



Michael Devous, Sr., PhD

Lines From the President

Hello Again!! Much has happened since I last brought you an update, even though only two months have passed. One piece of good news is that my editorial colleagues have actually doubled my space allotment — to 800 words! I want to update you on progress on several fronts:

refinement of the major foci of the SNM; our financial status; and the FDA and NRC. Also, I thought you might want a little insight into what your president has been doing. So, to begin with, here's a look at travel during my last six weeks (for any of you who might someday be a candidate for this office, please realize that this is a lot of fun...no, really it is...really):

The Road Show Fall Board of Directors planning retreat and budget meeting; two-day IS/I Project meeting; meetings with NRC Commissioners; preplanning meetings with NEMA regarding FDA issues; two and a half days at RSNA (including meetings with ACR, the Nuclear Medicine Commission, the ACR InterSociety Commission, the SNM presidents and executive staff, NEMA, and two conference calls regarding FDA); meetings with FDA re: cancer drugs; represent SNM at the NIH stroke treatment initiative; and meetings with FDA re: devices approval (whew!). Now, if I could only get my Christmas shopping finished!

Focus The Board of Directors met in October to completely review the SNM's programs and strategic plan, and further to analyze potential weaknesses or inadequately addressed areas of concern. In a facilitated review, the BOD determined to "establish SNM as the driving force to integrate nuclear medicine into health care delivery." We acknowledged strengths in education and research, as evidenced in the annual meeting and the *Journal*. However, three major strategies were adopted to address over the short term our most substantive needs: (1) by 1998, gather, package and disseminate efficacy data on the top ten procedures most likely to increase appropriate nuclear medicine referrals and result in a 10% increase in nuclear medicine procedures; (2) implement methods to ensure the quality of nuclear medicine as a necessary component of value; and (3) identify, prioritize and develop liaison relationships with key referent groups and other organizations, and align with IS/I.

Finances The SNM ended fiscal year 1995-96 in the black—for the first time in several years. This overage was immediately designated to restore our depleted operating reserves. A FY 96-97 budget was adopted that achieved substantial improvements in the annual meeting, underwrote important activities of the Commission on Health Care Policy, expanded our educational programs and yet should achieve balance between expenses and revenue by year end. Thus we are able to support our key activities, including the new strategies described above, *within* our fiscal resources.

NRC In addition to the meeting we had in September with Commissioner Rogers that I told you about in my last report, Drs. Brill, Caretta and I, along with David Nichols and Al Lorman,

met in November with Commissioners Nils Diaz and Edward McGaffigan, Jr. These were also very productive exchanges, that continued to support open dialogue to form the purpose and language of reform. Commissioner Diaz has a substantial history of training in nuclear medicine and was especially supportive of reform.

FDA I have worked with others on two fronts to improve approval processes. With NEMA we have made substantial progress in developing a mechanism for the approval of 511 keV collimators, which had previously been rejected by the devices branch. We now have a specific outline for this process, and a trial application is being refined cooperatively between the community and the agency as we speak. Further, I met with many FDA leaders, across several centers, in cooperation with CORAR and ICP, to add diagnostics to the recently announced cancer fast-track approval initiative. That meeting was very successful, with the agency approving the principle of including diagnostic imaging in the fast-track process. A detailed plan for such inclusions will be developed by a team with representatives from both the FDA and the community.

Brain Attack No, this is not what I'm having right now—though there are days... Rather as I write to you I am representing the SNM at a symposium sponsored by NIH/NINDS to launch a national program focused on the treatment of acute stroke (watch for national ads about brain attacks, paralleling public education programs for heart attacks), subsequent to the approval of rt-PA for such treatment. Nuclear medicine has a marvelous opportunity to participate in the development of appropriate treatment algorithms for the fourth leading cause of death in the U.S.

And now I'm out of words despite all the extras granted me!! As before, I'd like to extend to each of you an invitation to communicate with me on any topic that you feel is important. Write to me at the SNM offices in Reston. You might also want to visit our home page at <http://www.snm.org>.

Join the Society of Nuclear Medicine for the 1997 Mid-Winter Meeting in conjunction with the ACNM and with the ACNP Annual Meeting, February 4-11, 1997, at the Palm Springs Riviera Resort and Racquet Club, Palm Springs, California.