News Briefs

Nuclear Scans for Chest Pains Reduce Costs

Although nuclear medicine procedures are traditionally thought to be more expensive than standard (and often older) diagnostic tests, a new study has found just the opposite. Researchers at St. Luke's Hospital in Jacksonville, FL found that performing a nuclear scan using ^{99m}Tc-sestamibi on patients with chest pain who enter emergency rooms could significantly reduce costs and admission rates as compared to performing the traditional electrocardiograph (ECG) on these patients. In fact, the study found that hospitals could save an average of $900 per patient, according to Stephen Stowers, MD, principal investigator in the study and co-director of Nuclear Medicine at St. Luke's. In a similar study, University of Michigan researchers found a savings of a whopping $1700 per patient.

The reason for the reduced costs? Nuclear heart scans are better able to predict which patients will suffer adverse cardiac events, such as a fatal heart attack, as compared to ECG's, said Stowers. Thus, a negative scan enables physicians to release patients with benign chest pain from the hospital earlier than usual. ECG's have a false-negative rate of 50 to 60 percent, so physicians often admit patients with normal results for overnight observations—just to be on the safe side. Nuclear heart scans (with a false-negative rate of only 4 percent) can be performed while patients are still under emergency room care, said Stowers, which may allow many patients to leave earlier which significantly reduces their hospital bills.

The St. Luke's study also found that nuclear scans decreased mortality rates in heart disease patients from 14 percent to 4 percent. Stowers predicts nuclear scans will become more widely used to diagnose chest pain as future research documents the benefits of the imaging test. "Like any new diagnostic test, the nuclear scan is being accepted slowly, but it's gaining momentum fast." ■

Men are from Mars, Women from Venus

PET researchers have recently found evidence for what ordinary people have known all along: Men and women have marked differences in their emotional behaviors. Researchers at the University of Pennsylvania School of Medicine in Philadelphia employed PET scanners to examine the physiologic activity in various regions of the brains of 61 healthy right-handed adults in a relaxed resting state. Using ^{18}F-FDG and obtaining arterial samples over 90 minutes, they found that women and men had virtually the same amount of total metabolic activity. However, they also found two significant differences: Men, on average, had higher metabolism than women in the temporal-limbic regions of the brain and lower activity in the cingulate gyrus, according to Ruben C. Gur, head of the school's Brain Behavior Laboratory and lead author of the study which was published in *Science*.

Gur said these findings give weight to the hypothesis that men are more prone to express emotion through physical aggression, while women tend to vocalize their feelings. The cingulate gyrus region arrived later in the evolutionary scheme of things and may be responsible for the switch to symbolic expression. Thus, "women may have more highly evolved brains," he said.

The study also found that women have more metabolic activity on the left side of their brains, whereas men tend to have more activity on the right. This correlates with theories that women have improved verbal abilities and lower spatial and mathematical skills compared to men. Gur and his colleagues have recently submitted a second paper for publication, which has found a strong correlation between the PET scan findings and the behavioral traits of the study's participants. ■

Washington Office to Be Headed by New Company

The Washington Office, which handles government affairs for the SNM and ACNP, recently changed its contractor from Smith Bucklin & Associates to MARC Associates. The joint Oversight Committee of the Society and the College voted to hire a new company in order to implement a change in philosophy concerning government relations. "We have a new focus on legislative—rather than regulatory—affairs, and we chose a firm whose work is strongest in this area," said Robert E. Henkin, MD, chairman of the SNM Oversight Committee. He said the budget for the Washington Office—shared by SNM, ACNP and the Tech Section—would remain at $375,000 for 1995. However, the budget may increase next year as new programs and policies are considered.

The transition will take place during this month and the new staff should be fully in charge of the Washington Office by April 1. MARC Associates is currently in the process of hiring two new staff members who will be dedicated to the Washington Office full time. At this point, no decision has been made whether to retain any of the former associates at Smith Bucklin.

