

News and views

Window on Serbia

Currently Nuclear Medicine in Serbia is trying to adjust to transitional and social ferment which are consequently manifested in the health care system through organizational reforms and priority distribution of economic investments. From a clinical aspect, the greatest efforts have been put into maintaining the independent status of the clinical diagnostic discipline, as opposed to assimilating it with the intentions of radiology, to put it into its own frame. Parallel to these attempts, an up-to-date initiative within the Bologna process is the effort to incorporate nuclear medicine more extensively into all levels of academic teaching (basic, doctoral studies).

As in the majority of countries in the region, there are great expectations in Serbia related to the provision and installation of the first PET system in the country. Since economic construction has been closed, two nuclear medicine centres (Belgrade and Sremska Kamenica) will install the PET devices in 2008, with additional plans to found the centre with the accompanying baby-cyclotron and laboratories for the preparation of positron radiopharmaceuticals in Belgrade.

In the past two years great improvements in the development of therapeutic nuclear medicine have been made, meaning that in two centres (Kragujevac and Cuprija), in-patient therapy blocks for the treatment of thyroid cancer have been opened and a third in Zlatibor is being prepared.

Although Nuclear Medicine is an expensive medical branch (high technology, radiopharmaceuticals), new regulations which enabled work in private practices have influenced the profession-

al orientation of nuclear medicine specialists; therefore, as novelties, the opening of two private-business based *in vivo* and *in vitro* laboratories should be mentioned.

An outstanding novelty in the sense of organization, which is expected to contribute vastly to the improved quality of work, is the foundation of the Association of Nuclear Medicine Technologists, representatives of which have joined IAEA educational training courses. In addition, the organization of a meeting with international participation is planned for next year.

The active participation of nuclear medicine specialists at international meetings has been recorded this year as well; thus, at two of the largest scientific events (EANM 2007 Copenhagen and ICRT07 UlaanBatar, Mongolia) 17 papers were presented, which is much more than the number presented by other countries from the region. Unfortunately, due to both objective and subjective reasons, the traditional National Congress of Nuclear Medicine will not be held this year, and hence, scientific activities will take place at the Clinical Section for Nuclear Medicine of Serbian Medical Society.

In conclusion, we can say that after the long-term stagnation due to political and economical reasons, the importance of Nuclear Medicine in Serbia has significantly risen, and in spite of numerous difficulties, it is continuing on its course to a complete recovery.

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