

MEDICAL PHYSICS WORLD

Bulletin of the International Organization for Medical Physics

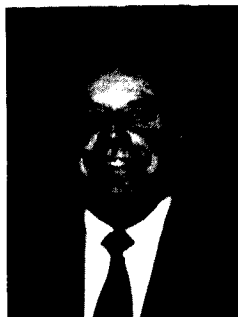
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President's Message

Dear Fellow Member of IOMP,

Is anybody out there?



Although this is allegedly the Modern Age of Communication, a major problem for your Officers, Chairmen of our Committees and Regional Groups as well as our more active members has been and remains to evoke responses from our Adhering National Organizations, who are the backbone and membership of IOMP. For example, at least, once per year, I have written to the President of each National Organization seeking comments, views or proposals. In response to a total of about 200 letters, I have so far received about 10 replies in total.

In some cases, my letter may have been addressed to a now Past President who has not passed it on. However, IOMP can only keep its records up-to-date if each National Society responds promptly to the Secretary-General's annual request for updated information. Many National Societies fail to do so and some subsequently complain that communications have been sent to the wrong person! Telepathy has yet to become a reliable means of communication!

IOMP can best fulfill our objectives and serve us, the membership, if everyone is prepared to contribute individually and through their National Organization. It is particularly important to establish national opinions when IOMP has to address major issues, such as those we are about to face and will need to consider in Nice.

One issue is the future of the International Union for Physical and Engineering Sciences in Medicine (IUPESM), which has again been questioned in view of its limited achievements. You will recall that IUPESM was formed as an umbrella organization, encompassing IOMP and our sister body the International Federation for Medical and Biological Engineering (IFMBE) while keeping their independent identities. The principal purposes for establishing the Union were to organize the joint World Congress, encourage collaboration in areas of mutual interest and, particularly, to seek to become a Full Member of the International Council of Scientific Unions (ICSU) with access to its outstanding stature and resources. To date, IUPESM has been only an Associate Member of ICSU with little tangible benefit and no obvious prospect of becoming a Full Member. Apart from the joint Developing Countries Committee, lack of resources has prevented any real progress being made on broader collaboration and, in practice, the triennial World Congresses are not dependent on IUPESM for their organization. As your President and on behalf of the President of IUPESM, I have produced a Discussion Document which dispassionately considers 4 options for the Union's future. These are:

- i) Continue with IUPESM in name only;
- ii) Discontinue IUPESM as soon as practicable, taking into account ramifications for future World Congresses;
- iii) Continue with IUPESM and an Action Plan whose outcome will be the basis for a decision on its future at the Millenium World Congress; and
- iv) Amalgamate IOMP and IFMBE and IUPESM.

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Secretary-General's Report

By the September Meeting in Nice I will have served 3 years as an insider at IOMP. My early information on IOMP came from some Swedish colleagues (Brenner, Waldeskog and Walstam) who were very active in the organization during its early phase. Also, I had been the IAEA liaison officer to the IOMP almost 7 years. In spite of this, I must confess that I did not have much knowledge of IOMP when I agreed to be one of the officers for a three year period. I will try to summarize my impressions.

At present, according to the new directory there are 12,941 members, belonging to the IOMP member societies, an increase of 1,830 since 1994. In addition there are a number of corporate affiliates. The number of IOMP member societies is 64. During the three year period 9 new national organizations have been accepted by the officers of IOMP. Their membership applications have, however, to be presented at the next IOMP Council Meeting in Nice for ratification. These countries are: Algeria, Cuba, Ecuador, Estonia, Georgia, Lithuania, Morocco, Ukraine and Zambia — in all almost 500 new members.

The IOMP is obviously today a large and expanding organization. There is a great need to support both new members and also some old members with small resources. This is a problem as IOMP is operating with a small budget. Indeed the administration is carried out totally on a voluntary basis. The secretarial help that is needed by the three officers (president, vice-president and secretary-general) and the honorary treasurer as well as the MPW editor is covered by their universities.

The IOMP office is in principle at the department of the secretary-general. I can assure that there is a steady stream of fax, e-mail and letters every day. Modern, rapid communication is a must, but at the same time a problem, as there is a tendency that also unimportant letters pop up as e-mail. This means that part of the time that the officer is setting aside for IOMP work is taken away by unnecessary readings. I think that in the future the IOMP must be supported by some regular administrative (secretarial) help at least in the office of the secretary-general. This could solve part of the problem. Unfortunately this requires more money.

