



Prairie

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July 27, 1998

Senator Carol Moseley-Braun
320 Hart Senate Office Building
Washington, DC 20510-1303

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Dear Senator Moseley-Braun:

I am writing to support the Nuclear Regulatory Commission's Advisory Council for the medical use of Isotopes (ACMUD) endorsement of streamlining the radiation safety training and experience requirements for diagnostic nuclear cardiology to 120 hours because of its minimal risk to patients and public safety. The current training level is 1200 hours.

The American College of Cardiology has long advocated a more reasonable level of training requirement.

This is becoming critically important because of something called "intravascular brachytherapy". Currently this being performed only in large academic medical centers with strict oversight. The procedure is experimental but allows placement of various types of nuclear material into the coronary artery to reduce restenosis.

I am writing particularly because there is "intramural squabble" between radiologists and cardiologists. Radiologists tend to be protective of their "turf". This is a natural concern on their part. Radiologists do provide many valuable services; however, this is one that will really have to be moved over into cardiology since radiologists are not trained to do the coronary angiograms, stent placements, and balloon dilatations that this type of therapy requires. We certainly would be willing to work with radiology, but we simply do not wish to have onerous regulations that restrict patient care.

In summary, this is a complicated issue but I think the proper thing to do is to support the Nuclear Regulatory Advisory Council's recommendation to streamline safety training to 120 hours. This is quite adequate for the type of radiation involved and would improve patient care and accessibility of this very promising experimental approach.

Thank you for your consideration.

With kind regards,

H. Weston Moses, M.D.
HWM:bw

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