvements will be found on the Women in Thoracic Surgery web page.

We have begun the process of identifying mentors. A WTS mentoring commitment survey has been created, and can be found in the Oracle accompanying the dues reminder as well as on the WTS website. This survey allows our members who desire to participate as a mentor to define their areas of expertise. Once these profiles have been collected, they will be placed on the mentoring page of the website. We have also identified the women presently in CVTS training. There are at least 42 female CVTS residents presently in training.

Membership applications for the WTS and information about the mentoring program will be sent to them shortly.

Our final objective is to take advantage of our collective experience and create a Women in Thoracic Surgery Guide that will address issues that occur during fellowship training and during those years immediately following training. Examples include an update on the 80 hour work week, preparation for ABTS boards, career planning, contract negotiation, research and career advancement. We are actively in the process of putting information together for publication this summer.

I would invite any active member at Women in Thoracic Surgery to become a mentor for a resident, student or young surgeon. Please, fill out a Women in Thoracic Surgery mentoring commitment. I would also be glad to hear from anyone about any ideas or improvements to the program, as it is in its infancy.

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## Surgical Specialties in Austria Preliminary Data of a National Survey

Adelheid End<sup>1</sup>, Hildegunde Piza<sup>2,3</sup>

<sup>1</sup>Department of Cardiothoracic Surgery,  
University of Vienna

<sup>2</sup>Department of Plastic and Reconstructive  
Surgery, University of Innsbruck,

<sup>3</sup>Ludwig-Boltzmann-Institute for Quality  
Control in Plastic and Reconstructive Surgery  
Austria, Europe

Austria is a small Central European Republic with about 8.1 Mio inhabitants, and an area of 84,000 km<sup>2</sup> which is half the area of Washington State. It is member of the European Union, and has a well-organized health care system. There are 3 large University Hospitals: the universities in Vienna (=capital with 1.6 Mio citizens), Graz and Innsbruck; and 206 community and private or church-affiliated hospitals. We present a brief history of women surgery in Austria, recent demographics and a summary of the national survey of female surgeons in 2001.

### History

The history of Austrian women surgeons started with a delay of more than 50 years after Elizabeth Blackwell and her sister Emily had been pioneers in the field of surgery in America. In Austria, the first known female surgeon was Frieda Barolin, assistant in general surgery at the University Hospital in Vienna in 1914 (Fig. 1).



Fig. 1

Elisabeth Winkler (plastic surgery) was the first female surgeon to become associate professor in 1962 in Vienna, followed in 1973 by Doris Kronberger-Schönecker in Graz (general surgery). In 1976 a pediatric surgical division was put under the leadership of Gesine Menardi (University of Innsbruck).

(cont. on page 3)

**Surgical Specialties in Austria (cont. from page 2)**

Freyja Smolle-Juettner was the first to reach the position of associate professor in thoracic surgery in Graz in 1988.

Hildegunde Piza was the first woman to be offered a chair (full professorship) and to be appointed head of a university department (plastic surgery in Innsbruck). Fig. 2 shows the 6 units out of a total of 231 surgical departments headed by female surgeons, and the dates of their appointments.



H. Piza

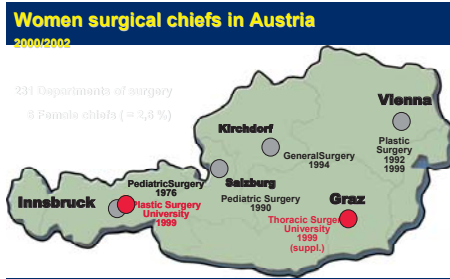


Fig. 2

**Demographic details**

Today there are 34,400 licensed medical doctors, 1,200 (3.5 %) of whom are general surgeons. As of 2001, there are 130 female board-certified general surgeons in Austria, representing 10.5 % of the total; but there are only a few women in cardiothoracic and vascular surgery (Fig. 3). The percentages of female surgeons in the subspecialties - pediatric, plastic and reconstructive, general and trauma surgery - are 27 %, 18.7 %, 10 % and 4.7 %, respectively.

