

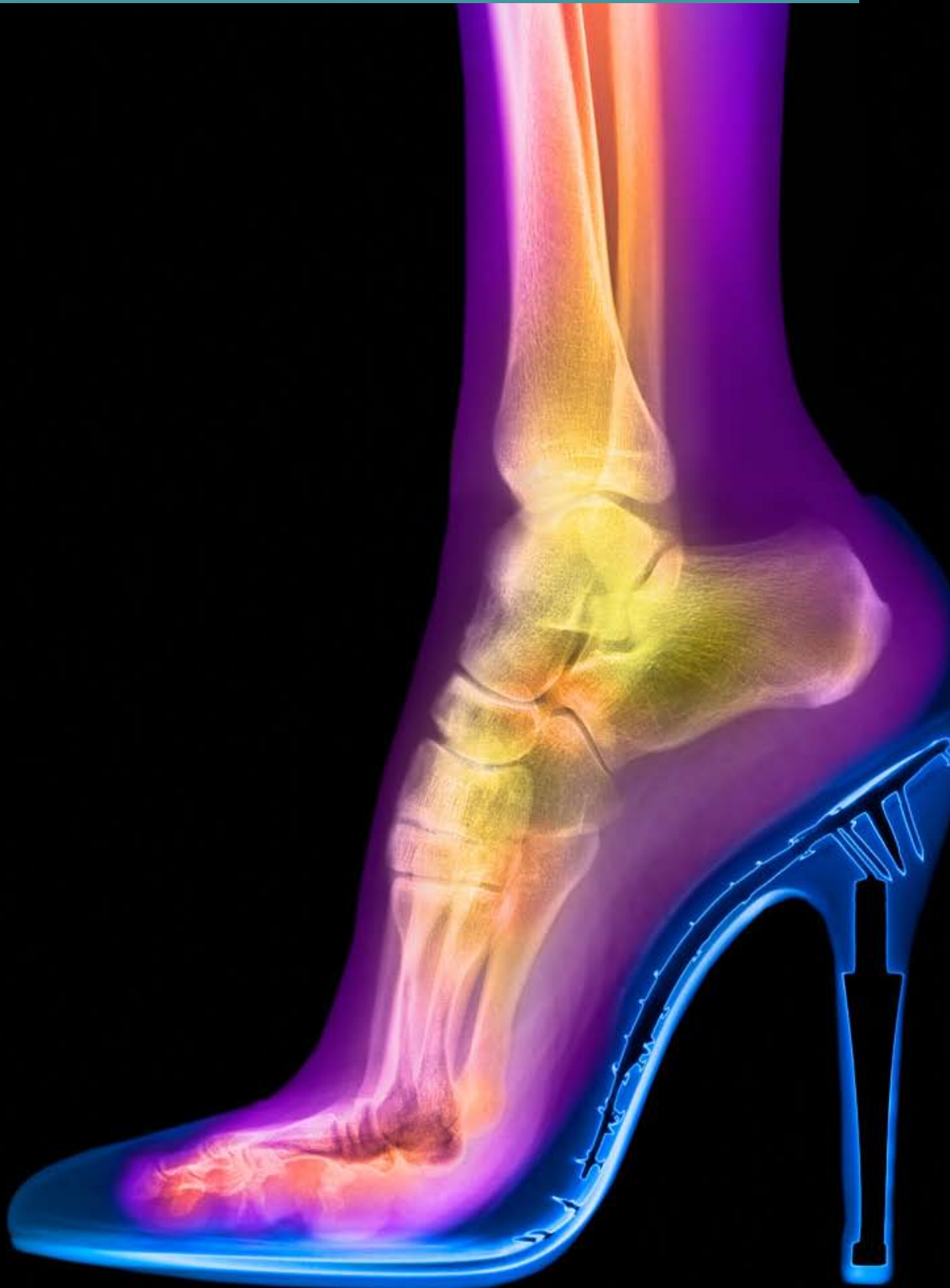


News

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*Sonography | Radiology | Oncology | Radiography | Dosimetry | Physics | Health Informatics | Industry | Surgery | Radiation & Cancer Biology
| Management | Molecular Imaging | Engineering | Radiation Protection | Radiochemistry | Radiobiology | Magnetic Resonance | Nursing*



Art by Hugh Turvey
BIR Artist in Residence

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Session 1 October 2010 – 30 September 2011

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Here's a new easy way to raise money for THE BRITISH INSTITUTE OF RADIOLOGY that does not involve parting with extra cash.

Everyclick.com has launched a new way to donate – it's been christened "Give as you Live". It means you can search the web, shop on line from your favourite retailers, trade on eBay and raise money for THE BRITISH INSTITUTE OF RADIOLOGY.

You get great search results from Yahoo!, content from leading shopping providers and access to all eBay auctions. Every search you make creates a donation for charity.

Our special address is <http://www.everyclick.com/bir>, all searches, shopping and eBay activity made from here will raise money for us.

Make sure you sign up so you can track your giving – it updates every 3 minutes, you'll be amazed how quickly it adds up!

