PARTNERING FOR PROGRESS

ANNUAL REPORT 2005
### AMERICAN ACADEMY OF NEUROLOGY

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### AMERICAN ACADEMY OF NEUROLOGY FOUNDATION

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### IN MEMORIAM

- **Francis M. Forster, MD, FAAN**  
  1912 – 2006  
  Co-Founder of the AAN 1948  
  AAN President 1957 – 1959

- **Kenneth M. Viste, Jr., MD, FAAN**  
  1941 – 2005  
  AAN President 1995 – 1997  
  AAN Foundation Chair 2004 – 2005
In this report, we share some of the significant accomplishments achieved by the AAN through partnerships and collaborations in 2005. These, of course, are just the tip of the iceberg.
These words are easily mouthed in today’s working world. But when taken seriously and put into action, they are more than just buzzwords. They are the foundations for accomplishments that can be more easily achieved in concert rather than alone.

At times, these words are accompanied by others: conflict, consensus, compromise. It’s natural that in any relationship there will be differences of opinion. Every organization has its own set of goals, unique perspectives, and accountabilities. Finding common ground is not always easy, but it is usually a prerequisite for progress. The test, of course, is to remain true to your ideals as you try to understand and accommodate the needs of others.

Fortunately, the mission of the American Academy of Neurology is easy to convey to our partners and keep in the forefront of our efforts—to advance research and quality neurological care for our patients and ensure the vitality of the profession through education, advocacy, and public awareness.

In this report, we share some of the significant accomplishments achieved by the AAN through partnerships and collaborations in 2005. These, of course, are just the tip of the iceberg.

We continuously interact with our colleagues in the medical community. From collaborating with major national medical associations to helping jump-start new state neurological societies, we strive to be a thoughtful, engaged participant, partner, or leader, as required. The occasions when we respectfully disagree with one another are often a reflection of the hard challenges of an unhealthy economic climate for healthcare providers, and underscore the urgency to make the difficult changes that will ultimately be in the best interests of our patients. We will continue to seek ways to find common ground and mutual success.

In education, we work closely with accreditation and certification organizations to ensure our members have the training and credentialing necessary to bring the best care to their patients. We bring it all together in our Annual Meeting and regional conferences, which require strong working relationships with AAN committees, program directors, lecturers, exhibitors, vendors, and corporate sponsors.

Our neurology advocates trained through the Donald M. Palatucci Advocacy Leadership Forum or Neurology on the Hill day are building meaningful political partnerships, from Washington, DC, to Vienna to Karachi, and within their local communities.

Because the neurologists and researchers of the AAN address more than 600 disorders of the brain and central nervous system, we are natural teammates for the scores of organizations that represent the patient community. We partner with them at Brain Advocacy Coalition events, the National Conference of State Legislators, and other occasions. We value their insights as reflected through the prism of their experiences.

The AAN has some special partnerships in support of two valuable organizations working on behalf of neurologists. The Academy has worked closely with the Society for Neuroscience in spearheading the American Brain Coalition, a consortium of neurological and psychiatric organizations. 2005 was an organizing year for new membership and setting the framework for advocating for increased support for research and cures.

We are one of the founding organizations for the United Council for Neurologic Subspecialties, which welcomed Neuro-oncology, Behavioral Neurology & Neuropsychiatry, Neuromuscular Pathology, and Headache Medicine into its membership in 2005.

We are grateful for the teamwork demonstrated by the members of the committees, works groups, task forces, and boards of our organizations. Countless hours are volunteered by our members to keep moving us forward to achieve our goals.

Finally, there are more than 100 employees of the American Academy of Neurology, American Academy of Neurology Foundation, and AAN Enterprises, Inc., in our St. Paul, MN, headquarters and our recently established Washington, DC, office. Working on behalf of you and your patients, each and every one of them is your partner. We hope you will join us in showing your appreciation for their efforts.

Thank you, one and all.
Many of our colleagues in developing countries work under extremely difficult conditions. The AAN has been an essential component of the World Federation of Neurology’s efforts to establish effective CME in these countries by donating copies of Continuum. More than 40 national neurologic societies are now taking part in this growing program. With primary support of the AAN, this program will shortly be available on the Internet.

—Theodore Munsat, MD, AAN Past President, Professor Emeritus of Neurology, Tufts University, Chairman, WFN Education Committee
Since the AAN’s inception, physician education has been a mainstay activity. But the process of creating high-quality continuing medical education programs is no simple matter. It involves a multitude of partners, from Academy committees and staff to individual program directors, faculty, and accreditation bodies.

PROGRAMMING WITH NEUROLOGISTS’ NEEDS

TEAMWORK LIFTS PROGRAMMING TO ACCREDITATION PINNACLE

A significant event of 2005 was the notification from the Accreditation Council for Continuing Medical Education that the AAN was granted a six-year accreditation with commendation. This feat was achieved by only eight percent of medical specialties, further underscoring the excellence of the AAN’s education and scientific programming. This success required many months of extensive teamwork and coordination between the AAN’s Education Committee, Program Accreditation and Development Subcommittee, Meeting Management Committee, Science Committee, Annual Meeting Subcommittee, and staff.

HELPING MEMBERS PREPARE FOR MAINTENANCE OF CERTIFICATION

Maintenance of Certification (MOC) is mandated by the American Board of Medical Specialties. As a result of this mandate, the American Board of Psychiatry and Neurology (ABPN) has developed the MOC program. The AAN has been working with the ABPN to help ensure US and Canadian neurologists understand and are prepared for this new process.

MOC is an ongoing procedure through which a diplomate’s credentials, licensure, and professional standing are verified and his or her knowledge and practice performance are evaluated. AAN Annual Meeting and regional conference programs can help members prepare for the MOC exams. These CME activities, along with Continuum: Lifelong Learning in Neurology® and Quintessentials®, were reviewed and approved by the ABPN.

The ABPN relied on the Academy to get the information out to members on the MOC process. A series of articles in AANews® explained the reason for the MOC process and its four components: Professional Standing, Self-Assessment and Lifelong Learning, Cognitive Expertise/Recertification Examination, and Performance in Practice.

REACHING OUT TO INTERNATIONAL PHYSICIANS

As it has for several years, the AAN provided 200 free copies of each issue of Continuum to the World Federation of Neurology for use in its education program, which includes study groups in 40 developing countries. In 2005, the AAN and publishing partner Lippincott Williams & Wilkins began working with the WFN to provide an online Continuum website with a special portal that will enable the Federation to more effectively answer an ever-increasing demand for Continuum to reach even more neurologists in the developing world.

