Vascular surgery has developed into a specialty distinct from general surgery: It should have its own separate governing bodies: many benefits will accrue

O. William Brown MD, JD  
Chief, Vascular Surgery  
Beaumont Health, Royal Oak, MI

Why doesn’t vascular surgery have its own separate governing bodies?

‘Those who cannot remember the past are condemned to repeat it.’

(George Santayana-1905)

Application

• ABVS incorporated in 1996
• Application submitted in 2002 (LCSB hearing on December 18, 2002)
• Application denied December 20, 2002 (No reasons given)
• Appeal heard before the LCSB Appeals Panel February 11, 2005

Statement concerning the position of the ABS relative to the creation of an independent ABVS

No Disclosures
Reasons for denial

• Process for training vascular surgeons (as determined by the specialty of general surgery) was in place.
• “The specialty of vascular surgery is not new and the “new” it wishes to add to its expertise are not new either.”

Reasons for denial

• Proposal for an independent board “does not enjoy the unalloyed support of many of the senior leaders of the vascular surgical community”

What’s Changed?

Nothing has changed
Just more clearly defined

Distinct specialty

• With the advent of endovascular techniques, general surgeons are no longer qualified to provide vascular care
• Decrease in the number of open vascular procedures
• Primary certificate which does not require general surgery certification

• Surgeons who wish to recertify in vascular surgery are no longer required to recertify in general surgery
• The majority of vascular surgical cases are now performed by trained vascular surgeons
• There has been no documented decrease in the standard of vascular surgical care provided to patients in rural areas

General surgeons are not trained, and therefore not competent, to treat the full spectrum of vascular disease
Benefits of specific governing bodies

• Confirm the expertise of vascular surgeons in the treatment of vascular disease.
• Impact hospital credentialing for those providing care for vascular disease
• Determine compensation

Benefits of specific governing bodies

• Medical legal implications
• Equitable and independent access to funds for the development of vascular surgery.
• Active participation in development of service lines
• Equitable and independent access to philanthropic donations.
• Control training of vascular surgeons

Recent notification from ABS

• Update from the ABS (not VSB) regarding some existing policies related to certification in vascular surgery
• No where was the VSB mentioned
• It is true that many beneficial changes for the specialty of vascular surgery have occurred as a result of the VSB. However, all of the changes had to be approved by the ABS

Politics

Agendas change
Participants change

It can be very dangerous to rely on “the kindness of others”

Conclusion

The establishment of separate governing bodies for vascular surgery will benefit ALL vascular surgeons as well as patient care for the treatment of vascular disease