## 2006 Glasgow, United Kingdom

10th EFNS Congress, Glasgow, United Kingdom, 3 - 6 September 2006

## **Welcome Address of the President**

Welcome to the 10th Congress of the European Federation of Neurological Societies in Glasgow. This meeting promises to be as exciting as the one we had in Athens last year. Although Glasgow is not as sunny as Athens, we expect approximately the same number of participants. This indicates that our congresses are scientifically of high quality and that we do not need to move to exotic islands to attract participants.

I would like to thank Professor Ian Bone, the local arrangements committee and the Association of British Neurologists for their kind hospitality, and I wish to express my sincere congratulations to all the persons who have contributed to the success of this meeting.

It is an EFNS tradition that at the opening ceremony the President gives a lecture on a topic of general interest in Neurology. Being new in this job the topic I will present can appear somewhat controversial. However, I will take the risk. So, the title of my presentation will be "The history of the cheapest prevention tool for neurological diseases".

First a quote that today could be applied to AIDS: "A mysterious epidemic, hitherto unknown, which had struck terror into all hearts by the rapidity of its spread, the ravages it made, and the apparent helplessness of the physicians to cure it". However, this statement is not about AIDS but about the appearance of syphilis in the early 16th century. Syphilis and AIDS share issues from science and public health to civil liberties and sexuality. Both infectious diseases have severe neurological complications such as general paralysis, tabes dorsalis and Argyl-Robertson pupils for syphilis, and opportunistic infections, tumours, dementia, and myelo- and radiculopathy for AIDS. So, the topic of my talk will be about the history of the condom.

It has been suggested that the Ancient Egyptians were among the first to wear them as was found on a statuette from 6000 BC and on a wall drawing of 1200 BC during the XIX dynasty, presented at the "Deutsche Gesellschaft für Urologie" in 1911. However, there is no hard evidence for the use of a condom in Ancient Egypt. It was more probably used as a penis protector during combat and against insect bites, tropical diseases or even evil spirits. Also, the Ancients Egyptians were keen of fertility and worshipped the God of reproduction Min.

The possible earliest illustration of a man using a condom in Europe is painted on the walls of a cave in Combarelles (Dordogne, France) but again the evidence that it was used as protection against sexually transmitted diseases is rather poor.

The real earliest description of the condom was by the great Italian anatomist from Padua, Gabriello Fallopio, a pupil of Vesalius. In his book "De morbo gallico", published in 1564, two years after his death, he claimed to have invented a linen sheath, made to fit the glans and it was worn for protection against syphilis. He mentioned that he tried it on 1100 men and accordingly not one of them became infected. So, this is the first large prevention trial in the history of medicine and, as syphilis epidemic mainly caused nervous complications, it can be considered as the first prevention study in neurological diseases. The Cochrane Library should acknowledge this study although it was not double-blinded and placebo controlled, nor multi-centred, nor with

written informed consent. So, I hope that even the hard-liners of evidence-based medicine will accept the scientific evidence of this study and that they will not ask for another trial.

The origin of the name "condom" remains a mystery. Several hypotheses have been proposed. The most popular one is that the name refers to a Doctor Condom, a physician and colonel to King Charles II from England (1660-1685), who provided the king with means of preventing illegitimate offspring. Another explanation is that the word is derived from the Latin 'condos', that means recipient. Some authors link the name to a small French village. However, extensive research performed at the University of North Carolina concluded that the origin of the word is unknown and definitely not derived from Latin.

The name 'condom' appears for the first time in the English literature in a poem of John Hamilton in 1706, entitled "A Scots answer to a British vision".

The condom became very popular in France thanks to the great French lover and writer Jacques Casanova. It was called 'Rédingote Anglaise', a name that was probably first introduced by the French King Louis XIV. As a young man Casanova was not so fond of using it as a protection but rather to amuse ladies by inflating the condom. It is only when he became older and afraid that he used it for protection against unwanted pregnancies and sexually transmitted infections.

After the French Revolution, the name was changed in 'Capote Anglaise', which is still used up to today. There is a story that the French soldiers at the beginning of the battle of Waterloo were laughing at the caps of the English soldiers, suggesting that they put their 'Capote Anglaise' in the wrong place. This probably only happened at the beginning of the battle.

With the invention of rubber vulcanisation by Goodyear and Hancock, condoms could be used worldwide, as they became cheap and easy to use. Previously condoms were made from dried guts and bladders, or even from animal skin. Only rich people could have afforded them.

Condoms protect against sexually transmitted diseases, i.e., bacterial infections such as syphilis, chlamydia, gonorrhoea and trichomonas and viral infections such as HIV, hepatitis B, cytomegalovirus and herpes simplex.