Everyclick has already raised over £1,301,644 for a wide range of charities around the UK, and was voted website of the year 2008 as well as being recognised as a top 100 media tech company 2009.



Discover the new way to give to THE BRITISH INSTITUTE OF RADIOLOGY. Give as you Live.



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We need your support...donate today!

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Gift Aid Please treat all gifts of money that I make today, have made in the past, and will make in the future to The British Institute of Radiology, as Gift Aid donations. I am a UK taxpayer.

By donating to The BIR, you will help to develop current educational projects such as:

Radiology History Stories

This project is an archive of primary source material, generated by those with direct experience of practice of radiology and radiotherapy during the development of the subject and is available to the general public.

Need a meeting room?

Central London meeting rooms available for hire from £88!

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At the heart of Portland Place stands an elegant Grade II listed building, home to The British Institute of Radiology (BIR).

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SCIENTIFIC MEETINGS

TRAINEE EVENT

The British Institute of Radiology's Trainee Committee is proud to announce the first ever event for trainees, by trainees.

Multidisciplinary Collaboration: Training and Beyond

Friday 10 December 2010
Venue: The British Institute of Radiology, 36 Portland Place, London, W1B 1AT

Join Dr Erika Denton, Prof Andy Adam, Dr Stephen Davies and many more as they address the future of radiology and its impact on today's trainees. This multidisciplinary meeting will cover important topics such as radiology in the 21st century, radiology within the NHS and independent sector, challenges of research in radiology and international radiology. The day will be followed by the BIR Trainee Christmas Bash.

Register online at: www.bir.org.uk

CALL FOR PAPERS

Paper poster presentation and competition!

- Abstract Deadline: Friday 29 October 2010
- Abstracts are invited on the following topics: scientific/research or audit
- Accepted posters will be displayed at the meeting and will compete to win the best poster prize!
- Accepted presenters can register at the BIR trainee member rate of £48

Interested in participating?

Submit an abstract of up to 250 words to
Dr Amrita Kumar
amrita.kumar@bircommittee.co.uk

Late Effects of Radiotherapy

6 September 2010 | The British Institute of Radiology

The meeting aims to raise awareness of the extent and prevalence of radiotherapy late effects, identify key toxicities and assessment strategies and explore late effect management and best practice approaches to care. It will include presentations on 'Optimizing assessment and identification of late effects' by Dr Susan Davidson from Christie Hospital Manchester and 'Late effects of radiotherapy in young adults: management plans longer term' by Dr Diana Greenfield, Sheffield Teaching Hospitals NHS Foundation Trust.

This meeting would be of interest to: Clinical oncologists, GPs, Therapy Radiographers, Specialist Nurses and Students.

Imaging in Stroke – An Update

8 September 2010 | The British Institute of Radiology

This meeting will give an overview of the National Stroke Strategy, the demand and expectations it places on the Radiology departments across the country, the challenges and potential solutions. The management of Stroke is discussed in detail with particular emphasis on the Imaging aspects. The meeting will include a presentation and live demonstration from Miss Stephanie Banfield, St Thomas' Hospital London on 'First Hand experience of Telemedicine' and 'Determining the most effective imaging protocols from a Radiographers perspective' by Mr William Bailey, Manchester Royal Infirmary.

This meeting would be of interest to: Radiologists, Stroke Physicians, CT/MR Radiographers and other Medical Staff involved in Stroke care.

New Frontiers in Paediatric Oncology

28 September 2010 | The British Institute of Radiology

This meeting will explore paediatric aspects of PET CT in children's cancer imaging and will discuss novel imaging techniques and image-guided therapy in paediatric malignancy. Topics will include a practical guide to PET CT in children, brain tumour imaging, radio-frequency ablation and MR spectroscopy. This meeting includes talks from BIR President Dr Stuart Green, Queen Elizabeth Hospital Birmingham, on Proton Therapy and ADC mapping in MRI by Dr Oystein Olsen, Great Ormond Street Hospital.

This meeting would be of interest to: Radiologists (especially Paediatric Radiologists), Radiographers, Nuclear Medicine Physicians, Paediatric Oncologists, and Radiology and Paediatric Oncology Registrars.

Molecular and Functional Imaging in Clinical Practice

30 September – 1 October 2010 | The British Institute of Radiology

This event will discuss the methodology, applications (both clinical and research) and educate through workshops in these modalities. The latest applications of molecular imaging will be covered along with the teaching of theory and practical aspects. The programme is divided into a day dedicated to neurology and a second day dedicated to oncology. This meeting includes the illustrious Silvanus Thompson lecture and award which will be presented to Martin Leach, Institute of Cancer Research and four workshops including ultrasound & elastography and perfusion CT and MRI. This meeting would be of interest to: Radiologists, Clinical Scientists, Physicists, Researchers and Nuclear Medicine Physicians

NEW BJR HONORARY EDITOR (MEDICAL)

The BIR is pleased to announce that Dr Jane Phillips-Hughes has taken on the role of the BJR's Honorary Editor.

