

## 2010: The Year in Review

Once again we mark the ending of a year and the beginning of a new decade. The year brought high and low points for health care, nuclear medicine, and molecular imaging.

At this writing, President Obama's health care reforms have passed Congress but may yet face strong challenges in the Supreme Court. The economy continues to be the ever-present theme behind almost every major health care story of the year. Although some signs indicate that 2010 was the beginning of a recovery that may pick up steam in 2011, other signs give us pause. The substantial federal funds invested in research through the American Recovery and Reinvestment Act of 2009 are tapering off, and promising programs initiated under the act must scramble for sustaining funds elsewhere. Despite talk of recovery, many hospitals and imaging departments are finding themselves challenged, with some reporting staff (including physician) reductions and other cost-saving measures that would have seemed unthinkable in years past. Reimbursement for services (including for PET, SPECT, and other molecular imaging) continues to be an ever-changing and sometimes bewildering series of unpredictable ups and downs, making it especially difficult for hospitals and practitioners to plan for future growth. A proposed 23% cut to Medicare reimbursements, for example, came within days of effective status at least twice (as reported in the pages of Newsline) but was ultimately reversed (for now) by Congress. Cardiac PET, however, will take an especially unwelcome hit in the new year.

At least so far, most of us who continue to be employed as nuclear medicine professionals can console ourselves that even though the practice setting (private, academic, or public) may be challenging right now, we still have our jobs. However, a debate is emerging (and will be covered in the coming months in an in-depth Newsline article) on whether new jobs really are available to nuclear medicine trainees. This is a serious problem that will require our collective attention in the coming months.

Positive news, though, continues to provide a balance. New medical schools are being created to replace retiring boomer physicians and to care for the coming wave of patients living longer and demanding increasingly sophisticated monitoring and care. It is clear that nuclear and molecular medicine will be not only integral parts of this care but areas in which the most exciting and paradigm-changing discoveries will be made. Each month we review more than 100 new articles from nonimaging journals and then choose fewer than 20 for summarizing as literature briefs in Newsline. The astonishing variety of techniques, the range of new molecular imaging and therapy approaches,

and the continuing refinements to established procedures make it clear that the quest for individualized patient care will continue to be significantly enhanced by developments in our exciting and rapidly changing field. As we have noted before in these pages, in less than a half century nuclear medicine has progressed from a field in which one practitioner could fairly competently master all the related knowledge and techniques to one in which subspecialization and continuing (lifelong) education are becoming routine.

On a personal note, we want to recognize 2010 as the completion of the seventh successful year of *The Journal of Nuclear Medicine (JNM)* under the direction of Heinrich Schelbert, MD, PhD, as editor-in-chief. He has announced that 2011 will be his final year. Heinz has expanded on the excellent foundation established by his predecessors and continued to build the reputation of and recognition for *JNM*. His keen judgment, good humor, and forward-looking leadership have propelled the journal to not only a leadership position among imaging journals but also a position of prominence in the larger field of medical publishing. This year, once again, *JNM* topped all imaging journals, with an impact factor of 6.424. It is worth noting that these remarkable successes with the journal have been achieved while Heinz has maintained a fair and personable relationship with authors and contributors—even when tough decisions had to be made. The journal's continued success is also the result of his collegial and productive work with SNM staff, who provide stellar support.

One aspect of *JNM* management in the past year has been modest belt tightening to ensure that the quality of the journal can be maintained even in difficult economic times. New page restrictions on Newsline mean that we will have to choose our content even more carefully in 2011. Reader response tells us that we should continue with our literature and news brief sections. At the same time, we will be responding to requests for more in-depth coverage of important issues in the field. Rather than a single "year in review" issue, we will be featuring a series of reviews on the state of molecular/nuclear imaging and therapy throughout the year. It is hoped this will give more individuals the opportunity to participate and share their perspectives. We hope that by year's end, these composite perspectives and reviews will provide the readership with a broad look into strengths and challenges currently facing our field.

Conrad Nagle, MD  
Editor, Newsline  
Nancy Knight, PhD  
Consulting Editor, Newsline