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Thailand Chapter of The American College of Surgeons

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Guest Editor

Editorial

On October 17, 1997, at the 83rd Clinical Congress of the American College of Surgeons (ACS) in Chicago, the ACS Thailand was recognized to become the Thailand Chapter. This recognition brought pleasure and pride to Fellows both within and outside Thailand. We are fully aware that this honour has brought with it great responsibilities in carrying out the activities of the Thailand Chapter, and respond to the faith and trust of the ACS.

In Thailand, there are three surgical colleges: the Royal College of Surgeons of Thailand (RCST), the second establishment but the one with the largest number of members and the central core of surgeons in Thailand. Currently, there are approximately 1,800 members. The International College of Surgeons (ICS) is the oldest, with 600 members. The ACS is the

youngest, with about 70 fellows.

The existence of three colleges augurs well for the solid advancement of surgeons in Thailand, since Fellows, whether those of the ACS or the ICS, virtually all are RCST Fellows. Hence, the activities of all the three colleges receive the co-operation of the Royal College of Surgeons of Thailand.

At its Annual Congress in July of RCST, the ACS Thailand arranges for presentations, in English, of scientific and technical papers. This was done continuously for a few years. In the past three years, the Committee has set definite rules for selection, putting weight on the scientific content and English. The top winner receives a cash award of Baht 10,000; the second Baht 5,000, and the third Baht 3,000.

During the past three years, and with co-operation of ACS Fellows who are Thai surgeons in the USA, the award for the top winner has been raised. The ACS

*Former ACS Governor for Thailand, 1996-1998.



CHARTER 114

GRANTED BY THE BOARD OF REGENTS OF THE

AMERICAN COLLEGE OF SURGEONS

TO FELLOWS OF THE AMERICAN COLLEGE OF SURGEONS
FOR A CHAPTER LOCATED IN
Thailand

Witnesseth, That**NAME AND AREA**

The organization of Fellows under this Charter shall be known as the Thailand Chapter

**OBJECTIVES**

The objectives of the Chapter shall be:

- 1. To be responsible for and endeavor to attain within its geographical area the objectives of the American College of Surgeons. These include elevating the standards of surgery, establishing a standard of competency and character for practitioners of surgery, providing a method of granting membership in the organization, educating the public and the profession to understand that the practice of surgery calls for special training and that the surgeon elected to fellowship in this College has had such training and is properly qualified to practice surgery.*
- 2. To provide for close fellowship of its members in uniting their efforts to improve the quality of care for the surgical patient.*
- 3. To offer the assistance of their Fellows to professional and civic groups concerned with the health of the community.*
- 4. To provide a medium through which surgical experiences may be presented and to provide a meeting ground for all surgical specialties.*

Paul A. Ebert
The Director

**MEMBERSHIP**

All Fellows of the American College of Surgeons residing in the area who desire to be members of the Chapter and who comply with its bylaws, shall be eligible for membership.

**AUTHORITY**

- 1. The Chapter shall adopt such bylaws as it feels are appropriate, provided that these are not inconsistent with the bylaws, principles, and objectives of the American College of Surgeons.*
- 2. Neither the Chapter nor its officers, nor any member of the Chapter, is authorized to represent, or, in any way, bind the American College of Surgeons.*

**DURATION**

This Charter shall remain in effect at the will and pleasure of the Board of Regents of the American College of Surgeons.

By order of the Board of Regents of the American College of Surgeons, entered this 17th day of October, 1999

Kathryn D. Anderson
Secretary of the College

Sylvan R. Shulman
Chairman of the Board of Regents

Thailand provides travel expense to the top winner to attend the Clinical Congress in the USA. The Governor has contacted the ACS Headquarter in Chicago to arrange for the awardee to attend a post-graduate course and participate in the meeting without having to pay for the registration fee. On arrival in the USA, our Fellow is provided with board and lodging by Thai Fellows in the USA. The Thai Fellow in the USA whose

name should be recorded here is Dr. Somprasong Songcharoen. There are many other Thai surgeons in the USA whose names cannot all be mentioned here. Beside attending the Congress, the awardee spends an extended period of time to observe surgical research and clinical works in various centers in the USA, which is very beneficial to the awardee.

The author has occupied the executive posi-



Chinda Suwanraks, MD, FACS (left) received the plaque recognizing ACS Thailand Chapter from David L Nahrwold, MD, FACS (right) during the 83rd Clinical Congress in Chicago on Oct 17, 1997.

tions of all the three colleges at various times and in various capacities. He is therefore in a position to comment that all the three colleges enjoy a very strong relationship, based on the goal of the advancement of surgery in Thailand, and the commitment to make surgery and surgeons in Thailand attain the world class standard.

This issue of the Thai Journal of Surgery commemorates the establishment of the Thailand Chapter of the American College of Surgeons. Three articles published here are those which were presented at the Annual Congress of RCST mentioned above. In addition, Prof Chomchark Chuntrasakul, President of the Thailand Chapter, has kindly written the "Message from the President", stressing the importance of the activities of the Chapter which must be continued, especially in Trauma and Cancer.

Saranatra Waikakul et al presented "The Use of Aiming Device for Pin Fixation in External Fixation of Pelvic Fracture". This work is a blueprint. The author had measured the iliac crest and iliac wing in the Thai cadaver, based on which an external fixator was constructed. This was cheaper and more easily handled for 30 patients with fracture of the pelvis. The author stressed that the external fixator could be used beginning from the OPD and ER, and it reduced the

pain suffered by each patient.

Taweesak Chotivatanapong et al presented an article on "Mitral Valve Repair with Autologous Pericardial Ring - An Early Result". A total of 39 patients showed indications requiring surgery due to various causes. The author used an autologous pericardial ring for posterior annuloplasty mitral valve repair. This procedure could correct only the diseased part. The reason given was that such surgery prevented an accident in causing injuries of the aortic valve which is close by. Moreover, the reason was that the shape, size and flexibility of annulus were almost normal, which preserved the ventricular function for a long period. Also, the autologous pericardium used as a valve ring was already available, and therefore, surgery is inexpensive. A short-term follow-up showed satisfactory results. However, a long-term follow-up is awaited.

Prasit Sirivittayakorn et al reported on "Endorectal Mucosal Advancement Flap for Treatment of Complex Anal Fistula: Reported Result" in treating complex fistula in ano by advancing the rectal mucosa to cover the internal opening so as to separate the fistulous tract from communication with the inside anal canal. The idea is similar to endorectal mucosal advancement flap for treatment of post-radiation recto-vagina

fistula.¹ The reporter indicated 56 per cent success in 16 patients.

In addition, there is an interesting rare case by Chumphon Wilasrusmee, an article on "Gangrenous Ileum and Mesenteric Lymphadenitis Caused by Tuberculous Peritonitis - A Case Report".

Supot Wudhikarn et al reported an interesting case of "Rhabdomyolysis in Renal Transplant Patient

Treated with Simvastatin and Cyclosporin - A Case Report".

Finally, the author presented an article on "Surgery in Thailand" in this ACS issue.

References

1. Fry RD, Kodner U. Advancement flap repair of recto-vaginal fistula: Anorectal disorder. CIBA Clin Symposium 1989; 37:6.