

Chapter 14

1997–2001

President: Marc R. Nuwer

The Federation celebrated Golden Anniversaries in 1999. The Prague International Congress marked the 50th anniversary of the founding of the Federation and its Journal. A group of renowned neurophysiologists had organized an international meeting in London in 1947. They discussed the “Formation of a World EEG Organization and the Foundation of an International Journal”. This 1947 meeting was considered, in retrospect, as the First International Congress. Its 50th anniversary was celebrated at the 1997 Florence International Congress. Two years later in 1949, at the Second International Congress in Paris, the Federation formally was constituted and the first full set of officers was elected. In the same year the first issue of the Federation’s journal, *Electroencephalography and Clinical Neurophysiology*, appeared. The year 1999 also marked the 70th anniversary of H. Berger’s first publication on recording the human EEG.

Looking back from 50 years later, the Federation had come a long way. The initial proposal for a federation involved just three societies: in the UK, France and USA. By 50 years later the Federation had 55 member societies on six continents. In 1949, EEG and EMG were used at tertiary and academic medical centers, requiring PhDs to keep the equipment running. By 50 years later, clinical applications were routinely applied in hospitals and medical offices worldwide, and the techniques had expanded to include evoked and event-related potentials, magnetoencephalography, polysomnography, autonomic testing,

ultrasound, functional magnetic resonance imaging, and many variations on those themes. The science of clinical neurophysiology broadened to methods too numerous to mention here. Eight Nobel prizes were awarded for scientific advancements in neurophysiology during these years. The field evolved to use terms of microseconds, nanovolts, and femtotesla. Digital methods were replacing many analogue early generation recorders.

Despite changes in techniques and science, the mission of the Federation remained as it was at the beginning. That mission can be summarized as: to discover new knowledge, teach others what has been found, integrate that into a better understanding of nervous system function, to encourage high quality medical care for diagnosing, treating, teaching, and comforting patients, and to train new physicians and scientists to meet the scientific and clinical missions of the Federation. A formal mission statement is included in the Federation Statutes.

To help celebrate this 50th anniversary, the Federation published a new Practice Guidelines book and gave copies to all registrants at the 1999 International Congress.

During this Fiscal Period, five Honorary Fellows were appointed unanimously by the General Assembly. An Honorary Fellow was someone who had rendered important services to the Federation. The Honorary Fellows appointed at this time were Past-Presidents John Desmedt (Belgium), Jun Kimura (Japan), Robert Ellingson (USA), and Robert Naquet (France), and former Editor-in-Chief Gastone Celesia (USA).

During this term, the IFCN Executive Committee (ExCo) was composed of President Marc R. Nuwer (USA), Past-President Carl H. Lüking (Germany), Treasurer Paul A. Despland (Switzerland), Secretary Hiroshi Shibasaki (Japan), Members-at-Large David Burke (Australia) and Günther Deuschl (Germany), and Editors-in-Chief Paolo M. Rossini (Italy) and Mark Hallett (USA) (Appendix 11, Fig. 16).

The Federation continued its move toward unification as a broad discipline covering more than just EEG. In 1990 the Federation changed the official name from *International Federation of Societies for Electroencephalography and Clinical Neurophysiology* (IFSECN) to *International Federation of Clinical Neurophysiology* (IFCN). Building upon that, in this term the IFCN changed the name of its journal from *Electroencephalography and Clinical Neurophysiology* to the simpler name *Clinical Neurophysiology*. The accompanying book series name was changed in the same way to *Clinical Neurophysiology Supplement Series*. Finally, the two separate series of International Congresses were combined and the name changed to *International Congresses of Clinical Neurophysiology*. In this way, the Federation recognized its evolution from its origin in the field of EEG and related techniques to its new expanded position representing a broad discipline, its science, and clinical applications as a recognized medical specialty or subspecialty.

1. Congresses and courses

1.1. Scheduling of meetings

By 1997, the Federation schedule included two separate series of worldwide congresses, three Chapter congresses, plus other sponsored local or regional meetings. One or another occurred once or two each year. In addition, other non-Federation specialty and subspecialty meetings had become more numerous. A consensus opinion was that there were too many meetings.

The two major meetings were the International Congress of EEG and Clinical Neurophysiology

(ICEEGCN or the EEG meetings) and the International Congress of EMG and Clinical Neurophysiology (ICEMGCN or the EMG meetings). Each met every 4 years in an alternating pattern with 2 years between congresses. Over time the scientific, clinical and academic disciplines of EEG and EMG had become an intertwined collection of many techniques and applications beyond those first two. The distinction between the two meeting series became blurred with each containing courses, lectures, and presentations on the other topic.

The General Assembly decided to discontinue holding separately named series and combine them into one series simply named the International Congress of Clinical Neurophysiology (ICCN). The new combined series would be held every 4 years. The numerical congress identifying system would be combined. The last meeting in the EMG series would be in 2003 in San Francisco, and that meeting's official name was changed from ICEMGCN to ICCN.

The European Chapter congresses also were held at 2 year intervals. These were known as the European Congress of Clinical Neurophysiology (ECCN). The European Chapter proposed that each Chapter hold its own congress once every 4 years. These Chapter meetings could be held halfway between the quadrennial ICCNs. Together with the ICCN change, this reduced the number of Federation congresses from two per year to one on average.

The Federation also sponsored other local meetings. According to an Executive Committee decision from 1981, there are three levels of Federation meeting support. The first level is "Organized by IFCN in conjunction with [host society]". This level is for the major International and Chapter Congresses. They receive direct grants, loans, and fellowship support. The second level is "Sponsored by the IFCN". This level is for additional regional meetings sponsored by a national member society. They may receive financial support from the Federation. An example is the 1993 Bangkok Symposium on Clinical Neurophysiology. Some are held on specific

subspecialty topics. The third level is “Under the auspices of IFCN”. This level is for other meetings of interest in the general area of clinical neurophysiology without financial obligation by IFCN. Those meetings are usually organized by another organization.

1.2. Organizing congresses

Each ICCN is supervised by an Organizing Committee for the International Congress (OCIC). This is composed at this point by seven voting members, four from the Federation and three from the Congress’s sponsoring national society. The Federation’s four members are established in the Rules as the President, Past-President, Secretary and Treasurer. The national society’s OCIC members are the Congress’s Convener, Secretary and Treasurer. These seven organizers have overall authority for the Congress. The OCIC decides the Congress’s dates, hotel sites, schedule of events, major lecturers, budget, and contracts.

Details of collecting registration fees, contracting for hotel space, organizing the exhibit hall, and arranging social events usually are contracted with a Professional Congress Organization (PCO). Each PCO is a business experienced in organizing such a medical or scientific meeting. They bring to the organizing activity the knowledge of local customs, laws, import customs regulations for exhibitors, and personal contacts to facilitate business at a local level.

Some congress details are proposed before the Congress is awarded to a particular national society, for example the city, estimated dates, and convention center. This constrained the OCIC options. To assure that congress details were set wisely from the beginning, both financially and educationally, congress proposers were asked to provide more details of their tentative plans and commitments, not just the name of the city. The Executive Committee in this term screened congress proposals before the General Assembly and asked for more details where needed.

Past congress organizing problems prompted the Executive Committee in this term to increase the details needed from proposers. In one case a PCO hesitated to provide a final financial report and return congress profits to the Federation, doing so only after an extended time. One root cause was the contract signed between the national society and PCO, and that led to greater OCIC attention to the PCO contracts. In another case, the proposed convention center closed for renovation so that the meeting needed to be moved to a hotel that had insufficient size. That prompted a request for a preliminary contract with the proposed site before presentation to the General Assembly. In another case, the PCO itself put a hold on all available hotel sites during the desired time and proposed an exorbitant fee to organize the congress in the city at the time desired. The OCIC needed to move the congress to a different time. The lesson was to have a hold on hotel or convention center space in the name of the congress and to have a tentative agreement with the PCO that includes financial details. In another case, the contracted hotel was under construction, construction was delayed. In that case, the congress moved to a different city. For one congress, a substantial cost overrun was attributed to expensive contract details with the convention center that had not been properly budgeted. Given these experiences, a two-stage process was desired. Before being awarded a congress franchise, proposers needed to be more specific about the site, PCO, and budget and have preliminary contracts for those details.

This affected the congress proposal process. National societies were invited to submit bids at least 6 months before an ICCN. Last moment bids no longer would be allowed. Proposals provided details of dates, city, site, hotels, budget, registration fee, possible social events, national society’s organizers, PCO business, and preliminary contractual financial arrangements. The Executive Committee reviewed the proposals and approved for presentation those with sufficient, satisfactory detail. Bids then could be presented to the General Assembly meeting at a congress. Each

bidding society was given a defined amount of time to present video and business details. Once the General Assembly awarded a bid, the OCIC still needed to review and approve the congress's business and organizational details.

This expanded bid process was used during the 1997–2001 fiscal period to prescreen the 2006 congress bids presented to the 2001 ICCN General Assembly. In addition, a similar process was used at the 1999 Prague ICEMGCN, at which the General Assembly voted on the 2003 EMG Congress sites. The latter vote broke from tradition because EMG sites previously had been chosen directly by the Executive Committee. Bringing the choice to the General Assembly was consistent with the movement to unify the congresses as ICCN meetings. In both cases, an Executive Committee member presented a review to the General Assembly of each bid's strengths and weaknesses.

1.3. Named lectureships

A decade earlier the 1990 Rio de Janeiro General Assembly had endorsed Past-President John Desmedt's proposal for three named lectures at the quadrennial EEG congresses. The 1997 congresses considered a fourth lecture named after EMG pioneer Fritz Buchthal. EMG machine manufacturer Dantec wished to sponsor this. This opened a debate about additional named lectureships. Some considered that the formal named lectureships should honor only those pioneers who were no longer alive, and Fritz Buchthal was in an active retirement — still very much alive and holding discussions at meetings with those who wished to hear his stories about development of EMG “back in the early days”.

A member society survey inquired about naming the international congress lectureships. Responses of 38 member societies were divided equally on whether new lectureships could be created and named after founders who still were alive. The societies were evenly divided also about whether to aim for geographic balance in

these honors. There was no clear consensus about how many named lectureships to have, with preferences ranging between 2 and 5, or whether a named lectureship should be at every congress or alternate at every other congress. Overall there was no consensus.

This discussion continued on and off for over a decade. One option for holding a half dozen named lectureships was the international congresses held every 2 years, alternating between EMG and EEG meetings. That allowed for more possible different names. That option disappeared with the unification of the congresses during this term. With only half as many opportunities, the discussion dissipated and left the previously endorsed Adrian, Berger and Kugelberg lectures.

1.4. International Congress of EMG and Clinical Neurophysiology 1999

The XI International Congress of EMG and Clinical Neurophysiology was held in Prague, Czech Republic in September 1999. The Congress had 1200 registrants, and received over 800 abstracts. Young Investigator Fellowships were awarded to 70 young physicians and scientists. A group of 160 speakers were invited to lecture at organized courses and symposia. The program included 3 Honorary Lectures, 18 Main Sessions, 18 Topical Seminars, 17 Morning meetings, 5 Free Communication Sessions, 37 Poster Sessions, 16 Teaching Courses, and a Satellite Symposium and Annual Meeting of the International Society for Transcranial Stimulation (ISTS). The social program was full of highlights with the opening ceremony and welcome party in the Concert Hall *Rudolfinum* in a splendid New-Renaissance style, a concert in *St. Nicholas*, a famous Prague Baroque church, and the farewell dinner on the Slavonic Island in the middle of the Vltava River.

The Czech Society of Clinical Neurophysiology organized the congress under the able leadership of Convener Zdenek Ambler, Secretary Soná Nevšimalová and Treasurer Zdenek Kadanka, together with the IFCN Officers Marc R. Nuwer,

Carl H. Lücking, Hiroshi Shibasaki, and Paul A. Despland (see Appendix 11, Fig. 20). Honorary Presidents were Jun Kimura (Japan), Donald Saunders (USA), Erik Stålberg (Sweden), and Frantisek Vele (Czech Rep.). The Czech Medical Association served as the professional organizer under the executive meeting leadership of Helena Lonekova. The American Clinical Neurophysiology Society sponsored Continuing Medical Education (CME).

