

Looking Back at 2010

Congress passed health care reform in 2010 that included sweeping changes. The new legislation created both challenges and opportunities for the SNM and nuclear medicine professionals. The challenges include cuts in reimbursements and intrusion on practices by radiology benefit managers and changes in regulations. We believe there are also opportunities for SNM and our profession to demonstrate the efficacy and benefits of nuclear medicine and molecular imaging in improving patient care and outcomes. Added to the complexities of health care reform, 2010 included the worldwide molybdenum shortage (^{99}Mo) that had a significant impact on our industry and our ability to deliver critical services.

No one is able to accurately predict the long-term consequences of health care reform for the health sector and patient care. Public budgets are more and more limited as the unemployment rate rises and the number of taxpayers falls. The goals of health care reform are to provide health care to more individuals and to control costs. The number and cost of advanced imaging procedures have grown disproportionately to the overall growth rate of health care, which appears to be in conflict with the drive to reduce health care costs. We can expect health care reform to put more pressure on nuclear medicine and molecular imaging as Congress focuses on costs and prioritizes primary care over specialized care. As a result, laboratory accreditation and physicians' adherence to evidence-based practice guidelines and appropriate use criteria will be increasingly important as a condition for reimbursement.

Molecular imaging is an essential component for the diagnosis and treatment of diseases and can contribute to more efficient and cost-effective health care by rapidly identifying the most appropriate therapies and sparing patients unnecessary treatments—especially unnecessary and expensive invasive procedures. Comparative effectiveness studies and well-designed clinical trials are necessary for a sound scientific foundation and clinical acceptance of high-technology imaging procedures such as PET/CT and SPECT/CT, especially with new tracers.

The entire world was affected by the economic recession and the isotope shortage in 2010. National and international outreach and collaboration are critical to address the issues created by the recession and isotope shortage. SNM's mission is to improve human health by advancing molecular imaging and therapy. A central goal is to ensure that patients continue to have access to critical medical diagnostic tests and high-quality care.

When I began my term as president of SNM in June 2010, the SNM board of directors (BOD) approved a new strategic plan for the next 3 y, keeping these challenges and

goals in mind. The strategic plan focuses on 6 goals that are important to the membership, each of which is described below.

(1) *Radiopharmaceutical availability.* The 2 reactors located in Canada and The Netherlands that supply most of the world's ^{99}Mo are now back in operation after major repairs and downtime. However, these reactors are aging, and new sources for ^{99}Mo are still needed. SNM continues to work with the medical community on long-term strategies for improving supply and on advocating for a domestic supply in the United States, in collaboration with other organizations.

Another issue is new U.S. Food and Drug Administration (FDA) regulations regarding current good manufacturing practice for PET radiopharmaceuticals. SNM has recently formed a coalition to negotiate with the FDA an easier process for new drug and device applications.

The SNM Clinical Trial Network (CTN) mission is to facilitate multicenter trials with standardization of imaging. Multicenter trials are necessary in order to get approval of new radiopharmaceuticals so they can be clinically available. Well-designed and well-standardized clinical trials are also necessary to demonstrate that including molecular imaging in patient care can improve patient management and outcome. The CTN has now qualified more than 40 imaging centers around the world and has developed a curriculum to educate these centers about the practice of clinical trials. As a result of our efforts, the National Comprehensive Cancer Network (NCCN) Specialized Research Consortium is considering using the services of the SNM CTN for qualification and education of imaging sites performing PET imaging in their upcoming multicenter trials.

(2) *Comparative effectiveness research and guidelines.* In 2010, the SNM Practice Guidelines were updated to include: recommendations about best state-of-the-art protocols and technology; more extensive radiation exposure information and radiopharmaceutical dose reduction, where applicable, to address concerns about radiation exposure; qualifications of personnel to address concerns about quality performance, interpretation, and radiation exposure; and more extensive references to support evidence. In 2010, 3 SNM guidelines, either new or significantly revised, were published in *The Journal of Nuclear Medicine (JNM)* and



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or the *Journal of Nuclear Medicine Technology*. A conjoint statement from SNM, the American College of Nuclear Medicine (ACNM), and the American Board of Nuclear Medicine on credentialing and delineation of privileges for therapeutic procedures using radiopharmaceuticals is published in this issue of *JNM*.

