## DEPARTMENTS Letter to the Editor

## Drug Intervention in Nuclear Medicine

To the Editor: Cherico and Frater are to be commended for bringing attention to the possible occurrence of adverse reactions to drugs used as pharmacologic adjuncts in interventional nuclear medicine studies (1). Although ideally administered by physicians, physician assistants, or nurses, these interventional drugs may frequently be administered by nuclear medicine technologists under little or no direct supervision. Thus, it is imperative that nuclear medicine technologists be aware of potential adverse reactions (allergic or other) associated with each interventional drug prior to the initiation of an interventional study.

Unfortunately, the examples of adverse reactions described by Cherico and Frater include citations limited to only package insert-type references such as the Physicians' Desk Reference (PDR). Although the PDR continues to be the most widely used source of drug information, differences often exist between drug usage described in the PDR and that in interventional nuclear medicine studies. These differences include dosage, dosing regimen, chronicity of use, and even route of administration. The incidence and/or severity of adverse reactions can vary markedly in these different situations.

In addition to adverse reactions associated with drugs, attention should be extended to other cautions involving drug interventions, specifically contraindications, drug interactions, and incompatibilities. The risk(s) to the patient in these latter cases may be as great or even greater than from adverse reactions.

In summary, nuclear medicine technologists must be aware of all relevant cautions with the use of interventional drugs prior to their administration. When questions arise, a physician or pharmacist should be consulted. To provide a readily available reference, Swanson et al. (2) have recently compiled a formulary describing relevant cautions (i.e., adverse reactions, contraindications, drug interactions, and incompatibilities) associated with drugs specifically used in nuclear medicine studies (i.e., cautions are based on dosage, route of administration, etc., pertinent to their interventional use).

JAMES A. PONTO, MS, RPh University of Iowa Hospitals and Clinics Iowa City, Iowa

## References

*I.* Cherico VV, Frater SI. Pharmacologic reactions in interventional nuclear medicine. *J Nucl Med Technol* 1988;16:39-41.

2. Swanson DP, Syrja MJ, Anderson AJ, Dick TF. Formulary: Pharmacologic interventions in nuclear medicine. In: Thrall JH, Swanson DP, eds. *Diagnostic Interventions in Nuclear Medicine*. Chicago: Year Book Medical Publishers, Inc., 1985:247-267.

## Reply

We could not agree more with the comments by Ponto in his Letter to the Editor. The sole intention of this Teaching Editorial was to raise the awareness of potential problems that could exist in "Interventional Nuclear Medicine," and it was never intended to be a treatise on this complex subject.

Our thanks to Mr. Ponto for amplifying these and other potential risks when doing these studies.

> VINCENT V. CHERICO, CNMT STEPHAN I. FRATER, MD Rhode Island Hospital Providence, Rhode Island