

From The Editor

AmSECT and the Meetings of the Minds

As is the tradition of the first issue of the New Year we include the abstracts from the upcoming International Meeting of the American Society of Extra-Corporeal Technology (AmSECT). This month AmSECT will hold its 43rd meeting at the Hilton Riverside Hotel in New Orleans, Louisiana, USA, and once again, individuals from all over the globe will travel to America to partake in the scientific discussions and social gatherings of the convention. Trying to describe the meeting to an individual who has never before attended AmSECT is a daunting task. No other perfusion-oriented meeting can boast of the diversity in subject content, nor breadth of presenters, that is seen at AmSECT. The format of the meeting parallels what one would encounter at large surgical or anesthesia meeting where multiple sessions are conducted concurrently. One might ask why not conduct the meeting as a 'single auditorium' session, as is the modus operandi of most meetings. It is always easier, and more economical, to conduct a meeting with a single plenary session as the primary venue. Some meetings may also include small breakout sessions that are focused on single topic subjects. Such informal settings are comfortable and allow participants the opportunity to discuss issues on a more personal level. However, there are drawbacks related to limitations such as a finite number of attendees and limited subject content. Another feature of AmSECT International is the ability of practitioners to view the developing technologies at the manufacturers exhibits. These exhibits serve as the epicenter for discussion as well as a place for renewing old friendships and for developing new ones.

As perfusionists we are a technology driven group who rely heavily on industry to invest in the development of new products, ultimately with the goal of improving the conduct of cardiopulmonary bypass for improving patient care. Few medical specialties have developed consociational relationships with industry sources such as those seen between perfusionists and the companies marketing cardiopulmonary devices. Although most perfusionists will attempt to select their devices based upon an evidenced based approach, the economic advances of partnering with a single, or few, companies almost makes this impossible. Because of this economic benefit many of us



become sequestered from those companies whom we do little or no business, and it is only the aggressive product manager or representative who gambles by expending a fraction of his or her precious time on less devoted customers. Meetings such as AmSECT provide perfusionists with the opportunity to visit all the major manufacturers of cardiopulmonary equipment and compare products that are not readily seen in our clinical practices. Opportunities for product review are few and far between and shrinking CME and industry budgets will further complicate this effect.

Of course, the value of knowledge can never be over appreciated. Hippocrates in *Law IV* reflected on science by stating that "There are . . . two things, science and opinion; the former begets knowledge, the latter ignorance." Although I question the black and white aspect of his muse, his directness and challenge is clear. Neither science nor opinion is mutually exclusive. In the field of medicine science can direct opinion where the decisions made in managing our patients are made via a passionate objectiveness. As seen from the abstracts of the 43rd International Meeting, and the manuscripts published here within, this overt initiative of research exemplifies the value that perfusionists place on pursuing new knowledge. We are indeed fortunate to have opportunities for the collective expression of ideas, which stimulate critical review and academic debate.

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Editor