In 2009 and 2010, 8 American College of Radiology (ACR)–SNM practice guidelines were updated jointly and can be found on both the ACR and SNM Web sites. The ACR–SNM technical standard for procedures using radiopharmaceuticals that includes qualifications of personnel is being revised this year.

It is becoming obvious that clinicians who order molecular imaging procedures must be prime movers in the development of appropriateness criteria (AC). Therefore, SNM is collaborating with the ACR, the American College of Cardiology, the American Thyroid Association, and the NCCN on various appropriateness criteria and practice guidelines.

An update about comparative effectiveness research (CER) and guidelines was provided in the Leadership Update article in Newsline in the January 2011 *JNM*. A strategic plan has been drafted, and a session on CER will be held at the upcoming High Country meeting, March 11–16, in Steamboat Springs, CO.

Reduction of radiation exposure, when appropriate, is a high priority for SNM. The SNM Pediatric Council is actively participating in the Image Gently initiative to reduce radiation exposure in children, and SNM and the Society for Pediatric Radiology recently approved new North American guidelines for radiopharmaceutical doses for children, available on the SNM Web site and published in *JNM*. The Image Wisely program was launched at the 2010 Radiological Society of North America (RSNA) meeting, and the next step is forming an alliance of participating organizations. The SNM Committee on Councils has been charged with designing an SNM program to reduce radiation exposure and will collaborate with Image Wisely. In an effort to reduce radiation exposure for myocardial perfusion imaging, SNM appointed a task force with members from SNM's Cardiovascular Council and the American Society of Nuclear Cardiology (ASNC) to evaluate image quality using half-dose radiopharmaceuticals, when commercially available half-time acquisition software is used.

(3) *Advocacy at the federal level for reimbursement and regulatory issues.* SNM has increased its focus on advocacy programs because of the importance of advancing key SNM goals. The society recently contracted with a new lobbying firm, Arent Fox, to help with government affairs. A new director for health policy and government relations has been hired to replace Hugh Cannon, who retired. In addition, SNM created a new Commission on Government Affairs because of the increasing emphasis on government relations and the importance of SNM's involvement in legislative activities. This new commission will include

the chairs of the Government Relations and Coding and Reimbursement committees and other key SNM members who will liaison with the following organizations: the U.S. Department of Energy, the U.S. Nuclear Regulator Commission, the National Quality Forum, the Centers for Medicare & Medicaid Services, and the American Medical Association Physician Consortium for Performance Improvement. The goal of the Government Relations Commission is to provide representatives/champions to these organizations and to ensure SNM is up to date and informed on any changes or new developments.

SNM continues to work diligently to restore cuts in reimbursement and to correct technical inaccuracies. We are also collaborating with other imaging organizations, such as ACR and ASNC, who face similar issues.

(4) *Education.* One of SNM's top priorities is to keep physician, scientist, and technologist members abreast of rapidly changing technology and maintenance of certification requirements. The SNM Annual Meeting continues to be the primary educational venue for nuclear and molecular imaging professionals. The 2010 meeting in Salt Lake City, UT, was attended by approximately 3,000 professionals, including a large contingent of international members who represented 25%–30% of attendees and traveled to the United States to take advantage of our leading-edge education programs. The 2011 meeting will be June 4–6 in San Antonio, TX. The recent conjoint SNM/ACNM Midwinter Meeting, held January 20–23 in Palm Springs, CA, featured a CT workshop and a CTN educational session. As in previous years, SNM has also organized successful sessions at the RSNA, American Society for Radiation Oncology, and American Society for Clinical Oncology meetings.

SNM's flagship publication is *JNM*, which is currently ranked as the number 1 imaging journal, with an impact factor of 6.424, an all-time high. SNM's international reach and influence are reflected in *JNM*, with more than 50% of accepted manuscripts submitted from outside the United States. SNM also publishes the highly regarded *JNMT* and offers the journal *Molecular Imaging* to members at a heavy discount.

SNM Web-based education has focused on maintenance of certification with the Lifelong Learning and Self-Assessment Program for Part II and the Practice Performance Assessment Program for Part IV, in addition to modules of interactive CT and PET/CT cases and CT case review workshops. The full scope of SNM's educational resources and guidelines related to hybrid imaging was highlighted in a Newsline article in the October issue of *JNM*.

