Education and Preparation for Nuclear Medicine Procedures in Neuroendocrine Tumor Patients

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Abstract

In 2007, a coalition of health care organizations formed around the a unified goal of improving imaging safety and quality for adults (Image Wisely) and children (Image Gently).

In 2008, the Society of Nuclear Medicine (SNMMI) joined this coalition, embracing its role in providing outreach to the patient community on the use of molecular imaging and reducing exposure to radiation.

Since then, the Society formed a Patient Advocacy Advisory Board (PAAB) with representatives from over 10 different advocacy groups, created an annual patient program to reach patients and caregivers, launched a patient focused website, and is continually seeking input from the patient community to improve the program and other online educational resources. In 2016, patients and caregivers participating in the annual Patient Education Day, expressed concerns about the lack of information about radiation exposure from advanced imaging procedures. To understand the extent of this problem, SNMMI conducted a survey of caregivers and patients who had undergone nuclear imaging, therapy, or both.

Methods

The survey was developed by SNMMI in consultation with the PAAB to help SNMMI members better understand current practice and future needs regarding patient care and concerns on radiation exposure.

Patients and caregivers were contacted by their affiliated advocacy organizations and directed to an online survey platform. Links to the survey were also distributed via Facebook. The survey was completed by 700 patients in May 2017.

Results

Of the 700 respondents, 30% identified as NET patients. Patients were asked to rank how safe they felt nuclear imaging and therapy are on a scale of 1-5 (1 being very safe, 5 being unsafe). Those undergoing imaging averaged 2.36 while those undergoing therapy felt it was safer scoring 2.00.

70% of the NET patients undergoing imaging reported tracking the number of scans they received with only 33% answering that they were not concerned about the number of scans they received.

44% of NET imaging patients claim to receive no safety information regarding nuclear medicine imaging, while 100% claim to have received safety information regarding nuclear medicine therapy.

Possible contributing factors to the fear of scanning may be the lack of time the prescribing physician has to address the safety concerns, lack of expertise in nuclear medicine, or lack of specific patient education materials. More education is needed for NET patients undergoing imaging to lessen the fear of scanning. Pre and post surveys post education sessions have shown that the “scanxiety” can be greatly reduced with minimal intervention.

Conclusions

Patients have concerns about nuclear medicine scan safety which are not being adequately addressed. Patients undergoing a nuclear medicine therapy, by contrast, are given the appropriate safety information. Since imaging patients consult with the referring physician prior to the scan, considerations should be made by this prescribing physician to address patient concerns.

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