Jane Phillips-Hughes has been a consultant radiologist in Oxford since 1995. She graduated from the University of Wales College of Medicine in 1986 and undertook her radiology training in Cardiff between 1989 and 1995.

Specialising in interventional radiology, her main areas of interest are in gastro-intestinal and hepato-biliary radiology, ERCP and Endoscopic Ultrasound.

She has an active interest in training, having been Training Programme Director in Oxford for five years, has sat on and chaired the FRCR 1 Physics Working Group, and has recently joined the Speciality Training Advisory Committee of the RCR.

She joined the Editorial Board of the BJR as an Associate Editor in 2004 and became a Deputy Editor in 2008.

The BIR would like to thank outgoing Honorary Medical Editor, Dr David W Pilling, for his dedication and hard work on the journal, having spearheaded many of the new developments which will be implemented in 2011.

We are confident that Dr Phillips-Hughes will be an excellent successor and look forward to working with her in this new role.



BJR - Published online-only from January 2011

The British Journal of Radiology (BJR) will be distributed as an online only service starting in 2011. From January 2011, the BIR will modify its journal distribution model to meet changing subscriber needs and to remain prominent within the fast evolving STM publishing industry. The BJR will be distributed as an online service. A new journal website will be also launched in January 2011, and will be significantly enhanced with the latest Web2.0 technologies.

BJR – The news magazine of The British Institute of Radiology

BIR members already have access to the journal's comprehensive electronic archive, which dates back to 1928. In addition, they will now receive a printed magazine, which offers a fresh look at the radiological community. This magazine will contain the abstracts of full papers appearing in the online journal, while highly read articles, such as reviews, Hounsfield reviews, short communications and commentaries will be featured in full. This exciting new publication will also feature news about the BIR's activities and charitable mission, news from the radiological community, radiological history, training and management perspectives, technology updates and other topics of interest to the BIR readership.

BJR / SEPT

The BJR September 2010 issue is now available online. If you haven't had the opportunity to check it out yet, here are some of the articles which can be found on <http://bjr.birjournals.org>

FULL PAPERS

Is there a causal relationship between the hypoxia–ischaemia associated with cardiorespiratory arrest and subdural haematomas? An observational study

Natural history of true pancreaticoduodenal artery aneurysms

Proton-MR spectroscopy and white matter hyperintensities in idiopathic normal pressure hydrocephalus and other dementias

Can diffusion weighted imaging distinguish between normal and squamous cell carcinoma of the palatine tonsil: A preliminary study

Cytogenetic assessment of heterogeneous radiation doses in cancer patients treated with fractionated radiotherapy

Visual grading regression – analysing data from visual grading experiments with regression models

Significance of manipulating tumour hypoxia and radiation dose rate in terms of local tumour response and lung metastatic potential, referring to the response of quiescent cell populations

Editorial
Review article
Short communication
Pictorial review
Case of the month
Case reports

President's Conference Review

President's Conference Review

PRESIDENT'S CONFERENCE 2010

MANAGING RESPIRATORY MOTION IN RADIOTHERAPY: BIR PRESIDENT'S CONFERENCE FOR 2010

Movement associated with respiration has always been present in radiotherapy, but it is only relatively recently that technologies have become widely available to mitigate its effects. Despite wide availability, these technologies are often little used in busy departments.

It was with these issues in mind that I chose this subject for my 2010 BIR President's Conference, to bring together experts from around the UK, Europe and the US to discuss and learn from each other. As is traditional for meetings of the Institute, there was participation from members of all of the professions involved in clinical radiotherapy, plus contributions from the physics research community.

Since this was the President's Conference, I could also take the opportunity to include two really wonderful BIR Prize lectures 2010. Dr Chris Nutting of the Royal Marsden Hospital delivered the MacKenzie Davidson Memorial Lecturer on the Clinical Evaluation of Intensity Modulated Radiotherapy for Head and Neck Cancers. The Godfrey Hounsfield Memorial lecture for 2010 was delivered by Professor Bleddyn Jones of the Gray Cancer Institute on Progress in Charged Particle Radiotherapy: From Accelerator Physics and Radiation Biology to Improved Clinical Outcomes. Both were inspiring lectures from leaders in our field.



BIR
The British
Institute of
Radiology

Dr Stuart Green presenting
Chris Nutting with an award
for the Mackenzie Davidson
Lecture

MEETING SUMMARY

The meeting featured six speakers from overseas including a very strong contingent (four speakers) from the internationally leading centres in the Netherlands, one from the US and one from Spain. With the remaining speakers drawn from the UK, this was a truly international meeting and a great treat for the full house in Portland Place. The format over two days allowed plenty of time to explore the issue in depth and to really tease out the important points. There was plenty of time to focus on technical issues such as:

- Pre-treatment imaging where the issues of PET and 4D CT were explored
- On-treatment imaging and the role of implanted markers
- Phantoms for quality assurance
- Treatment delivery, where clinical speakers using the very latest image guided accelerator technologies from Varian/BrainLab and Accuray/Cuberknife were included, along with those from centres obtaining excellent results with more conventional technology.
- Overviews of experience from leading UK centres (Clatterbridge and the Royal Marsden)

The two-day format also allowed some presentations' which were important but would perhaps have been excluded from the normal tight restrictions of a one-day meeting. This included a highly entertaining talk on the mechanics of breathing and breath-holding from Dr Mike Parkes (University of Birmingham), and some views of the future of radiotherapy from Jan Lagendijk (Utrecht) on MRI guided linacs and Jason Cashmore (Birmingham) on use of a linac with the flattening filter removed.

