

Timothy J. Ley

Washington University School of Medicine, St. Louis, Missouri, USA

The Presidential Addresses of the ASCI are an important part of the Society's history. As such, all ASCI Presidential Addresses have appeared in the pages of the JCI save for a few — and publication of the following address, given by Dr. Timothy J. Ley in 1998, was unfortunately neglected at the time. Declining interest in the Society and its national meeting were major concerns for the ASCI in the mid- to late 1990s. The Council took important steps to reorganize and reinvigorate the Society, which have stood the test of time. The ASCI remains one of few advocates for the physician-scientist in the face of trends that would split the two evenly in the middle, and the national meeting continues to serve a role in highlighting the relevance of physician-scientist careers to young investigators. Dr. Ley's address appears now in small service of completing the record.

**John Hawley, Executive Director
The American Society for Clinical Investigation**

Ninety years ago this month, after the meeting of the American Medical Association in Atlantic City, a small group of physician-scientists outlined a plan for a new society that would specifically honor their young colleagues and allow them an opportunity to present their scientific work at their own national meetings. The idea turned out to be a useful and important one, and the American Society for Clinical Investigation was born. Eighty-nine years later, at the meeting one year ago, we openly wondered whether this same Society was outmoded — whether the ASCI was past the point of no return. Many young physician-scientists had little or no interest in being nominated or elected to the ASCI; overall, the number of nominations for new members had steadily declined over the previous four years, so that only 146 nominations were received — the lowest number in more than 30 years. The meeting was in dramatic decline, and was a financial disaster. I asked many of you, “is the ASCI worth saving?”

I am pleased to tell you that nearly all of you felt that it was. But where to begin? We spent many long hours around the council table examining our history, our mission, and our future. We asked you many questions.

Your enthusiastic responses to these questions taught us a great deal, and gave us the courage that we needed to institute several important reforms and solidify the core issues for this Society. When we asked you to update and extend your demographic information so that we could re-create our database, more than 97% of you responded. On that survey, we asked you whether or not you would be willing to serve a three-year term as an Institutional Representative for the ASCI. We were amazed by the response. More than 850 of you indicated that you would be happy to serve. This proved to us that there was a loyal, dedicated core of support within the ranks of the ASCI, and told us that our organization was sleeping, not agonal. You taught us even more in the questionnaire that we sent you last summer. First, we learned that you want this to be an organization of physician-scientists. More than 94% of you rejected the idea of opening ASCI membership to biomedical scientists without an MD degree. That is a very clear message, and it has truly helped us to solidify our thinking about the directions in which the ASCI should be moving. The second message was that the ASCI should expand its role to include advocacy for physician-scientists.

Nearly 80% of you felt that the ASCI should actively pursue public policy as one of its goals, and that we should partner with another organization to achieve that end. The final message that you sent us is that the meeting does not define this organization. Even though our meeting has declined dramatically in recent years, our membership has not lost interest in the Society; it means that the meeting itself has lost its relevance, probably because of the rise of the sub-specialty meetings as the primary venue for the presentation of state-of-the-art science from our members. The decline and fall of the meeting does not mean that the ASCI is dead. It simply means that the meeting should take on a new purpose, one that more accurately represents the core values of the Society.

Armed with this very important information, the Council decided that it was important to develop some common-sense approaches to the major problems that immediately faced the ASCI.

One of the most basic issues that we tackled was that of organizational infrastructure. None of the solutions that we could propose to *any* problems would have long-lasting impact unless the ASCI could develop a method for sustaining initiatives and develop an institutional memory that lasted for more than a year or two.

We therefore decided to develop an executive management structure for the Society. The Society, despite its wealth of financial and intellectual resources, has been managed in the past in an ad hoc fashion. Its accounts were spread out in three different institutions. The ASCI did not have ready access to its own database. The Executive Committee of the Council did not have substantial management support. The ASCI did not have an annual budget, centralized accounting, adequate insurance, a Policy and Procedures manual, or any reasonable way to create and sustain initiatives. The Council strongly

felt that the ASCI needed to change the way it conducted its business. We therefore held an open competition for the development of an executive management structure for the Society, and representatives from four major companies met with us last October. Team Management won that contract. We named Ms. Susan Nelson as the Executive Director of the ASCI. Within the course of six months, Susan and her staff have organized and implemented a sound management structure for the organization that will last us for years to come. Nearly all of our major management deficiencies have been corrected — some in the nick of time.