AAN HELPS ABOLISH RESIDENT CASE LOG

In 2003, the Neurology Residency Review Committee (NRRC) of the Accreditation Council for Graduate Medical Education instituted requirements that residents keep a case log for a data collection study that never came to fruition. In the meantime, residents were obligated to continue to collect and report this information. Working with the Residents Consortium and Program Directors Consortium, the AAN’s Graduate Education Subcommittee and Education Committee convinced the NRRC to lift the case log requirement and relieve residents of the burden.
Since its inception in 1950, the NINDS has enjoyed a productive partnership with the AAN in service to individuals diagnosed with neurological disorders. Nowhere is this more apparent than in the AAN’s enthusiastic and effective support of the NINDS Clinical Research Collaboration (CRC). By taking the lead in fostering research in communities across the country and around the world, the AAN is bringing better treatments faster to patients. We are delighted that the AAN and NINDS are working together to change medical practice and improve patients’ lives.

—Story C. Landis, PhD, Director, National Institute of Neurological Disorders and Stroke
NEW SUBCOMMITTEE PROMOTES BASIC SCIENCE RESEARCH

The members of the new Basic Science Subcommittee held their first meeting in 2005. They are charged with identifying ways to promote basic science research at the AAN, specifically at the Annual Meeting, and to foster training opportunities. The Subcommittee has defined basic science research as “disease-related neuroscience research. This focuses on studies of neurological disease mechanisms and may involve the use of human samples and sample collection, but not research that otherwise directly involves human subjects or clinical trials.”

One of the Subcommittee’s tasks is to increase the participation of scientists at the Annual Meeting. This resulted in the development of new integrated neuroscience programs for the 2006 Annual Meeting that focused on the genetics of motor neuron disease and the genetics of movement disorders, as well as the first Future of Neuroscience Conference, which examined the state of stem cell research.

BRINGING CLINICAL RESEARCH TRIALS TO A BROADER COMMUNITY

Clinical research trials are a crucial step in the process of delivering new treatments to people with neurological disorders. Unfortunately, the availability of these trials is often limited to participants who live in proximity of large academic centers.

To broaden access to clinical trials and improve research collaboration, the AAN (through its Practice and Science Committees; Quality Standards, Clinical Research, and Basic Science Subcommittees; and AAN Foundation Research Council) teamed with the National Institute of Neurological Disorders and Stroke (NINDS) to involve more neurologists practicing in community clinics. With an expanded number of physicians and patients involved in research trials, results may be obtained more swiftly and efficiently and the approval of treatments may be accelerated. Decentralizing research trials will also help connect neurologists to researchers and foster future cooperation.

A visible result of 2005’s efforts was the NINDS Clinical Research Collaboration Colloquium at the 2006 Annual Meeting, which welcomed neurologists seeking to learn more about participating in trials and attaining Level 1 clinical research training certification.

PARTNERING TO PRESERVE ANIMAL RESEARCH

The AAN has long supported the vital role animal research plays in understanding the causes of brain disorders and developing treatments for these diseases.

The AAN, through its Animal Studies Task Force led by Jasper R. Daube, MD, continued its efforts to ensure the continuation of animal research. Daube was asked to serve on the board of directors of the National Association for Biomedical Research (NABR). The AAN is collaborating with NABR on several fronts, including the Legal Strategy Initiative which is tackling the legal ramifications of threats against the use of animals in research and the controversial concept of animal “personhood.”

The Animal Rights Task Force and the staff of the AAN’s Center for Health Policy combined forces to help defeat federal legislation that would have prohibited funding to biomedical research facilities that lawfully purchase animals from licensed Class-B dealers.

“The National Association for Biomedical Research is fortunate to have the AAN as a strategic partner in advocating sound public policy for the humane use of animal models in medical research. Our combined efforts to stem the tide of the Animal Rights Movement’s animal law initiatives are of vital importance to the medical research community. The leaders of this movement advocate enacting new federal, state, and local laws and ordinances as well as establishing court precedents that have the potential to halt animal research. It is my sincere hope that responsible leadership from groups like the AAN will continue to ensure medical breakthroughs for the next generation.”

—Frankie L. Trull, President,
National Association for Biomedical Research
Our success in the Medicare five-year review would not have been possible without the cognitive specialties working together. The AAN should be proud of its RUC team as they were professional and firm allies in working toward our collective goals of revaluing the work of E/M codes. The neurology RUC team worked long and hard at many, many meetings. As the RUC representative for family medicine, I am grateful to both the individuals and the AAN for providing them with clear and firm guidelines and support.

—Thomas A. Felger, MD, DABFM, Associate Director, St. Joseph Family Medicine Residency
It was a busy year helping neurologists who feel squeezed by pressures on reimbursement and a greater need for chronic care services. The AAN made a major effort to improve evaluation and management codes for neurologists.

REACH FAIR REIMBURSEMENT

FIVE-YEAR REVIEW OF E/M CODES AFFECTS PRACTICING NEUROLOGISTS

Every five years, the Relative Value Scale Update Committee of the American Medical Association conducts a review of reimbursement values and makes recommendations to the Centers for Medicare & Medicaid Services (CMS), which ultimately sets the value for the Medicare physician fee schedule. Insurers, in turn, often rely on Medicare rates in setting their payments to physicians. Thus, results of the review can have a substantial impact on payments to practicing neurologists.

The AAN was one of 28 specialties to request a review of existing evaluation and management (E/M) codes. The review process included surveying physicians, including AAN members, to measure physicians’ time and work on cognitive services and equate that to relative value units. Societies surveyed nine families of E/M codes, including office, inpatient, new patient, consultations, and critical care.

These data were compiled with results from other specialties. Establishing proposed values for services entailed considerable negotiations between the societies and associations, since there is a finite amount of reimbursement money available from Medicare and increasing values for one area is going to decrease values in another. In particular, the AAN worked closely with the American College of Physicians, the American Academy of Family Physicians, and the American Osteopathic Association. Recommendations were presented to the Relative Value Scale Update Committee, which forwarded the approved values to CMS.

In December, AAN President Thomas R. Swift, MD, and a delegation from the Academy met with officials of CMS to have a candid conversation about concerns with E/M reimbursement. CMS will publish relative value units for E/M codes later in 2006, to go into effect in 2007.

