The 25th Gary P. Wratten Army Surgical Symposium

LTC John H. Armstrong, MC, USA

Critical Care Service, Brooke Army Medical Center, Fort Sam Houston, Texas

ABOUT THE COVER

Twenty-five years ago at the first Wratten Army Surgical Symposium, there were 8 Army Medical Centers with General Surgery training programs. Today, there are 6. At this year’s 25th Anniversary of the Symposium, we celebrated the strength of Army surgical training programs by remembering through brief biographies the namesakes of the current Army Medical Centers. The faces on the cover present a powerful legacy for Army Medicine in leadership, medical research, and combat casualty care. From left to right, the faces are as follows:

Brigadier General Charles Stuart Tripler (1827-1865) was the first Medical Director of the Army of the Potomac in the Civil War, and he standardized Army medical practice through his “Manual of the Medical Officer of the Army of the United States” and “Handbook for the Military Surgeon.” Tripler Army Medical Center is in Honolulu, Hawaii.

Captain William Beaumont (1785-1853) was a frontier surgeon who discovered gastric physiology through the serendipity of his patient, Alexis St. Martin. William Beaumont Army Medical Center is in El Paso, Texas.

Brigadier General Roger Brooke, VII (1878-1940) was an internist and infectious disease specialist who was the first to institute routine screening chest radiography in a patient population and who trained generations of Army physicians in field medicine. Brooke Army Medical Center is in San Antonio, Texas.

Major Walter Reed (1851-1902) was a frontier surgeon and early bacteriologist who conquered yellow fever by confirming through research the hypothesis that the mosquito was the vector causing this scourge. Before this, he headed the Typhoid Board, which discovered that typhoid spread through improper sanitation and impure drinking water. Walter Reed Army Medical Center is in Washington, DC.

Colonel Patrick Sarsfield Madigan (1887-1944) became the Father of Army Neuropsychiatry after 11 years as Chief of Neuropsychiatry at Walter Reed General Hospital. Madigan Army Medical Center is in Tacoma, Washington.

General Dwight David Eisenhower (1890-1969) concluded 2 wars and led American through the early years of the Cold War as our 34th President. He was no stranger to Army medi-

Correspondence: Inquiries to LTC John H. Armstrong, MC, USA, Critical Care Service, Brooke Army Medical Center, 3851 Roger Brooke Drive, Fort Sam Houston, TX 78234-6200; fax: (210) 916-2202; e-mail: john_armstrong@ama-assn.org

The opinions and assertions contained herein are the private views of the author and are not to be construed as official or as reflecting the views of the United States Government, the Department of Defense, or the Department of the Army.
Here are the 2 faces not seen on the cover: physicians trained at these 2 facilities, their influence is still felt. Here are the 2 faces not seen on the cover:

Lieutenant William T. Fitzsimons (1889-1917), the first American officer to lose his life in World War I, was a physician (see Fig. 1). He had 2 tours in Europe, first with the Allies in England and Belgium in 1914-1915 before United States involvement, and then again in 1917 in France, where, within 2 weeks, he was killed in a German air attack on his field hospital.

Major Jonathan Letterman (1824-1872) was a frontier surgeon who rose to become the Medical Director of the Army of the Potomac through the bloodiest battles of the Civil War (1862-1863) (see Fig. 2). As his memorial in Arlington Cemetery states, he was “the originator of modern methods of medical organization in armies,” to include the field ambulance corps and the 3-tiered battlefield medical evacuation system.

HISTORY OF THE SYMPOSIUM

The Gary P. Wratten Army Surgical Symposium is now in its 25th consecutive year, and it represents the annual meeting of Army surgery. It is named in memory of Major Gary P. Wratten, MC, USA, a distinguished 1963 graduate of the Walter Reed Army Medical Center surgical residency. Major Wratten was killed in action in the Republic of Vietnam in November 1966 while serving as the commander of the 45th Surgical (MUST) Hospital. He had been handpicked for this assignment by the Army Surgeon General, Lieutenant General Leonard D. Heaton. Although his life was cut short in service to our country, his bright promise lives on through this symposium.

The conference began as “Current Problems in Surgery” in 1967 and was hosted by Walter Reed Army Medical Center through 1974. It was designed to promote an active exchange of surgical expertise between military and civilian surgeons. The meeting was revived as the Gary P. Wratten Army Surgical Symposium 5 years later on May 16, 1979, in partnership with the newly formed Uniformed Services University of the Health Sciences and with cosponsorship from the Washington, DC, Chapter of the American College of Surgeons. The Symposium was structured around presentations by residents of original Army surgical research. The Leonard D. Heaton Distinguished Professor Lecture Series was established at the same time in honor of LTG(Ret.) Heaton, the U.S. Army Surgeon General from 1959 to 1970. Not only does this remain the longest tenure for any U.S. Army Surgeon General, but his legacy endures through the results of his strong advocacy for the establishment of surgical training programs in the Army.

The host institution for the Symposium has rotated around the Army Medical Center circuit. Off-campus meetings were possible through the mid-1990s. In 1995, the Symposium was timed in association with the Spring Meeting of the American College of Surgeons. On its 20th anniversary, the Symposium was honored by inclusion of papers in the September/October issue of *Current Surgery*, the official journal of the Association of Program Directors in Surgery and the Gary P. Wratten Army Surgical Symposium. MAJ Wratten’s spirit was poignantly present at last year’s meeting with the attendance of Mrs. Wratten and 30 family members. The Wratten Symposium serves as the annual meeting of the Army (State) Committee on Trauma, which sponsors the Resident Trauma Paper Competition.

PROGRAM REPORT

Wratten 2003 occurred during Operation IRAQI FREEDOM and was streamlined over 2 days because of these wartime constraints. Even with the ongoing war, over 80 academic, clinical, and resident surgeons attended. The program featured 34 papers of original Army surgical research that covered the areas of Readiness, Technology, Trauma (Basic Science and Clinical), Basic Surgical Science, Vascular Surgery, and General Surgery. Nine “spectacular cases” were presented, 1 each from the Army’s surgical, vascular, and surgical critical care residency programs. As mentioned earlier, a representative from each Army Medical Center presented a brief biography of its namesake as well.

Three visiting professors shared their expertise with Army surgery. The 25th LTG Leonard D. Heaton orator was Dr. Thomas Russell, Executive Director of the American College of Surgeons. His timely talk centered on the role of the ACS and the Surgeon in homeland security. Dr. Clifford Simmang, a 1987 graduate of the Brooke Army Medical Center General Surgery Residency and a colorectal surgeon from the University of Texas, Southwestern, discussed the present state and future of laparoscopic colorectal surgery. Finally, Dr. Charles Cox, a Lieutenant Colonel in the U.S. Army Reserve and a pediatric/trauma/critical care surgeon, from the University of Texas, Houston, demonstrated the relevance of pediatric surgery and pediatric trauma for the military surgeon. He had recently returned from Afghanistan after serving for 4 months on an Army Forward Surgical Team.

The winning papers in the Army (State) American College of Surgeons Committee on Trauma resident paper competition were Captain Lisa Coviello, from Tripler Army Medical Center, for her paper, “Vasopressin Preserves Vital Organ Perfusion in Vasodilatory Septic Shock,” and Captain Amy Young, from Madigan Army Medical Center, for her work, “Determining the Adequate Training Experience for Endotracheal Intubation with Cumulative Summation Analysis.” These papers will be presented at the Region XIII Trauma Paper Competition at the Uniformed Services University Trauma Day later this year.