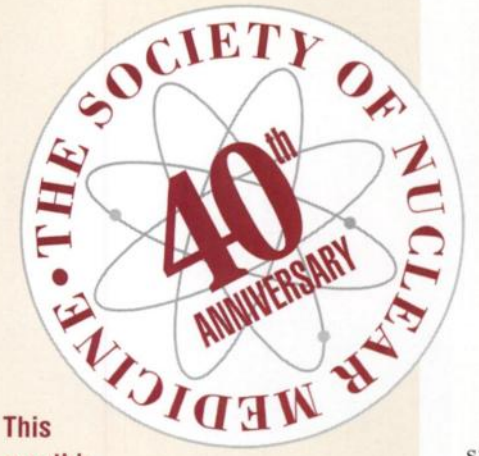

This month's *Newsline* presents a special section commemorating the fortieth anniversary of the Society of Nuclear Medicine.

The section leads off with a series of interviews with physicians, scientists, and industry leaders who have watched the discipline develop over four decades. Included are photographs tracing the progress of scanning technology and a look at the history of JNM. Following that is the regular *Newsline* coverage of issues in nuclear medicine.

The staff of the *Journal of Nuclear Medicine* hopes that the profiles and images appearing in this special section will underscore the human dimension of this challenging field. Watching from the midst of modern medicine's technology explosion, observers sometimes lose sight of medicine's real foundation—the individuals whose intelligence and creativity are the true dynamic of any science.

This special section pays tribute to the men and women who—over the course of four decades—have built the discipline of nuclear medicine.

Anniversary Waltz

"The time has come," the Walrus said,
"To talk of many things:
Of shoes—and ships—and sealing wax—
Of cabbages—and kings—
And why the sea is boiling hot—
And whether pigs have wings."
—Lewis Carroll

From the birth of the Society forty years ago to the present, we have lived in interesting times. We have witnessed a revolution in medicine. Beginning in the 1950s, the era of the great bedside clinicians has slowly faded from prominence. The great clinicians functioned in a world populated by subjective impressions and made their incisive diagnoses based on keen insights about pathophysiology. Technological advances have allowed laboratory tests and imaging investigations to replace these keen insights with objective information. Evolution of this process caused changes in education so that future clinicians could integrate this information into viable diagnoses and patient management plans. The emphasis on objective measures, however, has produced a remarkable atrophy of bedside skills. Clinicians now require objective data before making a clinical decision. The dependence on technology contributes to the escalation of health care costs and has triggered shrill cries for control of these expenditures. The collision of medical practice patterns and government cost-containment activities is like the mating dance of two behemoths. These activities are associated with much sound and fury, but significant events are occurring in some hidden place.

It is against this background that we celebrate our fortieth anniversary. History has shown us that the more things change, the greater the likelihood that we previously faced similar problems. In June 1955, at the second annual meeting of the Society, for example, Dr. Asa Seeds, then historian of the organization, invited the pioneering nuclear medicine physician Dr. John H. Lawrence to describe his early experience in medical research. Dr. Lawrence emphasized three points:

1. The bottleneck of medical research is not lack of equipment or space, but personnel. The right person with the right drive will move the field forward.
2. To optimize the chances for making major contributions, medical research needs to train people in basic sciences, physics, chemistry and mathematics.
3. It is dangerous for an individual or university to exert strong control over the direction of research activities. This control minimizes the drive and innovation of the investigator and reduces the likelihood that true innovation will occur.

To paraphrase the remarks of Frank Deland, written on the occasion of the Society's twenty-fifth anniversary:

We celebrate this anniversary with some degree of satisfaction and pride, with the knowledge that our goals have not yet been reached and with a sense of anticipation for the continued progress in service to our patients.

H. William Strauss, Editor
The Journal of Nuclear Medicine