Condom failure is mainly the result of inconsistent and incorrect use. HIV infection is observed in 14% with incorrect and 2% with correct use. Condom leakage occurs in 2%. There is no scientific evidence that the HIV particles can pass through the condom pores. A meta-analysis of 25 studies shows efficacy rates of the condom between 87 and 96% against HIV infection.

There is a rumour that Sir Winston Churchill was asked by Stalin at the Yalta conference to help combat the condom shortage in the Soviet army. Churchill persuaded a British manufacturer to have a special batch made twice as large as normal. This was shipped to the USSR marked 'Made in Britain - Medium Size'.

Whatsoever, condoms are not a British invention as is suggested by the French naming, but such mistakes are not uncommon as illustrated by the naming 'French fries', which are not a French but a Belgian invention. I hope to convince you of this latter statement when you will come to our next EFNS congress in Brussels in 2007.

Jacques L De Reuck

EFNS President

Chair EFNS Congress Programme Committee

## **Greetings from Glasgow**

The 10th Congress of the EFNS was held in Glasgow from the September 2-5, 2006. The meeting was hosted by the Association of British Neurologists, assisted by the Scottish Association of Neurological Sciences. This was the first occasion that Glasgow had hosted a Neurological Conference of such magnitude.

The Opening Ceremony took place in the 5,000 seats Clyde Auditorium. After an introduction from me the large audience was addressed by EFNS President Prof Jacques De Reuck, Dr Harry Burns Chief - Medical Officer for Scotland and Professor Sir Graham Teasdale - distinguished Neurosurgeon and President of the Royal College of Physicians and Surgeons of Glasgow. Jacques De Reuck gave an amusing talk on an 'instrument' of preventative neurology; Sir Graham followed with his account of the history, worldwide application and future of the Glasgow Coma Scale.

The Opening Ceremony had a distinctly Scottish flavour with Dr Burns welcoming delegates to 'the best small country in the world' and emphasising how things were done a little differently here when compared with our geographical neighbours (England). Those that were there are unlikely to forget the stirring finale provided by a full Scottish Pipe Band entering the Auditorium to lead the delegates across the river Clyde to the Science Centre. Here, the reception amongst the museum's artefacts was provided by the City of Glasgow as a gesture of welcome.

Over the four days the conference was extremely well attended with 4,333 delegates from 82 countries. 1242 abstracts had been submitted. From these 120 platform presentations and 972 posters had been selected by the Congress Programme Committee under Jacques De Reuck's enthusiastic and unflagging leadership. It was apparent to me, as Vice-Chairman of the Committee how much we owe to the membership and the selfless endeavours of all our reviewers and the EFNS secretariat. The work that goes on behind the scenes to ensure the educational and scientific quality of our Congress is immense. In addition to the Short Communications there were 9 Main Topics, 13 Teaching Courses, 16 Focused Workshops and 19 satellite symposia. The 2 oral sessions (Clinical and Basic) for judging the Uschi Tschabitscher Prize for Young Neurologists revealed, as usual, presentations of the highest standard. All those short-listed to present as well as the eventual winners are to be warmly congratulated. The Special Sessions were a great success especially those on 'Neurology and Art' and 'History of Neurology'. The latter was followed by the Neurohistory tour to the Hunterian Museum and Royal College.

Whilst Glasgow weather is normally more conducive to attending lectures than going out and about in the City this could not be said over the duration of our Congress. The weather was surprisingly mild and yet the meeting halls and exhibition areas remained full to the very end.

The main social event took place at the Kelvingrove Museum and the adjacent Glasgow Museum of Transport. The Kelvingrove Museum has just been re-opened after refurbishment and was a stunning venue, especially when combined with the musical entertainment. We were treated to an organ recital and encouraged to participate in traditional Scottish Country Dances, a skill even native Scots have difficulty in mastering. When it all ended, after so many years planning, we 'locals' had a feeling of sadness in seeing our guests leaving but also a sense of achievement for what we perceived as a friendly and educationally perfect Congress. We Neurologists meet to learn, renew old friendships and kindle new ones as well as to observe the emerging generation of Neurologists. It was pleasing to see so many nations represented, especially our newer European colleagues, and to get the feeling of the increasing significance and reputation of the EFNS.

There are some many messages of thanks to give here and it is difficult to know where to begin: Lisa, Anja and colleagues from the EFNS secretariat in Vienna, Evelyn in Florence, Daniella and her excellent, red-coated team at Kenes. Locally we have been splendidly served by the staff of the Exhibition Centre, the Tourist Board and Glasgow District Council. To all a hearty thanks from the Local Arrangements Committee.

We hope delegates will visit Glasgow and Scotland again now that they have got to know us but for now it is on to Brussels in 2007 for what I am sure will at least equal what we have achieved here.

Ian Bone, Chair Local Arrangements Committee