(Continued on page 3)

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The document is about to be circulated to all National Organizations for their consideration and to seek their views. This represents a major matter for debate at the General Assembly in Nice. Written responses from National Organizations are vital, together with full briefing of your representative(s) at the General Assembly.

If anybody is out there, please respond!

By coincidence, ICSU has a system of reviewing periodically its relationship with Members and that with IUPESM will be undertaken and completed within the next 10-12 months. This is extremely timely. Again on behalf of our Constituent Organizations, I have drafted the brief report requested by ICSU. After its consideration by Officers of IUPESM, IOMP and IFMBE, the report will be reviewed and submitted to ICSU against a tight deadline of 30 April 1997. The issue of becoming a Full Member will again be raised and we are seeking a more positive and productive relationship. Opportunities for further representations to ICSU and its Review Panel will be sought.

What about the future of IOMP itself? That depends on us, our colleagues and our National Society. IOMP is our vehicle but not only are we the steering wheel but vitally its engine and fuel. Some parts are functioning well and there are encouraging signs of growing enthusiasm from individuals to contribute. We will be seeking such committed members to participate as IOMP Officers, Chairmen and Committee Members at the General Assembly in Nice. Are you and your National Organizations willing to contribute further in increasing the meaningfulness of IOMP? Otherwise, the future itself could be a matter for debate at the Millennium Congress! Please respond positively before and during the Nice Congress, when I hope to meet you, and afterwards. Is anybody out there?

Keith Boddy, D.Sc.
President, IOMP

Officers and Council of the IOMP

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(Continued from page 2)

The IOMP has several continuously running activities (its official journal and several committees). All these activities must be coordinated by the officers. This is not a simple task as the officers are in different parts of the world and partly act separately. Another problem is communication with some of the national societies as some do not respond. Recently for instance, a new directory was completed, which meant a lot of work. This directory was sent out to all the national societies and corporate affiliates, more than 100 addresses. I asked at the same time in an enclosed letter for an up-date on information from the national societies. Still, there are very few answers. Please, help!

In spite of the negative sides I think that the IOMP really is needed. The programme of the Nice Meeting is exciting and the region around Nice is an attraction. I wish future officers of the IOMP success in operating the organization.

Hans Svensson, Ph.D.
Secretary-General, IOMP

CALENDAR OF EVENTS

21-31 July 1997: 39th Annual Meeting, American Association of Physicists in Medicine, Milwaukee, WI, (Lisa Rose Sullivan, Projects Manager, AAPM, One Physics Ellipse, College Park, MD 20750-3846, U.S.A., [Tel: 301-209-3350, Fax: 301-209-0862]).

14-19 September 1997: 11th Triennial Conference, International Organization for Medical Physics, Nice France, (Prof. H. Svensson, Radiation Physics Department, University Hospital, 90185 Umea, Sweden, [Tel: 46-90-103891, Fax: 46-90-101588]).

14-19 September 1997: World Congress on Medical Physics and Biomedical Engineering, Nice France, (NICE '97, SEE, 48, rue de la Procession, F-75724 Paris Cedex 15, France, [Tel: 33-1-44496060, Fax: 33-1-44496044, E-mail: nice97@univ-paris12.fr]).

14-19 September 1997: 16th Meeting of the European Society for Therapeutic Radiology and Oncology, 9th European Conference on Clinical Oncology, Cancer Research and Cancer Nursing, Hamburg, Germany, (FECS Secretariat, UH Gasthuisberg, Herestraat 49, B-3000 Leuven, Belgium, [Tel: 32-16-347680, Fax: 32-16-347681]).

3-5 December 1997: American Association of Physicists in Medicine, Joint Meeting with the Radiological Society of North America, Chicago, IL, U.S.A., (AAPM, One Physics Ellipse, College Park, MD 20740-3846, U.S.A., [Tel: 301-209-3350]).

13-17 May 1998: 6th International Meeting on Progress in Radio-oncology, ICRO/OGRO 6, Salzburg, Austria, (Marleen Stevens, ICRO Office, Dept. of Radiotherapy, UH Gasthuisberg, Herestraat 49, B-3000, Leuven, Belgium, [Tel: 32-16-34-76-85, Fax: 32-16-34-76-81]).

