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FROM THE COALFACE

Dr Dinesh Varma



Dr Russell Metcalfe



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FROM THE VIEWBOX

Cyclotron coming
soon to a town near you

CHAIRSPACE

Christmas came early this year with the arrival, from Amazon, of the Beatles Remastered box set. A veritable treasure trove of some of the best music of the 20th century. Nothing really new of course, but perhaps what did come was a new-found appreciation of it all. The thing that was most impressive was the fact that this embarrassment of riches was all created in just 7 years! A ten month period between 1966 and 1967, produced both Revolver and Sgt Pepper, and people at the time were wondering why the big delay? It's a bit like inventing and building the first CT scanner, then following it up with a 3T MR, all in the same year.

At the end of my 3 year term as Chair of the Branch, and 6 years on Council, it is probably time for some remastering, summing up and horizon scanning. Unfortunately, us mere mortals cannot point to an enduring legacy that will form the substance of a future box set that could be a time capsule for generations to come. But we all must have learned something in the past 6 years, right?

"they are the eggmen - I am the walrus GOO GOO GOO JOOB" (Magical Mystery Tour)

After spending extraordinary lengths of time in meetings in the past 6 years, I now have a more than passing acquaintance with the heavily nuanced language of "bureaucratspeak". This is an arcane tongue, not dissimilar to Elvish, which is used by the eggmen. It is frequently heard in the Beehive, on The Terrace and Lambton Quay, not to mention DHB documents and anything from the Ministry of Health. Sentences are studded with words such as "devolution" and "integration". The acronym is king, and the most embarrassing admission that anyone can make is that you don't get it, or can't figure it out. Rather ironic really that one of the traditional criticisms of doctors is that we speak in gibberish jargon so that ordinary folk won't understand us.

The eggmen always use the word "around" as much as they can. They are constantly "seeking more clarity **around** issues" and "informing their thinking **around** a subject". "Around" gets a proper thrashing, and all this circumlocution isn't good for you. Maybe, just maybe, if your brain is always going **around** stuff, it's never going to arrive at the right answer?

Another concept that is frequently bandied **around** is that "we're all working in silos" and that we are frequently guilty of "siloed thinking". I imagined this referred to tall people working in tall buildings with no windows, sneezing all the time and up to their necks in wheat. This, of course, would be the literal interpretation of a pre-school child (or adult radiologist). For those of you that can engage in abstract thought, and aren't a little bit aspergerish, it really just means working in isolation. Who knew that?



The biggest issues of the past 6 years have been workforce, workforce and workforce. (I know you're all wondering about the fact that the planet is already dangerously heating up, and we haven't yet moved to plan B, but trust me, workforce is bigger than global warming). So many government groups have been working on workforce, that no one person can claim to be familiar with all of their acronyms. The numbers of bureaucrats doing workforce work is similar to the numbers it took to complete the 3 Gorges Dam in China. So what have they come up with? To summarise, there aren't enough doctors (of all types) in the country, we're haemorrhaging our finest fledglings to Australia, and with the greying of New Zealand's population its all getting worse in a hurry. Just add such factors as increasing complexity of medical care, increasing patient expectations and more scaremongering about error ridden hospitals, and workforce becomes a hot and spicy topic. The brand new, Des Gorman led "Health Workforce NZ" is apparently the one ring to rule them all in this area. I suspect the solution will be to train pluripotential health workers of the near future that will be like stem cells. They will be deployed to pressure points in the system where they will morph themselves into folk who can work in multidisciplinary teams, read imaging tests, talk to patients empathetically, then operate on them without tying off the common bile duct by mistake.

Seriously though, the solution to our workforce problem will definitely involve changes in our roles, the way we work, turf issues and different interprofessional relationships. After years of listening to radiologists fret about losing imaging to other groups, I don't currently see underemployed radiologists looking for things to do. Rather, the opposite is true and imaging seems to have all the characteristics of a runaway train, and we're working ourselves ragged.

I've met the Hon Tony "Better, sooner, more convenient" Ryall, and the Hon Dr Nick Smith in recent months. Dr Smith, the minister for ACC, was primarily focused on the corporation's bottom line and was clearly in no mood to listen to whingeing colleges going on about quality, evidence-based medicine or growth of referrals due to

CHAIRSPACE CONTINUED...

the diagnostic power of imaging. Somewhat ironic really, given that the first of ACC's guiding principles for its purchasing strategy is that the process should be "relationship based". So the new mantra from Smith is probably "cheaper, quicker, take away or have here?" One thing did emerge though, and that is that radiology providers need to advocate for themselves with ACC on the nitty gritty of contracts. Nick Smith was quite clear when he intimated that any whiff of college-sponsored collusive or anti-

competitive behaviour would be met by lethal force from the Commerce Commission.