To celebrate the 50th anniversary of the 1949 International Congress of EEG and Clinical Neurophysiology, special 50th Anniversary Awards were made to six young investigators who delivered platform presentations at a 50th Anniversary Symposium. Over 150 applications were entered into this competition. The local organizers selected 30 semifinalists and the Executive Committee chose the winning abstracts. Each winner received a certificate, a cash award, and a free 1-year subscription to the journal *Clinical Neurophysiology*, all provided by the Federation's publisher, Elsevier. Award recipients were A. Brusa (Italy and UK), R. Jech (Czech Republic), V. Marchand-Pauvert (France), S. Ohara (Japan), K. Rosenkranz (Germany), and M. Valeriani (Italy).

Congress registrants were given a complementary copy of the new Federation guideline book, *Recommendations for the Practice of Clinical Neurophysiology*. This book was a compendium of older and new practice guidelines brought together under the able leadership and editing of Andrew Eisen and Guenther Deuschl.

Abstracts were published in the special issue of the journal *Clinical Neurophysiology*. This led to one of the interesting but little known stories about this meeting. The abstract books were published in Western Europe and shipped by truck to the Prague meeting. They were scheduled to arrive at the meeting hotel days before the meeting. At the border to the Czech Republic, the truck was turned back because it lacked one of the necessary paper forms for importing these books across the border. On the day before the

meeting, the books were on the truck heading back to Amsterdam. Meeting organizers scrambled to intercept the truck and divert it to an airport. Proper paperwork was completed and faxed to the airport, and arrangements were made to ship the books by air to Prague. As the meeting registration opened just before the evening opening reception, the books were still en route to Prague. Organizers simply notified the registrants to pick up their abstract books the next morning at the registration desk. Overnight, the books arrived and were available in the morning. Registrants were generally unaware of this adventure. As a more general observation, congresses have these interesting issues out of sight of the meeting attendees, who may be unaware of the amount of detail and problem solving needed to accomplish a major meeting.

The Prague Congress also incurred an unanticipated change in location. The Prague Convention Center, the originally intended meeting site, was closed for renovation. With the Convention Center closed, there was no other optimal site in Prague for a meeting of our size. The Hilton, the best alternate site, was smaller than the usual venue. To use the Hilton, temporary tent structures were built in a parking lot to house exhibits and certain other meeting activities. Even with the suboptimal location, exhibit space was quickly filled and overflow space was arranged in other hotel common space.

The major honorary lectures included the Kugelberg lecture on "Neurophysiological studies of collateral reinnervation in man", delivered by Erik Stålberg (Sweden). Roger Broughton (Canada) gave the Berger Lecture on "The chronobiology of sleep/wake and of sleepiness/alertness states in normal and sleep disordered human subjects". The honorary Adrian lecture was delivered by Mark Hallett (USA), asking "Can EEG coherence help solve the binding problem"? The many symposia were collected together and published as the book, *Clinical Neurophysiology at the Beginning of the 21st Century*, Vol. 53 of the *Clinical Neurophysiology*

Supplement Series books, edited by Z. Ambler, S. Nevšimalová, Z. Kadanka, and P. Rossini.

Meeting jointly with other societies is a suitable way to help with the widely acknowledged problem of too many meetings. It also encourages exchange of ideas among groups who often travel to different meetings. Just prior to the congress meeting the ISTS held a satellite session on transcranial cortical stimulation science and clinical applications. The congress overlapped 1 day with the 23rd International Epilepsy Congress of the International League Against Epilepsy (ILAE) on Saturday September 11, just at the end of the ICEMGCN. The International Epilepsy Congress continued on the subsequent days. The overlapping day was a joint meeting of the two organizations. The ILAE and Federation jointly advertised the two meetings, increasing the visibility and attendance at each. The joint meeting day was on a Jewish holiday, Rosh Hashanah. Arrangements were made to open four downtown Prague synagogues for services for those who wished to attend. The Epilepsy meeting used the Hilton as a hotel but held its sessions at a temporarily renovated fairgrounds venue. Together with the ILAE and other joint and satellite meetings, over 4000 neurologists, clinical neurophysiologists, neuroscientists and others attended the collected Prague meetings. The years long good working relationships between ILAE and the Federation was enhanced by the curious coincidence that the two organizations' presidents were clinical and academic colleagues together at UCLA. Occasional organizational issues were resolved by walking 10 m down the hall to discuss the problem face to face.

1.5. International Congress of Clinical Neurophysiology 2001

The XV ICCN was held in Buenos Aires, Argentina, in May 16–20, 2001 in the Sheraton Buenos Aires Hotel and Convention Center and in the Marriott Plaza Hotel. The Federation Congress attracted 900 registrants and received

over 400 abstracts, an excellent size for a Latin American congress site. Young Investigator Fellowships were awarded to 75 young physicians and scientists. The program included: Named Lectures, Advanced Courses, Basic Courses, Teaching Courses, Symposia, Workshops, Video Presentations, and Poster Sessions. A group of 130 speakers were invited to lecture at organized courses and symposia. The Sociedad Argentina de EEG y Neurofisiología Clínica organized the congress under the able leadership of Convener Carlos Medina, Treasurer Alicia Cueto, Secretary Roberto Reisin, Roberto Sicca (Scientific Committee) together with the IFCN Officers Marc Nuwer, Carl Lücking, Hiroshi Shibasaki, and Paul Despland (Appendix 11, Fig. 19). Dr. Reisin served as the principal physician organizer. Ana Juan, a Buenos Aires professional congress organizer, was chosen eventually to serve as the business organizer for the meeting. The American Clinical Neurophysiology Society provided CME credits for the congress.

Building on the successes of the tandem Prague Congress, the meeting was planned to be joint with the International Epilepsy Congress of the ILAE and International Bureau of Epilepsy (IBE). Former IBE president Richard Holmes coordinated the joint events and budgets. The International Epilepsy Congress met in Buenos Aires May 14–18 at the same site, a 2-day overlap with the ICCN. Three additional affiliated symposia were integrated into the ICCN. These were the VII International Symposium of Spinal Cord Monitoring (ISSCM), the seventh International Evoked Potential Symposium EP7, and the International Transcranial Magnetic Stimulation.

The VII ISSCM meeting drew surgeons and anesthesiologists in addition to clinical neurophysiologists. Organizers include neurophysiologists Vedran Deletis and David Burke, and orthopedic surgeon Tetsuya Tamaki designed a 2-day meeting standard for ISSCM series meetings. The ISSCM covered the topics of intraoperative motor, somatosensory and auditory evoked potential monitoring, their known physiology and clinical applications.

The 7th International Evoked Potential Symposium (EP7) organizer, Colin Barber, designed a meeting for neurophysiologists, audiologists and other physicians on modern topics in evoked and event-related potentials. EP7 activities were held throughout the ICCN including an all-day session on 1 day.

The International Transcranial Magnetic Stimulation Symposium was organized with the help of Leo Cohen, Eric Wasserman and Martín Segura. The sessions were designed to draw additional neurophysiologists as well as psychiatrists interested in this technique. This was a meeting in the series of International Symposia of Transcranial Stimulation (ISTS). The sessions covered enhancement and depression of cortical excitability, cortical plasticity, and studies of cognitive processes. Clinical topics were the use of transcortical stimulation in epilepsy, movement disorders, and psychiatry.

Brazier and Cobb Awards were given at the Opening Ceremony. The competition was drawn from among manuscripts submitted to the journal by young investigators. The honorary lectures included the Kugelberg lecture delivered by Carl H. Lüking (Freiburg) on “The role of the basal ganglia in the control of tremor and epilepsy”. The Berger lecture on “Cognition, gamma oscillations and neuronal synchrony” was given by Wolf Singer (Frankfurt). The symposia were collectively published as *Advances in Clinical Neurophysiology*, Vol. 54 in the *Clinical Neurophysiology Supplement Series*, edited by R.C. Reisin, M.R. Nuwer, M. Hallett, and C. Medina.

The General Assembly considered the 2006 ICCN site (see Appendix 11, Fig. 24). Two candidate sites submitted bids that were prescreened by the Executive Committee and judged to be suitable for presentation. The bids were for an Edinburgh Congress in September, received from the British Society for Clinical Neurophysiology, and for a Lausanne Congress in August received from the Swiss Society for Clinical Neurophysiology. Executive Committee member David Burke prepared comments on the strengths and weaknesses of the

two proposals. In a close vote, Edinburgh was chosen as the site for the 2006 ICCN.

The social program was excellent with opening and closing ceremonies in the Sheraton Hotel, a welcome party in the Marriott Hotel, an Argentinian Night with an exciting dinner and tango show. Social tours were organized to view this “Paris of Latin America” with its wide avenues and parks, and to visit the famous Colón Theater Opera House. Some attendees were able to take the side trip to Iguassu Falls or tours of the semi-tropical Tigre and Paraná River delta region.

2. Publications

1999 marked the 50th Anniversary of the journal *Electroencephalography and Clinical Neurophysiology*. The journal continued to be the premier publication in clinical neurophysiology worldwide, with the best impact factor of any journal in our specialty area. Impact factor is the most common scale for measuring the quality of scientific reports published in a journal. It is related to how often the reports are cited by other publications. By 1999 the journal’s impact factor was 2.86, the best of any journal in this discipline and an excellent number for any scientific publication. This level is nearly twice the impact factor achieved by the journal a decade earlier. The journal needed to choose carefully among the manuscripts submitted so as to stay within its allotted pages and to maintain high quality of published reports.

By 1999, submission acceptance rate was 50% for 500 manuscripts received. The acceptance rate was gradually dropping and submission volume continued to grow. A greater variety of manuscripts were published as the field expanded to include manuscripts dealing with the physiology of motor control and movement disorders, as well as psychophysiology, cognitive neuroscience, and event-related potentials. The traditional topic of routine EEG gradually decreased.

This term saw a change in the journals name, consolidation of its three separate titles, and

initiation of electronic publishing. Topics of discussion remained how best to balance high quality while allowing sufficient pages. Color pages were increased to add quality and attractiveness.

The two Editors-in-Chief were Paolo Rossini in Europe, and Gastone Gelesia through 1999 and Mark Hallett beginning in 2000 in America. Elsevier's primary contact was manager Tatjana Fischer-Driessen of Amsterdam.

2.1. Consolidating journal sections

For over a decade, the journal was composed of three separate titles. The original journal series *Electroencephalography and Clinical Neurophysiology* was published in 12 issues annually. A section subtitled *Evoked Potentials* was published in six issues annually. A third section subtitled *Electromyography & Motor Control* also was published in six issues annually. These three sections amounted to 24 issues per year.

The Federation sought to improve problems with time to publish an accepted manuscript, a need for more pages annually, and an imbalance among the pages needed for the three sections. A solution was found in combining the issues together into 12 unified, longer issues per year. This reduced publication delay because two sections had been published only every other month. Now those manuscripts could be published a month earlier. By reducing issues the publisher reduced costs, and those cost savings could be converted into extra journal pages. This also would remove differences in acceptance rates, publication time, and pages needed among the sections.

2.2. Title change

The journal title was changed to *Clinical Neurophysiology*. The 50th anniversary was considered a good opportunity to do so. This was a time to reflect on not only our past but also the future. The journal should aim for broad set of issues in clinical neurophysiology, including consciousness,

pain and emotion, cognitive neuroscience, central control of autonomic regulation, magnetoencephalography, neurosonology, and functional imaging. Whereas the discipline began with EEG, it had grown far beyond that technique and its variations. The title change recognized that evolution.