COMMON CAUSE HELPS PRODUCE NEW CODES

Efforts on the Five-Year Review did not divert attention from other opportunities to improve coding and reimbursement.

In conjunction with the American Stroke Association and the Brain Attack Coalition, the AAN’s Stroke Systems Work Group successfully advocated for a new Diagnosis Related Group code for acute stroke which was accepted by CMS. DRG 559 provides enhanced reimbursement to hospitals for providing quality care to stroke patients. The AAN partnered with the American Academy of Dermatology in defining and advocating for new codes for the treatment of hyperhidrosis with injections of botulinum toxin type A, which would become effective in January 2006.

With the assistance of the American Association of Neurological and Electrodagnostic Medicine and the American Academy of Otolaryngology—Head and Neck Surgery, the AAN added new CPT® codes for needle electromyography and nerve conduction tests, including EMG-guided chemodenervation, for the larynx and hemidiaphragm.

The AAN worked with the American College of Radiology, the American Society of Neuroradiology, and the American Psychological Association to gain approval for three new codes for functional magnetic resonance imaging.

BROCHURE GUIDES AUDIT PREPARATION

Few words strike fear as much as “audit.” When insurers request a retrospective audit, it’s imperative that physicians understand their rights, their options, and the necessary resources to determine if the audit is appropriate. Consequently, the AAN partnered with the American Medical Association’s Private Sector Advocacy Group to develop “How to Deal with a Health Plan Retrospective Audit,” a brochure to assist physicians dealing with the audit process and help it proceed more smoothly.

“Partnering with the AAN allowed us to work with experts in the specialty who understand which audit issues are key to neurologists and how to address those in the brochure. The AMA and the AAN were able to share the costs of development as well as reach the wider audience of physicians and the target audience of neurologists. A product with the logos of the AAN and AMA side by side highlights the importance of organized medicine working together on behalf of all physicians: Together we are stronger.”

—Michael D. Maves, MD, MBA, Executive Vice President, CEO, American Medical Association
The AAN and EFNS launched a task force, chaired by Dr. Gary Gronseth of the AAN and myself, of American and European experts devoted to producing common guidelines that may have more value worldwide. We selected the subject of trigeminal neuralgia because the literature is limited and there are contrasting views in the United States and Europe on surgical treatment. We collaborated on the literature search, classification of evidence, and preliminary drafts. If approved by both the AAN and EFNS, the same article will be submitted to the official journals of our organizations, Neurology and European Journal of Neurology. This will be a landmark event for neurology.

—Prof. Giorgio Cruccu, Secretary General, European Federation of Neurological Societies
The AAN constantly strives to help ensure the safest and highest-quality care for neurology patients. Two significant areas in this ongoing effort are the development and dissemination of evidence-based clinical practice guidelines, and emphasizing, through increased awareness and training, the importance of health literacy as a key component of sound patient safety practices.

**IMPROVED OUTCOMES**

**NEW RELATIONSHIPS TO PRODUCE CLINICAL PRACTICE GUIDELINES**

The AAN reached out to partner with outside organizations to develop new clinical practice guidelines.

Seeking to bridge the difference of opinion between emergency physicians and neurologists on the use of t-PA, the AAN and the American College of Emergency Physicians began work on a joint evidence-based guideline.

One of the goals of a new working relationship with the European Federation of Neurological Societies is to bring alignment between its guideline development process and the AAN’s and enhance the quality of both. EFNS is the main guideline developer in Europe, and striking a closer association between the organizations will offer greater opportunities for cross-fertilization and communications between members. Together the two parties are crafting a new guideline on trigeminal neuralgia.

The AAN also charted a new process to ensure its previously published guidelines stay abreast of the changes in treatments and technology, with each practice parameter and technology assessment receiving an annual review and a major evaluation every three years. The reviews could lead to an addendum to the guideline—as in the case of Prevention of Post-lumbar Puncture Headache from 2000—or a full update.

In 2005, the AAN published guidelines on the efficacy of carotid endarterectomy for stroke prevention, serum prolactin tests, therapies for essential tremor, corticosteroid treatment of Duchenne dystrophy, and a definition of distal symmetric polyneuropathy for clinical research.

**PATIENT SAFETY AND HEALTH LITERACY**

Communication is the heart of the neurologist/patient relationship. Yet, medical information can be hard for anyone to understand. Improved health literacy has been shown to: enhance clinical outcomes, empower the patient, augment ability in making informed medical decisions, decrease medication errors, enhance participation in preventative health care, result in fewer hospitalizations, and decrease healthcare costs. This is particularly relevant in a time of increasing complexity of medication schedules, diagnostic testing, insurance programs, and a potentially hostile medico-legal climate.

The AAN worked with the American Medical Association Foundation on several projects in 2005, including distribution of a health literacy tip card to more than 20,000 physicians and development of a new, safe communications tip card in association with the National Technical Advisory Council on Patient Safety and Health Literacy. Trainers from the AAN have instructed more than 3,700 healthcare professionals across the country on health literacy since 2003.

Other health literacy collaborators included the National Institutes of Health, where AAN staff participation represented the only medical specialty society on two health literacy grant review panels; and the Minnesota Alliance for Patient Safety, where the AAN has seats on the Best Practices and Steering Committees, and has partnered to provide health literacy training to more than 250 participants representing a half dozen major healthcare organizations.
For more than 10 years, the partnership between my firm and the AAN regarding advocacy on legislative and regulatory issues has been professionally rewarding and productive. The AAN’s approach to the challenging issues in health care is refreshingly thoughtful, professional, and patient oriented. Its leadership, committees, and staff are extremely well informed, hard working, and have developed sound strategic approaches to the concerns facing the membership. The shared effort of the Academy membership and staff, our firm, and other patient and medical organizations on common issues has resulted in improved visibility for neurology and the patients it serves and beneficial changes in health policy. We thank the Academy for the opportunity to work with it.

—Richard Verville, JD, Principal, Powers Pyles Sutter & Verville, PC
Bringing members together to advocate for neurology and patients has been the cornerstone of the AAN’s prize-winning advocacy efforts. 2005 saw tremendous growth in the AAN’s outreach to and partnership with state neurological societies, and wider member participation in personally advocating for change.