5-10 July 1998: 12th International Conference on Solid State Dosimetry, "Casa del Cordón" Conference Center, Burgos, Spain, (Professor Yigal S. Horowitz, ISSDO Chairperson, Department of Physics, Ben Gurion University of the Negev, POB 653, Beersheva 84105, Israel, [Tel: 972 7 461567, Fax: 972 7 472904, E-mail: yigal@bgumail.bgu.ac.il]).

9-13 August 1998: 40th Annual Meeting, American Association of Physicists in Medicine, San Antonio, TX, U.S.A., (Lisa Rose Sullivan, Projects Manager, AAPM, One Physics Ellipse, College Park, MD 20740-3846, U.S.A., [Tel: 301-209-3387, Fax: 301-209-0862]).

25-29 July 1999: 41st Annual Meeting of the American Association of Physicists in Medicine, Nashville, TN, U.S.A., (Lisa Rose Sullivan, Projects Manager, AAPM, One Physics Ellipse, College Park, MD 20740-3846, U.S.A., [Tel: 301-209-3387, Fax: 301-209-0862]).

25-30 July 2000: World Congress on Medical Physics and Biomedical Engineering/42nd Annual Meeting of the American Association of Physicists in Medicine, Chicago, IL, U.S.A., (Lisa Rose Sullivan, Projects Manager, AAPM, One Physics Ellipse, College Park, MD 20740-3846, U.S.A., [Tel: 301-209-3387, Fax: 301-209-0862]) and (IUPESM Secretariat, Prof. Josf Spaan, Department of Medical Physics, AMC University of Amsterdam, Meibergdreef 15, 1105 AZ Amsterdam, The Netherlands).

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Vice-President's Report

In my role as an Officer of the IOMP for the past decade, firstly as Secretary-General and now as Vice-President, the major emphasis of my activities has been to keep the Organization going. Certainly we made a few improvements, such as establishment of our Libraries, but most of my efforts and thoughts have been concentrated on the more obvious pursuits such as increasing our membership, expanding our educational programs, maintaining our triennial World Congress, etc. Now that I am about to become your President, however, I feel that I need to take a more proactive, rather than reactive, role in the affairs of the IOMP. In order to do this effectively I have come to realize that I must decide in my own mind what I think the IOMP is all about. Why have an International Organization for Medical Physics? Is the IOMP achieving its goals and, if not, why not? I want to devote this Vice-President's Report to giving you my views on this topic and seeking yours.

The IOMP Statutes state that the aims of the Organization are to:

- (a) *Organize international cooperation in medical physics and to promote communication between the various branches of medical physics and allied subjects.*
- (b) *Contribute to the advancement of medical physics in all its aspects.*
- (c) *Advise on the formation of national organizations of medical physics in those countries which lack such organizations.*

These all seem to be very laudible aims but firstly, is this what the IOMP has been doing and, secondly, is this really what we want the IOMP to do? The answer to the first of the questions is a limited yes. Yes, we have helped our colleagues to form national medical physics organizations: in the past five years alone I know of 20 such national organizations we have helped to form. Also, yes, we have contributed to the advancement of medical physics: we have (we hope) convinced the International Labor Office to recognize the occupation of *Medical Physicist* as a separate category. Furthermore, we have helped to advance medical physics expertise in developing countries by establishment of over 70 libraries, sponsorship of workshops/courses, and collaboration with the IAEA in support of their developing countries programs. And again, yes, we have organized international cooperation and promoted communication. Our Triennial World Congresses have been the principle means by which we have achieved this, but we have also had some success with our regional organizations, EFOMP in particular.

Unfortunately, however, I feel we may have failed to achieve our goals as often as we have succeeded. In my opinion, we ought to have been able to sponsor far more workshops and courses than we have. We have tried to find ways to transport discarded equipment from developed to developing countries, with very little success. We had hoped that our World Congresses would promote interaction between medical physicists and biomedical engineers whereas, in reality, these have in the most part become two separate conferences in the same place at the same time, with very little interaction between the two groups of specialists. Our efforts to interact via the International Union for Medical Physics and Biomedical Engineering (IUPESM) have been almost totally ineffective (see President's Report) Your President's efforts (in his 1994 Action Plan) to establish more Regional Liaison Groups and to enhance communication between national organizations have been equally unproductive.

In summary, therefore, any euphoria your Officers have due to our many successes must be somewhat dampened by our failures. As your incoming President, just like my predecessor Professor Boddy three years ago, I want to do something about this. I want to find a viable way to make us all proud of being members of the IOMP. Proud of its aspirations and proud of its achievements. I think I know how to do it and that is to **make** full use of the one resource we have most of: people. I intend to involve more of our members in more of our activities. I am certain that for every member presently involved in IOMP affairs, there are ten more who *could, should* and would, become involved if given the opportunity. You'll be hearing from me!

