
NEWS BRIEFS

Canadian Energy Agency Releases Phase I of Cancer Cluster Study

The number of childhood leukemia cases observed in the first phase of a study of the disease near Canadian nuclear facilities ranged from 0.31 to 3.49 times the expected values. The results of this independent study conducted for the Atomic Energy Control Board (AECB) contrasted with the nine-fold increases reported in a 1987 study of leukemia cases near a nuclear fuel reprocessing plant in Sellafield, Great Britain that had prompted the Canadian study.

The researchers caution, however, that due to the statistical uncertainties resulting from the small number of cases of leukemia that were identified, the findings may be due to chance. They noted that the range falls within the variations of the natural occurrence of the disease. The AECB will extend the study to include a wider age range (up to 14 years) to increase the number of children in the study and to improve the precision of the results.

The study, being conducted by Aileen Clarke, MB, BS, MSc, and John McLaughlin, MSc, of the division of epidemiology and statistics of the Ontario Cancer Treatment and Research Foundation, and Terry W. Anderson, MD, PhD, of the University of British Columbia, examined leukemia-related incidence and mortality among children aged from infancy to 4 years, who were born to mothers living near one of seven Canadian nuclear facilities in five geographic areas. The investigators studied 795 children who died of leukemia between 1950 and 1986 and 951 children who were diagnosed with leukemia between 1964 and

1985. The facilities studied — the Chalk River Nuclear Laboratories, the NPD reactor at Rolphton, the Pickering, Douglas, and Bruce nuclear generating stations, the uranium conversion facility in Port Hope, and the uranium mining and milling facility in Elliot Lake — are all in Ontario and have been operating for 15 to 40 years. The next phase of the study is expected to be completed by March, 1990.

The National Cancer Institute (NCI) is conducting a similar study of cancer deaths near more than 100 nuclear power reactors in the US (see *Newsline* April 1988, p. 440). This study also was initiated in the wake of the Sellafield study. The NCI plans to issue a report on the study by the end of the year. ■

FDA Sets Up Pilot Drug Review Division

The Food and Drug Administration's (FDA) Center for Drug Evaluation and Research has established a pilot review division separate from its two offices of drug evaluation. According to the FDA, the pilot division will be a testing ground for various ideas for streamlining and improving the drug evaluation process. Two other divisions of the center have been realigned to facilitate enhanced focus on evaluation of radiopharmaceutical products and drugs to treat cancer. The Division of Surgical and Dental Drug Products is now Radiopharmaceutical, Surgical, and Dental Drug Products, with John Palmer as its director, and the Division of Oncology and Radiopharmaceutical Drugs has become Oncologic and Pulmonary Drug Products, with Greg

Burke, MD, as acting director. In addition, analgesic drugs and the drug abuse function have been transferred from Neuropharmacologic Drug Products to the new pilot division. The divisions of Cardio-Renal Drug Products and Gastrointestinal Drug Products remain unchanged. ■

Mallinckrodt and CSI Plan To Set Up PET Centers In Major Cities

Mallinckrodt Medical, Inc.'s nuclear medicine division has joined with CTI Services, Inc. (CSI) in a plan to establish positron emission tomography (PET) facilities in major US cities.

Under an agreement announced in March, CSI will own, install, and maintain cyclotrons in one hospital in each major market. Mallinckrodt will purchase radionuclides generated in the CSI cyclotrons and, within a nuclear pharmacy established close to the cyclotron, will compound unit dose PET radiopharmaceuticals.

Selected hospitals will become host PET centers, housing the cyclotron and PET radiopharmacy and supplying unit dose radiopharmaceuticals to other area hospitals with PET scanners. According to Ronald Hopkins, PhD, general manager of Mallinckrodt's nuclear medicine division, "This concept increases the access to PET for hospitals, doctors, and patients by reducing the capital outlay and operating expenses of each hospital, since only one cyclotron and radiopharmacy is needed to serve up to six hospitals." The companies plan to set up four centers by 1990. Five agreements are in various stages of negotiations at this time. ■

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David E. Kuhl, MD, Wins ACP Award

Society member David E. Kuhl, MD, was awarded the American College of Physician's William C. Menninger Memorial Award during the College's 70th Annual Session in April.