Given the current anti-regulatory mood in Congress, SNM leaders believe that senators and representatives will be more sympathetic to nuclear physicians' frustration with government agencies—namely the Nuclear Regulatory Commission (NRC) and the Food and Drug Administration (FDA). The Oversight Committee has named specific priorities that they would like the Washington Office to focus their lobbying efforts on. These include: the re-evaluation of the process by which the FDA approves radiopharmaceuticals; the review of the NRC's role in the practice of medicine; the assurance that the Department of Energy will still play a major role in supporting nuclear medicine. MARC Associates has established a strong lobbying base with Congress and represents several other medical organizations, including the American Urological Association and the American Society of Anesthesiologists. For more information on the new office, contact Randy Fenninger, senior vice president of Marc Associates at (202) 833-0007. ■

DOE Panel Seeks to Shrink Labs

National physics laboratories should be made more efficient and taken out of the government's hands, said an advisory panel from the Department of Energy (DOE) in a report released in February. The panel, headed by Robert Galvin, chairman of the executive committee of Motorola, inc., recommended shrinking the size of national labs, which currently employ about 50,000 people, over several years. In a press conference, Galvin said that the labs are so inefficiently managed that up to 50 percent of their current costs could be saved by streamlining. He also suggested that the labs be run exactly like private companies with a board of directors comprising executives from major energy corporations—but funded entirely with public money. The panel's recommendations included:

- Outlining the mission of each lab more clearly. The panel does not recommend closing any specific labs but feels that each lab should become a leader in one area. Work that is duplicated in various labs should be transferred or eliminated.
- Ensuring that a proper balance is maintained between the universities and the national laboratories in the performance of DOE-related basic research. The panel emphasized continuing funds for universities and more cooperation between the labs and universities in collaborating on research.
- Ending the longstanding rivalry between the two nuclear weapons design laboratories, Livermore and Los Alamos. The experts recommended that the Livermore laboratory turn over all of its design work to its rival. ■

Election Bulletin

The following candidates will appear on the final ballot for the 1995-96 term. The nominees were selected by the nominating committees of the Society of Nuclear Medicine and the Technologist Section.

SOCIETY OF NUCLEAR MEDICINE

President-Elect (Non-Physician Member)
Michael Devous, PhD
David Weber, PhD

Vice President-Elect *
Robert E. Henkin, MD
H. William Strauss, MD

Secretary/Treasurer
Tom R. Miller, MD, PhD
Martin Nusynowitz, MD

Delegates at Large
Milton Guiberteau, MD
Carol S. Marcus, MD, PhD
Warren H. Moore, MD
Henry D. Royal, MD
Edward B. Silberstein, MD
Guy H. Simmons, PhD
Arnold M. Strashun, MD
Andrew Taylor, MD

*This position has become a three-year track to the presidency. The elected officer will serve three years: one as Vice President-Elect, one as President-Elect/Vice President and one as President.

TECHNOLOGIST SECTION

President-Elect
Mickey T. Clarke
Martha W. Pickett

Secretary/Historian
Nanci A. Burchell
Denise A. Merlino

Delegates
Vincent B. Cherico
Patti Lynn Corrigan
Miriam K. Miller
Susan C. Weiss
James J. Wirrell

OVERHEARD

Congress is considering a bill called the "Regulatory Transition Act of 1995" that would impose a 6 month moratorium on new government regulations. If it passes, the bill would be retroactive to November 1994 (and would halt new rules from the NRC as well as other agencies).

—The Washington Post

In a growing trend to reduce health care costs, radiology has become the number one referral from family physicians. Although interventional radiology probably won't eliminate surgery, it has become the treatment of choice for many conditions once thought treatable only by surgery.

—The University of Texas Medical Branch at Galveston

Plans to name a new element after Nobelist Glenn Seaborg have been abandoned after chemists decided there is one crucial criterion he doesn't meet: He isn't dead. The Commission on Nomenclature of Inorganic Chemistry instead recommended that element 106 be tagged rutherfordium (Rf) after Ernest Rutherford, the atomic researcher who died in 1937.

—Science

Two physicians — Lawrence Minkoff, MD, and Joel Stutman, MD — who helped pioneer MRI technology have invented a smaller, less expensive MRI machine. The machine requires 150 square feet of space and costs about $500,000. This compares to the standard MRI unit which requires up to 2,000 square feet of space and costs as much as $2 million. The machine, called Magna-SL, was approved by the Food and Drug Administration this past September.

—Profiles