Let me start by asking any and all of you who have ideas as to how the IOMP can better serve its members, or who want to become involved in our activities, to contact me. I promise I will respond.

Wish me luck and come visit our Homepage at <http://www.medphysics.wisc.edu/~empw/iomp.html>.

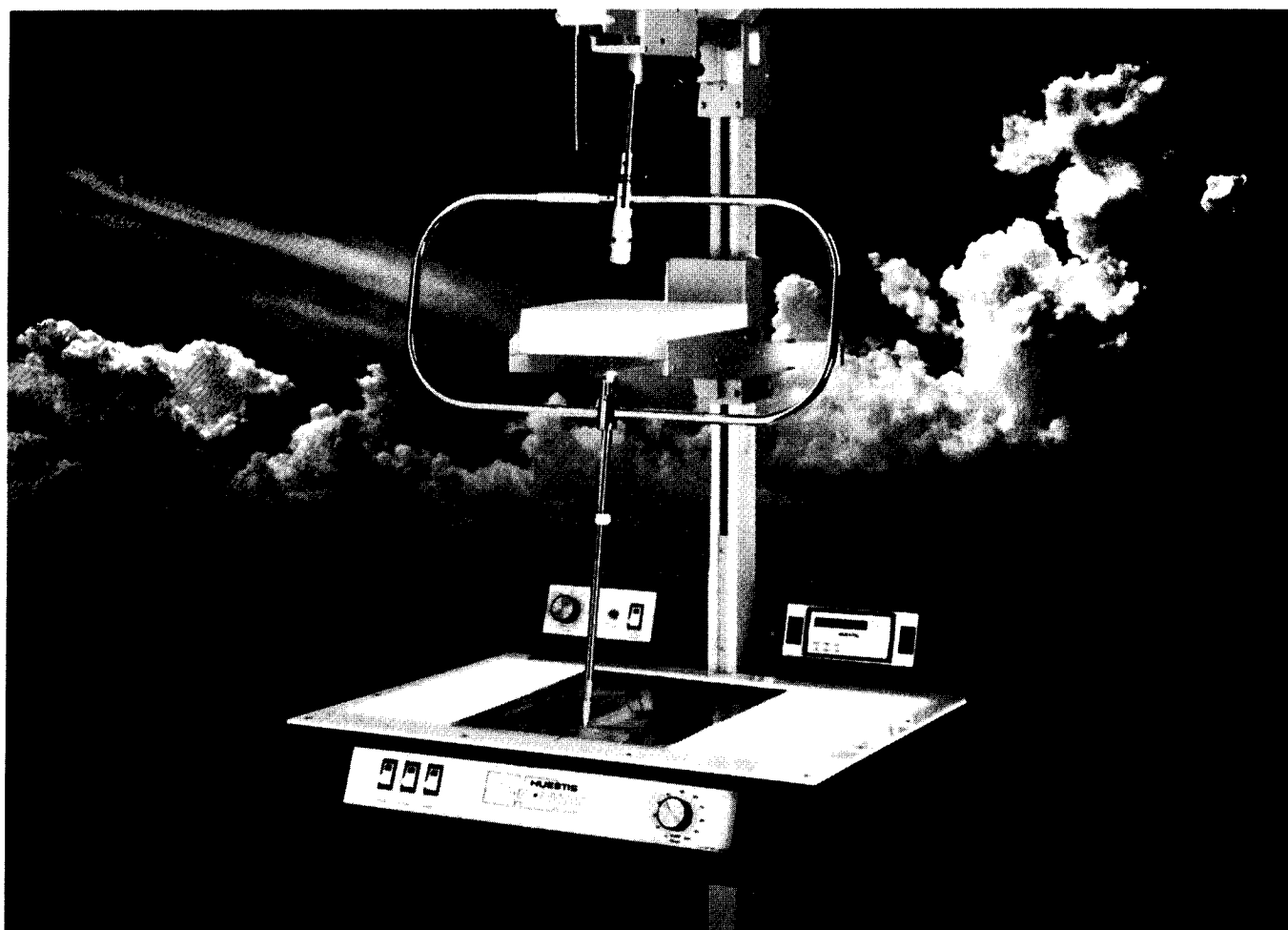
Colin G. Orton, Ph.D.
Vice-President, IOMP

