

THE FOUNDING AND COURSE OF
THE INTERNATIONAL BILIARY ASSOCIATION (IBA)

A Personal Recollection

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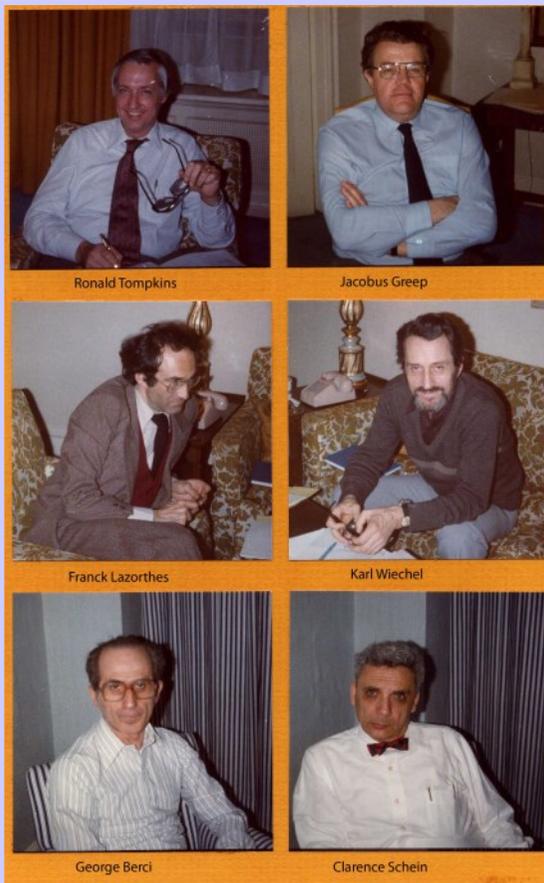
Los Angeles, CA 90095

Origins.

The International Biliary Association (IBA) was founded some 37 years ago, in August, 1978. It seems appropriate, if not overdue, to recollect the events and people involved in the formation of this unique association. The idea to form such a group came from Dr. George Berci, Clinical Professor of Surgery at UCLA School of Medicine and Director, Division of Surgical Endoscopy at Cedars-Sinai Hospital, both in Los Angeles, California. His concept was to form a small interdisciplinary working group of international specialists in biliary tract disorders which could facilitate clinical research protocols to study many of the problems in biliary tract disease at the time. Therefore, academic surgeons and non-surgeons were initially to be involved in a limited, invited membership. These aims were outlined in correspondence dated August 22, 1978. This original concept later would be overtaken by the populist sentiment to broaden the group's membership and the IBA would be eventually merged into the International Hepatobiliary Association (IHPBA).

Leadership.

Dr. Berci approached me with the idea and it was agreed that this would be a worthwhile endeavor. The initial name given to the organization was the International Association for the Study of Biliary Tract Disorders - an explanatory but completely unwieldy title. We began contacting individuals to assess their opinion of the idea and to form an Organizing Committee. There was widespread interest in the idea and a group of 14 individuals, including Drs. Frank Glenn, Charles McSherry, John Braasch, Seymour Schwartz and Kenneth Warren agreed to participate. The first meeting of this group was held during the American College of Surgeons Clinical Congress in San Francisco on October 15, 1978. Professor Frank Glenn of New York, who agreed to be a Senior Advisor to the group, told us that he and Dr. Charles McSherry had tried to form a similar group 10 years before but had not been able to generate any interest in the plan. At this time, however, the assembled interested surgeons discussed the proposal and agreed that the effort should go forward. As a result, an ad hoc Committee was appointed to plan the organization. The committee consisted of Drs. Clarence Schein (USA), Jacobus Greep (Holland), Karl Wiechel (Sweden), Franck Lazorthes (France) along with Drs Berci and Tompkins.



The ad hoc committee met at the Stanhope Hotel on 5th Avenue, New York City, for three days (March 23-25, 1979). During this meeting a constitution and bylaws were drafted; the name of the society was changed to the International Biliary Association (IBA); a logo was designed and two protocols for clinical research studies were outlined. New members were approved pending the vote of the membership, and the program of the first annual meeting was planned. A Nominating Committee was named to recommend officers for election at the first meeting which was to be held in New Orleans just before the annual meeting of the Society For Surgery of the Alimentary Tract (SSAT) in less than two months time.