This change was consistent with other name changes. In 1990 the Federation's name was shortened from IFSECN to the IFCN. A decade later, the meetings' names were shortened from International Congress of Electroencephalography and Clinical Neurophysiology and International Congress of Electromyography and Clinical Neurophysiology to the new name International Congress of Clinical Neurophysiology. It seemed appropriate for the journal to participate in this expanded vision of the Federation. The Federation is a broad discipline of medicine and science, and this change de-emphasized a focus on one technique. Many national societies also adopted this vision and accomplished an analogous name change.

The Rules Committee reported on Statutes and Bye-Law changes needed to accomplish the journal name change. Advice was sought from the national societies. Generally this was met with enthusiasm from national societies, who recognized the historical ties to the old name but the need to move forward into the 21st Century. The only expression of concern came from the French society, who noted the proposed name's similarity to their national society's journal's name, *Neurophysiologie Clinique: Clinical Neurophysiology*, abbreviated as *Neurophysiol. Clin.* The Federation and the publisher Elsevier agreed to do whatever they could to avoid confusion.

2.3. A new cover

The name change required a cover change, at least a modest one. Other concomitant changes were considered. The new cover emphasized the two words *Clinical Neurophysiology* in a large font size. The IFCN logo appeared more as a

subtle watermark rather than in bold black. A figure from a current issue article would be published on the front cover, with a subtitle referencing the manuscript from which the figure was taken. The color was changed from the previous beige to a warmer brighter color. Several color schemes were considered, and the one chosen was sun yellow with a sky blue top banner. This color scheme was carried further as the journal's branding for its other products, for example Supplement Series books, the Handbook series, the web page, and advertisements.

2.4. Editors-in-Chief

The end of 1999 marked a transition in the Editor-in-Chief for the Western region. At this time, the Federation had two Editors-in-Chief. One received manuscripts from the Eastern region, composed of Europe, Africa, and Asia (except Japan). The other received manuscripts from the Western region, composed of The Americas, Japan, and Australasia. This practice derived from the days when overseas mail delivery was slow and expensive. An expeditious way to solve the speed and cost problem had been to have two sites to which manuscripts could be sent for review, one site in Europe and another in the Western hemisphere. In the early days, the Editor-in-Chief was in one region and an Editor was in the other. The Editor-in-Chief took overall publications responsibility and attended Executive Committee meetings on behalf of the journal. Over time, this situation evolved into two persons both of whom held the title Editor-in-Chief, one for each region. Both attended Executive Committee meetings.

The Prague 1999 Congress marked the end of Gastone Celesia's term as Western region Editor-in-Chief. In January 2000 the mantle of responsibility passed to Mark Hallett, well known to the Federation for his scientific and educational work over the decades, and his then current leadership role in Clinical Neurophysiology at the US National Institutes of Health. Paolo Rossini

continued to serve as the Editor-in-Chief for the journal's European office.

Before leaving his post, Gastone Celesia suggested converting back to a single Editor-in-Chief. He noted that the time of slow, expensive overseas mail was being replaced by instantaneous worldwide electronic submission and review. Paolo Rossini, the other Editor-in-Chief, agreed with this and went further. He suggested that no new European office Editor-in-Chief be appointed at the end of his term. Instead a single office would cover the Editor-in-Chief role from that time forward.

Advantages of returning to a single unified Editor-in-Chief included:

- Reduce confusion when one Editor assumes the other has taken care of an issue.
- Economies of scale.
- Motivation regarding clear leadership.
- Better position with a single voice in dealing with the publisher.
- Better staffed office with a unified budget.
- Cost saving from one fewer person attending distant Executive Committee meetings.
- Editor-in-Chief should attend OCIC meeting, preferably one person instead of two.

A disadvantage was that the Editor-in-Chief would have less contact with the other area or with subspecialty disciplines within clinical neurophysiology. This was remedied partially by appointing a half dozen Associate Editors carefully chosen so as to have at least one from each of several geographic regions and one from each of several subspecialty disciplines.

2.5. Three journal boards

The Federation Executive Committee's role for the journal was renamed the Executive Board. The role was to oversee the business side of the journal and other Federation publications. This board should not interfere with the editorial decisions of the Editor-in-Chief. The Editor-in-Chief remains operationally in charge of routine journal function. The Executive Board oversees issues

such as the finances, contacts, and major issues of journal operations. The Executive Board appoints and can remove the Editor-in-Chief or any subordinate journal editors such as the Associate Editors, Consulting Editors, and Book Editor. The Editor-in-Chief brings to the Executive Board, for their advice and consent, his or her nominations for subordinate Editorial positions. This policy helped clarify the relative relationships of the board and editors, an issue that had been controversial a decade earlier.

The Board of Consulting Editors was renamed the Editorial Board. Both new board nomenclatures took effect on the journal inside cover in January 1999. Both changes cleared up ongoing confusion in the use of terms.

A new Journal Liaison Board was created. To promote the journal better within our member societies, Mark Hallett and Paolo Rossini established a board of journal representatives. This Journal Liaison Board is separate from the Editorial Board. Each Federation member society was asked to appoint one representative. Terms were limited to encourage rotation of this responsibility. The representatives are charged with reporting journal issues to their society, promoting increased individual subscriptions by society members, and reporting back to the journal Editors-in-Chief about journal-related issues from their society. In turn, each representative receives a complimentary individual subscription to the journal.

2.6. Celebrating 50 years

To celebrate the 50 years anniversary of the journal, extra events were scheduled at the 1999 Prague Congress. A celebration book was planned initially with reprinting of 25 previously published, historically significant journal articles with comments about the significance of each article. The book would be offered for sale and given out free to each registrant at the Prague Congress. Over time, the scope of the celebration book changed. In its place was substituted a new

Practice Guidelines book that was already in development under the editorship of Guenther Deuschl and Andrew Eisen. A reason to change in scope was pressure of time to accomplish the initially proposed scope before the Prague congress.

Publisher Elsevier sponsored a 50th Anniversary Symposium at the Prague Congress. Elsevier provided 6 US \$1000 monetary awards. These awards went to young physicians, up to 40 years of age, who made presentations at this plenary symposium. Awardees were chosen from among abstracts submitted to the meeting.

2.7. Entering the electronic era

When the name change was initiated, the manuscript volume increased. In 1998 before the name change, the publisher had received 178 accepted manuscripts. In the first 8 months of 1999 with the new name, 230 manuscripts already were accepted. The system for processing manuscripts needed improvement. Editorial time was 26 weeks for receipt, review, revision, and decision. The production time, from the arrival at Elsevier to publishing, was another 25 weeks. Consolidation of the three sections into one decreased this to 15 weeks. Electronic submission should substantially reduce editorial time and further speed production time. The publisher at this time was testing an electronic system with another of its journals *Brain Research*. The Smart Works software for electronic submission was scheduled to begin in January 2001. The review process would be done electronically by Internet. Unfortunately the system encountered operational problems and delays. When the system was implemented for *Clinical Neurophysiology*, it still needed improvement. Eventually this whole Smart Works system was replaced by the software system Editorial Manager, which continues to be used effectively to this day. Editorial and publication times became much shorter. Decision times dropped from 126 days to 42 days from manuscript arrival.

Elsevier reported its plans to publish electronically its neuroscience journals beginning around 2000. Libraries would be asked to subscribe to the electronic journal service. Concomitant major reductions in library subscriptions to print issues were expected. Physicians, scientists and students would be able to access the electronic subscriptions through their local library. Personal electronic subscriptions would also be made available. Considerable worry was expressed about the future of publishers worldwide when the web and electronic publishing replace print publishing.

At the same time, the Federation was moving into the 21st Century by establishing a website. The IFCN Secretary had established an initial website at his own university in 1998. Elsevier agreed to host and maintain a more formal site that could continue uninterrupted even when the Executive Committee membership changed. Advertisements on the website were debated, with sponsors possibly linking back to their own home pages. The IFCN Secretary would serve as the web site supervisor even when Elsevier took over hosting the site.

2.8. Journal content

Review articles were increasing in number. These were popular with the readers and were well cited. Major invited lecturers at congresses were asked to submit a review article to the journal. Review articles also were solicited from other senior leaders in their respective subspecialty fields. Each underwent standard peer review. The Editors-in-Chief aimed for one invited review article in each issue.

Editorial comment opportunities were sought when research reports were sent for review. Each reviewer was asked if editorial comments would be helpful or needed. The Editor would then assign a person to write editorial comments and may use one of the reviewers for this purpose. These editorial comments could appear at the front of the journal, separate from the article itself.

Journal page space traditionally was used to publish abstracts from member national societies' meetings. This took a progressively larger number of pages over the decades of this practice. Suggestions were considered about how abstracts would be published. The Executive Committee, in its role as the Journal Executive Board, decided to publish an annual December 13th issue to be mailed along with the 12th regular journal issue. Abstracts should be submitted no more than 6 months after a meeting. Eventually that plan was rescinded because too many abstracts were published more than a year after the meeting at which they were presented.

The abstract books for ICCN and ECCN Congresses would appear as supplemental journal issues, published at an additional cost to each congress. Congress organizers could choose whether the issue would be sent out to all subscribers or delivered only for the congress registrants. The smaller chapter congresses in Asia–Oceania and Latin America might be included in the regular issue's abstract collection, since they were smaller and more manageable.

The journal decided to accept and encourage Letters to the Editor. These would be in response to recent journal publications, not as a substitute for Brief Communications. They would appear at the end of an issue. They would appear in a smaller font size than usual journal articles and run one after another consecutively without page breaks. Letters assisted to refine areas of controversy, clarified methods and conclusions, allowed others to draw different conclusions from the data, and pointed to other publications on that topic.

Difficulty with English language use continued as a problem for submitted manuscripts. Corrections were accomplished at several stages. Reviewers occasionally contributed needed changes. It was unclear who was responsible for thoroughly vetting word use, grammar and spelling in each manuscript — the editor or the publisher. A sample of accepted manuscripts confirmed continuing problems. A quality improvement process focused on

manuscripts submitted by non-English speaking authors as reviewed by English speaking MD or PhD neurophysiologists. Each reviewer was asked to indicate whether a particular manuscript needed extra attention to language editing. Elsevier decided to give the editorial offices funding for manuscript language editing before manuscripts are submitted to Elsevier.

The Yellow Pages are a section at the end of each issue that prints society news and meeting announcements. The IFCN Secretary submits them as camera-ready copy. Using smaller fonts shortened the section. The difference in pages was converted to white pages, allowing publications of slightly more manuscripts. Some announcements were judged inappropriate for our journal. Several principles for announcement inclusion were: accept any IFCN member societies announcements, accept announcements for clinical neurophysiology meetings organized by other groups, and for other meetings the IFCN Secretary judges the merit or seeks advice from other Executive Committee members.

Supplemental journal issues were optional. Abstracts of the ICCN or ECCN ordinarily were published as a supplemental journal issue. Satellite symposia to the ICCN or ECCN could publish a supplement for abstracts, or for review articles or research reports based on their symposium. Other requests for supplemental issues would be judged individually. The Editors-in-Chief would decide about these supplemental issues, or may bring them to the Executive Board for advice. The organization requesting a supplemental issue was responsible for paying the publication costs.

2.9. Reduced member subscription prices

Elsevier agreed to reduce the individual subscription price very substantially for members of Federation member societies. A new annual price for 2001 was set at US \$130.00. For this price, the Federation would collect subscription payments and submit the collected list and payment to the publisher. An independent office was sought to

collect those subscription fees. Bids were solicited from prospective vendors in the US and Europe. The winning bid was from a small US association executive firm. Society members were encouraged to take advantage of this reduced subscription price. In addition, the first 200 persons to sign up for this new subscription price received a copy of the recent book *Recommendations for the Practice of Clinical Neurophysiology: Guidelines of the International Federation of Clinical Neurophysiology* at no additional cost.

To encourage further these reduced subscription prices, the Executive Committee encouraged societies to sign up their entire membership for subscriptions at a price even lower than the individual prices. Contacts were pursued first in Japan, Germany and Italy, and some societies did contract for this deeply discounted package subscription relationship. The journal became an official journal for those societies.