Overall we learned that large improvements in patient outcomes in terms of local tumour control are now achievable for small stage I and II lung tumours using very short fractionation schemes delivered at high dose per fraction. After careful evaluation at a number of centres, fractionation schemes seem to be converging at 3 X 20 Gy (or 3 x 18Gy at some centres) for small tumours located in the periphery of the lungs and 5 x 12 Gy for small tumours located more centrally and close to critical vessels and tissues (oesophagus, heart etc). A "no-go-zone" of 2 cm around the major airways was also mentioned as a planning constraint.

These schedules are capable of delivering local control rates at three years in excess of 80% with manageable toxicity (less than 5% incidence of radiation pnemenitus). This represents tremendous improvements for patients and provides motivation to further develop this approach.

One of the other great benefits of a two day meeting is that the group had the chance to socialise together in the evening and discuss the meeting in a more informal environment. On this occasion we were treated to a reception at the Institute with our Artist in Residence, Hugh Turvey. For this evening, we had a very wide range of work on display in the BIR Library, and Hugh himself was able to tell us something about but the inspiration he receives from modern medical techniques, and also about the mechanics of producing some of the wonderful work he does.

An important part of the message of the meeting was expressed very well by Suresh Senan, quoting Alexander Pope, saying "perfect is the enemy of good". Prof Senan showed some excellent clinical outcomes achieved with minimal technology, which were a great encouragement to all present to work carefully and thoroughly through the issues, using the technology available to them for the maximum clinical benefit.

Dr Stuart Green, BIR President

BIR Branches

Forthcoming Branch Meetings

BIR Scottish Branch MSK Meeting

30 September 2010 | John MacIntyre Conference Centre, Edinburgh

The second meeting of the newly reformed Scottish Branch of the BIR will include talks from high profile musculoskeletal radiologists, such as Dr Stephen Davies, President of the BIR as well as an osteoporosis workshop.

BIR East of England Branch Meeting

2 October 2010 | Addenbrooke's Hospital, Cambridge

This multidisciplinary meeting will provide information on NHS issues related to radiology and it will also provide opportunity for multidisciplinary networking in the Eastern region. Nurses, radiographers and radiology trainees will also have their individual platform for interaction.

BIR Wessex Branch Autumn Meeting

3 December 2010 | Southampton

The popular Wessex branch meetings provide an excellent opportunity to network with medical imaging professionals from the local area, earn CPD credits and hear a variety of general interest radiology talks.



(Left to right) Dr Derrian Markham, Dr Gareth Tudor, Dr Jonathan Bainbridge (prizewinner from University Hospital Wales, Cardiff)

Welsh Branch



The Welsh Branch of the BIR held their annual Scientific meeting on the 18th and 19th of June at the Postgraduate Education Centre, Royal Glamorgan Hospital, Llantrisant. The meeting held over two days attracted a wide audience of Radiologists, Radiographers and Physicists. The meeting featured workshops on Musculoskeletal ultrasound and CT colonography, followed by sessions on Trauma, Stroke management and Oncology. The sessions were all well received and were truly multidisciplinary with lectures from Radiologists, Physicians, Radiographers and Physicists.

The talk by Surgeon Commander Dr. David Gay about Radiology in Camp Bastion, Afghanistan was particularly interesting, sharing the experiences of the Radiologist managing trauma in a combat environment. Dr. John Rees' presentation on the progress and future of Wales' first PET imaging centre was informative, giving insight into this exciting new development for imaging in Wales. The trainee presentation session was of a very high standard and the winning presentation by Dr. Jonathan Bainbridge was featured in the final meeting session.

The traditional Welsh BIR golf event and the dinner took place at the Vale Hotel and Spa. The dinner as always was enjoyed by all who attended. It was an excellent opportunity to meet colleagues from hospitals throughout Wales in a relaxed setting.

The Welsh Branch would like to thank the following companies for supporting the meeting: Terumo UK, Covidien, GE Healthcare and Toshiba Medical Systems.

By Dr Gareth Tudor, Welsh Branch Chair.