POWER OF NUMBERS

MEMBERS SOUND OFF ON REIMBURSEMENT REDUCTIONS

AAN members responded to action alerts in record numbers in 2005 as they used Vocus, the Academy’s online advocacy program, to contact their members of Congress. Most of them voiced their views on the flawed sustainable growth rate (SGR) formula, which controls physician reimbursement under Medicare. Under current law, a 4.4-percent cut in Medicare reimbursements would have taken place January 1, 2006.

Adequately updating the SGR is vital to preserving quality care and access for Medicare patients and accurately reflecting the cost of practice. It was one of three issues advocates took to Congress for the Neurology on the Hill Day in May. Three action alerts from the AAN prompted 1,013 members to send 4,129 emails and faxes to their representatives and senators. When the Deficit Reduction Act finally passed in early February 2006, it froze physician payments at 2005 levels for 2006, eliminating the cut.

Preventing future reductions in the SGR, and how physician reimbursement relates to pay-for-performance, remain major concerns. To keep on top of legislative events and communicate with federal healthcare policymakers, the AAN opened an office dedicated to advocacy efforts in Washington, DC, in May 2005.

ALLIANCES WITH NEUROLOGY SOCIETIES PROVE FRUITFUL

The AAN recognizes that state neurological societies are the real voice of neurology at the state and local level. Because the Academy has no state chapters, partnering with state societies is essential to the future growth and success of AAN’s advocacy initiatives. Through these partnerships the Academy is able to disseminate information on key educational, practice, and advocacy initiatives to a wider audience.

These relationships also provide the Academy with valuable feedback about issues affecting neurologists throughout the country. Academy staff exhibited and/or presented at more than a dozen state neurology society meetings in 2005. The AAN hosted affiliate meetings at the 2005 Annual Meeting for the Florida Society of Neurology, the Association of California Neurologists, the Indiana Neurological Society, and a joint meeting of the Oregon Neurological Association and the newly formed Washington State Neurological Society.

Members in Arizona understood that neurologists must band together for networking, information sharing, and ultimately greater political clout in decisions affecting the practice of neurology. Lead by Terry Fife, MD, they launched the first statewide neurological association, the Arizona Neurological Society. The AAN was at their side, lending support that ranged from designing and hosting an ANS website to providing sample bylaws.

The AAN allied with the Michigan Neurological Association and the American Association of Neuromuscular and Electrodagnostic Medicine to achieve a striking legislative success with the passage of a landmark EMG scope of practice law. Gregory Barkley, MD, then president of the MNA, led local efforts to garner neurology support and involvement. He also testified several times before the state legislature, truly acting as the “voice” for neurology on this important issue.

The Academy and the California NeuroAlliance—a coalition formed by the AAN in partnership with the Association of California Neurologists and state patient advocacy organizations—developed an Internet survey that enables individuals with chronic neurological conditions to anonymously report on the status of their health care and community support systems. The survey, which went online at www.calneurosurvey.com in early 2006, could become the template for a wider data-gathering initiative that supports “data-driven advocacy” on state and national levels.
I am always looking for new information about MS, and I suspect that many others with MS are just like me. When the AAN approached me about being featured in their first issue of a new magazine devoted to people with neurological disorders, including MS, I knew it was an important opportunity to support an important mission. I applaud the AAN for their commitment to educating people who live with devastating diseases, and I have found the magazine to be an ongoing source of good information and timely topics that are relevant to me. I am especially pleased that I could share my own personal experiences living with MS, and I only hope the readers benefited in some part from my story, as I continue to benefit from the stories I read in Neurology Now. Keep putting the good stuff out there, as it really helps.

—Teri Garr, Oscar®–nominated actress and MS LifeLines Ambassador
Part of the AAN’s mission is to improve public awareness of neurological disorders and the critical role of the neurologist in diagnosing and treating these afflictions. To that end, the Academy worked hand in hand with its subsidiaries, the AAN Foundation and AAN Enterprises, Inc. (AEI), and numerous outside organizations on three key initiatives: the patient magazine, and the Think Neurology Now and Neurology EXPO events. These patient-oriented endeavors augmented The Brain Matters Website (www.thebrainmatters.org), which received an Award for Excellence from the Health Improvement Institute, and the AAN’s Quality of Life book series, which published new editions on stroke and Alzheimer’s disease.

**NEUROLOGY NOW WARMLY RECEIVED BY READERS**

Under management of AEI and the editorial leadership of Robin Brey, MD, Neurology Now offers patients and caregivers a trusted source for the latest medical information, wellness and lifestyle tips, and inspirational stories related to the diverse range of neurological disorders. Complimentary copies of the magazine are sent to AAN members in the United States to share with their patients.

The magazine premiered at the 2005 Annual Meeting with a cover story on actress Teri Garr and her life with multiple sclerosis. By year’s end, Neurology Now had more than 370,000 readers and 34,000 patient/caregiver subscribers. It also received the Award of Excellence in the 2005 Associations Advance America Awards, sponsored by the American Society of Association Executives.

“Lippincott Williams & Wilkins enjoys a wonderful strategic and working relationship with the AAN, and we were thrilled to be the partner in the development and launch of Neurology Now. We share a common view of the substantial role that such a partnership can play in patient education—being grounded in science, good medicine, and ultimately best practice. The Academy’s desire to reach out to neurology patients increases awareness of the specialty as a whole while adding value to the AAN’s membership. And launching a publication of this type breaks new ground in medical publishing by helping reinforce the bond between patient and physician. We view this as truly a win/win/win situation.”

—Paul O. Weislogel, PhD, Executive Vice President, Journals Publishing, Lippincott Williams & Wilkins

**THINK NEUROLOGY NOW CAPTURES ATTENTION IN NEW ENGLAND**

Boston was center stage for a month-long campaign created by the AAN and AAN Foundation to urge New Englanders to “Think Neurology Now.” The effort was launched with proclamations from Massachusetts Governor Mitt Romney and Mayor Thomas Menino and a kick off reception at the Massachusetts State House. A Neurology Town Hall Forum featured Teri Garr and leading neurological researchers. The AAN joined with several patient organizations for an advocacy day to press their causes with state legislators on Beacon Hill. The campaign received substantial media coverage and reached approximately 3 million people.

**NEUROLOGY EXPO HEIGHTENS AWARENESS IN THE SOUTH**

Also in 2005, the AAN and its Foundation developed Neurology EXPO, a full day of education programs and exhibits for patients, families, and caregivers presented in Atlanta, Georgia. Again, the AAN teamed with area neurology professionals and patient organizations to get the word out on the latest treatments and healthcare services.

