REGISTRATION & ABSTRACT INSTRUCTIONS

The 4th Annual General Meeting of ARCCNM
August 15 – 17, 2005 Bangkok, Thailand

1. Abstract must be submitted **by June 30, 2005.**
2. Registration must be made **by June 30, 2005.** After this date, the hotel reservation will be subject to space availability at another hotel.
3. After the evaluation of abstracts submitted, the participants will be financially supported by the following three grades.

   A: Round-trip Airfare / Accommodations B: Round-trip Airfare C: Accommodations

   As for the accommodations, two participants will have to share a room together due to the limited budget. Participants who want to use a single room separately are required to pay a half of a room rate. Also, please note that we support the room charges only. The extra expenses, such as meal and international phone calls, mini bar etc., are not included.
4. This is the Fourth Annual General Meeting of ARCCNM, which is very important for the promotion of Nuclear Medicine in Asia region. I expect that ARCCNM members' active participation and would appreciate your big contribution to this coming occasion.

Thank you.

June-Key Chung, M.D.
Chairman, ARCCNM

Reproducibility of an automatic quantitation of regional myocardial wall motion and systolic thickening on gated 99mTc-sestamibi myocardial SPECT

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We investigated the reproducibility of an automatic quantitative algorithm for measuring regional myocardial wall motion and systolic thickening METHODS: 99mTc-sestamibi gated myocardial SPECT with dipyridamole stress was performed twice consecutively on 31 patients with known or suspected coronary artery disease, with the patients in the same position for each scan. With AutoQUANT software, segmental wall motion and systolic thickening were quantified automatically and expressed in millimeters and percentage increase, respectively, for 20 segments. Afterward, the correlation and agreement between repeated measurements were investigated, and the influences of wall location, perfusion grade, and partitioning of the myocardium on reproducibility were evaluated by ANOVA and t testing. RESULTS: High correlations (r = 0.95 for wall motion and 0.88 for systolic thickening) and good agreements (weighted kappa = 0.81 and 0.71, respectively) were obtained from repeated measurements on consecutive gated SPECT. Changes in wall location and perfusion grade did not cause significant differences between repeated measurements (P > 0.05 in ANOVA and t testing), but a change in partitioning did. On Bland-Altman analysis, 2 SDs for repeated wall motion and for systolic thickening were 2.0 mm and 20%, respectively. CONCLUSION: The automatic quantitative algorithm for myocardial SPECT provided by AutoQUANT software has good reproducibility under diverse conditions. A change of motion > 2.0 mm or a change of systolic thickening > 20% can be regarded as significant during a follow-up study using this software.

∗ Please complete this form and send it either by mail or fax to the ARCCNM Secretariat.

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