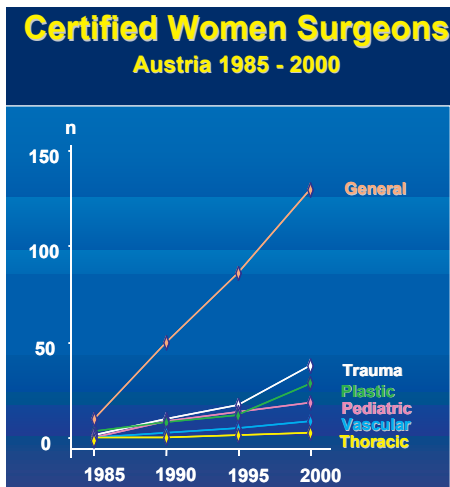


Fig. 3

Their numbers are steadily increasing (1).

**National survey**

In 2001 a national survey was conducted of all 351 living female surgeons. The response rate was 58.7 %; mean age was 40 years (24 to 78 years). The main surgical specialties were general (51.6 %), trauma (24.5 %), pediatric (9.4 %), plastic and reconstructive surgery (8.3 %), cardiothoracic and vascular surgery (6.2 %). We chose these specialties because of their high operative volume in Austria. 58 % were certified, and 42 % were in training (Fig. 4). 281 women were active surgeons at the time of the survey, 25 were on maternal leave, 11 had retired, and 44 had left surgery. About 34 % of all women worked in Vienna. Only 11 of the 351 women surgeons held or are currently holding a higher academic position, the “venia docendi” which corresponds to associate or full professorships.

The majority of female surgeons are working in community hospitals (Fig. 5). The survey included sociodemographic variables, profession and career, family life and partnership (2). Overall professional satisfaction was assessed on a five-point scale (1 very satisfied, 5 dissatisfied). The results in the group of active women surgeons are shown in Fig. 6. Pediatric and plastic surgeons are mostly very satisfied with their job (scale 1+2), followed by trauma, and finally by general surgeons. The number of active cardiothoracic and vascular surgeons, who responded to the survey, is small (n=10), the degree of satisfaction, however, is generally quite high.

**Summary**

Cardiothoracic surgery is a relatively young discipline in Austria with only a few female cardiothoracic surgeons being certified. There are 3 University Hospitals in Austria - Vienna, Graz and Innsbruck - where cardiothoracic surgery is practised. Besides, there are about five community hospitals with departments of cardiac and/or thoracic surgery. Although the number of women

	Certified		In Training	
	n	%	n	%
General Surgery	107	52,2	74	50,7
Trauma Surgery	48	23,4	38	26,0
Pediatric Surgery	21	10,2	12	8,2
Plastic & Reconstructive	18	8,8	11	7,5
Cardiothoracic&Vascular	11	5,4	11	7,6
	205		146	

Fig. 4

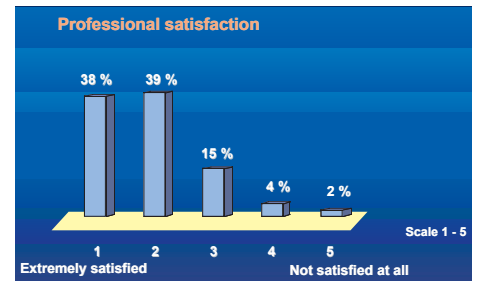


Fig. 5

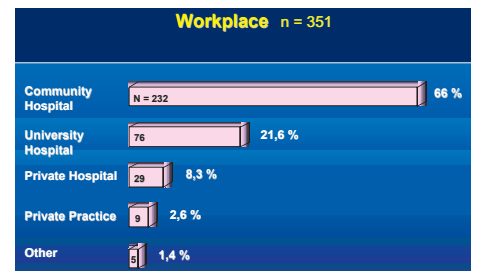


Fig. 6

surgeons has been rising in the surgical subspecialties over the past years, female cardiothoracic surgeons still constitute a small number. Further analysis of the study will give insight into the self-perception of the surgical profession.

**References**

- 1 Austrian Medical Association 2001
- 2 End A, Piza H: National survey of women surgeons in Austria - Unpublished data 2001

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A. End

# Moving Ahead



Leslie J. Kohman, MD has been appointed as the next Chair of the Surgery Committee of Cancer and Leukemia Group B. She is a Professor of Surgery SUNY - Upstate Medical Center in Syracuse. Beyond this, she has had extensive experience working with CALGB most recently completing a term as the Chair of the NCI Subcommittee H. This is a very prestigious position as she assumes full responsibility from David Sugarbaker, MD who chaired the Surgery

Committee for over ten years. Congratulations to Dr. Leslie Kohman!