“The Georgia Chapter of the Alzheimer’s Association was very pleased to participate in the Neurology EXPO. Many caregivers of people with dementia visited our exhibit to obtain information and learn more about services available to help in caregiving. There was also a very informative talk on Alzheimer’s disease presented by Dr. James Lah, a neurologist from Emory University. Attendees were not the only ones who benefited from this event. The AAN and our organization learned much from one another, and these shared experiences help strengthen us individually and collectively.”

—John Thames, Family and Community Services Director, Alzheimer’s Association, Georgia Chapter
LEVERAGING ALLIANCES

An ideal high-affinity setting is created through the valuable information supplied by AAN to its members. That strong affinity and trust in the organization is what allows FTJ to successfully communicate with the members about the quality insurance programs we offer. In the same way, AAN’s standing with the membership motivates the insurance companies that underwrite the programs to create and support the best programs possible. At FTJ, we derive a great deal of pride from being the endorsed insurance provider in the AAN Partners Programs.”

—Paul Andres, Director of New Business Development, Forrest T. Jones & Company, Inc.
Throughout 2005, the AAN continued its efforts to strengthen its relationships with its 19,000 members and enhance the value of their memberships by offering an expanding array of services, products, and incentives.

TO ADD VALUE

AAN PARTNERS PROGRAM OFFERS CONVENIENCE, SAVINGS

This aptly named service to our membership was launched in 2005 with a host of insurance products, including major medical, long term care, term life, disability, and business overhead from partner Forrest T. Jones & Company. It continued to expand throughout the year to include streamlined credit and debit card processing from Solveras Payment Systems, the AAN Rewards American Express® Card from MBNA, and discounts on the popular Epocrates® Essentials suite of clinical reference software.

In the AAN Partners Program, the Academy evaluates products that best meet an array of member needs. Comparisons are made between vendors, service, pricing, quality, and overall value. The AAN collaborates with partners to develop products tailored to the requirements of neurology professionals, and harnesses the collective buying power of our membership to negotiate better pricing. In other words, the AAN does the shopping and passes on convenience and savings to its members.

JOINT MEMBERSHIP BRIDGES THE ATLANTIC

In 2005, the AAN and the European Neurological Society (ENS) laid the groundwork for 25-percent discounts on membership dues for European physicians who are members of both organizations, effective with the 2006 membership year. A goal of the two-year pilot project is to improve communications with and among international members and to support a more global neurological community.

The ENS is delighted to have formed the strategic partnership with the AAN. Resources from both organizations have been mobilized and merged together to create a new range of services, activities, and resources. In relation to the fast changing world with increased globalization, the ENS values this joint membership as a global membership which has opened valuable resources to neurologists all over the world. The partnership is highly regarded as the ENS sees the importance of ensuring a good match between the partners’ missions, strategies, and values. Both organizations strive to promote the best possible care for patients with neurological disorders. Accordingly, the ENS and the AAN have joined forces with a mutual course heading into the future of neurology.

—Sabine Adam and Julia Bicher, Administrative Secretariat, European Neurological Society

NEW PRODUCTS AID MEMBERS

The AAN Store added a number of new products in 2005 to benefit members. Two dozen practice management books published by the American Medical Association, Medical Group Management Association, and SEAK, Inc., were selected to help members buy, sell, and own medical practices; manage staff; implement electronic health records; and avoid legal mistakes.
During 2005, the Academy and subsidiaries (AAN Enterprises, Inc., and the American Academy of Neurology Foundation) had consolidated revenues of $27.2 million. Notable sources include:

- The Annual Meeting is the largest single source of revenue with its $7.9 million representing 29 percent of total AAN revenues. Compared with 2004 this revenue increased by nearly $800,000, or 11 percent, while expenses were up by 5 percent.

- The Academy’s publishing activities represents 22.4 percent of total revenue and were down slightly by $90,000 or 1.4 percent.

- Products and services produced $3.6 million in revenue from advertising, fees, and sales of products.

- Membership dues of $5.5 million were 20 percent of total revenue. During the year, membership increased by 608, or 3 percent, to a total of 19,500 members. Membership fees were last increased in 2003.

Overall expenditures were $23.8 million. Program expenditures represent 84 percent of total expenditures and include the following major areas:

- Publication expenses include the cost of member subscriptions to the journal Neurology.

- Board and committee activities account for 9 percent of total expenses. Three Boards and more than 50 standing committees, subcommittees, and task forces, working with staff, set strategy and manage the overall direction and operation of the three organizations.

- The Academy’s expenditure for grants and awards decreased by $345,000 to $1.5 million. Our challenge is to seek out new funding sources for clinical research in neurology.

- The Annual Meeting costs were 26 percent of total expenses. Our 2005 meeting in Miami Beach set a record for attendance and produced a net income of $1.5 million.

- Support services were 16 percent of expenditures, lower than last year and well below the conventional 30 percent acceptable maximum. This allows more investment in programs and services addressing the mission of the Academy.
The net excess from revenues after expenses was $3.4 million, which increased the AAN net assets by this amount. This excess of assets over liabilities supports the financial health of the AAN.

During the year, the Boards approved the transfer of $2.7 million from cash to long term investments. At the end of 2005, $19.1 million was held in investment funds. Even after these transfers, our short-term cash position remains very strong.

The Board, Finance Committee, and our finance staff is committed to transparency. Our financial results are audited by an independent outside firm and their report is available on the AAN Website at www.aan.com/financial. The IRS requires us to annually submit Form 990 for the AAN and its Foundation and these are also available on our site.

It is an honor to serve as your Treasurer. Working with the finance staff, the Finance Committee and the Boards, we pledge to meet the demands and challenges for the coming years. I thank all these folks for their support and hard work in making 2005 a successful year.