ACC, I'm Lovin' it.

So, this summer, I urge you all to swim in the sea, catch a fish and listen to a seashell (where you may hear a disembodied voice whispering workforce, workforce.....) Also, ask Santa for The Beatles box set, and remember that John Lennon (the oldest of them) was only 30 by the time they'd called it quits.

(Recommended holiday read "Bad Science" by Ben Goldacre - a sharp kebabbing of charlatans around the fringes of medicine, with 3 cheers for proper evidence).

Thank you for your support over the past 6 years, and I would like to extend my best wishes to the incoming Branch Chair Mike Baker.

Mark Leadbitter

EXPERIENCE AS THE RANZCR 2009 ROUSE FELLOW

by Dr Dinesh Varma, Melbourne



When the news came through that I was awarded the RANZCR 2009 Rouse Fellow

I was extremely excited and felt very honoured. It suddenly dawned on me that I had a lot of planning to do and also to get ready to deliver a few lectures, starting with a talk at the New Zealand Branch annual scientific meeting in August. What was comforting was that the Branch Committee left it to me to decide where and when I wanted to go with the caveat that I would include some smaller centres.

Having trained and worked at the Alfred Hospital, Melbourne and currently Head of Emergency and Trauma Radiology, I was keen to share my experiences in this new subspecialty across the Tasman. Still in its infancy in Australia and New Zealand, I would like to see more radiologists take interest in this subspecialty. The Alfred has the largest trauma centre in the southern hemisphere including a state of the art division of Radiology in the Emergency and Trauma Centre with DR systems, Ultrasound, 64 slice MDCT, 1.5 T MRI scanners. Our department is staffed 24/7 and we are very proactive in intervening early in multitrauma damage control and non operative management of solid organ injury.

At the New Zealand Branch's annual scientific meeting I gave a talk on the "Role of CTA in Multitrauma Triage". I was very impressed by the quality of the scientific programme and the expertise of the speakers. The conference was very well organised. I also observed the dedicated

registrar teaching session and realised that this concept could be of value at the RANZCR annual scientific meeting. In fact I addressed the Trainee Forum at the meeting in Brisbane and floated the concept.

In September with my wife Rita and our 16 year old son, Ritesh I returned to New Zealand. Our first stop was Nelson where Dr Stephen Busby was my local host. Stephen had invited along the Emergency Medicine staff for my talks. It was interesting to note that expectation of radiological services after hours is no different across the Tasman. Being a smaller department with no registrars, they still have to provide an efficient after-hours service to a busy Emergency Department. It would be a good site for the registrars to rotate as there is a wealth of experience to be gained in primary and secondary level of radiology training.

My next visit was to Christchurch Hospital. Dr Sean Skea had organised two half days of lectures and I managed to cover a few topics. It ended with registrar teaching session which was my highlight. Besides the formal activities I also had the opportunity to discuss some organisational and operational issues with Sean. During the discussions it became clear that there were quite a few areas of mutual interest and we plan to keep ongoing informal and semi-formal exchanges between our departments.

My final visit was to Dunedin and Dr Ben Wilson had organised a low activity day in the department which allowed most of the staff to attend my lectures. I also conducted an "interesting cases"

session with the staff and film reading sessions with the registrars, which were well received.

We spent the final weekend in Queenstown and our regret was that it had taken us so many years to get there. The other disappointment was watching the AFL grand final in a pub where the atmosphere was rather sombre and subdued, with a lot of the patrons clearly not interested in the game. However, the evening travelled well with some fine regional Pinot Noir. A day trip to Milford Sound made us realise that we need more than a few weeks to soak in all that the South Island has to offer.

During my visit I was able to share information and my experience in Emergency and Trauma Radiology on topics such as "Cranio-facial Trauma, Blunt Abdominal Injuries, Imaging of Cervical Spine Injuries and Imaging Orthopaedic Hardware", etc. I also gained some good ideas from the discussions that followed in a very professional and open environment with various colleagues. I only wish that I had some more time to visit some centres in North Island. I hope some other opportunity may arise to take me there.