(Pictured: The Committee of the Welsh Branch of the BIR. L-R Anna Birch, Colin Davies, Derrian Markham, Connor Corr, Gareth Tudor, Jane Pollitt, Wil Evans)

East of England Branch

The BIR East of England branch was formed on November 2009 as part of the BIR project in developing regional branches across the country. I am honoured to be appointed as the Chair working in a committee comprising multidisciplinary colleagues (radiologists, radiographers, nurses, physicists and trainees) in the region. The aim of the branch was to encourage multidisciplinary interactions in addition to promoting educational and scientific development in the region. It is envisaged that BIR membership will grow in the process and members are also encouraged to participate in wider aspects of BIR activities.

We plan to organise a regional BIR conference annually in the region and we are also looking into incorporating two imaging workshops in 2011. This is a multi-disciplinary network so we are also working closely with the Eastern Imaging Nurses' group, East of England Physicists' group and radiographers in the region to focus on educational update and other relevant issues specifically related to the group. It's hoped that by running these events in the region and interacting with people that we are more likely to work with will promote better understanding and positive impact on our professional framework.

The branch is holding its inaugural meeting on 2/10/2010. Please visit the BIR website for full details. Your support is very much needed to ensure that we are working towards a BIR branch that serves your professional expectations and needs in the Eastern region.

By Dr TC See, East of England Branch Chair.



Dr Teik Choon See

Wessex Branch

Following on from the outstanding success of last September's meeting focusing on ultrasound, the recent Spring Scientific meeting of the Wessex Branch of the BIR once again brought together a healthy mix of professionals involved in imaging, and provided a much-needed opportunity to learn, revise and discuss current imaging issues.

There is no doubt that the financial climate for the foreseeable future will restrict opportunities to develop professionally and keep up to date with best practice. Several Trusts have recently reduced study leave allowances and there is a worrying trend towards devaluing educational activities by too great an emphasis on targets and waiting times. At the same time, there is little doubt that we will need to provide evidence of professional development in order to prove our fitness to practice. This was brought home by Dr Tony Nicholson, Dean of the RCR and the first speaker of the afternoon, when he addressed the topic of revalidation. We heard how the Royal College intends to tackle the unenviable task of complying with GMC requirements whilst introducing a workable scheme, that will be robust and achieve its purpose without being too unwieldy.

Increasingly, therefore, gatherings such as the twice-yearly Wessex branch scientific meetings will provide real value for money in "points per pound" terms. The ethos of the Wessex branch has always been to provide a friendly forum for radiologists in training to present papers, interspersed with a healthy offering of more "mature" speakers. This type of meeting, whilst critical in the career development of specialist trainees, would not have lasted very long if it had relied on realistic registration fees from delegates: we have for many years been supported by our colleagues in industry, and it is their assistance which has allowed the Wessex Branch meetings to continue.

Over recent years, however, the Wessex meetings have been able to boast speakers of the highest calibre, (including two presidents of the BIR) and this gathering was no exception. We heard about positron emission mammography from Dr Will Ryder, were treated to some very impressive images of the cochlear hook region by Dr Daren Gibson and learned how we should be imaging GI surgical complications from Dr Tony Higginson. Dr Penny Gordon brought us up to date with developments in medical postgraduate education, and the afternoon was rounded off by a comprehensive review of issues in trauma imaging presented by Professor Paula Richards. This admirably illustrated how valuable these meetings are in professional development terms.

I suspect that the time is rapidly approaching when we will have to consider making a small charge to cover catering at our meetings, but for as long as possible we hope to be able to continue to host scientific imaging meetings at minimal cost to BIR members. Given the registration fees you can expect to pay at other radiology congresses, the Wessex Branch scientific meetings must represent the cheapest way of gaining Class 1 CPD points currently available. Clinical directors and finance managers take note! The time has come to encourage all members of imaging departments across the south of England to attend. It would be hard to find a better investment.

Our thanks go to Drs Fiona Witham and Janine Domjan for organising the meeting, and to our sponsors Terumo UK Ltd, Bayer Healthcare, Covidien and Toshiba Medical Systems.

By Dr Jo Fairhurst, Wessex Branch Chair.



Prof Paula Richards, Dr Jo Fairhurst & Dr Fiona Witham

THE BIR NEEDS YOU!

The BIR needs enthusiastic BIR Members to help develop regional branches in the following areas:

London | Midlands | South East | Northern Ireland | Ireland

If you are interested in joining a regional committee please call 020 7307 1425 or email: branches@bir.org.uk

Trainee Talk

BIR Statement on UKRC and UKRO

Throughout last year the BIR has been engaged in discussions with our partner professional bodies on the future of UKRC. This meeting continues to provide the centrepiece of the radiology meetings calendar each year, and is by far the largest and most successful meeting of the UK radiology year. The ethos and motivation for UKRC is multidisciplinary team working, so as well as providing excellent educational opportunities for each profession, it is a unique forum through which the MDT comes together to discuss both current practice and future scientific and technological advances which will drive practice for years to come.

The BIR has come out of the discussions of last year with a renewed focus on UKRC and UKRO. We consider a broad scientific meeting and a productive partnership with industry is key to the success of any national radiology congress. While we believe that both meetings could benefit from evolutionary development, we are confident that our partnership with Institute of Physics and Engineering in Medicine and the Society and College of Radiographers is strong enough to allow robust but constructive discussions on the future.