### BALANCE SHEET

As of December 31 (in thousands)

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2005</th>
<th>2004</th>
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<tbody>
<tr>
<td>Cash</td>
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<tr>
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<td>131</td>
</tr>
<tr>
<td>Equipment &amp; Leasehold Improvements</td>
<td>394</td>
<td>432</td>
</tr>
<tr>
<td>Deferred Income Tax</td>
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<td>373</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$35,147</strong></td>
<td><strong>$30,872</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES AND NET ASSETS</th>
<th></th>
<th></th>
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<tbody>
<tr>
<td>Accounts Payable</td>
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<td><strong>Total Liabilities and Fund Balance</strong></td>
<td><strong>$35,147</strong></td>
<td><strong>$30,872</strong></td>
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### 2005 REVENUE – $27,204 (in thousands)

- Corporate Other $1,326
- Products & Services $3,694
- Publications $6,105
- Membership $5,498
- Interest & Other $719
- Special Courses $1,270
- Gain on Long-term Investments $694
- Annual Meeting $7,889

### 2005 EXPENSE – $23,805 (in thousands)

- Projects $2,631
- Products & Services $1,520
- Publications $1,689
- Special Courses $1,433
- Support Services $3,915
- Membership $2,579
- Committees $2,218
- Grants & Awards $1,483
- Annual Meeting $6,339
AMERICAN ACADEMY OF NEUROLOGY LEADERSHIP

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Barbara J. Scherokman, MD, FAAN, FACP
Kenneth L. Tyler, MD, FAAN
Kenneth M. Viste, Jr., MD, FAAN, AAN Foundation Chair (deceased)
Catherine Zahn, MD, FAAN

2005-2007 COMMITTEES
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Committee on Sections
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Legislative Affairs Committee
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Meeting Management Committee
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Membership Committee
Gregory D. Cascino, MD, FAAN, Chair
AANnews Subcommittee
James P. Kelly, MD, FAAN, Chair
International Subcommittee
John M. Newsom-Davis, MD, Chair
Member Demographics Subcommittee
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Science Committee
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Dreifuss-Penry Epilepsy Award
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Dystel Award Subcommittee
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Harold Wolff-John Graham Award
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Medical Student Essay Award Subcommittee
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Norman Geschwind Prize in Behavioral Neurology Subcommittee
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Potamkin Prize Subcommittee
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Preuss Award Subcommittee
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Scientific Program Subcommittee
John H. Noseworthy, MD, FAAN, Chair
Sheila Essey Award Subcommittee
Hiroshi Mitsumoto, MD, FAAN, Chair
Sidney Carter Award Subcommittee  
Huda Zoghbi, MD, Chair

Sleep Science Award Subcommittee  
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State Affairs Committee  
William H. Fleming, III, MD, Chair

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International Task Force  
Mark Hallett, MD, FAAN, Chair

Leadership Task Force  
Lynne P. Taylor, MD, FAAN, Chair

Public Leadership Award Celebrity Task Force  
John Mazzotti, MD, FAAN, Chair

Stroke Systems Work Group  
Lawrence R. Wechsler, MD, FAAN, Chair  
Lawrence M. Brass, MD, Vice Chair (deceased)

Website Rebuild Task Force  
Barbara J. Scherokman, MD, FAAN, FACP, Chair

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David A. Stumpf, MD, FAAN, Liaison

American College of Occupational and Environmental Medicine  
Ed H. Klimek, MD, Liaison

American College of Radiology/Rheumatology Expert Panel on Appropriateness Criteria  
Michael A. Sloan, MD, MS, FAAN

American Medical Association National Advisory Council on Violence and Abuse  
Anna D. Hohler, MD

Brain Attack Coalition  
Lawrence Wechsler, MD, FAAN

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Laura B. Powers, MD, FAAN

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Laszlo Mechtler, MD, Liaison

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Susan McDermott, MD

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David A. Stumpf, MD, PhD, FAAN, Liaison

Pan-American Congress  
Antonio Culebras, MD, FAAN, Liaison

Physicians Electronic Health Records Coalition  
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Daniel B. Hier, MD, FAAN, Alternative Representative

Relative Value Scale Update Committee  
J. Baldwin Smith, MD, Representative  
James J. Anthony, MD, Advisor, Alternate Representative

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Leslie Morrison, MD, FAAN, Representative  
Francis L. Kittredge, Jr., MD, FAAN, Alternative Representative  
Stephen M. Sorgay, MB, FAAN, Past Chair

United Council for Neurologic Subspecialties Accreditation Council  
David C. Anderson, MD, FAAN, Representative

United Council for Neurologic Subspecialties Certification Council  
J. Clay Goodman, MD, FAAN, Representative

United Network for Organ Sharing  
David A. Stumpf, MD, PhD, FAAN, Liaison

US Pharmacopeia  
Thomas Chase, MD

World Federation of Neurology  
Sandra F. Olson, MD, FAAN, Liaison

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Stephen M. Sergay, MB, FAAN, Ex-Officio
Catherine M. Rydell, Ex-Officio

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Neurology  
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Neurology Now  
Robin L. Brey, MD, FAAN

AANnews  
James P. Kelly, MD, FAAN

Patient Education Book Series  
Austin J. Sumner, MD, FAAN

Neurology Reference Series  
Terrence L. Cascino, MD, FAAN
AMERICAN ACADEMY OF NEUROLOGY LEADERSHIP

AMERICAN ACADEMY OF NEUROLOGY BOARD OF DIRECTORS

Front: Kenneth M. Viste, Jr., MD, FAAN.

Front Row: Marc R. Nuwer, MD, PhD, FAAN; Barbara J. Scherokman, MD, FAAN, FACP; Robert C. Griggs, MD, FAAN; Thomas R. Swift, MD, FAAN; Terrence L. Cascino, MD, FAAN; David A. Stumpf, MD, PhD, FAAN; Catherine M. Rydell; Steven P. Ringel, MD, FAAN.

Back Row: Sandra F. Olson, MD, FAAN; Mindy L. Aisen, MD, FAAN; Stephen M. Sergay, MB BCh, FAAN; Robin L. Brey, MD, FAAN; Kenneth L. Tyler, MD, FAAN; Catherine Zahn, MD, FAAN; Michael L. Goldstein, MD, FAAN; Walter J. Koroshetz, MD, FAAN; Ralph L. Sacco, MD, MS, FAAN; Timothy A. Pedley, MD, FAAN.

