Welcome to the Winter edition of the WINM Newsletter!

This month, we would like spotlight learning more about safe spaces, inclusion, and empathy by Dr. Jennifer Schroeder as well as work in theranostics in neuro oncology by lead author Dr. Nelleke Tolboom. For those of you who were able to join our successful Paint and Sip Networking Event at the Mid-Winter Meeting, see if you were captured in one of our photos. Please also check out our Women in Nuclear Medicine awards and nominate yourself or someone else!

We would love to feature any of you and your work or interests in an upcoming newsletter -- please reach out if you have news to share. Thank you all for your contributions to medicine and to our specialty.

As my three-year term as WINM Chair is coming to a close, I would like to introduce you all to Dr. Elizabeth Dibble, who will become WINM Committee Chair starting at the Annual Meeting this June. Dr. Dibble is an Associate Professor of Diagnostic Imaging at The Warren Alpert Medical School of Brown University. She is an incredible leader, researcher, educator, clinician, and mentor, and we are lucky to have her in this role. She was instrumental in drafting and spearheading adoption of our SNMMI Family Leave Statement, which impacts so many of our trainees.

Please join me in welcoming Dr. Dibble!

Best,
Joanna

Joanna R. Fair, MD, PhD (she/her/hers)
Chair, Women in Nuclear Medicine Committee, SNMMI
Senior Associate Dean of Graduate Medical Education and DIO Regents’ Professor and Interim Executive Vice Chair, Radiology University of New Mexico
The Women in Nuclear Medicine Paint & Sip event at the SNMMI Mid-Winter & ACNM Annual Meeting was a success! Thank you to our sponsors at Bracco for making this possible.
Women in Nuclear Medicine Awards
Application Deadline: March 15

The Women in Nuclear Medicine She Paved the Way Lifetime Achievement Award seeks to recognize women that have dedicated a significant part of their career to “paving the way” for other women in the field of Nuclear Medicine and Molecular Imaging.

Award recipients will receive a plaque and $1,000 and will be acknowledged at the SNMMI Annual Meeting during the WINM Breakfast. In addition, the award recipient will be asked to speak during the WINM continuing education session at the Annual Meeting the following year.

A special thank you to Global Advanced Imaging, PLLC, the sponsor of the Women in Nuclear Medicine She Paved the Way Lifetime Achievement Award.

Apply Here

The Women in Nuclear Medicine Rising Star Award will recognize women in Nuclear Medicine that are early career professionals (in-training fellows, residents, PhD students, technologist students and junior career individuals <7 years in practice).

This Award will provide the next generation of leaders the opportunity to benefit from recognition early in their career. Award recipients will receive a plaque and $1,000 and will be acknowledged at the SNMMI Annual Meeting during the WINM Breakfast.

A special thank you to Curium, the sponsor of the Women in Nuclear Medicine Rising Star Award.

Apply Here
Safe Spaces, Inclusion, and Empathy
Jennifer Schroeder

I am an identical twin. I start with this because despite being raised in a tumultuous home where I
witnessed two messy divorces, I feel relatively centered. Of course, this feeling of centeredness was not
always the case, but whenever I felt confused as to the state of my inner world or where I belonged in my
outer world as a result of parental screaming matches, I always had my twin to turn to. Not only was she a
good listener, but she knew exactly what I was going through because she was going through it as well.
Being heard and seen in this way was a comfort, even though often it resulted in no perceptible change in
our outer world. In this way, we were safe and held in the inner world of the other and that was enough. It
is because of this shared comfort that I believe we have been able to process some of the more painful
events of our past together and come out the other side as more compassionate and understanding
individuals. Don’t get me wrong, my twin and I have had our fair share of squabbles and hurt feelings over
the years, but when all is said and done, we have realized the true value of our relationship is in holding
space for each other and building each other up despite the struggles we inevitably must face.

Right about now I am sure you are asking what does my relationship with my twin have to do with you or
inclusion? Good question. For many years, I have believed that the world would be a less divisive place if
everyone were born with a twin because twins are uniquely set up from birth to be inclusionary of each
other. My mind immediately goes to the story of a set of twins, Anna and Lisa Hahner, who finished their
Olympic marathon in Rio in 2016 holding hands. They were thinking of nothing in the moment but the
support of the other. That is what I see in the look of joy, compassion, and relief that is on their faces as
they are photographed crossing the finish line hand in hand. Yet the officials at the match scoffed at the
two for what they labeled as childish and attention seeking behavior. Knowing firsthand the support that
lies in such a relationship, I believe the officials reactions were merely a misunderstanding of the twins'
relationship. The twins’ critics could not imagine a world where supporting each other was more important
than finishing ahead of the other (they finished 81st and 82nd). I remember thinking to myself, if the
officials had twins, they too would be celebrating with Anna and Lisa. Still, I could not place my finger on
why twins seemed to exhibit more behaviors that are inclusionary.

It came to me when I was reading the book Mindsight by Dr. Daniel Siegel. I will start by saying that I
cannot recommend this book enough. It has taught me so many invaluable lessons, and I want to share
what this book has taught me regarding safe spaces and how it has spurred me on in my efforts in equity
and inclusion.