One of the partner organisations (RCR) has chosen to withdraw from the congress organising group, which will see them cease participation in both UKRC and UKRO after the 2011 meetings. The BIR remains committed to both meetings and will provide the medical input as required. Engaging in large scientific meetings which draw professionals from all backgrounds together was one of the key reasons for the founding of the Institute all those years ago, and remains a cornerstone of our activity today.

If you are a practicing radiologist or radiotherapist with a desire to work constructively as part of the modern NHS teams and develop your subject in partnership with other professions, then we would suggest that the BIR is the forum for you for the future, and that UKRC and UKRO remain high on your list of important meetings each year.



Stuart Green (President), Andrew Jones (incoming Vice President)

Trainee Committee

The BIR's Trainee Committee has been busy developing its raison d'être and has now reached out to medical students. Dr Rajat Chowdhury, Committee Chair and the BIR's Marketing and Events Manager Ms Lizette van Niekerk, recently met with Robert Springthorpe, President of the King's College London (KCL) Radiology Society and two of his fellow committee members to discuss future collaborations with the BIR.

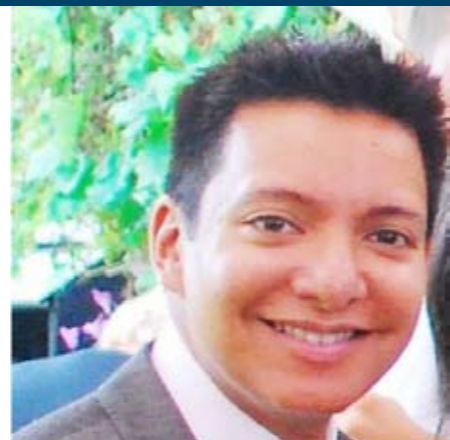
It was obvious that the BIR has much to offer medical students at all stages through the Trainee Committee and several new initiatives have been planned. The KCL Radiology Society will therefore be actively encouraging their members and other medical student societies to join the BIR as trainee members to start enjoying its benefits.

The BIR and KCL Radiology Society also hope to pilot a joint stand at this year's University Fresher's Fair and promote interest in radiology early in medical students' careers. The Trainee Committee aims to dedicate part of its projects specifically towards students and is therefore looking to appoint a student onto the committee to take a lead on this. This approach will allow us to tailor a programme of activities specifically for multidisciplinary students.

Current ideas being developed include CV writing workshops, interactive seminars and competitions. The medical students welcomed the opportunity to be taught by more senior trainees, which will also create new national presenting and teaching opportunities for our trainee members, as well as attract guest speakers.

The BIR Trainee Committee is now proud to announce the launch of two exciting enterprises. The first is a revision guide for the new part 2A FRCR Examination for radiologists and is due for release in 2011. It will be co-edited by Dr Jeremy Jones and Dr Amrita Kumar from the Trainee Committee and Dr Madhuchanda Bhattacharyya, a trainee member. The book will be authored by a group of new and existing trainee members. The second enterprise is the inauguration of the Chowdhury-Wilson Radiology Essay Prize sponsored by Wiley-Blackwell. This will be a student essay competition on a radiological topic and has been established by Dr Rajat Chowdhury and Dr Iain Wilson, lead authors of the undergraduate textbook Radiology at a Glance (Wiley-Blackwell 2010). Details of the competition will be available this autumn.

The Trainee Committee is looking forward to the Multidisciplinary Collaboration: Training and Beyond on Friday 10 December 2010. This is the first annual meeting to be hosted by the Trainee Committee and the line up of speakers includes the President of the BIR, President of the RCR, Chief Executive of Salisbury NHS Foundation Trust, National Clinical Lead for Diagnostic Imaging (Department of Health), Medical Director for UK Telemedicine Clinic, BJR Editor, RCR Roentgen Professor and Research Director, and Project Managers at McKinsey & Co, amongst many others. There are also accompanying poster competitions in scientific and audit categories and a Christmas Bash after the meeting. Registration for the meeting, Christmas Bash, and abstract submission for the poster competitions are all now open online at the BIR Events site. Places are limited, so sign up today to avoid disappointment!



BIR Trainee Committee Chair, Dr Rajat Chowdhury (Top), establishes new collaborations with the President of the King's College London Radiology Society, Robert Springthorpe (Bottom).

Meeting BIR Members

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Alternatively, email: medical@matchtech.com, or visit www.matchtech.com/radiography-jobs.

Matchtech Group 1450 Parkway Solent Business Park Whiteley Hampshire PO15 7AF

AWARD WINNERS

The BIR offers a number of awards and prizes annually. Here's how a few of the winners got on.



Mr I Mitcham (Philips Healthcare Key Account Manager), Matthew White, and Dr Rakesh Ganatra (University Hospital Nottingham)

Award: PHILIPS TRAVEL BURSARY

Winner: Matt White

I was fortunate enough to be awarded a Philips Travel Bursary to aid my elective experience in the US. I travelled to Toledo, Ohio to shadow Dr Murray Howe, Consultant Radiologist at the Toledo Hospital.