2.10. *Recommendations for the Practice of Clinical Neurophysiology: Guidelines of the International Federation of Clinical Neurophysiology*

At the beginning of the term, the Executive Committee agreed to publish recent practice guidelines as a compendium book. A previous practice guidelines compendium, published in 1983, was well received at that time. Many guidelines had been developed and approved by the Federation since then.

The Executive Committee appointed Andrew Eisen (Canada) and Guenther Deuschl (Germany) as book editors. A contract with Elsevier called for the books to be ready for the 1999 Prague ICEMGCN. The Federation agreed to pay for the printing, since Elsevier was not interested in separately selling the book on the open market. It was designated as Vol. 52 in the *Electroencephalography and Clinical Neurophysiology Supplement Series* of books. Many libraries around the world had standing orders for that book series and automatically would purchase copies.

Drs. Deuschl and Eisen collected the various Federation Practice Guidelines adopted since 1981, the last year in which reports were included in the 1983 compendium. Additional documents were included to round out the collection to cover most current areas of clinical application.

The book was published on time and given free to all registrants at the Prague 50th Anniversary Congress. Additional books were given to fellows at subsequent congresses, to individuals who subscribed to the journal, and to hospitals and societies from economically disadvantaged regions.

The Federation retained the book's copyright with an explicit contract clause about translations. The Federation retained sole authority to translate the book into other languages and publish the translations with any publisher. National societies and Chapters were given the opportunity to translate the book into their language, print or publish the translation at their own expense, and to keep any proceeds from selling that book. Societies that share a language were encouraged to coordinate or agree upon these translation endeavors. The Société de Neurophysiologie Clinique de Langue Française organized and published a translation into French with participation of Belgian and Swiss neurophysiologists.

2.11. *Handbook of Clinical Neurophysiology*

The Executive Committee decided to publish a new Handbook series. Previously the Federation published an extended series of books in the 1970s known as the *Handbook of Electroencephalography and Clinical Neurophysiology*. This was a collection of reviews of the academic field of clinical neurophysiology. They were drafted by individuals and small working groups established by the Federation in a process dating to the 1969 San Diego ICEEGCN meeting. Former IFSECN President Antoine Rémond served as the primary series editor. A short Revised Handbook series appeared a decade later, with Antoine Rémond in an encore role as series editor.

The name of the new series was shortened to *Handbook of Clinical Neurophysiology*. This name change paralleled the movement to drop from other Federation names the technique-specific term *Electroencephalography*.

Jasper Daube (USA) and François Mauguère (France) were appointed as book series editors. Most individual volumes would focus on a particular disease and discussed the neurophysiology techniques that can be useful for diagnosis or better understanding of the pathophysiology of disease. Emphasis was on volumes on specific areas of clinical interest, for example epilepsy. This disease-oriented approach contrasted with the Practice Guideline book that is technique-oriented. The editors proposed publishing two volumes annually for 5 years. Affiliated physiological techniques can easily be included in the disease-oriented books, including techniques not covered in the Practice Guidelines book. Examples of these additional techniques were magnetoencephalography and function neuroimaging.

2.12. *Supplement Series*

The *Electroencephalography and Clinical Neurophysiology Supplement Series* continued to produce books, including the Congress Symposium book for the Florence 1997 Congress, the 1998 International Evoked Potential Symposium book, and the Prague 1999 Congress book. Other books published in this series were based on specific topics or other meetings. Topics were proposed ad hoc, some through the Federation and others coming from Elsevier based on the interests of specific individuals. An advantage of this series for book editors and authors is that the series already has a wide existing distribution through subscription lists to individuals and medical libraries.

The series was renamed *Clinical Neurophysiology Supplement Series* in keeping with the movement to change names of other publications and congresses. The series has no overall named editor. The Executive Committee approves new

titles in the series. Individual volume editors then work directly with Elsevier to produce the book.

3. Chapters

During this Federation term, considerable progress was made to establish and organize Chapters in Europe, Asia–Oceania and Latin America. Development of regional chapters advanced several Federation goals. This continued the Chapter organizational efforts begun in the previous term by then IFCN President Carl Lücking and that Executive Committee.

3.1. Organizing chapters

Many physicians, scientists and trainees found it difficult to travel to international meetings every other year. The Executive Committee and General Assembly developed the chapters to take educational and scientific opportunities to more convenient locations. Regional chapters gave a better voice within the Federation to neurophysiologists who share common interests in their geographic region. In Latin America, the region also shared a common language among a majority of societies. In Europe, political and educational issues in clinical neurophysiology were best handled through a regional organization.

These regional organizations were best accomplished as a part of the Federation rather than as individual stand-alone organizations. In the formulation of their place in the Federation, Chapters were viewed to give them considerable discretion in their own activities. They commission and oversee their own Chapter congresses. At the same time, they need to work within the aims of the Federation in general and should not compete directly with each other, with the national societies, or with the Federation's global activities. To help keep a suitable balance, each Chapter drafted its own Bye-Laws. Those Bye-Laws are considered Federation Bye-Laws, subject to ratification by the Federation General Assembly. The Federation Rules Committee

serves as the arbiter of conflicts between the Executive Committee and Chapters, and among the several Chapters. The Chapters were asked to keep the other parts of the Federation informed of their activities, congresses and other meetings through their semi-annual reports to the Executive Committee, summaries of which are included in the periodic reports to all Delegates. Chapters were encouraged to post their congresses and meetings in the journal's Yellow Pages, so individuals worldwide can know about a Chapter's meetings.

Two initiating events led to the development of Chapters. These were the needs of Latin American neurophysiologists as championed by Chilean delegate Nelly Chiofalo, and the movement in Europe for an organization to perpetuate the periodic European Clinical Neurophysiology meetings.

The old Latin American Clinical Neurophysiology Society had been removed from the Federation at the 1985 London ICEEGCN General Assembly meeting. This was based on two reasons. First, that society had not paid Federation dues for many years. Second, many members of that society were simultaneously members of a national society, giving them a kind of double vote in Federation activities. Yet, that Latin American Society had served as the only vehicle for participation for members who did not have a national society. Once the Latin American Society was excluded from the Federation, they had no home or voice — not even a clear way to communicate about upcoming congresses.

Forming a national society was not a possible option for those who had an insufficient number of neurophysiologists in their country. Belonging to another country's national society was possible for some, but not others, and seemed to be an artificial solution. Some sort of multinational organization was needed to include these neurophysiologists in some way. Yet, a multinational organization could stifle creation of new national societies.

At the same time in Europe, a process was underway to consolidate medical policies across the European Community. Neurophysiology needed a voice there to present its vision of how clinical neurophysiology should evolve in this new European organization. European clinical neurophysiologists had a European Congress series and desired an organization to perpetuate these meetings in an organized way. Both of these needs came together in a wish to form some sort of European Clinical Neurophysiology organization.

Discussions about both issues were underway during the previous Federation Fiscal Period 1993–1997. The discussions involved many individuals, and chief among whom were Federation Presidents Carl Lücking and Marc Nuwer, Chilean delegate Nelly Chiofalo, Editor-in-Chief Gastone Celesia, and former Editor-in-Chief François Mauguère. The various needs were best resolved by developing a new kind of Federation body, one establishing a body to address region needs.

3.2. Guiding principles for Chapters

Several guiding principles were defined for establishment of Chapters. The national societies in each region needed to be involved in the new bodies, so as to minimize the chances of conflict between a Chapter and its national societies. To do so, the new bodies should have a General Assembly constituting representatives from each Federation member national society in their region. Each regional body would need its own Executive Committee to organize and implement activities. Each would need funds for their operations, which could be drawn from any of several sources. Funds could come from regional congress profits, transfers from the Federation treasury, or individual profitable projects. Transfers from the Federation treasury would be at the discretion of the Federation Executive Committee. Projects could include publications of Practice Guidelines translations or other books. The

regional bodies should not compete with the Federation's journal by establishing their own journals. Instead, the journal *Clinical Neurophysiology* should be recognized as the official journal of each Chapter.

The Federation has some guiding principles to which each Chapter should adhere. There is an annual audit of the income, expenses, and accounts of the Federation. The Rules Committee resolves conflicts among organizations within the Federation, and that should include the Chapters. Even if a Chapter had its own internal Rules Committee, the Federation Rules Committee should have the final say to resolve disagreements. Appeals, in the form of rules changes, still can be brought to the floor of the Federation General Assembly, the body that oversees most broadly the Federation's organization and rules.

Erik Stålberg, the founding president of the European Chapter, made further suggestions to avoid conflicts in timing between regional and global congresses. The suggestion was to reduce the ICCN meetings to once every 4 years as a unified congress, instead of every 2 years in two series of alternating EEG and EMG congresses. During the middle of the inter-congress interval, the Chapters would hold their Congresses. Major Chapter congresses would be held once every 4 years for each Chapter. That reduced the overall major Federation meetings from two to one per year on average.

Each congress should oversee the organization of other Federation meetings and activities in their region. Up until this time, the Federation occasionally funded or lent its name to the organization of smaller symposia or other meetings. Some were held in regions where additional general educational activities were desired. Others were held on specific topics, for example evoked potentials. With the establishment of Chapters, those bodies should have oversight or give approval for these secondary meetings in their region. These would be in addition to the major quadrennial Chapter congresses.

To facilitate communications, a member of the Federation Executive Committee should be included in the Chapter Executive Committee. The position was named the Liaison Officer. Ideally that Liaison Officer would be an Executive Committee member from that geographic region.

The initial Chapters considered were from Latin America and Europe. Eastern and Southern Asia region was identified as an additional area that could benefit from a Chapter to foster periodic meetings and education in the region.

3.3. *Latin American Chapter*

The Chapter was formally organized during this term. Bye-Laws were written and accepted by the General Assembly. The foundational work was accomplished during the previous Federation Fiscal period of 1993–1997. During that time, discussions were held on the conceptual issues. The First Latin American Congress of Clinical Neurophysiology was held as a symposium during the Pan American Congress of Neurology in Guatemala City in 1995 during the previous Fiscal Period. Chapter founder Nelly Chiofalo organized that Clinical Neurophysiology Symposium with help from Enrique Delamonica (Argentina). Representatives attended from Argentina, Brazil, Bolivia, Chile, Colombia, Cuba, Costa Rica, Dominican Republic, El Salvador, Ecuador, Guatemala, Honduras, Mexico, Panama, Peru, Puerto Rico, Uruguay and Venezuela (Appendix 11, Fig. 11). That symposium primarily was a scientific and educational program with workshops and breakout sessions. One portion of the symposium was set aside for the business meeting, at which enthusiasm was voiced for the formation of a regional organization as an IFCN Chapter. Executive Committee President Carl Lücking, Member-at-Large Marc Nuwer, and Editor-in-Chief Gastone Celesia attended on behalf of the Executive Committee. Chapter Officers were chosen and appointed to the task of drafting formal Bye-Laws. Nelly Chiofalo was chosen as Chapter Chairperson and Enrique

Delamonica (Argentina) as Chapter Secretary–Treasurer. The Brazilian Society of Clinical Neurophysiology subsequently volunteered to host the Chapter's administrative office in the same site as its own society office in São Paulo. In follow-up, Dr. Chiofalo drafted Bye-Laws in Spanish. Francisco Luccas and Jose Xavier de Castro (Brazil) translated them into Portuguese.

In this 1997–2001 Federation Fiscal Period, the chapter held its Second Latin American Congress of Clinical Neurophysiology in Buenos Aires just prior to the World Congress of Neurology in September 1997. About 100 physicians attended, representing nearly all of the Federation's Latin American member societies. The Organizing Committee was President Nelly Chiofalo (Chile) and from the Argentine Society of Clinical Neurophysiology Vice-President Marcos Turner, Chairman of the Scientific Committee Enrique Delamonica, Secretary Ricardo Reisin, Treasurer Ana Maria Pardo. The site was the Sheraton Hotel and Convention Center. Most of the IFCN ExCo Members were actively involved in the program. The 2 days included 5 Scientific Sessions, 8 Poster Sessions, 2 Workshops, and 1 Symposium. At the Chapter General Assembly meeting during this Congress, draft Bye-Laws were discussed. The Chapter organized a mailing list and began periodic communication with member societies.

