Proposed QIBA SPECT Biomarker Committee (BC)
Friday, February 20, 2015, 9 AM (CT)
Draft Call Summary

In attendance:

Richard Wahl, MD (Moderator)
Ronald Boellaard, PhD
Janice Campbell, PhD
Ming-Kai Chen, MD, PhD
Yuni Dewaraja, PhD
Eric Frey, PhD
John Hoffman, MD
Paul Kinahan, PhD, FIEEE
Michael King, PhD, DABR
Gregory Klein, PhD
Richard Laforest, PhD
Adriaan Lammertsma, PhD
Michael Lassman, PhD
William C. (Rusty) Lavely, MD
Martin Lodge, PhD
Manuela Matesan, MD, PhD
Robert Miyaoka, PhD
P. David Mozley, MD
Aaron Nelson, MD
Dennis Nelson, PhD
Eric Perlman, MD
John Seibyl, MD
Anne M. Smith, PhD
Eli Stern, BSc, MBA
John Strologas, PhD
John Sunderland, PhD
Pierre Tervé, MS
Benjamin Tsui, PhD
Timothy Turkington, PhD
Wolfgang Weber, MD
Scott Wollenweber, PhD
John Wolodzko, PhD
Brian Zimmerman, PhD

RSNA
Fiona Miller
Joe Koudelik
Julie Lisiecki

Moderator: Dr. Richard Wahl

Discussion

- Joint meeting with the QIBA FDG-PET/CT Biomarker Committee members began with a brief update on the NIBIB March 2015 Progress Report; BC leaders to draft brief two paragraph status reports for Mr. Buckler (by Feb 27th) for incorporation into a larger QIBA semi-annual progress report as required by our federal NIBIB contract
  - Reminder to Round-3 project PIs to submit their final project reports by the end of February
  - Round-3 PI final project reports are needed to close Rnd-3 projects and may also be used to supplement the NIBIB semi-annual report

- A SPECT Profile was suggested with both a technical and clinical focus; suggested organ systems included:
  - Peptide therapy for kidney
  - Selection of an isotope: lutetium (Lu), or technetium (Tc)
  - Bone quantitation
  - Heart
  - Absolute organ uptake
  - DaTscan vs. organ – radiation dosimetry

- The group plans to begin with a gap analysis and discussion of data for testing potential Profile claims, led by Dr. Seibyl.
  - A simple use case with a strong clinical claim is needed
  - SPECT parameters suggested:
    - Parameters with low bias, good precision, and relative reproducibility deemed important
    - Consideration for future innovators, with respect to how they approach solutions, particularly on the device side, is also very important
    - Innovation encouraged without excessive prescription in the Profile

- Dr. Seibyl to identify some relevant datasets for discussion on the next call

Upcoming Nuclear Medicine Calls (Fridays, 9 am CT):

- **February 26** PET Amyloid: Site Qualification Task Force
- **February 27** PET Amyloid: Image Analysis Task Force (in place of Amyloid Biomarker Ctte)
- **March 06** FDG-PET Biomarker Ctte – UPICT FDG-PET/CT Protocol Discussion (led by Dr. Graham)
- **March 13** PET Amyloid Biomarker Ctte
- **March 20** SPECT Task Force
- **March 27** PET Amyloid Biomarker Ctte
- **April 3** FDG-PET Biomarker Ctte

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