Honorary Treasurer's Report

Travel grants have recently been awarded to 23 of the developing countries to assist delegates to attend the World Congress in Nice this autumn. Almost the entire IOMP treasury has been spent in trying to assist as many members to attend the Congress as possible, but nevertheless I know that many of the developing countries will have been disappointed by the size of the grant and several requests were received too late to be considered. I have however made a bid to the Nice organizers for them to waiver 20 registration fees in order to further assist the developing countries but I have yet to receive a reply. The total IOMP award amounted to US\$ 70,000 which was made possible from country subscriptions and the continued support of our corporate members and in particular from two generous UK donations of US\$ 4,800 and US\$ 3,200 from the Institute of Physics & Engineering in Medicine (IPEM) and from the Institute of Physics (IOP) respectively. Despite strenuous efforts of both your President and Treasurer sponsorship has become increasingly hard to secure these last two years and therefore any assistance that members can offer with regard to this matter would be greatly appreciated. The latter could simply be the names and addresses of manufacturers from which your department and associated departments such as oncology, radiotherapy, radiology, etc. purchases major medical equipment.

Audited accounts for the IOMP for the years 1994, 1995 and 1996 will be presented to members at the General Assembly in Nice, and for those members not attending they or a summary will be published in the next edition of *MPW* following the Congress.

Ann Dixon-Brown
Honorary Treasurer, IOMP



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IOMP Libraries Program Report

Since the last issue of *Medical Physics World*, we have added new libraries in the following cities: San Jose, Costa Rica, Havana, Cuba (INOR), Mexico City, Mexico (UNAM), Windhoek, Namibia, Hanoi, Vietnam. Additionally, we have pending applications from Shoumen, Bulgaria, Chittagong, and Bangladesh. A warm welcome to all these libraries!

If you are interested in creating a new regional library, please contact me at 7649 Cedar Elm Dr., Irving, TX 75063 USA. You will be provided with a questionnaire which could be completed and returned to me in order to initiate a library. Since we do not have unlimited donations, you are encouraged to develop a regional library whereby the medical physicists in your region can equally access the materials. Please note that all materials are the property of the institution at which the library exists.

Following is an updated list of IOMP/AAPM Libraries (As of April 1997):

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|-------------------------------|----------------------------------|
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NEW CURATOR OF LIBRARIES NEEDED

Over the past 7 years, the Developing Countries Libraries Program has grown from 13 to 75 libraries. The program has flourished and hopefully has met many of the needs of its libraries. The success of the program has been due to the generosity of many individuals, organizations and corporations, without which none of this would have been possible.

An excellent opportunity to serve both the Medical Physics profession as well as many countries throughout the world currently exists. Applications are now being accepted to fill the position of Curator of Developing Countries Libraries. The position involves ongoing publicity of the program through contact with individuals and organizations to obtain donations, matching these donations with appropriate libraries based on the need established in the computer database (Paradox), and involves regular correspondence with the libraries themselves.

For more information, please contact Catherine Alekhteyar, Curator, IOMP/AAPM Libraries Program.

Cathy Alekhteyar, MS
Curator, IOMP/AAPM Libraries

Radiation Therapy Procedure Manual For Developing Countries

Hillbrow Hospital Radiation Therapy Procedure Manual, compiled, edited and published by Dr. M. J. Scott. This manual is useful to Radiation Oncologists in areas under-supplied by physicists and to training centres for radiation oncologists. It is 231 (A4) pages long. Available from Dr. M. J. Scott, Department of Medical Physics, Hillbrow Hospital, Joubert Park 2044, Soth Africa for a nominal copying and shipment fee.

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MEDICAL PHYSICS WORLD

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Adhering National Organizations 1996