The chapter worked with Dr. Gustafo Pradilla and Luis Morillo (Colombia) representing the Colombian Clinical Neurophysiology Society to try to organize a 1999 Third Latin American Chapter Congress in association with the Pan American Neurology Congress in Cartagena in October 1999. This was difficult to organize and eventually support was withdrawn from this meeting. In part, this was because the site was very distant from many members. A decision was to hold initial formal Chapter congresses closer to a large number of participants so as to build more momentum for Chapter activities.

An interim Chapter symposium was held in Buenos Aires in October 2000. Both a scientific

symposium and a Chapter business meeting were held at that time, organized with the help of local physicians under the leadership of Carlos Medina. The meeting was well received by the 150 registrants. The scientific topic was focused on the occipital lobe function. IFCN provided fellowships for young physicians and scientists to attend this meeting. Chapter Chairperson Nelly Chiofalo (Chile) led the business meeting. Francisco Luccas (Brazil) was elected as the Chapter Secretary–Treasurer. Olga Sanz (Argentina) was selected as a new Chapter Executive Committee Member-at-Large for terms beginning in 2000. The Federation Executive Committee appointed Member-at-Large Marc Nuwer to succeed Editor-in-Chief Gastone Celesia as Liaison Officer for the Latin American Chapter. By this point, the Chapter approved its new Bye-Laws and submitted them to the IFCN Executive and Rules Committees. The Bye-Laws were written in Spanish, Portuguese and English.

In 2001, Daniel Cibils (Uruguay) was chosen as the new Chapter President. Augusto Fernando-Guardiola (Mexico) was chosen as a new Chapter Executive Committee Member-at-Large. The greatest Chapter activity at this time was preparations to host the 2001 ICCN in Buenos Aires, which has taken much time from organizers in the Sociedad Argentina de EEG y Neurofisiología Clínica.

Overall, this term saw the Chapter evolve from its 1995 inception to an organized set of interested and active participants representing many Latin American societies, and drawing in the interest of many clinical neurophysiologists. The preponderance of activity in these formative years was from the southern region. Meetings were at a high scientific and educational quality, well attended, and conducted mainly in Spanish and Portuguese.

3.4. *European Chapter*

The European Chapter grew out of a desire for an organized group to continue the ECCN meeting series and the need for a voice for Clinical

Neurophysiology in the European political community. The European subsection of IFCN had been active for years in organizing meetings such as those in Paris, Lisbon, Munich, and Budapest. There was interest in organizing the European chapter of IFCN discussed at the Munich ECCN. An ad hoc committee was chosen in Munich to consider forming a Federation Chapter and drafting Bye-Laws. Guenther Deuschl (Germany) served as committee chairman. The committee included Kjeld Andersen (Norway), Aurora Constantinovici (Romania), Al De Weerd (The Netherlands), Andres Fuglsang-Frederiksen (Denmark), Jean-Marie Guérit (Belgium), and Paolo Rossini (Italy). That committee reported back to the European Chapter at the Florence 1997 International Congress, where the European delegates spent 2 days discussing the proposed European chapter statutes. These were modified, approved, and submitted to the Federation Rules and Executive Committees for approval. These committees recommended accepting the proposal and sent them to the Federation Council, which voted formally to accept this Chapter as a part of the Federation. This was the first Federation Chapter formally established in this way. Initial officers were Erik Stålberg (Sweden) as Chairman, Al De Weerd (The Netherlands) as Secretary–Treasurer, and Theresa Sagalés and Giorgio Cruccu (Italy) as Members-at-Large. At this initial election, the chairman and one member-at-large, Dr Cruccu, were elected for a term ending in 2000, and the secretary–treasurer and the other member-at-large, Dr Sagalés, were elected for terms ending in 2002. Several years later, those four all were re-elected to additional 4-year terms. In addition to those Chapter officers, Paolo Rossini (Italy) served as the IFCN Liaison Officer for the Chapter. IFCN Executive Committee member Guenther Deuschl (Germany) also continued active involvement with the Chapter.

The Chapter establishing a host-section status for Clinical Neurophysiology in the European Society of Medical Specialists, giving itself a formal voice in medical politics. The place of Clinical

Neurophysiology as a specialty on its own or as a subspecialty of Neurology was debated. A Chapter Task Force of Kjeld Andersen (Norway), Theresa Sagalés (Spain) and J.A. Jarrat (UK) evaluated the specialty status for clinical neurophysiology. Dr Andersen described how the Medical National Associations cooperate to organize and formalize medical issues and influence European medical decisions taken in the European Commission (EC). Union Européenne des Médecins Spécialistes (UEMS) organized cooperation and some uniformity among specialties. A European Union council directive determined the rules for free movement of physicians and mutual recognition of their diplomas and board certificates. UEMS issued charters organizing specialist training, quality assurance, and CME. Details are then implemented within specialist sections and boards. In 1997 the Federation European Chapter Task Force organized contacts with representatives from countries where Clinical Neurophysiology is recognized as a specialty. Nine European Federation member nations recognized Clinical Neurophysiology as a specialty. There were many similarities in training among these countries but also some differences. Further organization and uniformity were needed to comply with UEMS rules. The European Commission did not recognize Clinical Neurophysiology. Clinical Neurophysiology was offered a position as an observer in the European Board of Neurology.

The Task Force noted Directive 93/16/EEC, which organized European medical specialties. An August 1996 letter from UEMS to Dr. Andersen suggested approaching the Advisory Committee on Medical Training that includes governmental and professional representatives. He also could contact the Ministry of the Committee of Senior Officials on Public Health (CSOPH) and government representatives to recommend Clinical Neurophysiology as an independent specialty. Theresa Sagalés, writing in 1997 on behalf of the European Task Force for Clinical Neurophysiology, contacted the Secretary General of the CSOPH in Brussels. Her letter requested

assistance recognizing Clinical Neurophysiology as a specialty in the revised version of the 93/16/EEC Medical Directive. Representatives from the societies in Norway, Italy, Spain, Denmark, Finland, UK, Sweden, The Netherlands and Slovenia signed the letter. Commission directive 98/63/EC in 1998 amended directive 93/16/EEC and recognized Clinical Neurophysiology as an independent specialty recognized in Denmark, Spain, Ireland, Sweden and the UK. It asked for development of training standards. The specialty was not granted a specialist section within the UEMS because it was not recognized in more than one-third of the member states. The management council instead accepted Clinical Neurophysiology as a host section.

The Chapter established several committees. One began work on unified training standards for Clinical Neurophysiology in Europe. Chapter By-Laws recognized *Clinical Neurophysiology* as the official journal of the European Chapter. The Chapter adopted EC-IFCN as an abbreviation standing for European Chapter of the IFCN. The Long-Term Planning Committee recommended reducing the ECCN meetings to every 4 years, a proposal subsequently taken to the Federation General Assembly by EC-IFCN President Erik Stålberg.

Turkey and Israel applied for Chapter membership during the Lyon Congress. Some discussion was held about Chapter membership of societies from countries not geographically in Europe. Turkey pointed out that a part of Turkey is in Europe including its largest city. Israel was asked why it should be recognized for membership in the European Chapter. Among the various points presented was an interesting, nonmedical, non-geographic one — that Israel participates in the European football leagues. In any case, the Chapter General Assembly voted to accept the both bids for membership.

Erik Stålberg (Sweden) was reelected as EC-IFCN Chairman. Giorgio Cruccu (Italy) was reelected as Member-at-Large of the EC-IFCN Executive Committee, both for terms lasting until 2005.

EC-IFCN funds would be raised from several sources. One is the profit from each ECCN, which will be applied to start-up funding for the next ECCN. The Chapter also asked the IFCN Treasurer for a stipend to support annual operating expenses and for ECCN fellowship stipends. The Federation Treasurer requested that the EC-IFCN Executive Committee should be the source of requests for funds. The Chapter should maintain a separate account in the IFCN Treasury. Accounting must be audited periodically as for any Federation funds.

The 9th ECCN was held in Ljubljana, Slovenia, in June 1998. It was organized by the Slovene Society of Clinical Neurophysiology under the auspices of the European Chapter of IFCN. The Organizing Committee was Janez Zidar (Convener), Tone Zaklj (Secretary), Jelka Brecej, and David Neubauer. The International Scientific Committee consisted of delegates of the Member Societies of the Chapter. IFCN provided US \$30,000 for fellowships. Clinical Neurophysiology as a distinct medical specialty has had a long-standing tradition in Slovenia. Its beginnings, with the first home-built EEG machine, date back to 1947. The Congress intended to touch on a number of different aspects of clinical neurophysiology; from the recent developments in basic neurobiological sciences to advances in practical application of neurophysiologic methods. The program included 3 Plenary Lectures, 21 Scientific Sessions, 7 Poster Sessions, and 18 Advanced Courses. The well appreciated social program started with a welcome reception, continued with an organ concert at the Cathedral and ended with a social event in the Grand Hotel Union. The Congress attracted 550 registrants from 36 countries. Abstracts were published in a supplement of the journal *Electroencephalography and Clinical Neurophysiology*. Monduzzi Editore (Bologna) published the Congress Proceedings (see Appendix 11, Figs. 17 and 18).

The 10th ECCN at the Lyon Conference Center, Lyon, France, in August 2000 attracted over 800 registrants. This excellent congress was

organized by François Mauguière (Convener and Chairman of the Organizing Committee), C. Fischer (Secretary/Treasurer), and members of the Société de Neurophysiologie Clinique de Langue Française together with Officers of the EC and IFCN. Honorary President was J. Courjon. The program included an opening lecture by R. Frackowiak, closing lecture by R. Hari, tutorial lectures by J. Kimura and M. Jouvet, four Advanced Courses Sessions, eight Platform Sessions, two Topical Seminars, two Symposia, three Poster Sessions with about 300 posters in total, and two Video-EEG Sessions (see Appendix 11, Fig. 23). The social program was very well accepted with a welcome party, a City Hall reception and a gala dinner. The Federation provided US \$18,000 for Young Investigator Fellowships of US \$500 per person. Satellite Symposia covered two additional topics: "Functional Neuroimaging of the Epilepsies" and "Vagus Nerve Stimulation".

The EC-IFCN and Federation sponsored several local meetings during this period. Erik Stålberg organized a course on "EMG and Related Clinical Neurophysiology" in Budapest. Professor Falck of Finland and Drs. Dioszeghy and Mechler of Hungary served as faculty. The attendance was 46 and rated the educational experience very highly. The general concept seems successful. Another Electromyography course was given in Warsaw in 2001 at the Institute of Biocybernetics and Biochemical Engineering, Polish Academy of Sciences. Organizing committee chairperson Prof. Barbara Emeryk-Szajewska arranged for Profs. Stålberg and Falck and five members of the Polish Society of Clinical Neurophysiology. The 45 registrants from the throughout Poland were trained with demonstrations on normal subjects and on patients, whose EMGs displayed on one video projector and details of needle positions and other details of the demo were displayed via an extra video camera and video projector. It was very well received by the participants and considered as a success by all parties involved. The Federation also let its

name be used to promote the International SFEMG course and VII Quantitation EMG Conference in Uppsala in 2001. These all were excellent educational programs. The Federation Executive Committee decided that the sponsoring of such local meetings should be under the general jurisdiction of the Chapter. Beginning around 2001, the EC-IFCN should be the group approached by those who wish to involve the Federation in local courses in Europe.

