A Decade of the Asian Regional Cooperative Council for Nuclear Medicine: A Path to Reduce Heterogeneity of Nuclear Medicine Practice in Asia

Asia is huge; more than 60% of the global population and economy are in Asia. Unfortunately, this is not true in nuclear medicine. Some countries are benefited by advanced technologies and knowledge of nuclear medicine and molecular imaging, while more Asian countries are suffering from limited facility and personnel related to one of the most helpful medical wonders. Some countries like Cambodia and Laos do not have any nuclear medicine facility and personnel.

Heterogeneity is a reality and an obstacle to overcome for nuclear medicine practice in Asia. The activity of nuclear medicine practice is not related to the economic status of the country. It is obvious if we consider the gross domestic product (GDP) and facilities of nuclear medicine in each country. In North East Asia, one country has a GDP of ~1 trillion USD and ~150 PET/CT in 2010, while one country has a GDP of ~6 trillion USD and ~100 PET/CT at the same time. In South East Asia, one country has a GDP of ~200 million USD and has eight PET facilities, while another country has a GDP of ~700 million USD and has only two PET facilities at the same time.^[1] Therefore, it is evident that the economic power is not a sole factor to provide a successful practice of nuclear medicine. There can be more factors other than economic power that contribute to the promotion of clinical PET. Public awareness is definitely one of them. Man power as well as leadership is also needed. International cooperation can contribute to build them.

International communication and cooperation among nuclear medicine societies are mandatory to reduce heterogeneity and to enhance promotion of nuclear medicine pracitce in Asia. The Asian Regional Cooperative Council for Nuclear Medicine (ARCCNM) was founded in 2000 and officially started in Feb. 2001 by pioneers in Asia, including Drs. M.C. Lee (Korea),



M.A. Karim (Bangladesh), J.S. Masjhur (Indonesia), Y. Suzuki (Japan), X.J. Liu (China), F.X. Sundram (Singapore), C.M. Tong (Hong Kong) and J.K. Chung (Korea). ARCCNM began with 13 member states but later grew to include 18. Its main objectives are to establish liaisons with the official national bodies of nuclear medicine and to enhance regional scientific activities by way of conferences, seminars and educational programs, by which communication between experts, trainees and fellows in the field may be facilitated. [2] The founding chairman was Dr. M.C. Lee. Chairmanship was succeeded by Dr. J.K. Chung in 2003 and by Dr. H.S. Bom (Korea) in 2010. ARCCNM has three regional chapters: Southeast Asia, South Asia and Far East Asia, which were represented by co-vice chairs Drs. M.A. Karim, J.S. Masjhur and Y. Suzuki, respectively. The main objectives of ARCCNM are to foster Asian regional cooperation in promoting nuclear medicine in Asian countries, particularly in developing and less-developed countries, to establish liaisons with the official national bodies of nuclear medicine, to encourage research collaboration, to work out training programs, to communicate with international organizations, to enhance regional scientific activities by way of conferences, seminars and educational programs, to facilitate exchange programs for experts, trainees and fellows and to organize Task Force Groups.[3]

ARCCNM has held annual general meetings associated with national or international meetings the last 10 years. The first annual meeting was held in 2002 in Dalian, China, with approximately 60 participants. The second annual meeting was held in 2003 in Dhaka, Bangladesh, February 6-8, 2003, with 300 participants, including 100 from abroad. The third annual meeting was merged with the congress of the Asia and Oceania Federation of Nuclear Medicine and Biology and was held in 2004, in Beijing, China. The fourth annual meeting was held in 2005 in Bangkok, Thailand, and the fifth meeting was merged with the 9th World Congress of Nuclear Medicine and Biology in 2006 in Seoul, Korea. The sixth annual meeting was held in conjunction with the 2nd International Conference on Radiopharmaceutical Therapy (ICRT-2007) in Ulaanbaatar, Mongolia. The seventh annual meeting was merged to the 9th Asia Oceania Congress of Nuclear Medicine and Biology (9th

AOCNMN2008) in New Delhi, India. The eighth and ninth annual meetings were associated with national nuclear medicine society meetings: in 2008 in Jogjakarta, Indonesia, and in 2009 in Dahka, Bangladesh. The 10th annual meeting is in conjunction with the 4th International Conference on Radiopharmaceutical Therapy (ICRT-2011) in Ho Chi Minh City, Vietnam.

The Asian School of Nuclear Medicine (ASNM), which is an educational arm of ARCCNM, was founded in 2003. Dr. F.X. Sundram (Singapore) was elected as the first dean of ASNM, and was succeded by Dr. T.O.L. SanLuis (Philippines) in 2007. ASNM aims to facilitate the spread of knowledge in nuclear medicine from the more-developed countries to the less-developed ARCCNM member states. The School aims to do this by fostering education in nuclear medicine in the Asian countries, promoting training of nuclear medicine physicians, technologists, radiopharmacists, medical physicists and other allied professionals, in cooperation with government agencies, universities, national societies and industry partners, assisting in national and regional training courses, awarding continuing professional education (CPE) points and providing regional experts for advanced educational programs, standardizing nuclear medicine education and training throughout ARCCNM member states and working toward awarding diplomas or degrees/ continuing education (CE) units in association with recognized universities/hospitals by distance learning, practical attachments and other scholarly activities. From its establishment, ASNM has been actively involved in several teaching courses and activities. It has initiated some national training programs in nuclear medicine and has spearheaded educational sessions in various regional and national congresses. Furthermore, ASNM has initiated the survey of training programs in member states, which will be critical in the development of a template for a standardized program for nuclear medicine for the region. Data collection on human resources (MD, PhD, Tech, etc.), equipment and instrumentation, procedures and training formats is likewise part of the effort to come up with a standardized training program. [4] ASNM actively joins the training programs of the International Atomic Energy Agency (IAEA) in Asia.

Role of govenments in each country is essential for the promotion of nuclear medicine, and it is especially true in developing countries. The importance of active communication between the nuclear medicine community and the government cannot be overemphasized. ARCCNM can support activities of societies of nuclear medicine in Asian countries. International cooperation between Asian governments is gradually increasing, and shall reduce heterogeneity of nuclear medicine practice gradually but concretely.

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