I initially rotated around the main department covering X-ray, ultrasound, MRI and CT imaging studies. I shadowed in the breast radiology unit and gained exposure to interventional techniques and their breast MRI service whilst discussing the meritocracy of their early (40yrs+) annual breast cancer screening program.

I have an interest in sports medicine and was able to shadow in the local Sports Care and orthopaedic units.

Both teams utilised a variety of radiological modalities to assist their diagnoses and treatment, but I gained valuable experience of ultrasound guided injection techniques and soft-tissue MRI use and how imaging can aid clinicians on a day-to-day basis.

The group has recently purchased expensive but state-of-the-art voice recognition software that allows reports to be digitally dictated as they are read. This was installed just before my arrival and it was interesting to see its implementation into a busy department. By the end of my elective the time savings made were vast and this can only correlate to improved patient care overall. I imagine this is something the UK may see more of in years to come.

My experience of a radiology service in the US has greatly improved my understanding of this specialty and will aid my early years as a doctor in the UK. I thank the BIR and its members for their kind generosity in supporting me.

To find out more about any of our awards please www.bir.org.uk/bir-about-us-home/awards--prizes



Lena Farruggio

Award: GE HEALTHCARE FELLOWSHIP

Winner: Lena Farruggio

During my elective I felt it was important to use the time to broaden my skills and understanding of aspects of medicine that were my weak areas; for this reason I chose radiology. Radiology is not given much teaching time in medical schools and it is a skill I wanted to develop in preparation for becoming a doctor. I chose to do my elective in Australia, as I wanted to experience medicine in another country.

I was based at Royal North Shore Hospital in Sydney, one of the largest general hospitals in Australia. I was able to experience the similarities and differences to the UK both in terms of the healthcare system and the healthcare issues facing Australia specifically.

I learned a lot more about radiology techniques as well as how to interpret radiological images, which had previously been an area I felt I lacked experience in. I really enjoyed my elective and felt it taught me a lot about radiology and medicine in a different country, and furthered my clinical skills. I am very grateful to the British Institute of Radiology for helping me to fund this elective and feel I have gained valuable experience that will help me on my path to becoming a doctor.

Fun Stuff

A Page of History

Win Vouchers

Donated by Matchtech

Matchtech have kindly donated 3 prizes for this issue of BIR News, 1 x £50, 1 x £30 and 1 x £20 Waterstones vouchers.

Three winners! How do I win this prize?

Very easy! Get your pen, read through the newsletter carefully and reply to the questions below.

Send your answers to marketing@bir.org.uk with your name and contact details by Friday 1st October 2010. This time there will be three lucky winners. So don't wait any longer and send your answers now!

Question:
Where is the next East of England Branch meeting being held?

Last issue's winners were Anna-Maria Belli, Dr Kevin Robson, Terry Featherstone and Adrian Porter.

Sudoku Fun

Logic-based, combination number placement puzzle. The objective is to fill a 9x9 grid so that each column, each row and each of the nine 3x3 boxes (also called blocks or regions) contain the digits from 1 to 9 only once.

Completed puzzles are usually a type of Latin square with an additional constraint on the contents of individual regions. Leonhard Euler is sometimes incorrectly cited as the source of the puzzle, based on his related work with Latin squares.

	7				8			
			2		4			
		6						3
			5					6
9		8			2			4
	5			3		9		
		2		8				6
	6		9			7		1
4					3			

Sudoku from www.puzzlechoice.com

Classic Books: A E Barclay "The Digestive Tract"

I think that it would be interesting to look at classic radiological texts in our historical book collection and will start with the magnificent book by our past-President Alfred E Barclay. The book is "The Digestive Tract" and was published in 1933 when he was a Lecturer in Medical Radiology at the University of Cambridge. The book in 395 pages gives an account of all that is needed for the examination of the alimentary tract including necessary apparatus, technique and the radiological appearances of both the normal state and pathological conditions. The physiological principles of movements in the gastro-intestinal tract are reviewed including manometric studies in swallowing. Barclay had a keen interest in radiological protection throughout his working life and saw it as being of paramount importance. Barclay had become interested in radiology in 1904 as an Accident Room Officer at the London Hospital when he was screening for radio-opaque foreign bodies. He had a lifelong concern that the anatomy and physiology learnt as a preclinical student are carried on into clinical practice and this book is a superb correlation of anatomy, physiology and pathology. Line diagrams and prints of radiographs beautifully illustrate the book. By 1933 radiology was established as a specialty with its own examination—the Cambridge DMRE. The radiology practiced in 1933 was very different from our own with screening in the dark without image intensification and television and requiring adaptation of the eyes and wet film processing. Do visit the library and look at the book when you are next in Portland Place.



Reference: A E Barclay. The Digestive Tract, Cambridge University Press 1933
Adrian Thomas, Honorary Librarian
adrian.thomas3@nhs.net
Figure: Radiologist attired for fluoroscopy.