3.5. *Asian–Oceanian Chapter*

The Asian Chapter chose Prof. Xiao-Fu Tang (China) as its Chairperson and Prof. Nubuo Yanagisawa as Secretary at its founding. In 1997, incoming Federation Secretary Hiroshi Shibasaki replaced outgoing Member-at-Large Xiao-Fu Tang as the Executive Committee Liaison Officer for the Chapter. At the Florence 1997 ICEEGCN, the Chapter delegates met with the President Carl Lücking to discuss organization and Bye-Laws. Following that discussion, Chapter Secretary Dr. Yanagisawa circulated the draft Chapter Bye-Laws to delegates of national societies. One issue raised in reply was a move to include Australia and New Zealand in the Chapter region. Australia did have an official society, and New Zealand at this time did not. To designate the Chapter as covering this region, a better title could be the Asian–Oceanian Chapter instead of Asian Chapter. Chapter delegates supported this name change. The Bye-Laws were further revised to include some elements adopted for the other two chapters, for example regarding periodic financial report to the IFCN Treasurer.

Asia had been the site of several previous regional and local Federation meetings during the previous two decades. Organized in large part by former Federation President John Desmedt, these were held in Beijing, Bangkok, and Bali. Now that the region had a Chapter, those delegates would decide where in the region to hold Chapter congresses and other local meetings. The first of those Asian–Oceanian Chapter

meetings was held in Manila in January 2000 in conjunction with the Asian–Oceanian Congress of Neurology. Convener Zenaida Bagabaldo, Secretary Marita Dantes, Treasurer Alejandro Diaz and their Philippines clinical neurophysiology colleagues, working together with IFCN Secretary Hiroshi Shibasaki, organized a very interesting and highly appreciated meeting that took place in The Heritage Hotel. IFCN ExCo held its meeting in Manila so that all members could give presentations at the Chapter congress (see Appendix 11, Figs. 21 and 22). This included seven Sessions with didactic lectures and hands-on workshops, two Sessions of Free Presentations, one Symposium, and two Poster Sessions. The Federation provided fellowship stipends of US \$18,000.

At the 2000 Chapter meeting in Manila, Prasert Boongird (Thailand) was elected as the Chapter Chairman. Nobuo Yanagisawa (Japan) was reelected as the Chapter Secretary. Draft Chapter Bye-Laws were again discussed at the assembly business meeting. The Chapter established a process to consider future official Chapter and additional local meetings. The next Chapter meeting was scheduled as the Asian–Oceanian Symposium on Clinical Neurophysiology to be held in Bangkok in January 2005. By 2001, this meeting was moved to northern Thailand. So as to keep the momentum going for Chapter activities, an interim local meeting was scheduled for Bangkok in conjunction with a meeting of the Neurological Society of Thailand, March 2001.

3.6. *North American region*

The largest region not then covered by a Chapter was North America. The three societies in the USA and Canada were among the largest in the IFCN, one the single largest member society. In other regions the Chapters provided a way to promote Federation goals. This was lacking in North America. The Executive Committee developed a pilot project for supporting physicians and scientists from disadvantaged regions to participate in

some North American Congresses. Council was consulted, and the delegates agreed with this pilot plan. The North American societies were invited to request Federation funding for travel fellowships for overseas physicians and scientists to attend their meetings, particularly for those from economically disadvantaged member nations. The American Association for Electrodiagnostic Medicine accepted this proposal and established and ran such a program for several years until the eventual formation of a formal North American Chapter in a later Fiscal Period.

3.7. African region

IFCN policy has been to foster clinical neurophysiology worldwide. In Africa there was no longer any society, since the South African society had disbanded IFCN membership in the previous Fiscal Period. Egypt started to build up an Egyptian Society of Electrodiagnostic Medicine (ESEM) and Clinical Neurophysiology. It was officially founded on the occasion of the First Alexandria International Symposium on Electrodiagnostic Medicine and Clinical Neurophysiology. That meeting was initiated and organized under the auspices of the IFCN. The symposium was held in Alexandria, Egypt on October 30–31, 1997. The Organizing Committee included Abdel-Moneim Helal (President) and Ibrahim Khalil Ibrahim (Secretary) and the IFCN Officers Carl H. Lücking, Giuseppe Caruso, and Paolo Rossini, all of whom were actively involved in the program. The meeting included three Scientific Sessions and a half-day Round Table Discussion. The new Egyptian Society eventually joined the IFCN as a member society.

4. Encouraging diversity and inclusion

A Federation goal is to encourage worldwide high quality science and education in clinical neurophysiology. There have been a number of approaches to pursuing that goal. These have included encouraging new member societies in

previously unrepresented nations. The Federation also has worked with other international organizations to jointly foster mutual goals. It has provided fellowship funding support for young investigators to attend meetings. In addition, the Federation has arranged for journal subscriptions and books for major teaching institutions that otherwise were unable to afford them.

4.1. Societies and individuals

In this Fiscal Period one new member society was accepted into the Federation in 1999, the Egyptian Society of Clinical Neurophysiology. This marked the return of the Federation to the African continent, after a 5-year interval since the closing and withdrawal of the previous South African EEG Society in the previous Fiscal Period. The Executive Committee inquired of other nations whose clinical neurophysiology activities might lead to formation of further new national societies in the future.

In Latin America, the Chapter was encouraged to create mailing lists for individuals in unrepresented nations. The lists could be used to keep open lines of communications with individuals and small groups who might form the nucleus of future national societies. It also provided a practical way to let those physicians know about Chapter and other Federation activities and meetings, and to invite participation from those countries in future Federation and Chapter meetings.

4.2. Sponsorship assistance for education in disadvantaged regions

The Executive Committee desired to provide resources to teaching hospitals and medical centers in regions that are economically disadvantaged. Those areas have had difficulty obtaining resources. The IFCN is able to provide books and journal subscriptions at a discount. Book contracts for books produced under the auspices of the IFCN often have included a contract clause giving a certain number of books to the

Federation without charge. This included some contracts for the *Handbook of Clinical Neurophysiology* series, copies of *Recommendations for the Practice of Clinical Neurophysiology: Guidelines of the International Federation of Clinical Neurophysiology*, and volumes in the *Clinical Neurophysiology Supplement Series*. In addition to those free books, the Federation was able to purchase more at a discounted price.

The Past-President Carl H. Lüking was asked to oversee arrangements for these books and journal subscriptions to be distributed to worthy organizations. In this process, he solicited ideas from delegates and received spontaneous requests from institutions or professors. Some delegates from economically advanced countries were able to identify contacts they had in other countries who could benefit from these resources. Others identified opportunities in their own country where these resources would be of most value. After screening the financial reasons for needing assistance, he arranged to ship books or sign up professors at teaching hospitals to receive journal subscriptions. In each case, the recipient agreed that these resources would be placed in libraries or otherwise be made available openly to clinical neurophysiologists or others at their institution; they were not for private office shelves.

The donation of these was explicitly meant to be just that — a donation for the advantage of the local physicians and scientists. Carl Lüking assured each recipient that this in no way was meant to influence a delegate's vote in any IFCN matters. A feedback system was devised to evaluate the effectiveness of this program. The Federation desired to continue its support only to those institutions where it appeared effective that many individuals used these resources for clinical, educational, or scientific purposes.

5. Practice Committee

The new guidelines book, *Recommendations for the Practice of Clinical Neurophysiology: Guidelines of the International Federation of Clinical*

Neurophysiology was published. As described in greater detail above, the book served as a single source compendium of Federation guidelines adopted and published over the previous 18 years in the journal.

5.1. Transcranial Magnetic Stimulation Committee

The Transcranial Magnetic Stimulation (TMS) Committee was reappointed with the same members as in the past Fiscal Period. The committee's focus now was on repetitive TMS, its safety and uses.

The TMS Committee includes Robert Belmaker (Israel), Charles Epstein (USA), Mark Hallett (USA), Alvaro Pascual-Leone (USA), Walter Paulus (Germany), Paolo Rossini (Italy), John Rothwell (UK), Harold Sackeim (USA), Carlo Tassinari (Italy), and Eric Wassermann (USA). It also includes as nonvoting representatives from industry John Cadwell (Cadwell Laboratories), Reza Jalinous (Magstim US), and Jorn Ladegaard (Medtronic Dantec). TMS reports were included in the 1999 Practice Recommendations book.

5.2. Digital EEG Standards Committee

In the previous Fiscal Period, the Digital EEG Standards Committee published a report on minimum technical standards for clinical digital EEG recording and review. The committee then included Marc Nuwer (USA), Giancarlo Comi (Italy), Ronald Emerson (USA), Anders Fuglsang-Frederiksen (Denmark), Jean-Michel Guérit (Belgium), Hermann Hinrichs (Germany), Akio Ikeda (Japan), Francisco Luccas (Brazil), Peter Rappelsberger (Austria). In this Fiscal Period, the Chairperson was Ronald Emerson. The IFCN developed relationships with manufacturers to encourage them to adopt the standards.

The Digital EEG Standards describe the process for claiming in advertising that the vendor's equipment meets the IFCN Digital EEG Standards. The vendor was required to ask for

permission in advance. The Digital EEG Standards Committee or its designees would judge whether the hardware and software does indeed meet the standards. This raised a significant new problem, that of liability in case a vendor fails to meet standards and challenges the determination in a legal setting. To protect the Federation against those adverse actions, or any other legal adversity, it should have General Liability insurance and Directors and Officers insurance. At this time the IFCN carried no insurance. Implementing the Digital EEG Standards reviews was put on hold while the issue of insurance was reviewed. An attorney, one with experience in international legal matters, was sought to advise the Federation about the best ways to protect itself from legal actions. In turn, this raised issues about the Federation's legal status as a French nonprofit organization and French customs about insurance for such organizations, and those topics initiating a broad set of actions in the next Fiscal Period.

5.3. Medical Economics Committee

The Executive Committee in the previous Fiscal Period established an International Medical Economics Committee. The name was subsequently changed to the Professional Practice Committee. The Committee was charged with drafting a report comparing the different medical economic models and their impact on test procedures, access to testing and care, and the quality for common clinical neurophysiology techniques. The committee focused initially on several developed nations, sought methods to evaluate the different economic models, and measure influence of the economics on variations in testing procedures, access, quality, and cost. Additional issues included a central listing of available practice guidelines, development of demographic and practice surveys, and other issues about the professional practice of Clinical Neurophysiology.

Initial members were appointed representing USA, Canada, UK, and Germany. This was later expanded to include Switzerland, Japan, Italy,

France, Japan and Norway. The situation encountered might differ among countries. Development or use of guidelines could be suggested based on the results.

The committee ran into substantial problems. It became clear that the economic situations were very complicated and hard to compare among the countries. The incentives for cost containment, quality, access, and procedural details varied greatly among countries. The committee members had difficulty obtaining the needed details from their own countries; much of the needed detail was not readily available in the literature or from their national medical organizations. This stood in the way of achieving the primary goals of the committee.

An observation from the committee's work was that the variations were greater than expected in many ways. The systems for medical care in different countries were difficult to compare because of the numerous confounding variables that would have to be taken into account. In the end no formal report was forthcoming beyond those observations.

6. Communications

6.1. Mail, fax and e-mail

The Executive Committee sought better ways to communicate with Delegates, among the Executive Committee members, and with the various committees. Two Fiscal Periods ago in 1989, the standard communication was airmail. During that time international faxes came into use, which were helpful to speed communications. In the last Fiscal Period starting in 1993, e-mail was adopted for Federation business. All the Executive Committee members were able to exchange e-mails, and most committee members used e-mail for their professional business. At the beginning of this Fiscal Period in 1997, about half the Delegates from national societies were using e-mail for Federation communication. The other half still replied on faxes or airmail. As e-mail use

increased, Delegates were reached more often and more easily, and their advice was sought more often.

Delegates with only fax numbers, no e-mail address, were consulted somewhat less often. It was slower to reach Delegates by fax, and international fax lines were not always successful in transmissions. Delegates who only were available by airmail were consulted less often, and questions continued whether communications actually reached them.

