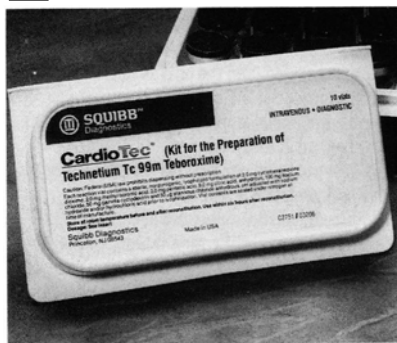


NEW PRODUCTS

■FDA Approves CardioTec



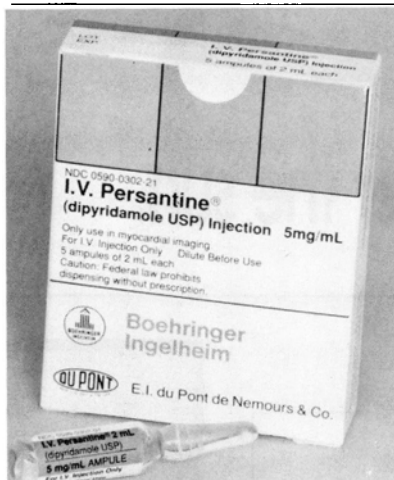
Squibb Diagnostics, a division of Bristol-Myers Squibb company, has received approval from the FDA to market its new technetium agent, CardioTec® (kit for the preparation of technetium ^{99m}Tc tetroxime), for use in myocardial perfusion studies, both at rest and at stress. CardioTec has received a therapeutic rating of 1B from the FDA for a new chemical entity representing a modest therapeutic gain over existing marketed agents. CardioTec can easily be prepared on site as needed and the agent allows physicians to image the heart within five minutes of its administration to the patient. The speed with which it can be used, coupled with the production of high-quality images, offers physicians the opportunity to make quick therapeutic decisions about possible life-saving therapy for patients suffering from or at risk for myocardial infarction. CardioTec is the first of a new class of imaging agents known as BATOs (boronic acid adducts of technetium dioximes) indicated for evaluating coronary blood flow. BATO compounds readily cross cell membranes, including those of the myocardium, even at high flow rates characteristic of patient exercise or pharmacologic intervention. Rapidly eliminated from the heart, BATO compounds allow repeat studies to be performed quickly, including the imaging of a patient's status before and possibly after intervention. The rapidity of the studies offers greater patient convenience and potential for significant cost savings. Using CardioTec, a typical stress/rest study can be completed within 1½ to 2 hours with only 20 minutes of total camera time needed, while a thallium study usually requires 4 or more hours for completion, including 50 minutes of camera time. Squibb Diagnostics has established CardioTec Learning Centers at key locations across the country including Worcester, MA; Philadelphia, PA; Providence, RI; Houston and Dallas, TX; Fairfield and Roseville, CA; Chicago, IL; and Richmond, VA.

Each description of the products below was condensed from information supplied by the manufacturer. The reviews are published as a service to the professionals working in the field of nuclear medicine and their inclusion herein does not in any way imply an endorsement by the Editorial Board of the Journal of Nuclear Medicine Technology or by The Society of Nuclear Medicine.

Janet Skidmore, Industry and Public Affairs, Bristol-Myers Squibb Company, P.O. Box 4000, Princeton, NJ 08543. (609) 921-5615.

Circle Reader Service No. 88

■FDA Approves I.V. Persantine

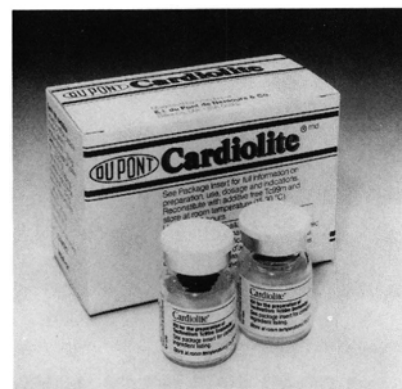


Du Pont Merck Pharmaceutical Company has received approval from the FDA to market I.V. Persantine® (dipyridamole USP), the first pharmacologic alternative to exercise in thallium stress testing for evaluation of coronary artery disease in patients who cannot exercise adequately. The drug will be used to evaluate thousands of patients with suspected heart disease who cannot perform exercise testing on a treadmill or whose tests are unsatisfactory. I.V. Persantine, which is indicated as an adjunct to thallium myocardial perfusion imaging, simulates the physiological effect of exercise by increasing coronary blood flow pharmacologically. I.V. Persantine/thallium testing could be used annually for as many as half a million patients previously unable to be tested effectively. Thallium studies using I.V. Persantine have been conducted at more than 100 clinical sites in the United States and worldwide since 1978, and I.V. Persantine has been available in the United Kingdom since 1987. Persantine is a registered trademark of Boehringer Ingelheim International

GmbH. The intravenous form of the drug will be marketed, manufactured, and distributed in the U.S. by Du Pont Merck under an exclusive licensing agreement with Boehringer Ingelheim Pharmaceuticals, Inc. Roger Morris, External Affairs Dept., Du Pont Company, Wilmington, DE 19898. (302) 992-4747.

Circle Reader Service No. 89

■FDA Approves Cardiolite



Du Pont Merck has received approval from the FDA to market its new technetium agent, Cardiolite® (technetium ^{99m}Tc sestamibi), for use in pinpointing heart attack damage, evaluating perfusion, and determining pumping efficiency in a single study. The agent allows imaging of the heart up to four hours after injection, enabling physicians to first stabilize heart attack patients and then to acquire images that show the heart as it appeared during the heart attack. Following treatment with clot dissolving drugs, Cardiolite can be injected again. A comparison of the original and follow-up images identifies heart tissue saved by the initial therapy. Cardiolite is a nonradioactive preparation that can be stocked in hospitals to make it convenient for emergency and routine examinations. It is transformed into a tracer when combined with technetium. Cardiolite is suitable for planar and SPECT imaging camera systems. The technetium agent offers distinct advantages over thallium. While Cardiolite can be stocked, thallium doses are radioactive when shipped and must be ordered for each study, thus requiring advance scheduling of patients. Also, the four-hour time period for imaging after injection with Cardiolite is more than fifteen times longer than the period during which thallium can be imaged. Roger Morris, External Affairs Dept., Du Pont Company, Wilmington, DE 19898. (302) 992-4747.

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