Carolyn Reed, MD has been appointed to Chair the American Board of Thoracic Surgeons.

More women are choosing Thoracic Surgery. This is the first year in which we have 'double digit' residents. There are currently 42 women in residencies out of a total of 340. Many women were accepted into the Society of Thoracic Surgeons membership including 18 Full Members, 7 Candidate Members and 1 International Member.

*See you in April in Toronto at AATS.!*

# Thank You!



Once again, Anita Bessler of Edwards has graciously sponsored the WTS Luncheon. We appreciate the consistent support of our industry colleagues. These meetings afford us an opportunity to network with our colleagues and are a building block for WTS.

# San Antonio STS Annual Luncheon Meeting of WTS



**MOVING AHEAD!**

Carolyn Reed, MD, is the new Chair of the American Board of Thoracic Surgeons. We congratulate her on this leadership role in our profession.

**WTS Supports TSRF**

WTS has contributed \$10,000.00 to the Nina Braunwald Scholarship Fund of the Thoracic Surgery Research Foundation. This is done on behalf and through the support of all the members of WTS. It reflects our commitment to the advancement of our specialty and the advancement of women as Thoracic Surgeons.

**WTS Leadership**

At the annual meeting in San Antonio, these new leaders were inducted:

*Vice-President -*  
**Margarita Camacho**

*Chair, Mentoring Committee -*  
**Cindy Herrington**

*Chair, International Member's Committee -*  
**Carolyn Dresler**

*Board Members -*  
**Mary J. Boylan, Nora Burgess, Carolyn Dresler, Shauna Roberts**

*Board Member at Large -*  
**Yolanda Colson**

**WTS Website**

Remember to visit our website at [www.wtsnet.org](http://www.wtsnet.org)

**European Women Thoracic Surgeons**

**Women In Thoracic Surgery Luncheon Attendees  
Vienna Austria  
Monday, October 13, 2003**

**Kalliopi Athanassiadi, MD**  
Greece

**Monica Casiraghi, MD**  
Columbo, Italy

**Tina Peters, MD**  
Klinekum Braunschweig,  
Germany

**Sandie Fraund, MD**  
Keil, Germany

**Carin Van Doorn, MD**  
London, England

**Flavia Sorrentio, MD**  
Pisa, Italy

**Franca Melfi, MD**  
Pisa, Italy

**Claudia Ghiribelli, MD**  
Siena, Italy

**Kathleen Fenton, MD**  
Omaha, NE, USA

**Adelheid End, MD**  
Vienna, Austria

**Ina C. Ennker, MD**  
Lahr Baden, Germany

**Paola Ciriaco, MD**  
Milan, Italy

**Nicoletta Salviato, MD**  
Sicily, Italy

European Association of Cardio Thoracic Surgeons meeting in Vienna at the Women in Thoracic Surgery Luncheon on Monday, October 13, 2004. Photo by Brigid Scanlan Eiyneck of Scanlan International, Inc.

The recent EACTS/ESTS meeting (Vienna, October 2003) was marked by the first organized meeting of the European women surgeons. Adelheid End, MD, a thoracic surgeon at the University of Vienna, organized and ran the meeting. Twelve women surgeons attended the meeting to discuss what direction the European group should move in. The consensus was that the European organization wants to address the serious professional (politics, training, committee work, professional development) and academic concerns. They also are interested in having at least one woman attend our WTS meetings here in the States (at the annual STS or AATS meetings). We look forward to hearing more from our colleagues during the coming year.

