

President's Page

Dear Colleagues,

There have been two recent developments of significant relevance to the future of our Society:

Firstly, your Board has been discussing for several years to what extent our Society should incorporate Cardiac CT (CCT) into its mission. Given that this issue is far-reaching, with substantial impact on our Society, your Board voted at the Annual Scientific Sessions in Miami in January to poll our membership on this issue. Thus, a membership ballot went out in February asking this simple question:

Should SCMR:

- Keep its mission unchanged as a society primarily focused on cardiovascular MR, but with regular coverage of cardiovascular CT at the annual scientific sessions.

Or

- Change its mission and become a society for both cardiovascular MR and CT, focused on both modalities.

This was accompanied by a summary of the arguments for both options, as shown below:

Some reasons for SCMR to maintain its core mission as a society primarily focused on CMR, but with regular coverage of CCT at the annual scientific sessions

- CMR has a broad spectrum (function, morphology, fibrosis, flow, perfusion, metabolism, spectroscopy) of powerful clinical applications. Therefore, CMR needs a dedicated Society focused on development, education, and clinical application of these methods. The inclusion of CCT into our core mission will lead to a loss of focus, dilute our efforts and slow the evolution of CMR into a competitive clinical tool.
- The Society for Cardiovascular CT already exists for those interested in CCT; it is too late for SCMR to start a competing focus on CCT. Improved dialog between CCT and CMR users at SCMR meetings and close collaboration with the SCCT are preferred.
- The inclusion of CCT into our core mission would ostracize some members, in particular MR physicists and basic MR scientists, who would shift their activities and presentations to other dedicated MR societies. These are the investigators most needed to drive the future of CMR. Thus, overall membership may also decline.
- The inclusion of CCT into the SCMR's core mission would necessitate an increase in the parallel sessions at our Annual

Scientific Meetings, thereby fragmenting/diluting the experience of attendees.

- While CCT and CMR are both tomographic imaging approaches, they are very different with respect to their technical potential and challenges. CMR research is much more targeted towards molecular and multi-functional strategies, while CCT is focused on morphology.

Some reasons for SCMR to change its mission and become a society for both CMR and CCT, focused on both modalities

- Many SCMR members now perform CCT as well as CMR. It is likely that issues on reimbursement and education will be equally important for our members with regard to both CCT and CMR.
- Attention to CCT and CMR at the SCMR Annual Scientific Sessions will enable members to get the newest information on both modalities at one meeting, and members will prefer to attend one rather than several meetings on CMR and CCT per year.
- SCMR will be the major scientific group to evaluate the advantages and disadvantages of CCT vs. CMR. Nonbiased comparison of the modalities will be increasingly important for members of the Society.
- Future membership growth will likely be augmented by encompassing a dual mission on cardiovascular MR and cardiovascular CT. On the other hand, membership and attendance at annual meetings may considerably decline if CMR and CCT are not dual missions of the Society.

The ballot closed on 3 April 2006. Impressively, 690 ballot sheets were returned: 454 (66%) voting to keep the SCMR mission unchanged and focused on CMR and 236 (34%) voting to change our mission to include CT. Thus, a clear two-thirds majority voted for keeping our mission unchanged and focused on CMR.

While the SCMR Board of Trustees will have to vote formally on this issue again at our Trustee meeting in July, the ballot has provided your Board with a clear direction as to where our membership stands on this issue and what it expects SCMR to concentrate on in coming years. However, your Board also realises that approximately one-third of our members wanted to expand our Society to CT, and this will certainly have to be reflected in our future efforts, with ample coverage of Cardiac CT at our Annual Scientific Meeting, development of joint initiatives with the SCCT, etc.

Secondly, shortly after our Annual Scientific Meeting in January, Kent Van Amburg resigned as Executive Director of

SCMR. The SCMR Executive Committee, in close collaboration with Gregg Talley and Charles Sapp from Talley Management Group, undertook a thorough search process, which led to three candidates being interviewed on 22 May 2006. The interview panel was unanimous in its decision to appoint Deborah Berkowitz, currently our Acting Executive Director, to this post. Deborah brings extensive experience and plenty of

enthusiasm to the SCMR Executive Director position. I invite you to join me in welcoming Deborah to her new assignment, and I look forward to working with her in the future to further develop the goals and mission of the SCMR.

Stefan Neubauer, MD, FRCP
SCMR President