AMERICAN ACADEMY OF NEUROLOGY EXECUTIVE STAFF

Front Row: Bruce A.F. Polsky, Chief Executive Officer, AAN Enterprises, Inc.; Timothy J. Engel, Chief Financial Officer; Murray G. Sagsveen, JD, General Counsel; Catherine M. Rydell, AAN Executive Director and Chief Executive Officer

Back Row: Linda Kay Morgan, Interim Foundation Director; Christine Phelps, Associate Executive Director and Director, Center for Education & Science; Rod Larson, Associate Executive Director and Director, Center for Health Policy; Melanie M. Hoffert, Director, Marketing, Communications, and Digital; Mary E. Post, Chief Operating Officer
Raising funds and investing in the researchers who will provide the clinical breakthroughs that will yield treatments for neurological disorders requires many partners.
Ken was a strong proponent of educating the public about neurological disorders and the pivotal role of the neurologist in diagnosing and treating these diseases. To that end, the Foundation and Academy presented the Think Neurology Now campaign in Boston and the Neurology EXPO in Atlanta. These public awareness efforts increased the visibility of neurology and understanding of disorders of the brain and central nervous system. The Foundation and Academy staffs worked together and forged new partnerships with neurologists, patient organizations, care providers, and policy makers. These relationships will undoubtedly benefit us for years to come.

The staff of the AAN and its Foundation was instrumental in the tremendous success of our first Foundation Gala Auction at the AAN’s Annual Meeting in Miami. We raised $139,000 for clinical research, a new record for our Annual Meeting fundraising. And many of last year’s Annual Meeting directors and faculty generously designated over $31,000 of honoraria to the Foundation—up from $19,000 in 2004.

The Foundation partnered with the National Multiple Sclerosis Society to present the first joint Clinician Scientist Development Award, and with the ALS Association to establish a similar award in the area of ALS research.

I must also acknowledge another unique team we’ve been privileged to be associated with over the years: Richard Olney, MD, a leader in ALS research, and Catherine Lomen-Hoerth, MD, a 1999 recipient of a Foundation Clinical Research Training Fellowship. Dr. Lomen-Hoerth has taken up the reins of Dr. Olney’s research as he faces his own battle with ALS. His invaluable scientific accomplishments and personal courage spurred us to present him with the first AAN Foundation Public Education Award. Current and future researchers will draw inspiration from the achievements of both Dr. Olney and Dr. Lomen-Hoerth.

Organizations, no matter how successful, need to periodically take stock of their efforts to ensure they continue to align with their core competencies and that staff and resources are optimally deployed. After much deliberation among the Foundation Trustees and with our friends in the Academy, we redirected the Foundation to its original purpose of raising funds from corporations, the public, and AAN members for neurological research. This realignment allows us to hand off public awareness activities to the Academy’s new Public Relations Subcommittee and enables us to build on our historical strengths. And we gave ourselves a goal worthy of our ambitions: to become the preeminent funder of clinical research next to the National Institute of Neurological Disorders and Stroke.

In 2005, the Foundation set new records for the number of applications for research grants and the number of awards presented. We awarded more than $1,158,000 for a total of seven Clinical Research Training Fellowships, Clinician Scientist Development Awards, and Young Investigator Awards.

If you are one of the donors who helped make this possible in 2005, we thank you. If you have not yet joined with us, please do. We can never have too many partners in our fight against neurological disorders.

It is my unfortunate task to write this letter. I say unfortunate because this should have been written by our good friend Kenneth M. Viste, Jr., MD. With Ken’s passing in August 2005, the Academy and its Foundation—indeed, all neurologists, everywhere—lost a vital partner, and people who live with neurological disorders lost a true champion. Ken was Chair of the AAN Foundation at the time of his death, served as AAN President from 1995-1997, and sat on numerous committees and subcommittees throughout his long association with the AAN. He was as tireless in his commitment to his patients in Wisconsin as he was in his commitment to quality and accessible neurological care around the world. He will be greatly missed, and never forgotten.
I consider it a great privilege to have been received by Dr. Adams, an individual who has literally helped create the practice of modern neurology. He kindly autographed my copy of his landmark textbook. It must weigh three or four pounds, but I would have carried it to the North Pole to have Dr. Adams sign it.

—Michael Waters, MD, PhD, First Raymond Adams Clinical Research Training Fellow
Someone has a noble cause and needs financial assistance. Someone else has some money and is looking for a worthy endeavor to support. How do the two of them hook up and become partners?

NEUROLOGICAL DISORDERS

The AAN Foundation is the matchmaker for this symbiotic relationship between donor and recipient, all on behalf of a third partner: the people who await new treatments and cures for neurological disorders. To that end, the Foundation offers several avenues for members and the public to become financial partners in support of researchers and tomorrow’s clinical breakthrough.

NEW FUNDS HONOR GIANTS OF NEUROLOGY

In 2005, Francis M. Forster, MD, FAAN—the last surviving co-founder of the AAN—and Milton Alter, MD, PhD, FAAN, were honored as giants of neurology and funds were established in their names to ensure that talented young investigators will lead the way in neuroscience research and, in turn, mentor the next generation of researchers.

Another neurology giant, 94-year-old Raymond D. Adams, MD, welcomed to his Boston home Michael Waters, MD, PhD, the first clinical research training fellow supported by the fund named for Adams.

FOUNDATION SALUTES POTAMKIN PARTNERSHIP

Since 1988, the Potamkin family has been the AAN Foundation’s single largest individual donor, providing nearly $2 million to fund the Potamkin Prize, which recognizes outstanding research into the causes and prevention of Alzheimer’s disease, Pick’s disease, and related diseases. The Potamkin family was honored for their monumental commitment to the Academy as they were presented with the AAN Foundation Chair’s Award at the Annual Meeting in Miami Beach. The award was accepted by brothers Robert and Alan Potamkin, sons of the couple who inspired the award, Victor and Luba Potamkin.

NEW AND RENEWED CONTRIBUTORS JOIN TO SUPPORT NEUROLOGY

Another pivotal relationship was renewed through the auspices of the Foundation. The AAN’s award-winning Donald M. Palatucci Advocacy Leadership Forum received another three-year commitment of support from UCB Pharma amounting to $300,000. This extended the donor’s original three-year contribution that helped launch the groundbreaking advocacy training program.

“UCB is proud to be an ongoing partner with the AAN in presenting the Palatucci Advocacy Leadership Forum at the beginning of each year. Our association with this unique program has contributed to the development of neurology advocacy programs throughout the United States. We are proud to support innovation on behalf of patients and caregivers in neurology.”

—Rich Denness, Vice President and General Manager, CNS, UCB

A new major donor to the AAN Foundation was the Association of Indian Neurologists in America, which contributed $10,000 raised by its membership.