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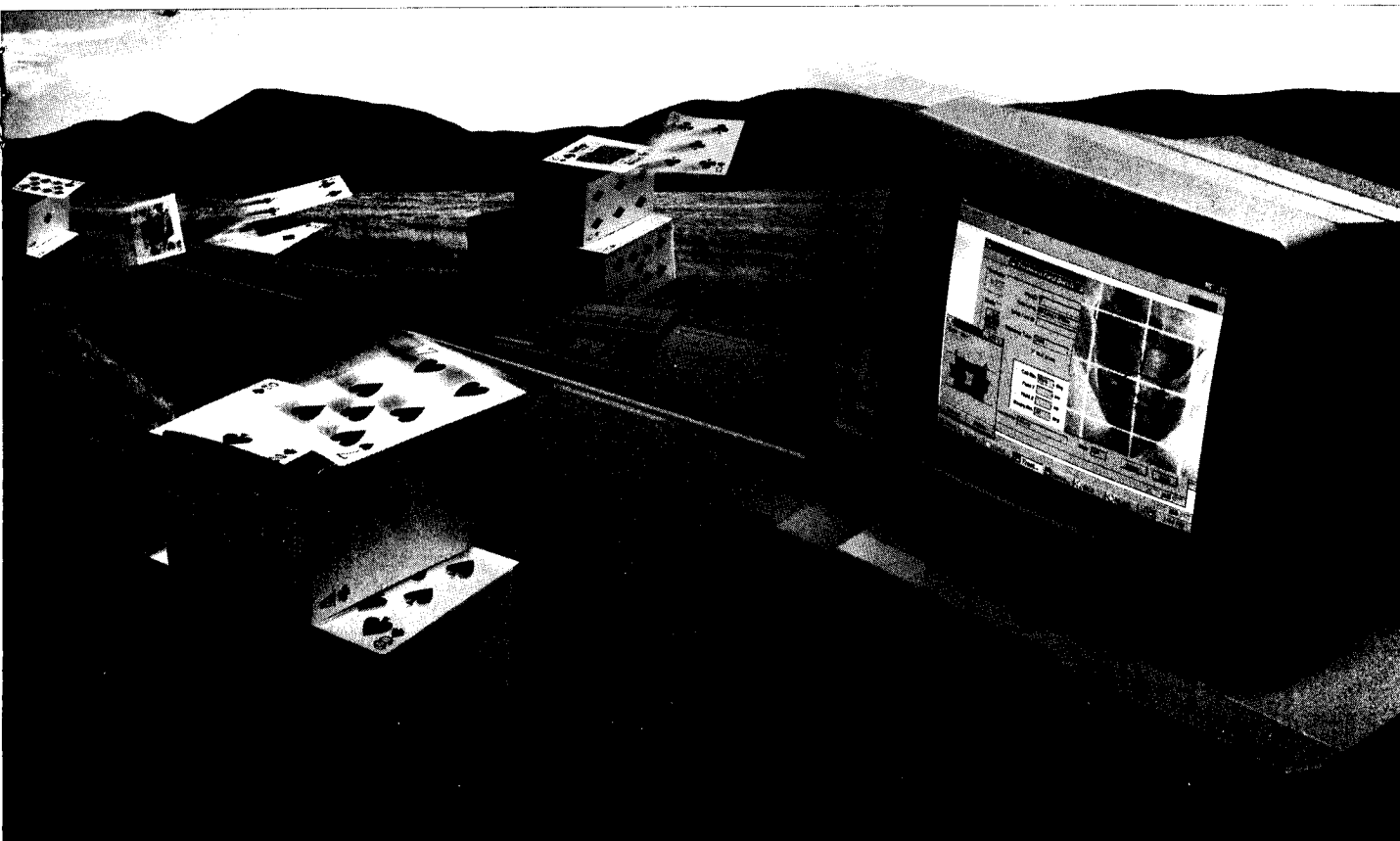
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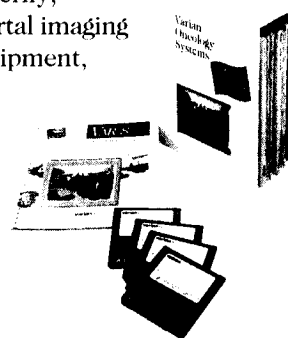
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Status of Medical Physicists in Developing Countries

In a response to a proforma published in MPW, 11(2), page 15, 1995, eleven countries (Brazil, India, Jamaica, Mexico, Nepal, Philippines, South Africa, Tanzania, Turkey, Ukraine and Venezuela) completed the proforma. Following is a summary of the data base:

1. Is Medical Physics recognized as an independent discipline?
Yes — 6 No — 5
2. Is there a regulatory requirement that Medical Physicists should be appointed in radiation therapy/radiodiagnosis nuclear medicine departments?
Yes — 6 No — 5
3. What is the minimum qualification required for appointment as a Medical Physicist?
M.Sc. — 8 B.Sc. — 3
4. Do you have opportunities for career advancement?
Yes — 3 Not much — 8
5. Is the emolument of Medical Physicist in comparison with other medical and paramedical staff satisfactory/unsatisfactory?
Satisfactory — 4 Unsatisfactory — 7
6. How do you think that IOMP can help to improve the status of Medical Physicists in your country?
By organizing workshops, regional conferences and training programmes — 7
By providing library facilities — 3
IOMP should take it up with the concerned national governments — 5
Technical assistance in setting up regulatory bodies.
M. S. S. Murthy, Ph.D.
Chair, IOMP Developing Countries Committee

"Twinning" of Medical Physics Departments

In response to a report on "Twinning" of Medical Physics Departments, published in MPW, 11(2), page 8, 1995, the following ten physicists have requested support from medical physicists in developed countries:

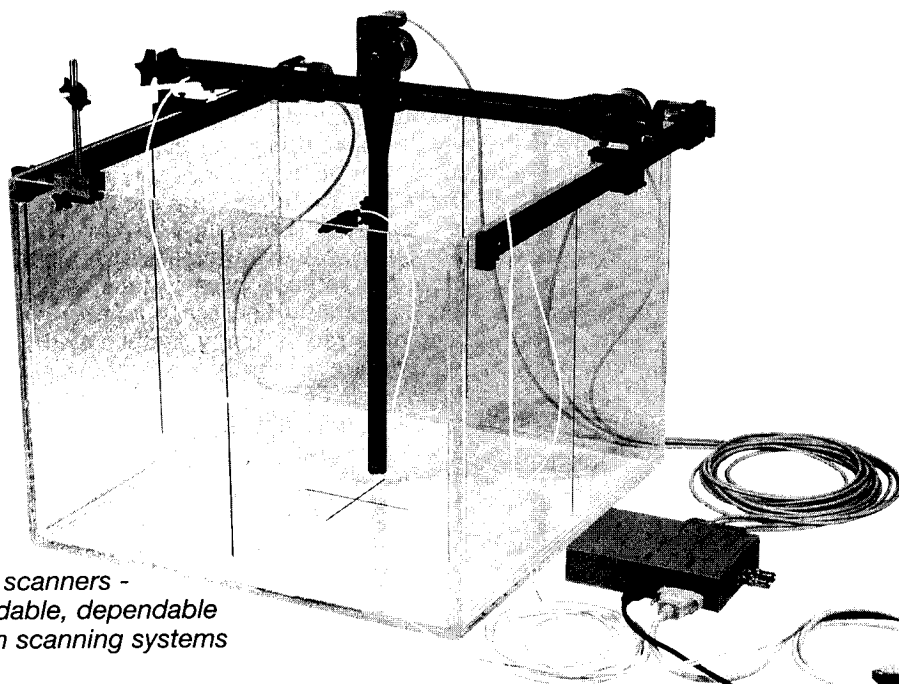
1. Lic. Mariana Levi de Cabrejas
Larroque 486
(1828) Banfield, Argentina
2. Mr. Benjamin Franklin
Dept. of Radiotherapy
Govt. General Hospital
Kurnool 518002 (AP), INDIA
3. Dr. S. P. Mishra
Head, Dept. of Medical Physics
Kamala Nehru Memorial
Hospital
(Regional Cancer Centre)
Allahabad 211 002 (UP), INDIA
4. D. V. Padmanabhan
Professor & Head
Div. of Radiation Physics
Regional Cancer Centre
Trivandrum - 695011, INDIA
5. Mr. N. K. Painuly
Nuclear Medicine & RIA Unit
PG Dept. of Medicine
SN Medical College
Agra 282003 (UP), INDIA
6. Mr. Surjit Pal
Div. of Radiation Oncology
Nanavati Hospital
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7. Mr. Manoj K. Semwal
Dept. of Radiotherapy
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Apdo. 21827, Caracas 1020A
Venezuela

Medical physicists from developed countries interested in "twinning" with any of the above departments should contact the department directly, or Ms. Ann Dixon-Brown, IOMP Treasurer or Dr. Murthy, Chair of IOMP Developing Countries Committee.