A Right Royal Knees Up



Royal Garden Party 22nd June 2010

"What a fantastic day. The weather was perfect the company good and the setting wow! I never expected the visit to Buckingham Palace to feel so special. The tea was better than the Ritz and to top it off we had a glimpse of the Queen. Peter and I both feel very privileged to have been able to go."

Lesley Coverdale (Facilities Coordinator, BIR)

L-R: Anna Green, Dr Margaret O'hara, Peter Coverdale, Lesley Coverdale and Dr Stuart Green

The Thorascope

The Thorascope was a common item seen in chest clinics in the mid 20th century. It consisted of a simple fluorescent screen for upright fluoroscopy. Dark adaptation of the eyes would be required to view the dim image. It was designed as a compact and completely self contained unit and was recommended for the consulting room of the private physician or in tuberculosis centres. It was easy to control and gave 0-5mA and a kV control from 55-85kV. However its ease of use could result in unnecessary dosage with untoward effects. JD Boice and others reviewed the incidence of breast cancer in 4940 women treated for tuberculosis between 1925 and 1954. There were 2573 women examined by X-ray fluoroscopy for an average of 88 times when they had lung collapse therapy for TB. In this group there were 147 breast cancers when only 113.6 were to be expected with no excess of breast cancer in 2367 women treated by other methods. The increased rates for breast cancer were seen from 10 to 15 years after the initial fluoroscopy. The age at exposure strongly influenced the risk of radiation-induced breast cancer with young women being at highest risk and women over 40 being at lowest risk. The mean radiation dose to the breast was estimated to be 79 cGy, and there was strong evidence for a linear relationship between dose and breast cancer risk. It is unfortunate that such an elegant piece of apparatus was associated with harmful effects.



Reference: Boice JD Jr, Preston D, Davis FG, Monson RR. Frequent chest X-ray fluoroscopy and breast cancer incidence among tuberculosis patients in Massachusetts. Radiat Res. (1991) 125: 214-222
Adrian Thomas, Honorary Librarian
adrian.thomas3@nhs.net
Figure: Chest screening stand

Final words as President

One of the great challenges that all Institutes such as the BIR face is to generate a sense of belonging and commitment to our activities. My belief is that this only really comes with participation and we are continually striving to find ways to encourage participation in the activities of the Institute. Our trainee committee is a shining example of this and I would encourage all our trainee members to participate in their first full scientific meeting on 10th December – it should be a really great experience.

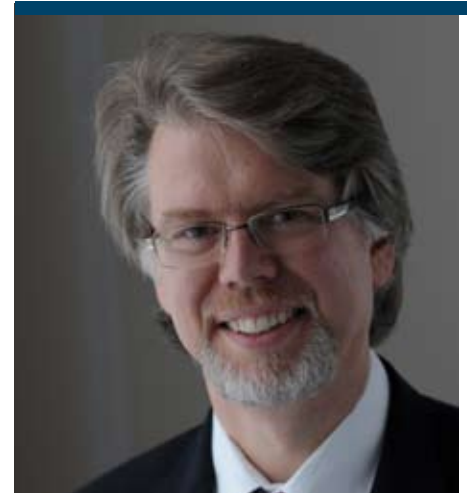
Organising successful and vibrant meetings is a central part of our role, and I have been extremely lucky that both of my President's Conferences have had a great buzz, created by really excellent presentations by speakers from home and abroad, and a full house in Portland Place who were keen to participate fully. The great breadth of our meetings programme is one of our strengths, and we have a unique capability to bring related disciplines together, acting as a catalyst to further develop our subject. I very much hope that our inaugural Molecular Imaging meeting on 30th September and 1st October will mark an important step in this

subject, which is set to expand dramatically in the years ahead.

As I write this, we are engaged in a detailed survey of your views, as we begin the process of redefining our membership packages and the whole strategic direction of the Institute. Getting our membership offering right is incredibly important and this has not been examined in detail for a number of years. I hope you have all sent in your views, since if we deliver what you want as current members we greatly increase our chances of growing the membership of the Institute in the years to come.

This, my final column as President, has come around much faster than I could have believed possible. Throughout the ups and downs the Institute has experienced in the last two years, I have had wonderful support from my fellow trustees and I will always be grateful for this. Together with BIR staff and the excellent leadership of Jacqueline Fowler, we have set the Institute on a good path, financially secure and operationally delivering.

Right at the start of my Presidency, Dr Julie Oliff advised me that perhaps the most important thing we can do to secure the future of the Institute is to recruit excellent people to follow us.




Dr Stuart Green

I am extremely pleased to be handing over to Stephen Davies for his term as President, with his leadership I believe that the BIR is entering a very positive period. Stephen will be supported by a talented and largely new group of trustees, and by a staff at Portland Place who are now forming a strong and well-focused team to support your needs as members and the charitable aims of the Institute.

Thank you for the opportunity to be President of The British Institute of Radiology, it has been a highlight of my life.

President

 **Letters to the President:**
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