The next major question that we wished to address was that of the declining number of nominations for ASCI membership. Let me say at the outset that we still do not know the cause of this problem. Several factors could have contributed. First, and perhaps most worrisome, is that the pool of young, outstanding physician-scientists from which the ASCI draws its members is shrinking. The implications of this are profound. It could mean that the ASCI is ultimately doomed. It could mean that biomedical research is in jeopardy of losing a unique pool of specially trained investigators. The solutions for this problem are complex, and require long-term planning, which I will discuss later. The second potential factor is that of apathy. Last year, we were told of many young physician-scientists who no longer cared about whether they were elected to the ASCI. With the decline of the meeting, and the uncertain future of the ASCI, many of our members also seemed to be losing interest. Finally, many of the people who lead our medical schools are no longer members of the ASCI, and many of them do not understand the significance of the organization. To address these issues, we created a multi-faceted plan.

First, we decided to create a program of Institutional Representatives at each and every medical school and research institute in the United States and Canada. As I told you a moment ago, nearly one-third of our members volunteered to serve as Institutional Representatives. The goal of the Institutional Representative program is twofold. First, the Society needs grass-roots representa-

tives to communicate with the Council on matters of importance to the ASCI. Secondly, the Institutional Representatives coordinate the nomination process for qualified physician-scientists within each of their institutions. This program has already been an unqualified success. Nominations for membership increased 54% this year, from 146 last year to 224 — a level that is very similar to the number of nominations we had 10–15 years ago. The Institutional Representatives have been active advocates for the ASCI at their home institutions, and have provided valuable advice to the Council. At this point, I would like all of the Institutional Representatives to accept our heartfelt appreciation for the outstanding job that they have done for the Society this year.

Our second response to the apathy issue is a broader one, and one that has important implications for our members. We wanted to create a strong incentive for the leaders of our medical schools to care whether their young physician-scientist faculty members were elected to the ASCI. In many institutions, this is not a problem, but this is not universally so. We hit upon the idea of using the number of ASCI members per institution as a measure of the quality of a medical school faculty. The criteria by which ASCI members are judged are semi-quantifiable, and the number of ASCI members per institution is not malleable or subject to manipulation. This index therefore provides an objective and unique way to evaluate the quality of a medical school faculty. Since the *US News and World Report* has the most widely followed ranking system for graduate schools, we approached them last year about the possibility of using ASCI membership as one of their ranking tools. They are interested in our proposal, but further negotiations will be required before a deal is closed. We believe that this initiative could have important consequences for the ASCI beyond those that I have already mentioned. It will help to create a public face for the ASCI, but perhaps most importantly, the *US News and World Report* sanction of the ASCI implies that outstanding physician-scientists are integral to the mission of outstanding medical schools.

When I was elected to the ASCI, I asked a senior ASCI member about the

significance of this event in my life. “Well,” he said, “it means two free drink tickets at the new members reception, and it means that now *you* have to pay for *your own* subscription to the JCI.” Well, that statement has always bothered me, mainly because it was so true. For many of us, that is exactly what election to the ASCI has meant over the years. I also think it is the major reason why such an overwhelming majority of our members want the organization to take a larger role — a more responsible role — in developing positions of advocacy for our members. During the past couple of years, we have taken many steps to begin to establish a role for the ASCI in developing public policy as it pertains to physician-scientists. This will not be an easy task, should we decide to go it alone. However, we have been investigating the option of joining FASEB as a way to develop the public policy positions of this Society. As you know, the Federation of American Societies for Experimental Biology now has 13 member organizations, representing 50,000 working scientists in the United States. The major purpose of the new FASEB is to develop public policy, and to effectively lobby Congress to enact legislation that is favorable to its member organizations. Currently, none of its member societies is comprised predominantly of physician-scientists. The leaders of FASEB realize that there are serious deficits in their public policy expertise as it pertains to disease-oriented research, translational research, and clinical research. They recognize the prestige and reputation of the ASCI, and have therefore invited us to consider becoming a member of FASEB. Yesterday, at our Council Meeting, the Council unanimously voted to petition FASEB for full membership. The FASEB Council will act on our petition sometime during the next week, so that we may be members before the end of the month. The cost will be relatively low — \$10 per ASCI member per year, for a total cost of approximately \$25,000 per year. We could not even begin to develop a comprehensive policy and lobbying arm of the ASCI for this amount of money.