The Endowment for the Neurosciences also gave a gift of $10,000 to the Foundation to provide funding on a national basis for research and studies in the neurosciences. The Endowment encourages and promotes highly meritorious investigative research to expand our understanding of the nervous system, and which ultimately will translate into cures for neurological disorders.

AAN members reversed a multiple-year downward trend and increased check-off donations on their dues statements, from 3,004 members donating $49,452 in 2004 to 3,733 members donating $57,180 in 2005. And the AAN staff pitched in too, with 65-percent of the employees raising $18,000.

AUCTION GALA AND RAFFLE GENERATE RECORD CONTRIBUTIONS

The Foundation’s first Auction Gala at the AAN Annual Meeting was a resounding success, raising a record $139,000 for clinical research training fellowships. The evening’s festivities, enceed by baseball great Tommy John, included music by country artist Clay Walker, a raffle drawing for a 2005 Toyota Prius, and both silent and live auctions. The event could not have been successful without the generous support of Teva Neuroscience, the many individuals and businesses who donated auction items, and the nearly 300 attendees who believed that it only takes one night to change the future.
During 2005 the Foundation explored new means of generating income in support of its mission and goals, as well as those of the Academy. Our first Gala held during the Academy’s Annual Meeting raised $125,000, a 50 percent increase from 2004’s total of $85,000 generated by the previous Silent Auction events, now incorporated into the Gala. Two new events took place during the year, both aimed at increasing public awareness of the field of neurology and the role of the Foundation in funding research and education. In January, the Think Neurology Now campaign was held in Boston with great success despite coinciding with one of the winter’s worst snow storms. In October, the Atlanta Neurology EXPO was another first-time event.

The Foundation continues to be the major fundraising arm of the AAN, transferring just over $2 million to support the Annual Meeting and regional meetings as well as other educational programs sponsored by the Academy, including the Dystonia/Spasticity Workshops and the Palatucci Advocacy Leadership Forum. All of these efforts help the Academy offer high-quality professional and educational meetings to its members. New pledges raised during the year include $205,000 for the 2006 Gala, and thanks to the continuing generosity of the Potamkin family, $300,000 for multi-year support of the Potamkin Prize awarded for research in Pick’s, Alzheimer’s, and related diseases.

The Foundation ended 2005 with $2.8 million in cash and investments and just over $800,000 in pledges receivable. Most of these amounts are earmarked for Foundation and Academy projects, leaving us with the challenge of raising support for the general operating expenses of the Foundation. Early in 2006, the Board began discussion on a business plan that would change the administrative structure of the Foundation, recognizing that the Foundation is primarily a funding organization for the Academy with our corporate partners being one of the major sources of funding. Your Board is committed to continuing these discussions in order to fulfill the mission of the Foundation in the most responsible and efficient means possible.

Of course, we continue to rely on the financial support of individuals like you in the form of contributions and planned gifts to make a difference in the lives of people affected with neurological conditions. We count on you and thank you for sharing in our mission!
The Foundation continues to be the major fundraising arm of the Academy, transferring just over $2 million to support the Annual Meeting and regional meetings, as well as other educational programs sponsored by the Academy, including the Dystonia/Spasticity Workshops and the Palatucci Advocacy Leadership Forum.

**BALANCE SHEET**
As of December 31 (in thousands)

<table>
<thead>
<tr>
<th>ASSETS</th>
<th>2005</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and Cash Equivalents</td>
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<tr>
<td>Investments</td>
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<tr>
<td>Contributions Receivable, Current</td>
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<td>Intercompany Receivables</td>
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<tr>
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<td>Temporarily Restricted – Academy</td>
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<tr>
<td>Permanently Restricted</td>
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<tr>
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<td><strong>$2,440</strong></td>
<td><strong>$2,886</strong></td>
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<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td><strong>$3,655</strong></td>
<td><strong>$3,970</strong></td>
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</tbody>
</table>

2005 REVENUE $3,822 (in thousands)

2005 EXPENSE $4,269 (in thousands)

Complete audit available upon request.
Recipient: Yoon-Hee Cha, MD  
University of California, Los Angeles, CA  
Mentor: Robert Baloh, MD  
Title of Research: Characterization and Genetic Localization of New Forms of Episodic Ataxia

Recipient: Ari J. Green, MD  
University of California, San Francisco, CA  
Mentor: Stephen Hauser, MD  
Title of Research: Direct Structural and Functional Analysis of the Nerve Fiber Layer in Patients with Multiple Sclerosis  
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Recipient: C. Adam Kirton, MD, MSc  
Alberta Children’s Hospital, Calgary, AB, Canada  
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Title of Research: Volumetric Analysis and Diffusion Tensor Imaging in Perinatal Stroke: Tools for Outcome Prediction and Evidence of Plasticity Following Focal Injury in the Developing Brain

Recipient: Annapurna Poduri, MD  
Children's Hospital Boston, Boston, MA  
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Title of Research: Genetics of Human Epilepsy and Malformations of Cortical Development

Recipient: Mustafa Sahin, MD, PhD  
Children's Hospital Boston, Boston, MA  
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Title of Research: The Role of SMN in Axon Outgrowth and Targeting  
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Cedars-Sinai Medical Center, Los Angeles, CA  
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Title of Research: Mutations in Voltage-gated Potassium Channel KCNC3 Cause Degenerative and Developmental Central Nervous System Phenotypes

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Toronto Western Hospital, Toronto, ON, Canada  
Mentors: Anthony Lang, MD, and Paula Rochon, MD  
Title of Research: The Risk of Cardiac Valvulopathy with Pergolide Use in Parkinson’s Disease

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Washington University School of Medicine, St. Louis, MO  
Mentors: John Morris, MD, and David Holtzman, MD  
Title of Research: In Vivo Metabolism of Aβ in Alzheimer’s Disease

Recipient: Christine DiDonato, PhD  
Northwestern University Medical School, Chicago, IL  
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Title of Research: Pharmacological Treatment Strategies Using Neuroprotective Agents in Cellular and Animal Models of SMA  
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Robert Wood Johnson Medical School, Camden, NJ  
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University of Utah School of Medicine, Salt Lake City, UT  
Mentor: Mark Bromberg, MD, PhD  
Title of Research: Refinement of Outcome Measures for Clinical Trials in Infants and Children with Spinal Muscular Atrophy  
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Johns Hopkins University, School of Medicine  
Mentor: Daniel F. Hanley, MD  
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