Meetings.

The first meeting of the new International Biliary Association was held in New Orleans, Louisiana on May 19, 1979 at the Hilton Hotel. The one day program did not conflict with other meetings of Digestive Disease Week being held in the same place. The first item on the agenda was a one-and-a-half hour business meeting of all 27 members present. At this meeting, the constitution and by-laws were approved. Objectives outlined in the constitution were:



- to provide a forum for exchange of information open to all;
- to promote exchange of ideas between disciplines;
- to establish prospective, controlled protocols;
- to initiate projects for investigation of biliary tract disease;
- and to publish certain transactions of the Association.



Attendees of the 1st Meeting of the IBA. New Orleans Hilton Hotel, May 19, 1979. Presidents of the Association are identified by numbers above their heads corresponding to the order of their presidencies: 1=Tompkins (1979-81);

Membership was to be by invitation to those who had contributed to knowledge in the area of biliary tract disorders. Active membership was limited to 8 years and officers were to be elected from various countries.

At this meeting, officers were elected and Councilmen at Large and an Advisory Council were approved (Table 1.) Eight Protocol Committees were formed in these areas: percutaneous transhepatic procedures; biliodigestive bypass; sphincter of Oddi; primary and secondary biliary operations; stone dissolution; cancer of the biliary tract; terminology; and pancreas. (It is interesting to note that, even at this early date, there was already a stimulus to expand the activities of the Association beyond the biliary tract.)

Following the business meeting, the Scientific Sessions were begun with a Key Note Address by Prof. Frank Glenn entitled "The Future of Biliary Tract Research". Thirty members and guests then heard and discussed 17 scientific papers presented from around the world (Table 2a,b.) It was an exciting beginning for the organization and the culmination of many months of intense planning.

Following on the success of the first meeting, the Executive Council met at the Hyatt Regency Hotel in Chicago on October 21, 1979 during the American College of Surgeons Clinical Congress. At this meeting, clinical research protocols for the study of primary and secondary biliary procedures were approved; the program for the second annual meeting was outlined; and a Festschrift to honor Langenbuch on the 100th anniversary of the first cholecystectomy was planned.



IBA Executive Committee Meeting, Hyatt Regency Hotel, Chicago, IL, October 21, 1979. Left to right: Dr. William P. Longmire, Jr. (Advisory Council); Dr. Rudolph Berchtold; Dr. Charles McSherry; Dr. Frank Glenn (Advisory Council); Dr. Kenneth Warren (Advisory Council).

The ensuing 5 months were hectic, near chaotic, as the next meeting was planned. There were great difficulties in communication ranging from letters from abroad being sent sea mail instead of air mail (no email in those days), lost letters, secretarial lapses, coordination of speakers among a number of issues but these were just parts of the problem. Unexpected personality conflicts arose, political considerations raised their heads and many prominent international surgical egos required frequent massaging. Added to these problems, our woeful inexperience with such a large task taxed the state of mind of the program and organizing committees. My correspondence during this time weighed 5 pounds and contained letters of deep concern from several prominent members regarding the future of our fledgling group. Nevertheless, a program was finalized in late March, 1980 which provided for a three-day meeting with 26 papers and four panel discussions.

The second meeting was held in Maastricht, the Netherlands from June 4-6, 1980 with Prof. Jacobus Greep was chair of the organizing committee. This time was chosen to immediately precede the XI International Congress of Gastroenterology in Hamburg, Germany. It was attended by 30 members, 360 guest physicians and 80 wives. At the business meeting, twenty-six new members were elected. Prof. Phillip Sandblom was appointed to the Advisory Council and Drs. Blumgart, DenBesten and Speranza were elected to 2-year terms as councillors. Thanks to the efforts of Prof. Greep and Dr. Wiechel, the Program chairman, the meeting was a great success. The Executive Committee expressed their relief and their confidence in the viability of the young organization. It was felt that this new organization was definitely going to survive and that its goals were of interest to many around the world. Interestingly, in the weeks following the meeting, I received numerous letters of congratulation and support, including some from the same individuals who had previously expressed their reservations. We were on our way.

However, ironically, the very success of this meeting may have set in motion ideas which would prove to be threatening to the Association in the future.