I would like to thank all for hosting me in their department, with generous and friendly hospitality and giving me the opportunity to share my experiences. I look forward to furthering this connection with ongoing exchanges to improve and advance this subspecialty in our region.

Dr Dinesh Varma, Melbourne



NEW ZEALAND BRANCH ANNUAL SCIENTIFIC MEETING

Friday 6 - 8 August 2010, Millennium Hotel, Queenstown



It is with great pleasure that we invite you to attend The Royal Australian and New Zealand College of Radiologists, New Zealand Branch Meeting to be held at the Millennium Hotel in Queenstown, one of New Zealand's spectacular tourist destinations.

The themes for the 2010 Annual Scientific Meeting focus on Abdominal Imaging and Musculoskeletal Imaging. We have assembled an impressive list of international experts in their

field including Professor Adrian Dixon from the United Kingdom, and Dr Sudhakar Venkatesh and Professor Wilfred Peh both from Singapore. Queenstown's reputation as an adventure destination stems from the innovations of jet boating and Bungy jumping. Apart from its widely known adventure and scenic offerings, the Southern Lakes region is also home to beautiful wine growing regions featuring gorgeous wineries, restaurants and cellar door operations as well as award winning wines, particularly pinot noir.

Getting to Queenstown is easy as the region is well served by major airlines. Domestically there are several connections each day from the main centre's Auckland, Wellington and Christchurch and Air New Zealand and Qantas fly direct from Sydney, Brisbane and Melbourne in winter. The Dunedin team looks forward to seeing you in Queenstown.

Dr Ben Wilson, Convenor on behalf of the Organising Committee RANZCR NZ Branch ASM 2010



In 2008 a joint venture between Pacific Radiology and Cyclotek Australia was formed to facilitate the onshore production of PET radiopharmaceuticals. Pacific Radiology has been using FDG, the main current PET radiopharmaceutical produced in Melbourne for the last 2 years. This was always a probable interim step to allow PET services to be established in New Zealand and follows on from the government NSTR SPINIA process which

ABSOLUTELY POSITRONLY WELLINGTON

advocated for PET but was put on the back burner by DHBNZ, pending further justification.

Due to the logistics of flying short half life isotopes an on-shore facility was needed to ensure sufficient isotope in all main oncology centres, to create enough access to avoid some patients being flown to Australia, and to allow PET scans to be read by the local radiologists who would be attending the local oncology MDMS.

Cyclotek Pharmaceuticals planned a facility at Wellington Airport given that this is the hub of the aviation industry and the expertise the local Air NZ cargo handlers have with shipment of the product. The cyclotron machine purchased, a GE PET trace with 10 Curie capacity can easily supply the needs of the whole country and so facilitates the placement of other PET/CT scanners.

To date CRG in Christchurch and Mercy in Auckland are placing machines. The cyclotron facility will produce NaF for bone scanning and other PET fluorine based products such as FLT, in the near future.

Resource and building consent were obtained in September 2009 and building of the vault foundations is well underway. The floor requires very strong foundations as the vault walls and roof are of concrete 2.5 meters thick! The building and commissioning programme is on target to have commercial FDG production in November 2010.

Trevor FitzJohn, Chairman
Cyclotek Pharmaceuticals Ltd

Obituaries

The Branch notes with regret the recent bereavement of:

Dr Mary Elizabeth Finlay

MB BS (Newcastle) 1979, MRCP 1985, FRCR 1990
Radiologist of Havelock North.

Dr Finlay and her husband and fellow radiologist Philip had worked in New Zealand on two previous occasions and in 2007 they returned with their family to settle in Havelock North. Mary took up a position at Hawke's Bay Hospital and subsequently joined the College as an educational affiliate.

Dr John Stuart Boyd-Wilson

MB ChB (NZ) 1949, DMRD (Lond) 1955, FRANZCR 1967

Retired Radiologist of Wellington.

Dr Boyd-Wilson trained and worked in the Wellington area where he developed the neuroradiology programme. In the 1970s he was an advisor to the Health Department, chairman of the fees and schedule committee representing the College at the Royal Commission on Social Security Services. Dr Boyd-Wilson served on the New Zealand Branch Committee from 1972 to 1978, the last two years of which as Branch Chairman. His contributions to the NZMA, the Medical Assurance Society and the Neurological Association of New Zealand as a foundation member and as its first chairman, are also noted.

Obituaries for Dr Boyd-Wilson will also appear in College Journal JMIRO and the NZMA Journal in the New Year.