Communications with Delegates always had been a problem for the Federation. Apart from the above issues about mail and faxes, Delegates moved their street or changed e-mail address or fax phone number, but without informing the Federation. Societies changed their Delegates without informing the Federation. Sometimes those communications to the Federation were not received. This was always a continuing struggle, especially for the Federation Secretary who was charged with keeping current the contact information for each society and its Delegate.

6.2. IFCN on-line

This term saw the start of the IFCN website. Secretary Hiroshi Shibasaki first opened this at his home institution in Kyoto. Subsequently the Federation publisher Elsevier offered to host the website and provide a technical manager. The website at the time of this printing is at <http://www.ifcn.info>. Chapters and many national societies also maintain websites, much of which has been made accessible as a web link through the IFCN website. The site contains information about the Federation's officers, national societies, meetings, fellowships, Executive Committee reports, and financial audits.

Elsevier also established on-line journal access during this Fiscal Period. These were available to libraries, some of which then discontinued receiving the printed hardcopy of the journal. Through the academic medical libraries, many members were able to access, read, print and save journal

publications. Back issues were scanned into the publisher's on-line database, so that issues available on-line dated back to the first issue in 1949. This provided a greater access to the journal than was available to many before these changes.

Elsevier established a process for individual subscribers to access the journal on-line for those whose local medical library did not give them the needed access. Individual subscribers also were given the ability to conduct automated searches across all Elsevier journals for articles with user-defined keywords, with reports e-mailed to the user each month.

Elsevier implemented the on-line publication submission, review and management software system, Smart Works, to aid authors in tracking their accepted manuscripts through the publication process. This was eventually replaced by the Editorial Manager software system in use now.

7. Rules Committee

The Rules Committee developed new Statutes and Bye-Laws for several purposes during this fiscal Period. Rules changes included the number of Editors-in-Chief, journal name change, General Assembly mail voting, and combining the two Congress series into one. The committee also reviewed, commented upon, and approved Bye-Laws for the three Chapters. The committee included Austin Sumner (USA, Chairman), François Mauguère (France), Americo Sakamoto (Brazil), Kjeld Andersen (Norway) and Ryuji Kaji (Japan).

7.1. Combining and scheduling congresses

At the Florence 1997 ICEEGCN General Assembly, Delegates asked to combine the two separate Federation Congress series, the ICEEGCN and the ICEMGCN, more informally known as the EEG and the EMG meetings. The new series combined meetings would be held every 2 years starting in 2001. The Rules Committee was

directed to develop rules renaming each congress as an ICCN instead of identifying separate EEG and EMG meetings.

At the 1999 ICEMGCN General Assembly, concern was voiced about too many meetings. The European Chapter suggested holding International Congresses and Chapter congresses each every 4 years. The Chapter Congresses would be held during the interval between the International Congresses. Business issues could be dealt between meetings by e-mail, reducing the pressure for face-to-face General Assembly meetings every 2 years. The European Chapter's motion was adopted without dissent.

The Rules Committee was directed to develop such rule changes. A choice was needed about which meeting to skip or move to convert to change the International Congresses to every 4 years. Options were skipping the 2003 or the 2005 meeting. As an added complication, the Executive Committee terms are usually 4 years long. The current Executive Committee cycles would end in 2001 and 2005. By mail ballot, a majority of Delegates favored holding the 2003 meeting. Delegates suggested shortening or extending the usual 4-year Executive Committee term once, so as to accommodate the conversion to ICCN meetings every 4 years. No congress would be held in 2005. Choices for the next Executive Committee term were from 2.5 to 6 years. Four years was excluded because the General Assembly already decided not to hold a meeting in 2005. The best choices were a Fiscal Period and Executive Committee term of 2 years 4 months, or 5 years, or 6 years. Delegates ranked the three options by mail, and 58% chose "5 years", 25% chose "2 years and 4 months", and 17% chose "6 years". The Council recommendation of "5 years" was adopted, that is holding an ICCN in 2006.

Through this action, the ICCN meetings were gradually spread out to every 4 years. ICCN 2001, 2003, 2006 and 2010 meetings were separated by 2, 3 and 4 years in that order. This had the effect of moving the ICCN meeting to even

years, no longer occurring in the odd-numbered years with the World Federation of Neurology Congresses or the ILAE Congresses.

7.2. *Reducing two business meetings to one*

Traditionally both the Council and the General Assembly meet during each quadrennial ICEEGCN and occasionally during the ICEMGCN. At that time, Council was composed of the Delegates, one per society. The General Assembly was composed of two, three, or four representatives from each society, including the Delegates. The size of the General Assembly delegation depended on society membership size. Those two business meetings covered much the same topics with similar audiences. Discussions overlapped and usually arrived at the same conclusions. Some issues differed, for example only Council discussed Bye-Law changes whereas only the General Assembly voted on future Congress sites.

The Rules Committee was charged with evaluating combining the two business meetings. The committee recommended that the two bodies meet together as the General Assembly at Congresses. No important constitutional function was served by having a separate Council meeting. Between Congresses, Council continued to serve an important role by giving advice and consent to Executive Committee actions. The 2001 General Assembly agreed with this plan.

This was part of a series of actions that led eventually to dissolution of the Council in the next Federation term.

7.3. *Journal name change*

The committee introduced the rules to change the journal's name to *Clinical Neurophysiology*. Discussion centered on potential confusion with the other journals of similar names. The confusion was considered relatively modest, and examples of similar names occurred in other scientific fields. The name change was approved unanimously.

7.4. *One Editor-in-Chief*

The General Assembly in Florence and Prague in 1997 and 1999 discussed combining the two Editors-in-Chief positions into one. Reasons were reviewed above in the Publications section. The Rules Committee was charged with reviewing the options and making specific suggestions to the Council.

The rules did not actually mandate one way or the other. The Bye-Laws on the Journal stated: “The Editorial Staff *may* consist of two Editors-in-Chief, an Assistant Editor, two or more regional editors, a review editor, a consultant for supplements and such others as the Editorial Board may decide. At any time, these posts may be in abeyance and any two or more may be combined at the discretion of the Editorial Board [the Executive Board]. The Rules Committee opined that if the intention is to irrevocably consolidate the office of Editor-in-Chief as a single position, then it is a simple matter to amend the Statutes and Bye-Laws to strike the words, “two Editors-in-Chief” and replace it with “one”. The Rules Committee suggests that maximum flexibility is desirable and that the simplest solution would be to insert the wording that the Editorial Staff may consist of one or more Editor(s)-in-Chief. Throughout the text wherever “Editors-in-Chief” was used the rules could state “Editor(s).”

The General Assembly accepted this compromise in the rule. It left it to the journal’s Executive Board, which is the Federation Executive Committee, not to replace Paolo Rossini as Editor-in-Chief when his term ended.

7.5. *Editor-in-Chief on the OCIC*

The Editor-in-Chief has a potentially important contribution to each ICCN’s scientific program. This has been informally conducted by allowing the Editor-in-Chief to contribute suggestions during the scientific program’s development. He or she is most current with the interesting new manuscript topics as well as the scientists and

physicians who are involved with those studies. For those reasons, the Executive Committee asked for a rules change to appoint the Editor-in-Chief to each Organizing Committee for an International Congress (OCIC). In discussion of the matter, the General Assembly suggested that an additional member from the sponsoring national society also should be added to each OCIC, for example the Scientific Program Chairperson. The matter was not approved in 2001. It was carried forward for further discussion and rule-wording in the next Fiscal Period.

7.6. *Chapter Bye-Laws*

All three Chapters drafted their own Bye-Laws within broad guidelines for IFCN Bye-Laws and other IFCN policies and rules. Of general application across all Federation functions, the Federation Rules Committee is the arbiter of disagreements between Federation organization, and all Federation accounting is subject to annual accounting. The General Assembly is the organization with overall responsibility for Federation rules and functions. Within these broad guidelines, the intention is that the Chapters will function on their own and report their activities periodically to the other Chapters and the Executive Committee.

The three sets of Bye-Laws were reviewed by the Rules Committee and are in compliance with Federation Statutes and Bye-Laws. The Federation Council approved of all three sets of Bye-Laws.

8. Long-Range Planning Committee

The Long-Range Planning Committee (LRPC) was charged with defining long-term goals, means and finance. Several specific questions were posed including:

- Should we have a permanent central office and executive director?
- Should we become incorporated, should we obtain insurance?

- How should we distribute resources to economically disadvantaged regions?
- What should we do about societies who do not pay their dues?

Past President Carl Lücking (Germany) chaired the committee. Members included Dr. Giancarlo Comi (Italy), Dr. Daniel Cibils (Uruguay), Dr. Andrew A. Eisen (Canada), Dr. Nai-Shin Chu (Taiwan) and Dr. Erik Stålberg (Sweden) along with the elected members of the Executive Committee.

8.1. Accounting, financial planning, and reserve funds

Several questions were addressed: Should the Federation retain a professional financial advisor to review the investments and financial strategy? What should be the long-range financial plan? How should the large reserves be used? Should the dues structure change? Should current general account funds be set aside for fellowship funding or other specific purposes?

The Federation general funds accumulated a profit in most years. The general account balance had slowly expanded, doubling in 6 years to US \$1.2 million. That is equivalent to 4 years of the Federation's budget. This was due in large part to profits from some Congresses, royalties from Elsevier, and careful monitoring of expenses by the Treasurer. The potential existed for adverse future years such as from a serious Congress fiscal loss or if Elsevier's royalty income were greatly reduced due to conversion to electronic publishing. There was also the ever present threat of lawsuits in the modern world. One or another of several governments could make tax payment demands. The LRPC recommended that the financial situation was tied up with the issues of the Federation's incorporation and clarification of the tax status and insurance, and that those issues must be resolved.

LRPC agreed to create an enrichment or special project account, and to set aside a portion of the general fund in this special account. The account would be used for support of education

and training, such as donated books, journal subscriptions, fellowships, and similar activities.

The LRPC agreed with the de facto policy of investing a portion of our accounts in low-risk funds. A more formal policy written was desired. One was developed by Executive Committee member Mark Hallett and adopted by the Executive Committee to cover long-term financial planning in a general manner. Questions were raised about the Federation's investment in Elsevier, which created at least a perceived conflict of interest because the Federation depended on Elsevier for a contract and income. Questions also were raised about investing in vendors who exhibited at our meetings, such as equipment manufacturers. Future investments in those entities were discouraged.

8.2. Gifts, sponsorships and lecturers for meetings

This was covered above in the section on "Inclusiveness". The LRPC was involved in general direction for such activities, and in setting aside funds to cover these activities. The Executive Committee authorized US \$7500 for sponsored subscription. From that allocation, 25 journal subscriptions were provided to 25 institutions of 8 countries. IFCN books also were distributed. Carl Lücking contacted many IFCN Delegates and other individuals to help to identify the best institutions for this program. Based on favorable results in the initial pilot project year, the program was authorized for an additional 5 years. Feedback from each institution was solicited annually so as to assure that a broad group of individuals could and did access these resources each year.

Requests to support local meetings were received frequently. In this Fiscal Period, several local courses received support, as reviewed in the section on IFCN Chapters. At first, the Chapter and LRPC discussed together to which local course to provide support. Later, this choice was turned over to the Chapter along with some funds to pay for the support.

8.3. *Legal status, insurance and taxes*

The LRPC recommended that the Federation retain an attorney to review the tax status and French nonprofit registration. At this time, the Federation was then a Registered Charity under a 1901 French law, but was not an incorporated organization. The Federation's Statutes declared the legal address of the Federation to be at the Centre Hospitalier Universitaire de la Timone, Marseilles, France. The administrative address of the Federation is that of the current President. No written document was found describing an incorporation of the Federation in Marseilles in 1949, only a Charitable Registration. It cannot be considered incorporated or as an equivalent.

