



### Plenary Session 3

**Monday, October 6, 11:30 – 13:00**

#### Session Title

**Referring Patients to Nuclear Medicine: When, How, and Mainly Why?**

#### Chairperson

**Paola Anna Erba** (Bergamo, Italy)

**Jochen Walz** (Marseille, France)

#### Programme

- 11:30 – 11:45 **Stijn Muselaers** (Nijmegen, Netherlands): Never without Nuclear Medicine in Prostate Cancer, is Kidney Cancer Next in Line?
- 11:45 – 12:00 **Liza Lindenberg** (Washington, United States of America): New Targets in Kidney Cancer
- 12:00 – 12:15 **Alessandra Gennari** (Novara, Italy): Nuclear Medicine is Routine in Lung Cancer and Optional in the Majority of Breast Cancers
- 12:15 – 12:30 **Gary Ulaner** (Irvine, United States of America): New Frontiers in Breast Cancer Molecular Imaging
- 12:30 – 12:45 **Daniel Ferreira Padilla** (Huddinge, Sweden): Nuclear Medicine has Revolutionized the Alzheimer's Disease landscape, is Parkinson's Disease the Next?
- 12:45 – 13:00 **Gunter Hoglinger** (Munich, Germany): Parkinson's Disease Can only be Understood with Molecular Imaging

#### Educational Objectives

1. Learn on the clinically validated and extensive use of nuclear medicine in prostate cancer, lung cancer and Alzheimer's disease
2. Understand the process bringing molecular imaging tools to an established clinical implementation in diagnostic algorithms
3. Get Learn on the novel molecular imaging perspectives in kidney cancer, breast cancer and Parkinson's disease

#### Summary

This session is conceived as a dialogue between imaging experts and clinical experts on the evidence that is required for the referral of patients to nuclear medicine procedure, combining the lessons learned from those clinical indications where molecular imaging is largely established and complementing it with unmet needs and novel evidence in emerging indications, taking oncology and neurology as examples. The successful implementation of nuclear medicine in many clinical guidelines and practice can further accelerate the translation of innovation into patient benefit through increasingly intense multidisciplinary joint efforts.

#### Key Words

Radiopharmaceutical development; prostate cancer; kidney cancer; lung cancer; breast cancer; Alzheimer's disease; Parkinson's disease; novel tracers