At the Executive Council meeting on October 19, 1980, in Atlanta (again during the ACS Clinical Congress), the dues were decreased to \$40 per year and the possibility of beginning a new multidisciplinary journal focused on biliary tract disease was discussed. The third annual meeting was held at the New York Hilton Hotel in May, 1981, during DDW. At that time there were 73 members of whom 84% were surgeons, 12% gastroenterologists, 3% radiologists and 1% endoscopists. Members from USA constituted 55% while 35% were from Europe and UK, 5% from Asia and 5% from Australia and South Africa. A listing of all meetings of the Association is in Table 3.

Accomplishments.

From the outset, the difficulties with designing protocols and obtaining international cooperation became evident. At each Executive Committee meeting and Annual meeting, these problems were repeatedly discussed with no real resolution. Only one protocol reached the stage of being submitted to a national meeting, that of the Primary and Secondary Biliary Operations group, led by Dr. Larry DenBesten. They were able to analyze over 1000 cases submitted by many groups around the world.

In 1983, it was suggested that the protocol concept should be replaced by projects to classify and categorize disease entities, such as papilla of Vater disorders amongst others. These activities continued at a slow pace but were overshadowed in 1985 by a most disconcerting and disruptive event.

Evolution.

At the annual meeting that year in Rome, posters were placed announcing a meeting to be held in Lund, Sweden in June, 1986. This "World Congress of Hepatopancreatobiliary Surgery" chaired by Prof. Stig Bengmark, the IBA treasurer, had as its aim the formation of "a world association of HPB surgeons" at the completion of the congress. This announcement coming, as it did, without warning or prior consultation shocked the assembled members and Executive Committee of IBA. There ensued a long period of anxiety, hostility and recrimination directed toward this new organization and its goals which seemed to be in direct opposition to the aims of IBA.

In a letter received days later by members of the Executive Committee from Prof. Bengmark, he reiterated his goal to form a World Association of HPB Surgeons (WAHPBS) and his hopes to coordinate its meetings with the World Congress of Surgery held by the ISS/SIC every other year. There followed a storm of correspondence and phone calls among the IBA members raising questions about, and expressing objections to, the formation of this new society and its threat to the IBA. Unfortunately, some of these interchanges took the form of hostile attacks on the personalities involved and insulted many of the individuals in both camps. These exchanges were unanimously decried by the Executive Committee of the IBA which, although deeply concerned, urged a calmer approach.

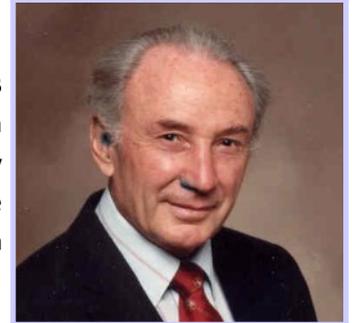
Upon further communication, Prof. Bengmark explained that he did not feel the new group was in competition with IBA since the IBA was an interdisciplinary group whereas the new group was entirely surgical in membership. Further, he pointed out that the IBA was a selective group dedicated to planning of studies and communication of data whereas the new group would have membership open to all surgeons who applied and paid a \$25 membership fee. In addition its aim was to be an educational forum, similar to a large post-graduate course.

Discussion of this new group was brisk over the next several months among IBA members and officers. Several favored the new group and saw no competition between it and the IBA while others remained deeply opposed to its formation. As a result of these discussions, the IBA Executive Committee decided in October, 1985, to formalize the expansion of the IBA into the areas of liver and pancreatic disorders. This had been discussed as early as 1981 but no firm decision had been made until now. It was further proposed in 1985 that the name of the association be changed to the International Hepato-Biliary-Pancreatic Association (IHBPA) to reflect this wider scope.

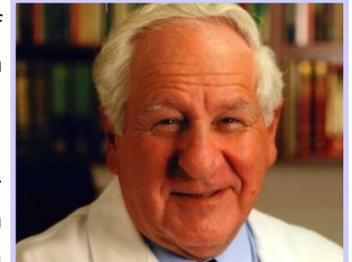
Several members of the Executive Committee continued to lobby at this point for a fusion, or at least a joint meeting, of the IBA with the WAHPBS. A cooling-off period developed by necessity as calmer heads worked to reduce the high emotions engendered by the perceived conflict and behind the scenes talks continued. However, it was not until September 29, 1987 that formal correspondence from the IBA was sent to the WAHPBS. This was from outgoing president Prof. Leslie Blumgart of the IBA to Prof. J. Miles Little, president of the WAHPBS. This letter stated that the Executive Council of the IBA (at the Adelaide meeting) "have resolved that we should open discussions which might lead to an eventual union of IBA / WAHPBS as a single society".