The award, established in 1967, honors "...distinguished contributions to the science of mental health." In the March issue of the *American College of Physicians Observer*, the College praised Dr. Kuhl, professor of internal medicine and chief of the division of nuclear medicine at the University of Michigan Medical School in Ann Arbor, for 30 years of medical research during which he "developed new techniques based on physiologic processes to image the human brain and has expanded our understanding of cerebral disorders." The College acknowledged several of Dr. Kuhl's achievements including the development of a photorecording system for radionuclide scanning, the introduction of radionuclide emission tomography as a technique for imaging the structure and function of a variety of internal organs, and the use of a variety of techniques to enhance cerebral imaging, most notably the introduction of [fluorine-18] fluorodeoxyglucose as a radioactive tracer. ■

SNM/ACNP Testifies On DOE 1990 Budget

In testimony before the Energy and Water Development Subcommittee of the House Committee on Appropriations, The Society of Nuclear Medicine and the American College of Nuclear Physicians urged the Congress to increase the budget for Department of Energy (DOE)-sponsored nuclear medicine research to \$42.6 million,

in fiscal year 1990, a \$5 million increase over 1989, and to adopt various programmatic recommendations.

Testifying on behalf of SNM/ACNP on April 11, R. Edward Coleman, MD, professor of radiology and director of nuclear medicine at Duke University Medical Center, said the approximately 15% increase was needed because "Not only have funding increases been eroded by inflation, but disruptive earmarks of scarce nuclear medicine dollars and internal programmatic reallocations of funding have caused further setbacks in a program that has always been a pillar of accomplishment within DOE."

The formal SNM/ACNP statement to Congress urged that the Committee encourage DOE to address the problem of restrictions in the availability of DOE-produced radioisotopes for biomedical research. "The enormous DOE reactors and accelerators that currently produce these radioisotopes are not dedicated to providing a continuous, reliable supply of radioisotopes for biomedical research. . . . This creates a precarious situation for investigators who must rely on an unreliable supply of this research resource."

The Society and the College noted that the \$7.5 million appropriated in fiscal year 1988 for the Center for Molecular Medicine and Immunology at the University of Medicine and Dentistry of New Jersey (UMDNJ) has not been expended due to legal problems surrounding the project. They urged that if the UMDNJ appropriation is not expended by the contract's expiration, the money should be transferred to the DOE base nuclear medicine account rather than returned to the General Treasury.

SNM/ACNP also asked the Com-

mittee to seek detailed budgetary information to ensure accountability in the DOE nuclear medicine research program and to support the peer review process in the awarding of DOE research funds.

"...Because [nuclear medicine research] is not a line item in the DOE budget, we believe that congressional intent in spending appropriated funds has not been followed," concluded SNM/ACNP. "Because of the enormous contributions of DOE nuclear medicine research to the health of the American people, The Society and the College respectfully urge this Committee and Congress to increase its budget. . . and to adopt our programmatic recommendations. . . . This is a modest request relative to the benefit that will be derived from it." ■

DOE Nuclear Medicine Research Grants

In response to a request for proposal (RFP) issued in September, 1988 (see *Newsline* Nov. 1988, p. 1760), the Department of Energy (DOE) received 119 proposals for research in nuclear medicine. After reviewing and rating the proposals, DOE determined that available funds will support the top 17 projects. The proposals to be funded, which will be initiated during July and August, are in the areas of positron emission tomography, single photon emission computed tomography, immunoconjugates, generator systems, imaging development, and boron neutron capture therapy. For further information, contact Paul Cho, PhD, Office of Health and Environmental Research, ER-73, Washington DC, 20545, (301) 353-5897. ■