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Progress

Sitting in the waiting room, I try to mentally tune out the television sound which fills the room while I use the time to catch up on reading medical journals. The news of the day passes without too much distraction. There are the usual political sound bites, another bizarre law suit from somewhere in California, the weekend football scores. A commercial break is followed by a feature story on health. The subject: coronary heart disease, the announcer informs us, specifically *"in women who are frequently overlooked as candidates for this disease. Often, the disease is not suspected by physicians, and women may not even be alert to the possibility that their distress may be due to something as serious as heart disease. Fortunately, Helen S. went to her doctor after several days of chest discomfort. Although the physical examination was normal,"* the voiceover continues, *"Helen is scheduled for a thallium stress test (I am now watching the screen) using a special contrast material (the screen shows Helen being imaged under a rotating gamma camera in an imaging suite), which reveals that Helen's heart muscle is not receiving enough blood during exercise. Helen will have to undergo further testing, but she is luckier than most. Her doctor did not ignore her symptoms."*

Although I am happy for Helen, I am especially pleased at the relatively casual acceptance of thallium stress testing in medical practice. In other words, the nuclear medicine procedure of performing stress testing and thallium SPECT imaging was presented as an appropriate next step for patients with suspected coronary heart disease.

I remember the first thallium stress tests we performed, particularly the fascination and excitement, as well as the resistance and caution of our cardiology colleagues, the reluctance of administrators to budget more equipment and space and the self-righteous refusal of health insurance providers to reimburse for the procedure. I also remember the abstracts and early manuscripts, written and read, the invited talks at nearby medical centers to explain the technique and the utility of stress thallium testing and the briefings of its merits to insurance company panels.

I felt pleased with the progress nuclear medicine has made in this important area and then was somewhat startled to realize that twenty years have passed since the introduction of thallium stress imaging.

A battle well fought. A battle won.

Stanley J. Goldsmith, MD

Editor-in-Chief, The Journal of Nuclear Medicine

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