SNM created a new program—RIT Resources, Information, and Tools—this year as an education and awareness program to recognize the importance of radioimmunotherapy, a cutting-edge cancer treatment option for patients that holds excellent promise. The goals of this program include helping patients identify centers in their geographic areas

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that provide radioimmunotherapy and facilitating recognition of medical centers and medical staff that have adopted radioimmunotherapy.

The Center for Molecular Imaging Innovation and Translation (CMIIT) (formerly the Molecular Imaging Center of Excellence) is organizing a Molecular Neuroimaging Symposium to be held May 6 and 7 in Bethesda, MD. The CMIIT has also developed a curriculum for scientists that will be submitted to *JNM* and continues to work to incorporate more molecular imaging into the nuclear medicine residency training programs.

The ACR/SNM Joint Task Force on Training is in the process of finalizing the draft of a position paper summarizing training options for nuclear medicine and radiology residency programs and making recommendations for future training options.

(5) *International Education*. International attendance at the annual meeting and international submissions and acceptance rate to *JNM* are at a record high. Collaboration with international organizations is becoming more and more critical to our success. This year many SNM members and volunteers participated in international educational meetings on behalf of SNM at their own expense or with alternate sources of funding. This includes participation in the 10th Congress of the World Federation of Nuclear Medicine and Biology, held September 18–23, 2010, in Cape Town, South Africa, where SNM organized 4 sessions; the International Atomic Energy Agency (IAEA) technical meeting on “Future Trends in Nuclear Medicine” in May; the IAEA 2nd International Conference on Clinical PET and molecular NM (PET-II) that will be held in November 2011, in Vienna, Austria; and the Sino-American Conference organized by the Chinese Society of Nuclear Medicine, to be held February 24–27. In addition, SNM and the European Association of Nuclear Medicine continue to collaborate closely, including a joint symposium on PET in prostate cancer and organized sessions on topics of special expertise at their respective annual meetings.

New Membership Category

Did you know that SNM has a new membership category for molecular imaging laboratory professionals? If you are a non-PhD professional working in the areas of biomarker development, stem cell research and cell trafficking or CT, MRI, optical, PET, SPECT, or ultrasound imaging, you are invited to join SNM at a special discounted rate. If you have technical individuals in your lab, they will benefit from this special membership promotion. For more information, visit www.snm.org/categories or call Member Services at 703.708.9000.

(6) *Outreach*. Outreach and education to referring physicians, patients, and administrators/regulators is essential to accomplish some of the goals of the strategic plans. SNM has created a Committee on Outreach, which has developed a plan to coordinate formal contacts with various organizations of stakeholders.

(7) *Governance*. SNM restructured some of the governance during the past year to focus better on the new strategic plan. Most of the activities of the CMIIT have been integrated into the goals of the strategic plan. One new commission and 1 new committee have been created: the Commission on Government Affairs and the Committee on Outreach to coordinate activities related to these goals.

A new financial management tool was developed for the SNM BOD that allows a programmatic review of revenue and expense and also includes direct and indirect costs. Review of the budget under this new format has allowed the BOD to better manage our programs and direct our resources. For example, the BOD recently decided that SNM will no longer manage other smaller societies, because this activity was not cost efficient.

In the current economy and given new conflict of interest policies related to industry that limit sponsorships, SNM had to make significant cuts this year to balance its budget. The society remains on sound financial footing, and its financial resources and funding support its key initiatives moving forward.

For the first time, SNM is in the process of drafting a fundraising plan, in collaboration with the Education and Research Foundation (ERF). This fundraising plan will identify programs that are in the strategic and implementation plans of the various commissions to meet the 6 main goals of the SNM strategic plan. Many of these programs have an educational component. Although the ERF has traditionally funded grants and awards, the funding of other educational programs is within the mission of the ERF, which is to support education and research in nuclear medicine and molecular imaging. The vision of the ERF is to be an effective fund-raising organization in support of the strategic plan of the SNM. Because some donors are interested in named awards and programs, SNM is also working with the ERF on guidelines for named opportunities, both endowed and honorary.

We made significant progress in 2010 in focusing our society's energy and funding on key goals, advancing initiatives that improve patient care and outcomes, addressing the critical issue of ⁹⁹Mo shortage and new regulations, and developing a financial roadmap to support and sustain our programs in the future. We are excited about our progress and look forward to advancing these initiatives in 2011.

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