**Women in Thoracic Surgery would like to thank our partners in industry for the support they have given over the years:  
Scanlan International,  
Edwards LifeSciences,  
Medtronic, and Guidant.**



# Women in Thoracic Surgery

**Women in Thoracic Surgery (WTS) is an international organization of thoracic surgeons whose purpose is to:**

- Provide quality care to our patients
- Mentor young women interested in pursuing careers in thoracic/cardiac surgery
- Provide educational opportunities for our members
- Educate the public, especially women, regarding cardiac and pulmonary health and disease

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*To further the achievements of women practicing thoracic surgery by providing mutual support and facilitating professional advancement*

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**2004 WTS OFFICERS**



*Lorraine J. Rubis, M.D.*

*106 - 4th Street East*

*St. Petersburg, FL 33715-2241 U.S.A.*

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# Women in Thoracic Surgery Mentoring Commitment

At the completion of the recent Women in Thoracic Surgery strategic planning retreat, creating an active mentorship program was placed at the top of our priority list. We have now begun to create the infrastructure necessary for this program. We will begin by focusing on those women presently in training and those just recently out of training. Our hopes are that this program will expand to include young women in college and medical school up and through their career and retirement.

We are developing a residents' page on the WTS website where interested parties can come and find WTS members interested in mentoring. I would ask you to take a few moments to answer the following questions and become an active mentor for the Women in Thoracic Surgery.

Yes, I would like to be listed on the resident's page as a WTS mentor.

Name \_\_\_\_\_

1) My practice is best defined as (please select more than one):

- |   |   |
|---|---|
| <input type="checkbox"/> Cardiac                  | <input type="checkbox"/> Private practice |
| <input type="checkbox"/> Thoracic                 | <input type="checkbox"/> HMO practice     |
| <input type="checkbox"/> Congenital/Pediatric     | <input type="checkbox"/> Research         |
| <input type="checkbox"/> Heart Failure/transplant | <input type="checkbox"/> Industry         |
| <input type="checkbox"/> Academic                 |   |

2) The areas that I would feel comfortable giving advice and mentoring (please select more than one):

- |   |   |
|---|---|
| <input type="checkbox"/> Surviving CV training          | <input type="checkbox"/> Research/grant writing |
| <input type="checkbox"/> Preparing for Boards           | <input type="checkbox"/> Crisis intervention    |
| <input type="checkbox"/> Curriculum vitae preparation   | <input type="checkbox"/> Personal balance       |
| <input type="checkbox"/> Job search                     | <input type="checkbox"/> Legal crises           |
| <input type="checkbox"/> Career planning                | <input type="checkbox"/> J visual/FMG issues    |
| <input type="checkbox"/> Interviewing techniques        |   |
| <input type="checkbox"/> Negotiating contracts          |   |
| <input type="checkbox"/> Further training opportunities |   |

3) The level of mentoring that I would feel comfortable with ( please select more than one):

- |  |  |
|--|--|
| <input type="checkbox"/> College students          | <input type="checkbox"/> Cardiovascular and thoracic fellows |
| <input type="checkbox"/> Medical students          | <input type="checkbox"/> Junior faculty                      |
| <input type="checkbox"/> General surgery residents | <input type="checkbox"/> Established CVTS faculty            |

4) How would you prefer to be contacted:

- By email \_\_\_\_\_
- By professional phone \_\_\_\_\_

Any suggestions you may have for the mentoring program:

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Please email to Herri011@umn.edu or Fax to 612-625-4106 attention Cynthia Herrington

Thank you

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lorrainejrubismd@att.net



## 2004 Membership Dues Invoice

(January 1, 2004 through December 31, 2004)

Name: \_\_\_\_\_

Hospital/Institution: \_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Phone: (office) \_\_\_\_\_

Address: (home) \_\_\_\_\_

\_\_\_\_\_

Phone:(best way to reach you): \_\_\_\_\_

E-Mail address: \_\_\_\_\_

Do you want your mail sent to your home or office? \_\_\_\_\_

Do you mind if we publish your e-mail address in our newsletter? \_\_\_\_\_

### Dues:

**Active membership:** .....\$100

**Institutional membership:**.....\$350

**Associate membership (GS or TS resident):** .....No fee (circle GS or TS)

If you are a GS, TS resident or fellow, please state your year of training \_\_\_\_\_

**Emeritus membership (Retired from practice, or > 70 YO):** ..No fee

**Honorary membership:** .....No fee

**Optional:** Donation to the Nina Braunwald Scholarship Fund through the TSFRE \$\_\_\_\_\_

Please remit to

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**Thank you for your support. Visit our website: [www.WTSnet.org](http://www.WTSnet.org)**