



Power of Collaboration

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Over the past months, the Society of Nuclear Medicine has been successfully strengthening relationships with key industry leaders, allies in related organizations, and government regulators—thus raising the profile of SNM, its members, and the field of molecular imaging.

By bringing together stakeholders to address issues and opportunities—both formally and informally—we can create unique opportunities to solve problems, examine issues, and effect necessary and important change.

Collaborating with allies has the potential to reap rewards and impacts far beyond those that can be achieved by any one society in developing medical imaging and drug advances, in promoting the benefits of nuclear/molecular imaging, in developing relevant educational programs, and in advocating for the profession. SNM leaders have spent a great deal of time in developing partnerships, alliances, and networks.

For example, SNM works with the commercial representatives of its Nuclear Medicine Industry Leaders Working Group. Together, we support the FDA Coalition—working closely with agency representatives and participating in discussions related to the Radioactive Drug Research Committee and experimental drugs—and the Nuclear Medicine Workforce Study, designed to provide insight into personal demographics, employment, career paths, and workplace issues in the nuclear medicine profession.

SNM's upcoming 2006 Industry Molecular Imaging Summit will produce information that can be used by members of SNM's Molecular Imaging Center of Excellence to create topical activities and educational programs. Summit participants will examine molecular imaging basic research, clinical issues, instrumentation, and drug discovery.

In another new SNM initiative—the Industry Partnership Program—the society and industry will work together on a wide range of projects, networks, and events.

Both sides will promote research grants and scholarships; advocate for reform on Capitol Hill; and provide continuing education possibilities through courses, publications, and online offerings.



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SNM President

SNM officers—along with members of the Radiological Society of North America (RSNA), the National Cancer Institute (NCI), and the Food and Drug Administration (FDA)—participated in a meeting hosted by the American College of Radiology (ACR) on uniform protocols for imaging in clinical trials. At this meeting, a committee was organized to foster the establishment of widely acceptable uniform imaging protocols across the multiple sites and modalities needed for case accrual and statistical power through the expertise and participation of radiologists, nuclear medicine physicians, radiation oncologists and other clinical specialists, clinical trials experts, and industry representatives. Standard protocols that can be used to assess efficacy in therapeutic trials are of great interest to both trialists and industry professionals for accelerating the drug development process. An oversight committee was proposed to include permanent members from ACR, NCI, FDA, the Radiation Therapy Oncology Group (RTOG), and the American College of Radiology Imaging Network (ACRIN). I requested that SNM be added as an oversight member, which was accepted by the group. As part of this initiative, the society will form a clinical trials working group to interface with this committee.

By attending the meeting of the ACR Intersociety Committee, I had the opportunity to see how those in the radiology field view those issues relevant to SNM, nuclear medicine, and molecular imaging. In

meeting with American Society for Therapeutic Radiology and Oncology (ASTRO) members, SNM leaders discussed the potential of working together on future programs. We were invited to participate in that society's fall radio-immunotherapy course and will cosponsor this course in the future. Also, we were approached by members of the Society of Molecular Imaging (SMI) about cosponsoring a clinical course—a featured categorical on clinical molecular imaging—with RSNA and SMI at the next Annual Meeting, which we accepted. At that meeting ACR's leaders expressed willingness to assist SNM in the government relations area. We also agreed to reconstitute the ACR/SNM task force on PET/CT—although when necessary we will lead, not follow.

SNM intends to become a member of the National Coalition for Cancer Research (NCCR), a powerful organization of cancer-related advocacy organizations including the American Society of Clinical Oncology (ASCO), ASTRO, and ACR. NCCR has been very supportive of SNM activities related to funding for basic and clinical nuclear medicine research. Becoming an NCCR member offers SNM access to its fellow member organizations; we plan to join NCCR at the start of the next fiscal year.

SNM hopes to work cooperatively with the Nuclear Regulatory Commission (NRC) to develop regulations regarding the Energy Policy Act, specifically the dirty bomb language, which gives NRC unprecedented control over all accelerator-produced radioactive material. As part of government relations outreach, I met with George Mills, MD, director of FDA's division of medical imaging and radiopharmaceutical drug products, prior to the release of that agency's proposed rule to establish current good manufacturing practices for PET drugs—ensuring that they meet safety, identity, strength, quality, and purity requirements. In conjunction with this proposed rule, the agency has issued for public comment a revised draft guidance that provides additional information about approaches to

comply with the proposed regulations when they become final.

Your officers have met informally with RSNA leaders and reaffirmed a commitment to work together on various activities, such as a follow-up on the Molecular Imaging Summit and support for the National Radionuclide Production Enhancement program. Leaders from SNM, the Academy of Molecular Imaging (AMI), and ACR met with the Centers for Medicare & Medicaid Services (CMS) to discuss the current state of PET/CT imaging in oncology and develop a common understanding of the possible resource costs associated with the various imaging algorithms. The coalition's goal was to influence CMS's rulemaking process regarding coding for PET/CT and diagnostic CT imaging procedures in the same day. Ongoing dialogue with CMS is anticipated to continue to address the appropriate coding strategies focusing on the introduction of this new hybrid technology with SPECT/CT on the horizon.

SNM's leaders will rely increasingly on strategic advice from the society's committees, centers, and councils. An example of this comes from the members of the new Committee on Health Care Policy and Practice, which is charged with discussing current clinical practice issues that need policy decisions and making recommendations to the board of directors for action. Recently, committee chair Robert E. Henkin, MD, provided recommendations to board members about pay-for-performance issues, same-day CT/PET/CT, the ACR designated physician imager proposal, the SNM physician-directed quality program, and dissemination of information regarding credentialing of nuclear medicine physicians to read CT and PET/CT.

All these efforts reflect SNM's point of view: Collaboration is key if we are to be successful in promoting nuclear medicine and molecular imaging.

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