The IFCN desired legal protection and appropriate status, clarification of the tax liability, and a desire for insurance to protect the Federation and its Executive Committee members from litigation and losses. To get insurance, an insurance agent informed the Executive Committee that we would need to incorporate and set up a permanent secretariat. An international business accounting firm would be needed to advise about tax status and international accounting practices.

Rules Committee member François Manguière and IFCN Treasurer Paul Despland sought legal advice about this matter from an attorney in Lyon. French Law had changed, which would require a change in the formal status of the IFCN. The Lyon attorney investigated the implications and necessary actions. Incorporation seems necessary in order to obtain officers' and directors' insurance as well as potentially to take advantage of certain tax benefits.

In a French legal Instruction dated September 15, 1998, French fiscal administration stated that an Association would be subject to commercial taxes when it has privileged relations with companies drawing a commercial advantage from this collaboration. This would be the case if all members of IFCN member societies had an obligation to subscribe to the IFCN's journal, because this would constitute a protected market to the

benefit of both the IFCN and Elsevier. Although this was obviously not the case, the attorney reviewed the 1983 contract between IFCN and Elsevier in this regard. He confirmed that there was no evident risk of the IFCN being in a taxable position with regard to French fiscal legislation.

The Executive Committee developed a policy about our financial objectives to protect our current tax-exempt status, one showing how we were using our funds for worthwhile social purposes. The Executive Committee asked the French attorney to help us incorporate as nonprofit charitable organization and to obtain directors' and officers' insurance. Unless there is a financial disadvantage, the incorporation would be in France. The issue of a permanent secretariat was brought back to the Executive Committee and LRPC.

The World Federation of Neurology (WFN) had dealt with some similar issues and had decided to incorporate. WFN Executive Board members received in this way some personal legal protection for their role in WFN matters. The WFN incorporation provided encouragement for IFCN to do the same. Insuring the IFCN directors and officers against liability was considered appropriate. The IFCN would need a permanent secretariat in order to incorporate. A properly incorporated nonprofit organization could receive the donations without incurring a tax liability and without needing separately to establish a Foundation.

Delegates were asked by mail and e-mail to contribute their thoughts on these matters. Active discussion with Delegates was held during the 1999 Prague ICEMGCN. Issues eventually carried over into the next Fiscal Period for incorporation and obtaining insurance.

8.4. *Executive office*

The matter of a central Executive office had been discussed for many years. The 1995 Kyoto ICEMGCN General Assembly raised the issue because the work required of Executive Committee officers was substantial. Each officer was

using staff time at their home institution to do portions of the Federation's work, and each was personally doing an excessive amount of work that could have been delegated to properly trained central executive and office staff.

By the beginning of this Fiscal Period in early 1998, the Executive Committee evaluated the concept of a central officer executive director. There was no consensus about how this might work. The general idea seemed meritorious. The Executive Office could keep mailing lists, communicate with societies and delegates, conduct elections and other balloting, and organize the many meetings and minutes. This was referred to the LRPC.

LRPC noted that WFN and other international medical societies had established permanent secretariats in recent years. Mark Hallett, then Movement Disorder Society President, provided examples of how they used this central resource. Each Executive Committee member was asked to contribute to a list of duties they are currently performing that could be accomplished by a central executive office. A long consolidated list was collected. It seemed that this move was an inevitability, given the need for incorporation, insurance, legal protection, and relieving the officers from many organizational chores. The committee then sought more information about actual tasks accomplished by existing professional executive offices for other international medical organizations, which professional groups were used by others, and what options seemed to have the best advantages. By the end of this Fiscal Period, the Executive Committee recommended to hire or create an Executive Director and permanent office. The decision of whom to hire was left to the new Executive Committee at the beginning of the 2001–2006 term.

8.5. Dues

The Florence General Assembly discussed what to do about nondues paying societies. The Long-Range Planning Committee considered options.

The committee recommended not to expel societies when economic problems precluded regular dues paying. For example some societies encountered national currency regulation problems. For others, dues were large compared to the daily income of typical member physicians. A few societies may have been dissolved but it is difficult to confirm that. One society was thought to have been dissolved, only to reappear and become active and paying dues again. There was a need to maintain good communications with Delegates and national societies so as to assure that correct contact information is used. The LRPC recommended that nondues paying societies lose their voting rights in the General Assembly and IFCN elections. Those societies would keep their eligibility for any office of IFCN and the capacity to get fellowships for their young members. Further work was needed to determine if a few societies have been dissolved.

An LRPC financial group task force included Andrew Eisen (Canada), Kjeld Andersen (Norway), François Mauguière (France) and Robert Miller (USA) to consider dues. The task force and LRPC group reported to the 1999 Prague General Assembly. The recommendation was not to change the dues amount.

9. Finances

Income and expenses varied considerably between the years because of the variable effects of International and Chapter congresses. Overall, a small to moderate profit was achieved every year. Paul Despland served as Treasurer since the 1993 Vancouver ICEEGCN. Over the succeeding 7 years, the Federation's assets more than doubled to US \$1.3 million. The annual budget depended on congresses during that year; it averaged US \$300,000 income and US \$220,000 expenses. Gains in currency exchange values contributed to the positive asset change. Details of congress financing caused considerable gain/loss variability from year to year.

9.1. Income

During this Fiscal Period, the annual income averaged US \$300,000. The major components were Elsevier royalties (US \$193,400 to \$231,200), National Society dues (US \$42,140 to \$67,807), Repayments from past congress profits (varied greatly), and Investment income (US \$8200 to \$35,800). In some years, the Elsevier royalties accounted for more than 75% of the income.

Elsevier royalties rose and fell with advertising revenues, expenses of publishing, number of new books released, and effects of electronic publishing. The contract called for the Federation to share in the profits rather than to get a preset annual amount.

9.2. Expenses

Annual expenses varied from US \$204,000 to nearly \$350,000, depending heavily on the kinds of congresses and projects accounted for in that year. The largest routine expense was the two Editors-in-Chief's offices, used for staff, mailing and other costs related to publishing the journal. This was budgeted at US \$60,000 per year. Other variable expenses were for travel of the Executive Committee members to attend Executive Committee meetings, OCIC meetings, regional meetings, and Chapter Congresses. An expense was incurred for local costs of those meetings. Support for Fellowships to Congresses averaged US \$44,000 per year but varied considerably. Support to the Congress budgets themselves varied from nothing in some years to US \$100,000 in other years, much of which was a loan repayable from congress profits. Special projects were variable, for example US \$42,000 to print the *Practice Recommendations* book. Executive Committee members were reimbursed for direct expenses of staff, mailing and other costs to their own institution to support Federation business. Executive Committee members personally never are paid a stipend, salary, or other payment for their time

or effort. They are expected to pay Congress registration fees like any other registrant.

Chapter support started as a loan of US \$3000 each year for each Chapter. The chapters were expected to report how the funds were spent, in part for the auditing process. Eventually this changed to an annual transfer, not a loan. In the next Fiscal Period the amount continued to change as the Federation assessed how best to support Chapter activities.

Office expenses were paid for the President, Secretary and Treasurer, while there were no expenses spent by the Past-President and Members-at-Large. The President's expense significantly decreased because of more frequent use of e-mail in lieu of airmail and faxes. The expense for one of the Editors-in-Chief was low because of expenses subsumed by the National Institutes of Health (NIH). As compared with the expenses in previous years, there was a significantly increased support for Congresses and Fellowships. The annual financial reports described substantial details and were accompanied by receipts. Expense details were made available for Delegates to examine and were presented to the external auditor for review.

9.3. Congresses

The International Congresses were operated by local organizations with oversight by the Federation. Those local organizations operated either as a part of the national society or by a PCO. The Federation contributed start-up funding as a loan to be repaid later from Congress profits. The Congress itself would raise most of its operating funds from local governments, charitable donations, exhibitor fees, and registration fees. Budgets were set to run a profit more than enough to repay the Federation start-up loan. The Organizing Committee of the International Congress (OCIC) is responsible for approving the budget and contracts as well as the scientific, social and other aspects of the Congress. The Federation

held four of the seven votes on the OCIC, with the other three held by the national society.

The Federation gradually increased its Congress support as the Federation operating budgets allowed. This was meant to keep Congress registration fees from growing too high. On some occasions, the Federation gave funds without a requirement that it be repaid, instead taking an outcome stake, for example one-third of profits. In addition, budgets called for repayment of the fellowship grants out of Congress profits, if any. If no profit occurred, no fellowship repayment was expected. As a result of this variability in timing and repayments, the fiscal effect of each congress was spread over several years in the Federation budgets, and this was a cause of great variability in the Federation's annual financial profit or loss.

Obtaining good accounting of congresses was sometimes difficult. On one occasion, 3 years passed before the professional congress organizer business turned over accounting and repaid loans. That and many other lessons from previous congresses showed that great attention to detail was needed so as not to be taken advantage of by professional congress organizer businesses or convention centers.

Most congresses turned a profit, best when sufficient charitable donation were obtained. For example congresses regularly obtained unrestricted educational grants from vendors or local charities. On one occasion a very large donation was obtained from a national horseracing association, with whom an organizer had made some contact. These activities were an important part of organizing a financially successful congress. It also allowed for better quality social events, lunch breaks, or other ancillaries and, importantly, kept its registration fees lower.

Chapter congresses were handled differently. They were organized more directly by the Chapter or national society. In general, two members of the Federation Executive Committee were appointed to each Chapter congress organizing committee. Federation support started as loans

and fellowship support similar to those for the International Congresses but often at smaller amounts. During future Fiscal Periods the organizational participation of two Executive Committee members remained, whereas financial support details gradually changed.

9.4. Audits

The 1997 Florence General Assembly approved a change in Federation external auditing and financial consulting arrangements. The recommendation was to retain an independent accounting firm with greater experience in international business. After a search, the Federation retained Mr. Alain Maillard of Geneva to provide independent auditing. Mr. Maillard was a member of the Swiss Institute of Certified Accountants and Tax Consultants. His auditing reports were shared with Executive Committee members. It was included with the finance materials brought to each General Assembly meeting, any Delegate who wished to review it, and the 1998 annual auditor's report was sent to all Delegates in June 1999. This communication was made much easier in the electronic communication era. Auditing for income, expenses, assets, liabilities, and balance sheet were generally satisfactory, with minor suggestions usually made for further improvements. Great details were kept of expenses along with receipts.

Areas of recommended improvement most often were for more detailed about Elsevier royalties. Those payments were often sparsely documented, even when the overall amounts were satisfactory. The Executive Committee and Treasurer pressed for more detail in publication royalties, income and expenses, as well as the list of journal subscribers. The journal title *Clinical Neurophysiology* is owned by the Federation, which gives greater leverage in negotiation. The contract with the publisher calls for payments to the Federation as a portion of profits, based on journal income and expenses. For that reason, those details would be relevant for auditing purposes.

The audits concluded each year that the balance sheet and profit–loss statement agreed with the books of account, the books of account have been properly kept, and the financial position, and the results of operations were presented in accordance with the principles and provisions of the Federation Statutes.

10. Nomination Committee

The Nomination Committee Chairman was Carl Lücking (Germany), as specified in the Statutes. Members were IFCN Delegates Americo Sakamoto (Brazil), Nobuo Yanagisawa (Japan), and Donald Sanders (USA).

In its usual procedure, the election was conducted in three stages. This complex process was specified in the Statutes and Bye-Laws so as to balance the Executive Committee geographically and by neurophysiology discipline.

Twelve societies were not allowed to vote because of failure to pay dues in the previous years. Forty-two societies were eligible to vote. In the several rounds of voting, 80–88% of those societies voted.

The results were

President	François Mauguière	France
Treasurer	Andrew Eisen	Canada
Secretary	Graham Harding	UK
Member-at-Large	Ryuji Kaji	Japan
Member-at-Large	Johannes Noth	Germany

Continuing members included

Past-President	Marc Nuwer	USA
Editor-in-Chief	Paolo Rossini	Italy
Editor-in-Chief	Mark Hallett	USA
