

《Panel Discussion》

1. Recent Development of Nuclear Medicine in Korea

Myung Chul Lee

Department of Nuclear Medicine, Seoul National University Hospital, Korea

Nuclear medicine have contributed consistently to patient management for more than 35 years in Korea since the beginning of Nuclear medicine started in 1959 when was only 4 years later than Japan. The medical institutes handling radionuclide began to increase rapidly and there are currently 110 hospitals. Most of the radioisotopes utilized in our country (99.8%) are purchased from abroad (2332 Ci every year) for diagnostic tests. Regarding to the change in the number of *in-vivo* studies according to the type of the study, liver scan decreased while bone scans and SPECT studies have rapidly increased. The radioimmunoassay for liver antigen/antibody assays became the main studies in the early 80s, while thyroid function tests and tumor antigen marker assays have been continuously increasing in 90s.

The most contributing factors for the recent development of nuclear medicine in Korea (between the mid-1980s and now, after the 3rd AOCNM), are wider utilization of SPECT for neurological and cardiovascular disorders, more widely employed multi-head

SPECT, production of more domestic radionuclide or radiopharmaceuticals, promotion of PET technology and, more than anything else, establishment of Korean Board of Nuclear Medicine.

There are 143 gamma cameras, 113 computer systems, 114 gamma counters, 27 beta counters distributed around the nation. In particular, the installation of SPECT machines have been rising rapidly. Currently we have 23 dual head and 8 triple head SPECT machines in our country. In 1994 the first two PET Centers were established in Seoul National University Hospital and SamSung Medical Center. Those Centers have already achieved reliable and successful routine clinical and research PET service. In last February, the Korean Board of Nuclear Medicine has been approved finally by the Government officially and is expected to be enforced starting this year. The training program for 4 years as a primary board should include 6 months in diagnostic radiology, 6 months in internal medicine, and 6 months in other specialties and then, 2 and half years should be devoted to nuclear medicine.