

A President's Farewell Message

As my term as president of SNM comes to an end, I reflect on all the changes that have taken place since I first took office. My goals were to support SNM's mission to improve health care by advancing nuclear medicine and molecular imaging and therapy. This included continued support of the Bench to Bedside campaign SNM began 5 y ago. This initiative is critical to the future of our field and essential to bringing new technologies and biomarkers to the bedside to improve patient care. In addition, I also wanted to focus on the more immediate needs of the membership; in particular concerns related to decreases in reimbursement, decreases in the job market, and a shortage of radioisotopes.

When I began my term as president of SNM in June 2010, the Board of Directors (BOD) approved a new strategic plan for the next 3 y. The strategic plan focuses on 6 goals that are important to the membership. Looking back on the past year, significant accomplishments have been realized for each of the goals of the SNM strategic plan, as detailed in the "Year in Review" article published in the February issue of *The Journal of Nuclear Medicine (JNM)*. A summary of those accomplishments follows.

Our first goal is to be the primary resource for nuclear medicine and molecular imaging education. There is a pressing need to ensure that nuclear medicine physicians, scientists, and technologists receive standardized and continuing education so that their skills continue to keep pace with and advance at the same rapid speed with which the molecular imaging field as a whole is evolving. Through the SNM Mid-Winter and Annual Meetings, the Center for Molecular Imaging Innovation and Translation (CMIIT)-sponsored molecular imaging symposia, an ever-growing offering of online continuing education and, of course, *JNM*, SNM has cemented its reputation as the leader in nuclear and molecular imaging education.

The next goal is for SNM to be the resource for all radiopharmaceutical issues. Over the past year we have focused many efforts in this area. A coalition was formed by SNM to address the U.S. Food and Drug Administration (FDA) current Good Manufacturing Practices for PET radiopharmaceuticals. Working with our allies we have successfully negotiated with the FDA for an easier process for new drug and device applications. In addition, the SNM Clinical Trials Network (CTN), which aims to facilitate the use of biomarkers in multicenter molecular imaging trials, qualified more than 40 imaging sites and celebrated the validation of its 100th scanner this past year. CTN also formed a strategic partnership with the National Comprehensive Cancer Net-

work and expanded its education offerings for nuclear and molecular imaging professionals.

Working with referring physician and patient groups is another priority for SNM. This past year we developed relationships with multiple groups, including the Alzheimer's Association, the American Thyroid Association, the Men's Health Network, and more. A strategic plan and timeline are in place to continue this outreach and we look forward to expanding our activities with these groups in the coming years.

SNM's goal to advance comparative effectiveness research (CER) and practice guidelines saw many major accomplishments over the past year as well. A strategic plan was drafted after an SNM CER workshop held in July 2010 and, after the High Country meeting in March 2011, SNM further defined its leadership roles in CER. SNM will develop education on CER, identify evidence gaps, communicate with stakeholder organizations, and create evidence-based guidelines for nuclear and molecular imaging. SNM also collaborated with other medical organizations on several appropriate use criteria and guidelines of mutual interest, in addition to developing and revising our own practice guidelines.

On the advocacy front, SNM has tackled a wide array of issues at the federal level, many of which have implications for other SNM goals. We have worked vigilantly to restore cuts in reimbursement and to correct technical inaccuracies, collaborating when appropriate with other imaging organizations facing similar issues. We also continue to work with the medical community on long-term strategies for improving supplies of ^{99}Mo and have strongly advocated for a domestic supply. Radiation exposure in relation to ^{131}I has been an important topic on Capitol Hill, and SNM representatives have attended several Nuclear Regulatory Commission hearings on regulations for the release of patients treated with ^{131}I . SNM revised its practice guideline for ^{131}I therapy of thyroid disease and is currently revising its patient brochure on ^{131}I .