Our awareness of another person’s state of mind depends on how well we know our own, and we can only
hope to know our own if we ourselves have had a safe space to process our experiences. Indeed, the need
for safety is an innate human attribute.
For me, my safe space to process was and is with my twin sister. Those who already have a safe space in another person, no matter the nature of that relationship, come from a place of internal security and are already equipped to sense the internal state of others. This security allows them to be a more compassionate coworker, companion, and caregiver who can better practice inclusion.

So here is what I propose we as a collective work towards: acceptance in everything that we do. I know that somehow this acceptance can seem radical at times, and I hope and think we can change that. We can change by creating an environment of inclusion, where everyone feels safe coming just as they are.

I do not mean agreeing with everyone; that is literally impossible as the myriad of experiences of the individuals in our community lends to differences in opinions and beliefs. What I am saying is to not negate the beliefs of others. To negate a person’s beliefs is to invalidate their experiences, which leads to distrust and a loss of that feeling of safety that is so critical to group function and psychological safety.

You may say, ‘easy for you, you have always been accepted.’ While that is true, I am going to argue, if not now, then when can we start making more safe spaces for others? We have to begin somewhere, and I believe in you. I know that you could be a tool of change. This isn’t to say that it won’t be hard. This task of accepting others where they are will probably be the hardest thing we have ever done. Showing up for ourselves can be near impossible some days, and showing up for others often is not natural either. There will be good days and there will be bad days. There will be misunderstandings and inner struggles, but when we have overcome all of that, there will be an unbelievable sense of We in the mind of each and every person that has replaced what was previously an I.

So here is to radical acceptance and creating a safe place in the workplace. May it change your world as it has changed mine. May you take it with you wherever you go. May it create in your life a connection with strangers, patients, and colleagues, and perhaps even a better connection with your friends, family, and significant other. I leave my fellow providers with one more thought to ponder, “people don’t care how much you know, until they know how much you care” –Theodore Roosevelt.

Please see the book The Art of Effective Facilitation: Reflections from Social Justice Educators (2013) by Brian Arao and Kristi Clemens for ideas if you feel inspired to begin creating a safe space in your department and healthcare facility.

References:
Jenn Donahue PhD is a retired US Navy Captain and former Commodore for an 1,800 personnel Regiment. She is also a civil engineer who works on large scale, high profile geotechnical projects. Over her 27-year military career, Jenn has built a bridge across the Euphrates River in the midst of the Iraq war, commanded an 800-personnel Battalion in Afghanistan, and constructed combat outposts in the middle of deserts filled with insurgents. Jenn has led earthquake and tsunami reconnaissance missions in places like Samoa and Japan; designed the seismic plans for a bridge over the Panama Canal; and built roads by blasting and drilling in the coldest climes of Ketchikan. Astonishingly, Jenn has even served as the seismology expert at no fewer than five nuclear power plants. Jenn passionately helps others overcome the obstacles that prevent them from achieving their grandest dreams and most ambitious goals. Today, Jenn is the Founder of JL Donahue Engineering, Inc. and Dare to Rise. She also lectures at UC Berkeley and UCLA.
Nuclear medicine has the potential to change the landscape of theranostics in neurooncology, according to a new article published in the February issue of The Journal of Nuclear Medicine (JNM). With recent advances in techniques to permeate the brain-blood barrier (BBB), the prospect of using radiopharmaceuticals to treat brain tumors, such as meningiomas, gliomas, brain metastases, and pediatric brain tumors, is promising.

“In the last decade, we have observed a huge step forward in treatment options for a wide range of tumors in terms of both survival and quality of life. However, therapeutic approaches to brain tumors remain a challenge, with considerable limitations regarding delivery of drugs,” stated the article’s authors. “There has been renewed and increasing interest in translating the popular theranostic approach well known from prostate and neuroendocrine cancer to neurooncology. Although far from perfect, some of these approaches show encouraging preliminary results.”

In this state-of-the-art JNM article, authors provided a general overview of the use of theranostics for four areas of neurooncology and provided perspectives on future research needs. The article focused on meningiomas, gliomas, brain metastases, and pediatric brain tumors.

**Theranostics in Neuro Oncology: Heading Toward New Horizons**

Nelleke Tolboom

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**Share your achievements with us!**

If you have any good news (professional or personal) related to yourself or women colleagues in the field of nuclear medicine, please forward a photo of you in your office (home office is fine) or clinic along with text describing yourself (name, title, institution) and any accomplishments you’d like to celebrate to win@snmmi.org. We’d love to get to know you and celebrate with you via @women_in_nuclear_medicine on Instagram.
The WINM committee is charged with promoting women physicians, scientists and technologists in nuclear medicine and molecular imaging; fostering the development of professional interests; addressing problems encountered in the practice of nuclear medicine; promoting leadership and career development in women; raising awareness of scientific contributions of women in nuclear medicine; recognizing the challenges of balancing career and family; promoting fair and equitable treatment; and improving the climate for women in nuclear medicine in all stages of their careers.

**WINM Committee Members**

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