The IHBPA (formerly IBA) convened a meeting of senior officials in Paris on January 11-13, 1998, to discuss such a merger. In the interim, a ballot had been circulated among the membership of the IBA asking their opinion of such a union. The results of this vote were 91 out of 102 responses against a merger. Faced with this strong opposition from the membership, the meeting decided that such a union was out of the question at this time and there was therefore no need to meet with WAHPBS executives. Even the suggestion of a joint meeting every two years was not approved. Results of this meeting were conveyed to the WAHPBS by President John Wong of the IHBPA.

Past Presidents who submitted photos, with the dates of their presidencies. (Some photos are contemporary).



Prof Frank Moody (1985)



Prof Leslie Blumgart (1987)



Prof John Wong (1988)

Discussions had begun in 1985 with the ISS/SIC to coordinate future meetings of the IHBPA with their World Congresses in Surgery on alternate years. Now the IHBPA proposed to the ISS and CICD to take charge of the entire hepatobiliary and pancreatic program at the 1989 Toronto World Congress of Surgery and this offer was accepted. Thus, the IHBPA continued to expand its influence and its membership. At the annual meeting in Nice in September, 1988, the constitutional change in the name of the Association to IHBPA was formally ratified by the membership.

Despite the previous negative vote of the membership, as leadership positions changed in the IHBPA it became more likely that a merger with WAHPBS would not only be desirable but was probably inevitable. At the 1989 meeting in Toronto, a working party was formed to set criteria for forming an association with WAHPBS. President David Carter was asked to meet and discuss these with Dr. Martin Adson, president of WAHPBS. As a result, from August 10-11, 1990, a meeting was held in Paris between IHBPA and WAHPBS principals to discuss a merger. President David Carter spearheaded an agreement on a merger of the two associations with a single constitution and a new name. The group also agreed on a multidisciplinary membership, a key goal of the IHBPA.

Thereafter, at the 1990 meeting in Hong Kong, the working party proposed that a joint scientific meeting with WAHPBS be held in Boston in 1994. The councils of each group were to draw up plans for a merger over the intervening 3 years. Further it was proposed that the new association be named the International Hepato-Pancreatico-Biliary Association (IHPBA) - a subtle change from that of the present IHBPA.

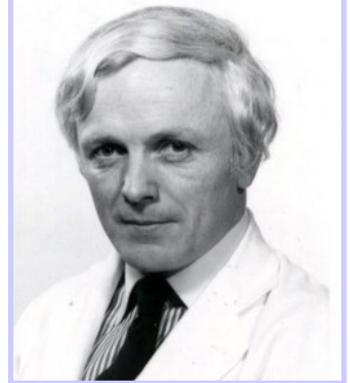
On August 29, 1991, at the meeting in Stockholm, the merger was announced and accepted by the membership. A new constitution for the merged group was presented which listed the following objectives:

- to promote a forum for clinical and investigative presentations and discussions at meetings open to all members of the medical profession.
- to promote interchange of scientific and clinical ideas between members of various medical disciplines.
- to foster friendship among hepatic, biliary and pancreatic specialists, clinicians and scientists involved in other disciplines.
- to establish well-controlled studies and collect data on unresolved clinical problems that affect the liver, biliary and pancreatic systems and to stimulate basic investigations into disorders of these systems.
- to publish the transactions of the Association in a manner which will be available to the worldwide medical profession.
- to strive towards the highest ethical standards in the Association's fields of endeavor.

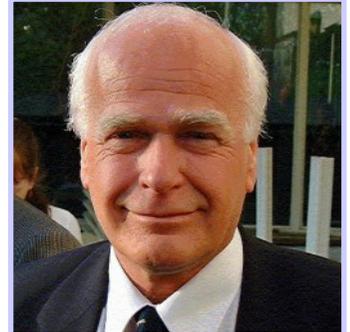
Members of both associations who studied these objectives carefully realized that the merger would be a positive move and would benefit both associations: it preserved the basic objectives of the original IBA while providing a much larger membership with which to advance its objectives.