Finally, SNM's goal of sound governance resulted in many improvements for the society. Our budget has been focused with conservative assumptions for budgeted income, significant cuts for budgeted expenses, and the implementation of a 3% surplus. So far we are on track to meet



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SNM Clinical Trials Network Validates 100th Scanner

The Clinical Trials Network (CTN) has been enjoying a good deal of press coverage. In March, SNM and the National Comprehensive Cancer Network (NCCN) were pleased to announce a collaboration to advance research for cancer imaging and therapies. NCCN will work with SNM and CTN to qualify imaging sites for their upcoming clinical research trials utilizing molecular imaging.

In April of this year, the CTN reached the milestone of validating 100 PET/CT scanners. Scanner validation is an essential component of the CTN imaging site qualification program, which works with sites to ensure high-quality imaging capability by assessing both equipment and personnel capabilities. This unique international program assesses PET/CT scanner performance to ensure that standardized imaging is occurring across sites involved in multicenter imaging trials. To have a scanner validated, imaging sites must first complete a 1-page imaging equipment form and submit this to CTN staff. The CTN Scanner Validation Committee reviews the information to assess imaging equipment capabilities. If acceptable, the unique CTN anthropomorphic chest oncology phantom and accompanying instructions are sent to the site. Scanned images and completed data collection forms are then returned to the CTN Core Lab for review. Once deemed acceptable, the site receives a Scanner Validation Certificate for each validated scanner. Achieving scanner validation is a major step for clinical imaging sites interested in participating in multicenter research studies.

The CTN is currently assisting with 4 multicenter clinical trials sponsored by major pharmaceutical companies. Two of these trials are utilizing ^{18}F -fluorothymidine (^{18}F -FLT) and are being carried out under the SNM Investigational New Drug program, with CTN playing a key role in facilitating availability of ^{18}F -FLT to the imaging sites. For all 4 trials, scanner validation is a key component toward full site qualification. In addition to site evaluation, CTN members assist in the development of imaging protocols and ensure the quality of study images. The actual study image acquisition and data management, including clinical review, are conducted by an imaging contract research organization.

Of course, properly research-trained technologists and physicians are a key factor in any successful clinical trial. To train imaging research personnel at sites, CTN maintains a comprehensive course curriculum on the practice of clinical trials, regulatory compliance, standardization in imaging, and general clinical research topics. The courses offer continuing medical education credits and are geared to all levels of experience.

To learn more about all of the CTN programs, please visit www.snm.org/ctn.

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our FY2011 budget goals. We also drafted a fundraising plan with the Education and Research Foundation of the SNM, identifying programs that are in line with our strategic goals. The plan also integrates funding for continuation of CMIIT programs, now a part of SNM's activities.

In an effort to improve communication, quarterly conference calls are now organized with the House of Delegates and the past presidents, in addition to the monthly conferences calls with the BOD and bimonthly calls with the Executive Committee. Minutes of governance meetings are also posted on the SNM Web site.

SNM leadership are committed to looking at the future of molecular imaging and nuclear medicine as a specialty. A Nuclear Medicine 2020 Task Force is currently working to bring together a broad cross-section of health care professionals to discuss the future of the profession and the SNM and make recommendations that will serve as guiding principles to meet the challenges that lie ahead.

Also looking ahead, SNM will fully integrate molecular imaging activities into the society as the Bench to Bedside campaign comes to an end. This has brought up another discussion about a name change for the society. The new name under consideration, Society of Nuclear Medicine and Molecular Imaging (SNMI), would both retain the identity of nuclear medicine and embrace the future of molecular imaging. The rationale for changing the name has been addressed in a Newsline article in the May issue of *JNM*.

I cannot express what an honor it has been to serve as your president for 2010 and 2011. I thank everyone who has supported me, including SNM's BOD. I have great confidence in George Segall, MD, PhD, as your incoming president, and I know the society will be in good hands. Meanwhile, I will continue to be involved with the society on many levels, and I will continue to support SNM in achieving its mission to promote the field of molecular imaging and therapy.

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SNM President