



BNCS Newsletter - March 2003

Dear Colleague

Since my last newsletter, the BNCS has been very active on different fronts and now that the hectic weeks of the first two months of 2003 are over, time has come to reflect on last year's performance and the challenges that we face in the months to come.

Meetings

The year started with the BNCS being heavily involved in two meetings. A two day meeting was organised by the BNCS and was held at Hartwell House, Aylesbury, on 25–26 January 2003. This meeting was to review the clinical evidence and other issues surrounding the use of MPS in the UK and to draft the submission of the myocardial perfusion scintigraphy appraisal to the National Institute of Clinical Excellence. This was a joint submission on behalf of BNCS, BNMS and BCS, who were invited consultees to the *NICE* appraisal. Representatives of the three societies attended the meeting, the participants of which included a faculty, invited discussants and other delegates with an interest in nuclear cardiology. Comments on the draft document from the discussants were incorporated and the final document was approved by the faculty and by officers of the three societies, the Royal College of Physicians and the Royal College of Radiologists and submitted to NICE on February 14th.

In the week before that, BNCS was actively involved in a one and a half-day course in clinical nuclear cardiology for SpRs. This was held at the National Heart and Lung Institute and it was organised by Professor Richard Underwood. Despite the short period of time between the course and our annual meeting in December, they were both successful and the participants enjoyed them thoroughly.

As usual, the *annual meeting* took place at the National Heart and Lung Institute, London, on December 2nd 2002. It focused on clinical excellence and new developments in nuclear cardiology. The first session was chaired by Dr. Malcolm Metcalfe and concentrated on quality and training issues. Dr. Mark Harbinson discussed clinical governance issues, audit and quality control. Dr. Andrew Kelion reviewed the current problems with nuclear cardiology training in the UK and suggested possible changes, including the idea of a unified training syllabus for Specialist Registrars from Cardiology, Radiology and Nuclear Medicine. Dr. Vahini Naidoo ended the first session by briefly reviewing new data from the recent ASNC meeting in the United States. The meeting continued with presentation of clinical cases by Dudley Pennell and our special overseas speaker Dr. Jeroen Bax (Leiden University Medical Centre).

The president of BNCS chaired the third session. Professor Richard Underwood gave the meeting a glimpse of the new European Society of Cardiology guideline statement on Imaging Left Ventricular Dysfunction. He emphasised that classical myocardial hibernation was best defined by the triad of akinesis, ischaemia and myocardial viability and suggested that these patients should be considered for revascularisation, whilst patients without viable tissue should be treated with medical therapy. The central role of

myocardial perfusion imaging, and the possible additional use of cardiac PET in selected cases was discussed. Following this, Dr. Jeroen Bax delivered the main lecture of the day giving a detailed overview of gamma camera coincidence detection imaging, cardiac PET for detection of viability and hibernation and high energy SPECT with FDG. He pointed out the current deficiencies in this area of the literature, and the importance of several ongoing trials such as the STICH in patients with ischaemic left ventricular dysfunction. Dr. Chee Loong (Royal Brompton Hospital) and Dr. Howard Gemmell (Aberdeen) then reviewed the UK experience with gamma camera FDG and NH_3 imaging. The meeting finished with Dr. David Stone leading a highly entertaining and interactive session during which he presented a variety of clinical scenarios and illustrated the appropriate use of several imaging techniques.

In the business meeting, which was held between the morning and afternoon sessions, we had the opportunity to discuss the future format of the annual meeting. Incorporation of a short session for presentation of original papers was proposed and in addition, there were proposals for separate sessions for technologists and physicists. In the absence of a clear majority, no decision was taken in either of the above issues. The financial situation of BNCS was also discussed and despite our healthy balance, it became clear that every possible attempt should be made to increase the membership numbers and hence the financial strength of the Society.

BNCS in a changing world

It is our view that a multidisciplinary and dynamic society should respond positively to a changing environment by broadening its base and encouraging active participation of medical and of non medical staff. To this end, the BNCS, together with the Royal Brompton hospital will organize a meeting in August specifically dedicated to the needs of technologists and specialist nurses. A transformed and more representative society also needs a different format of the annual meeting and I can assure you that the BNCS officers will do everything possible to make it happen.

An important development which will affect the structure and function of the BNCS is a closer link with British Cardiac Society (BCS). Last month the President of BCS announced that its members have overwhelmingly supported the idea of an associated membership to all members of the affiliated groups. This means that all BNCS members who are not eligible to become ordinary members of BCS will automatically have the opportunity to become associated members of BCS. Such members may be considered for ordinary membership of BCS after two years if they are; a) NHS/private healthcare employees with a clinical role in primary, secondary, or tertiary care or b) university employees with cardiovascular research interests/responsibilities.

We believe that by strengthening the links with BCS, the BNCS will benefit by the experience and significant contribution of BCS to the clinical community and society in general. These developments, together with the formation of the European Council of Nuclear Cardiology (ECNC) by members of the nucleus of the working group in Nuclear Cardiology of the European Society of Cardiology and members of the Cardiovascular Committee of the European Association of Nuclear Medicine indicate that the BNCS enters into a new era. Its active participation not only at national, but international level, is now more crucial than ever before.

We are excited about the challenges that we face as a society but we are also pleased with what we have accomplished over the last twelve months. The guidelines for tomographic myocardial perfusion imaging will be published in the HEART later this year and the editorial board of Nuclear Medicine Communications will also ask permission for a simultaneous publication. In addition to that, the guidelines will appear at the website of all three Societies, BCS, BNMS and BNCS. Important progress has also been made in the nuclear cardiology supplement to HEART and we are hoping to have this published by the end of 2003.

Education

On the educational front the BNCS, in liaison with the BCS, has participated actively in the creation of the curriculum in advanced training of SpRs in cardiology. In addition to that, significant progress has been made towards a common training curriculum for cardiology, radiology and nuclear medicine doctors who wish to practice nuclear cardiology. Preparations have also started for drafting a curriculum for technical staff. A form of accreditation for both medical and non medical staff similar to that of the British Society of Echocardiography has also been discussed and it could be the next step if you approve it. Your views will be extremely helpful to us and please take into consideration that the ECNC will make similar proposals soon.

Future meetings

Please make a note in your diary about the following important meetings and forward these dates and topics to your colleagues who are not members of BNCS; a) Spring meeting of British Nuclear Medicine Society, Manchester (April 29th – May 1st), a nuclear cardiology session has been allocated for Thursday (May 1st) morning and b) a satellite symposium during the British Cardiac Society meeting in Glasgow (April 28th – May 1st) on Tuesday 29th April 2003 from 2 pm to 3.30 pm. The topic of the symposium is 'imaging the failing heart'. Another very important meeting is happening at the same time in Florence and this is the 6th International Conference in Nuclear Cardiology (ICNC-6). For these and others events with nuclear cardiology topics, please visit our Website (www.BNCS.org.uk) and do not hesitate to be directly in touch with us if you wish to discuss anything further.

With very best wishes for a healthy and productive 2003.



Dr Constantinos Anagnostopoulos
President, BNCS