Over the course of the next two years, working discussions continued successfully so that at the annual meeting in Hong Kong in August, 1993, the final articles of coordination were approved to form the new IHPBA on May 31, 1994 in Boston. Interestingly, at that same meeting, the Secretary announced that the membership of IHBPA had grown to an all time high of 415.

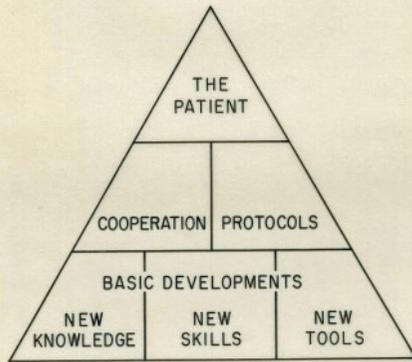
Presidents (continued)



Prof Sir David Carter (1989)



Prof Ingemar Ihse (1991)



The IBA Pyramid. Built on a foundation of basic developments, careful design of protocols and international cooperation will support the individual patient.

The new IHPBA Executive Committee was announced as:

President	Dr. David Carr-Locke	1994-96
Secretary	Prof. Robin Williams	1994-96
Treasurer	Dr. Eric von Sonnenberg	1994-96
Pres.-Elect	Prof. Robin Williamson	1996
Secy-Elect	Dr. James Toouli	1996-2000

Thus it was that the IBA, which began as a selective, multidisciplinary, international working group devoted to development of protocols and controlled studies of disorders of the biliary tract, became an organization which sought to study not only the biliary tract but the liver and pancreas as well. Under stimulation from a new open-membership surgical society, it fought against, then accepted and finally embraced, a merger to create a large, multidisciplinary, international society which has so far enjoyed an unchallenged success. This story is a testament to the diplomatic efforts of so many people, named and unnamed, from each association and a tribute to their even-handedness and high ideals directed toward the betterment of treatments for our patients world-wide.

These are my personal recollections, enhanced by review of 16 years of files and correspondence. Any errors of omission or commission are my responsibility alone.

The rest, as they say, is History...

Table 1.

Actions at 1st Business Meeting of the IBA
May 19, 1979
New Orleans Hilton Hotel

1. Officers

President	Ronald K. Tompkins (USA)	2 Years
V. President	Jacobus Greep (Holland)	2 Years
Secretary	George Berci (USA)	2 Years
Treasurer	Charles McSherry (USA)	2 Years

2. Advisory Council

Frank Glenn	USA
Walter Hess	Switzerland
William Longmire	USA
Lord Smith	England
Pierre Mallet-Guy	France
Kenneth Warren	USA
Robert Zollinger	USA

3. Council at Large

Rudolph Berchtold	Switzerland	1 Year
Leslie Blumgart	England	1 Year
Franck Lazorthes	France	2 Years
Clarence Schein	USA	2 Years
Larry Way	USA	1 Year
Karl Wiechel	Sweden	2 Years

4. Dues \$100 per year

Table 2.a

INTERNATIONAL BILIARY ASSOCIATION
(IBA)

Presents Its
First

INTERNATIONAL MEETING

May 19th, 1979
(Saturday)

CAMBRIDGE ROOM
NEW ORLEANS HILTON HOTEL
New Orleans Louisiana

Table 2b.

INTERNATIONAL BILIARY ASSOCIATION (IBA)

8:30-10:00 A.M. Business Meeting (Members Only)

10:00-10:30 Coffee Break

SCIENTIFIC SESSION I

Moderator: R. Tompkins

- 10:30-10:50 Key Note Address: "Future of Biliary Tract Research"
F. Glenn, New York
- 10:50-11:00 Dissolution of Gallstones
L. Way, San Francisco
Discussion
- 11:05-11:15 Non-invasive Radiological Investigation of the Biliary Tract
J.A. Hamlin, Los Angeles
Discussion
- 11:20-11:30 PTC: A Rapid Diagnostic and Therapeutic Approach to Jaundice
K. L. Wiechel, Stockholm
Discussion
- 11:35-11:45 Hepaticostomy for the Surgically Irremedial Jaundice
A. Cuschieri, Dundee
Discussion
- 11:50-12:00 Cholangitis: Clinical, Endoscopic and Pathologic Picture
C. Schein, New York
Discussion
- 12:05-12:15 Critical Evaluation of "Odditis"
F. Lazorthes, Toulouse
Discussion
- 12:20-2:00 Lunch