What are we buying? We are buying a seat at the table of public policy development at FASEB. As you know,

the new FASEB has arguably become *the* most effective advocate for biomedical scientists in the country, and it has the ear of Congress. By joining FASEB, we hope to coordinate the needs of physician-scientists with the needs of all experimental biologists. It will require compromise, and consensus building. However, we believe that it will be a tremendously effective way to communicate the positions of our organization into a comprehensive policy plan. We will need to develop a standing committee on public policy within the ASCI, and will need to appoint a FASEB representative who will report to the Council. All in all, the cost is very small, but the potential benefits to the ASCI are truly great. We believe that this move will greatly heighten the impact and visibility of the Society, and that it will increase the influence of physician-scientists in the entire biomedical research enterprise.

I would like to spend the last few minutes discussing a few other issues that have been of great concern to many of our members. The first of these is the Annual Meeting. Despite the nostalgic wishes of all of us, the old Tri-Societies meeting, with its thousands of attendees and abstracts, is gone forever. Our members have told us in no uncertain terms that they are not interested in presenting their best data at this meeting. The message is clear. Last year, we started to develop a new approach to the National Meeting, one that is focused on honoring and welcoming our new members. For many years, the new member recognition at the meeting was quite informal. However, on reflection, the honorific nature of election is a core premise of the ASCI. We have therefore refocused the meeting to place the spotlight on our new members. Last year, and again this year, four new members will present their work during the annual meeting. This year, we have added a poster session that immediately follows this meeting. At this session, you will get a chance to individually congratulate our new members and briefly discuss their work. Finally, with an eye to the future, we have paid for each new member to bring an MD

trainee with them to help present their posters. We are doing this to introduce the next generation of physician-scientists to the ASCI.

The AAP, with its similar honorific roots, is adopting a similar format for its National Meeting. Because our two societies have so very much in common, and since so many of our members belong to the AAP, we are joining the AAP for our National Meeting next year in Chicago. We sincerely hope that you will put our new meeting on your calendar and attend it faithfully. Our new meeting will have broad-ranging, outstanding science, and it will strengthen our honorific roots. The new meeting is an experiment. However, both societies strongly feel that the new format is consistent with our long-term needs and goals. We hope that all of you will help us to establish *new* traditions based on the core values of our sister societies.

Time does not permit me to fully detail all the new initiatives that are beginning to take shape. We have a new, state-of-the-art website that contains a searchable, up-to-date member database that has replaced the old Directory. The website is beautiful and will serve our members well. Mike Welsh is chairing a committee that is looking into ways to update the “History of the Society” as we move towards our centennial. The last “History,” written in 1958 by Ellen Brainard, was a wonderful document that was published in the JCI. You can find a full-text version of that history on our new website. Another committee is exploring the possibility of developing an honorary category of international members. Yet another committee is developing an initiative to support the training of future physician-scientists in our medical schools, by developing research awards within medical schools, and by encouraging the development of MA/MD and MD/PhD programs. Finally, we developed a white paper for the National Academy of Sciences last month that encouraged the NIH to use some of its new resources to support physician-scientists at all stages

of their careers, from medical school to professorships.

The theme should be clear to you by now. The leadership of this Society is working hard for its members. We have tremendous resources, both financial and intellectual. We are investing those resources in our members. The ASCI is *advocating* for all physician-scientists, and for the unique role that they play in the biomedical research enterprise.

There is one final message that I would like to convey to you. Consider for a moment why the *US News and World Report* is interested in the ASCI as a tool for measuring medical school quality. Consider why FASEB is interested in having the ASCI as one of its member institutions. The reason is that this Society has emphasized quality at every juncture in its history. It has not wavered in its demands for excellence in its membership or its journal. These policies have served us well in the past, and I would strongly encourage you to continue to support them. We are not defined by size, we are defined by excellence. For this reason, it is now possible for this previously *honorific* organization to achieve working status as well, a change that will benefit all physician-scientists, not just our own members. Ultimately, I hope that these efforts will be translated into benefits for our patients, and for our society as a whole.

I would like to thank the many people who have worked so hard to make all of the things that I have described to you today become reality. First, I thank Mike Welsh, Helen Hobbs, and Dave Ginsburg — who taught me everything I know about the ASCI. Secondly, I thank every member on this Council for their selfless commitment to this organization. They have read countless documents and e-mail messages this year, and worked hard to establish the reforms that I have discussed. Finally, I thank each and every one of you for affording me the opportunity to serve the ASCI over the past two years. It has been an honor, and a great personal privilege, to have done so.