

**Vladimir Benes, from the Czech Republic, current Chair of the EANS Training Committee and EANS President Elect spoke to Susie Hide on 19<sup>th</sup> December 2010**

***SH: Do you have a medical family background?***

**VB:** Yes, very much so. My mother was a pharmacist, and my father was a neurosurgeon (*Vladimir Benes Sr was the General Secretary of the EANS Congress, having hosted the 4<sup>th</sup> European Congress of Neurosurgery at which the EANS was founded in Prague in 1971*).

***SH: What made you decide to go into medicine?***

**VB:** Growing up, I was very interested in history, and also in film-making, but the prospect of going into medicine was always there, in the background.

***SH: Did you feel any pressure to follow in your father's footsteps?***

**VB:** Certainly not directly, but perhaps there was a subconscious influence at work. I suppose it was the same with my decision to go into neurosurgery. Following my third year at medical school in Prague, I had transferred to the university in Pilsen. On my first day there, I volunteered to go to the neurosurgical department – it just seemed the natural place to go. I was left alone with my boss, who was operating on a patient with a third ventricular tumour. Although that patient died, I immediately knew that I had found my discipline.

***SH: Had you considered any other specialties?***

**VB:** I definitely knew that I wanted to be a surgeon rather than a physician. I spent a year working in the Orthopaedic OR before going to University, and I guess that Orthopaedics would have been my second choice.

***SH: Which area of neurosurgery did you specialise in, and why?***

**VB:** I chose to specialise in cerebrovascular surgery. I liked the positive aspect – instead of resecting, you reconstruct. Things were very different in the late 70s/early 80s when I was starting out, and vascular neurosurgery was a very fast moving and exciting field. Two months after I had finished medical school I was told by my boss that he wants me to do EC/IC bypasses using a microscope (the microscope was very new at that time) and I was hooked.

***SH: What qualities do you feel that a good neurosurgeon should have?***

**VB:** He or she should be smart, imaginative, creative, inventive, honest and curious. And of course, the ability to teach the next generation is important. If you want to get to the top, a grasp of PR – the ability to “sell” your work – is also an asset. And you cannot take yourself too seriously.

***SH: Do you have any neurosurgical “heroes”?***

**VB:** My father, and my first two bosses, who were both gifted teachers. And in the past, Spetzler (*Robert Spetzler, the eminent vascular neurosurgeon from Phoenix, Arizona, where VB did a year's fellowship*).

***SH: To what extent do you involve the patient and their family in the decision making process?***

**VB:** The patient and family should be involved as closely as possible. I prefer to think of myself as an adviser, with the ultimate decision being made by the patient and/or family.

***SH: How and why did you become involved with the EANS?***

**VB:** My first involvement with the EANS was at the European Congress in 1971, where I helped as a runner. (*VB met his future wife at the Congress, where she too was working as a runner!*)

In 1981 I had the opportunity to attend the course in Bratislava as a trainee. The following year's course, in Verona, gave me the opportunity of my first trip to the West since (*the Soviet invasion of Czechoslovakia in*) 1968 and was a huge eye-opener.

That, and the three subsequent courses, gave me my first exposure to "real" neurosurgery; the faculty were really eminent, and what we were doing in Czechoslovakia lagged some 10 years behind at that time. Suddenly, I was seeing and hearing things that I had only ever read about previously – it was fantastic.

In 1994, I went to the Winter Meeting in Kuopio with a colleague. The Czech Republic was asked to supply a delegate to the Training Committee meeting, and the other guy said "you go". So I went, and I've been on the Training Committee ever since.

***SH: What do you believe to be the role of the EANS? And what do you feel should be its objectives over the next few years?***

**VB:** During my presidency, I would like the EANS to develop into a genuine "umbrella" community, offering the opportunity for all European neurosurgeons to exchange information - both in person, at our meetings, congresses and courses, and on-line via our website.

I believe that we should continue to develop internationally, offering membership and associated opportunities to those outside Europe, and co-operating with other continental societies. Our current reciprocal educational initiative with the CNS should be a useful first step in this direction.

I also believe that there is scope to increase the frequency of the European Congresses of Neurosurgery, and am delighted that the Executive Committee of the EANS has already agreed that these meetings should be held on a two-yearly basis from 2014 onwards. I would also like to see an increase in our CME educational events.

***SH: How do you think neurosurgery will develop over the next ten or twenty years?***

**VB:** I can make a guess at the next five years. I certainly can't guess how things will be in 50 years' time. I suppose that 20 years is borderline...

Surgery will become much safer, and the proportion of reconstructive surgery undertaken will increase, although I anticipate that the overall number of operations will fall. Transplantation and modulation will become increasingly important. Some surgery on tumours will continue, but vascular surgery will probably disappear altogether.

Minimally invasive techniques and the use of technologies such as intraoperative imaging will become ever more prevalent. The field of Spinal Neurosurgery is already fast moving, and will continue to develop.

I hope and expect that our evaluation of patient outcomes will develop in such a way that the extent to which a patient is able to return to a normal life within society and within his/her family is seen as the determinant of success. In the past the brain of the

neurosurgeon seemed to dominate that of the patient; things should be the other way round in future.

**SH: How do you choose to spend your spare time?**

**VB:** I like to read. We also go to the theatre a lot – the majority of our friends outside medicine are involved in theatre in some way.

**SH: And what about your own wife and family – are any of them involved in neurosurgery?**

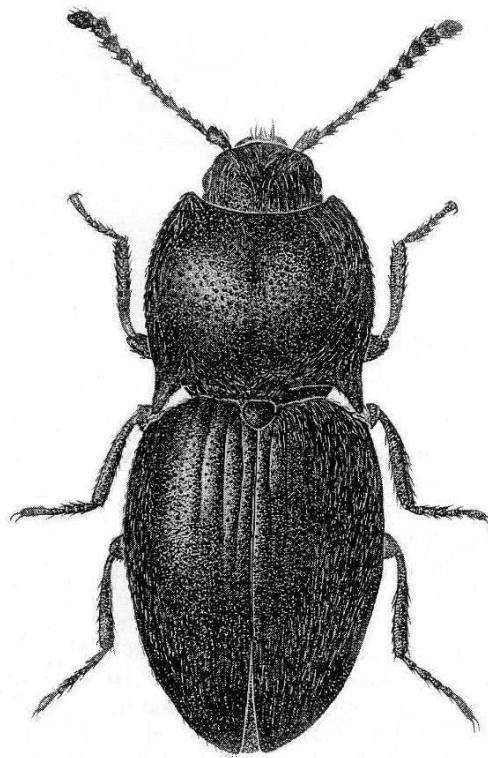
**VB:** Eva, my wife, is a business manager for the Concert Hall in Prague, and is involved in event organisation and marketing. My son (*another Vladimir Benes*) is also a neurosurgeon at the department in Liberec, regional city some 100 km north of Prague. And we now have twin grand-daughters, who are just under a year old.

**SH: Is there anything you can tell us that might surprise people reading the article?**

**VB:** I'm an avid entomologist. Once a year, I make a "pilgrimage" to remote areas, in the search for undiscovered species of beetles. I forget neurosurgery completely for a month, and focus entirely on the hunt. I've had some great times in China in the past; though for the last couple of years. I've gone to Mexico.

**SH: And have you ever found any new species?**

**VB:** Oh yes – there are several species named after me.



*Hypnoidus beneschi*