Condolences are extended to the families of Dr Mary Finlay and Dr John Boyd-Wilson.

Incoming 2010 New Zealand Committee

Chair

Dr Michael Baker

Honorary Secretary/Treasurer

Dr James Wellwood

Branch Education Officer (Radiology)

Dr Ben Wilson

Immediate Past Chair

Dr Mark Leadbitter

Councillor and Radiation

Oncology representative

Dr Graham Stevens

Committee Member

Dr Brett Lyons

Committee Member

Dr Emma Leigh

Workforce Representative

Dr Stuart Barnard

CPD Representative

Dr Adrian Balasingam

Trainee Representative

Dr Kirstin Chard

Non Committee Members

Alternate Branch Education Officer (Radiology)

Dr Lisa Sweetman

National Director of Training (Radiation Oncology)

Dr Maria Pearse

Vacant Positions

- Clinical Director of Adult Radiology, Auckland Hospital
 - Clinical Leader, Wellington Hospital
 - Consultant Radiologists, Wellington Hospital
 - Consultant Radiologist, Hutt Hospital
- Details of these vacancies can be viewed on the College website: <http://www.ranzcr.edu.au> - News and Events - Vacant Positions



NZ Radiology Education Trust 2010 Travelling Fellow

The Trustees are pleased to announce that the 2010 Travelling Fellowship has been awarded to Dr Russell Metcalfe, Paediatric Radiologist, Starship Children's Hospital, Auckland.

Dr Metcalfe intends to travel to outreach clinics in the North and South islands, to provide didactic lecture material on how to improve paediatric imaging and to establish more informal links with colleagues at other centres.

New Fellows and Registrars

The Branch is pleased to welcome all new Fellows including the 28 Radiologists and 2 Radiation Oncologists who have gained Fellowship over the past year under the long standing educational affiliate pathway. Welcome also to the new registrars and Educational Affiliates in Radiology and Radiation Oncology.

Opps!

In the July Edition the article **Imagine this ...** was mistakenly attributed to Dr Mark McCullough of New Plymouth. This should have been Dr Bruce Allen of Auckland. *Apologies.*

calendar

2010 AT A GLANCE

28 February

CPD 2009 Returns deadline

12-13 Mar

NZOA – Orthopaedic

Imaging CME, Nelson

4-8 March

ECR, Vienna

20-23 March

AOCR 2010, Taipei

24-27 Mar

TROG, Queenstown

2-7 May

ARRS, San Diego

14 May

NZ Branch ASM call for
abstracts close

2-5 June

ESGAR, Dresden

25 June

NZ Branch ASM early bird
registrations close

25 July

Radiology Directors of Training
Meeting, Auckland

26 July

Radiology Registrar
Interviews, Auckland

6-8 August

NZ Branch ASM, Millennium
Hotel, Queenstown

13-14 August

MOGA, Sydney

23-26 September

ASUM Congress, Gold Coast

14-17 October

RANZCR ASM, Perth

28 Nov-3 December

RSNA, Chicago

Additional courses and conferences
can be viewed on the College
website: <http://www.ranzcr.edu.au> -
News and Events - Calendar

Examination dates and deadlines
can be viewed on the College wall
planner or on the College website:
<http://www.ranzcr.edu.au> - News
and Events - Calendar

Opinions expressed herein are those
of the authors and do not necessarily
reflect the view of The Royal
Australian and New Zealand College
of Radiologists (RANZCR).



The Royal Australian and New Zealand College of Radiologists New Zealand Branch Annual Scientific Meeting



Queenstown 2010

6th - 8th August 2010
Millennium Hotel

Pinot
&
Piste
QUEENSTOWN 2010

KEYNOTE SPEAKERS:

Professor Adrian Dixon
Professor of Radiology
Cambridge University Hospital

Dr Sudhakar K Venkatesh
Assistant Professor and Consultant
National University Hospital
Singapore

Professor Wilfred Peh
Senior Consultant and Head of Department
Diagnostic Radiology
Alexandra Hospital
Singapore

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Articles

We welcome contributions to **FROM THE VIEWBOX**. We reserve the right to edit submissions. Resonance will be published in March, July and November.

2010 Deadlines are:

5 March

25 June

29 October



The New Zealand Committee
wishes you a Merry Christmas
and a relaxing and happy New Year
Branch office closed

24 December – 18 January 2010

Next issue

Palmerston North Hospital

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