SCIENTIFIC SESSION II

Moderator: C. Greep

- 2:00-2:10 P.M. Ten Years Followup of 400 Operated Cases of Biliary Lithiasis
C. Greep, Maastricht
Discussion
- 2:15-2:25 Acalculous Cholecystitis
L. Morgenstern, Los Angeles
Discussion
- 2:30-2:40 Biliary Endoscopy
J.M. Shore, Los Angeles
Discussion
- 2:45-2:55 Operative Cholangiography, Routine Procedure?
G. Berci, Los Angeles
Discussion
- 3:00-3:10 Followup of Indwelling Transhepatic Tubes
J. Braasch, Boston
Discussion
- 3:15-3:25 Ampullary Disorder in Biliary Lithiasis
F. Moody, Salt Lake City
Discussion
- 3:30-3:40 The Role of Endoscopic Sphincterotomy
J. Geenen, Milwaukee
Discussion
- 3:45-3:55 Cancer of the Biliary Tract
R. Tompkins, Los Angeles
Discussion
- 4:00-4:10 The Cause of Fatalities in Biliary Surgery
C. McSherry, New York
Discussion
- 4:15-4:45 Pre- and Intraoperative Assessment of Difficult Biliary Problems
L. Blumgart, London
Discussion
- 5:00 Adjournment

Table 3.

MEETINGS AND OFFICIALS OF IBA †

Meeting #	Date	Site	President	Program Chair	Local Arrangements
1	May 19, 1979	New Orleans, USA	R.K. Tompkins	Ad Hoc Comm.	Ad Hoc Comm.
2	June 4-6, 1980	Maastricht, Holland	R.K. Tompkins	K. <u>Wiechel</u>	J. <u>Greep</u>
3	May 21-22, 1981	New York, USA	R.K. Tompkins	C. Schein	C. <u>McSherry</u>
4	June 10-12, 1982	Paris, France	J. <u>Greep</u>	L. <u>Blumgart</u>	H. Bismuth
5	May 26-28, 1983	Barcelona, Spain	J. <u>Greep</u>	L. <u>Blumgart</u>	J.P. <u>LaCalle</u>
* 6	May 17-19, 1984	Houston, USA	H. Bismuth	M. <u>Gliedman</u>	F. Moody
7	May 30-June 1, 1985	Rome, Italy	F. Moody	F. Nakayama	V. <u>Speranza</u>
8	May 28-30, 1986	Sendai, Japan	J.P. <u>LaCalle</u>	H. Bismuth	T. Sato
9	Sept. 28-30, 1987	Adelaide, Australia	L. <u>Blumgart</u>	V. <u>Speranza</u>	J. <u>Toouli</u>
†10	Sept. 12-14, 1988	Nice, France	J. Wong	V. <u>Speranza</u>	J. <u>Mouiel</u>
≠11	Sept. 10-16, 1989	Toronto, Canada	D.C. Carter	L. <u>Blumgart</u>	R. Keith
12	Aug. 22-25, 1990	Hong Kong	A.R. <u>Moossa</u>	J. <u>Toouli</u>	S.T. Fan
≠13	Aug. 25-30, 1991	Stockholm, Sweden	I. <u>Ihse</u>	J. <u>Toouli</u>	N/A
14	Aug. 31-Sept. 2, 1992	San Diego, USA	H. <u>Debas</u>	J. <u>Toouli</u>	A.R. <u>Moossa</u>
≠15	Aug. 22-28, 1993	Hong Kong	A. <u>Cuschieri</u>	J. <u>Toouli</u>	J. Wong/S.T. Fan
Ω16	May 31-June 3, 1994	Boston, USA	L. Carey	H. Pitt	N/A

† Name changed to International Hepato-Biliary -Pancreatic Association (IHBP) in 1988

* Bylaws change limited Presidential term to one year.

≠ Held in concert with World Congresses of Surgery of ISS/SIC

Ω "Inaugural World Congress of The International Hepato-Pancreato-Biliary Association (IHPBA)"