CONTINUE FUNDING FOR NUCLEAR MEDICINE RESEARCH

For nearly 60 years, the Department of Energy (DOE) has funded essential, fundamental nuclear medicine research in the areas of biomedical imaging and radiotherapy that has facilitated technological breakthroughs. Only the federal government funds basic nuclear medicine research, so this DOE program is critical for training and education. Since the DOE has primary responsibility for isotope production, it would be beneficial to continue to fund nuclear medicine research.

**DOE-funded nuclear medicine research has already resulted in numerous achievements in patient care and will lead to more. It has contributed extensively to the development of:**

- Cutting-edge nuclear medicine imaging and therapy procedures, including positron emission tomography (PET), that are crucial for identifying the presence of cancer in the body and how the disease has progressed.
- Cardiac stress tests to analyze heart function
- Bone scans for orthopedic injuries
- Lung scans for orthopedic injuries
- Diagnoses of liver/gallbladder function abnormalities and neurological disorders
- Radium-223

Prior to cutting funding in fiscal year (FY) 2006, nuclear medicine medical application research was funded at about $34 million. Congress restored funding for nuclear medicine medical application research in (FY) 2008. Funding levels for the following years were:

- $17.5 million for FY08
- $17.5 million for FY09
- $17.5 million for FY10
- $12 million for FY12
- $5 million for FY13
- $5 million for FY14

The modest amount for research funding over the years has contributed greatly to a multi-billion industry which provides well-paying jobs across the country by fueling innovation and new technologies – not to mention the tremendous advancements in patient care. Additionally, researchers are leaving the field by finding work in other areas or retiring, and without continuation of funding there is a real possibility that the next generation of researchers will have no opportunity for hands-on training.