Plenary Session 2
Monday, October 19, 11:30–13:00

Session Title
From Treatment to Prevention: The Evolving Role of Nuclear Medicine in Early Diagnosis

Chairpersons
Jan Bucerius (Graz, Austria)
Valentina Garibotto (Geneva, Switzerland)

Programme
11:30–11:50 **Ken Hermann** (Essen, Germany): Prevention and Early Diagnosis in Oncology
11:50–12:05 **Marcus Hacker** (Vienna, Austria): Preventing Cardiovascular Diseases the Nuclear Medicine Way
12:05–12:20 **Massimo Filippi** (Milan, Italy): PET Imaging and the Prevention of Alzheimer's Disease
12:20–12:30 **Paola Anna Erba** (Milan, Italy): EANM Perspective to Move from Treatment to Prevention
12:30–13:00 Panel Discussion – All speakers

Educational Objectives
1. To gain insights into government policies for health prevention.
2. To get an impression of nuclear medicine imaging options in prevention/screening protocols in oncology, cardiovascular disease, and neurology.
3. To discuss how nuclear medicine can be implemented in (global) health prevention programmes.

Summary
Disease prevention programs gain more and more importance aiming to rather prevent disease development or progression than to treat established disease burden. Over decades, nuclear medicine imaging had very little impact in the context of health prevention programs due to e.g. rather high costs and limited availability of, mainly, PET imaging and, in addition, the imaging related radiation exposure which made implementation of nuclear medicine imaging into disease prevention and screening programs rather difficult. However, over the last years, nuclear medicine infrastructure in general but mainly with regard to PET imaging improved substantially and new technologies like total-body PET/CT with pretty fast imaging protocols also allowing application of rather low tracer doses with consecutively lower radiation exposure to the patients might lead to a
significant role of nuclear medicine imaging for disease prevention. This plenary session will discuss exactly that role in the context of EU prevention policies in general and, specifically, in the context of different disease entities.

Key Words
Prevention; Nuclear Medicine; Oncology; Cardiovascular; Neurology; Prevention Policies; Government.