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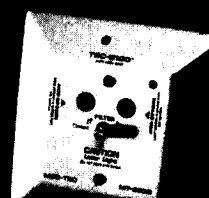
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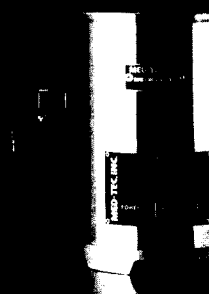


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Medical Physics Practice and Status in Jordan

Medical physics is relatively a new profession which is still unrecognized in Jordan as independent work category. The first appearance of medical physics in Jordan, dates back to the end of 1965 (with assistance of the IAEA expert Dr. J. Osman) in response to Cobalt therapy requirements—which take considerable credit for introducing physicists into hospitals (although we started orthovoltage therapy in 1956 but without physicists). The beginning of 1966 witnessed the creation of the first post for medical physicist at Al-Bashir (governmental) Hospital in Amman, where I was appointed as the sole physicist at that time to deal with problems related to dosimetry, treatment planning, radiation protection, and later quality assurance and equipment selection. At present, we still have only one radiotherapy center, with 4 medical physicists, 10 radiotherapists, and 9 technicians, serving about 4 million people. This work load is covered by two Cobalt units, 18 MeV Linear Accelerator, Superficial X-ray unit, and a Simulator. We had Brachytherapy during the years 1972-1979 using old manual intracavitary technique with Caesium needles and tubes. This practice will be resumed soon, but with safer techniques using remote afterloading system. Nuclear Medicine is covered by 7 centers: 5 in hospitals and 2 in private clinics.

In January 1991 the Jordanian Association of Medical Physicists was founded with six members with the objective of providing a forum to share ideas through scientific meetings and collective discussions, and to encourage research and development of the profession. At the end of 1991, our Association applied for IOMP membership. Two years later, we joined the IOMP Libraries Program, to gain access to worldwide literature, and fill some gap in our needs. We are grateful to the Libraries Curator Mrs. Cathy Alekhtiar for helping us build up our IOMP library which is maintained at Al-Bashir Hospital.

The need of medical physicists in Jordan, has not been adequately assessed for linking educational initiatives with future demands. One of the governmental universities initiated in 1988 granted Post Graduate Diploma in Medical Physics for two years. This program was discontinued in 1991 but may be resumed soon. Another private university started B.Sc. degree in the same field in 1992. Both programs stress the importance of laboratory exercises and field training in hospitals, with enrollment of few candidates per year. Very few job opportunities are available for medical physicists, even in areas where there are obvious need for their services. Actually, only 9 medical physicists are hospital based, involved in their main fields of activity namely: radiotherapy, nuclear medicine, radiology, and physiotherapy. Most of the practicing medical physicists have basic graduate degrees in physics or allied fields, followed by on-the-job training, and some get their post graduate degrees aboard in Medical Physics or Radiological Health. Few others work in

(Continued on page 11)

Report From Zambia

The Radiological Society of Zambia (RSZ) conducted a seminar on "Quality Control and Quality Assurance in Medical Imaging Technology" in Lusaka, Zambia from 1 to 3 August 1996. The seminar was attended by more than 50 people including radiologists, radiographers and scientists. The IOMP was represented by Prof. Andries van Aswegen from South Africa who is a member of the IOMP Developing Countries Committee. Matters regarding the radiological service rendered in Zambia were discussed with special emphasis on the different levels of application of quality assurance and control.

The RSZ was founded in 1971 and held regular meetings until 1984, whereafter the Society was inactive and activities were resumed with this seminar. Most radiation work in Zambia is in Diagnostic Radiology and the largest department is at the University Teaching Hospital (UTH) in Lusaka headed by Dr. R. Mkandawire. The first scintillation camera in Zambia has recently been installed at the UTH through an IAEA program. The IAEA is also planning the establishment of a radiotherapy facility at the UTH and various persons are currently undergoing training. Two physicists, Messrs. O. Hachinene and P. Kalebwe, are involved in the establishment of a medical physics training program in Zambia.

Prof. Andries van Aswegen
Member of IOMP
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(Continued from page 10)

universities, instrumentation companies, or regulatory work related to licensing and inspection. However, perspective will be opened soon with the opening of the following new facilities:

- Hope Center for Healing: a new modern specialized center for Cancer diagnosis and treatment, established by "The General Union of Welfare Societies," and includes all relevant medical specialities.
- Gamma Knife Radiosurgery: is just making its entry into Jordan (by one of our private hospitals) as the first and sole country in the Middle East to introduce this technology.
- Several other new private hospitals are in their way to open more nuclear medicine, CT, and MRI facilities in addition to Laser applications.

The status of medical physicists in Jordan is far below our aspirations because health authorities do not recognize us by a rank comparable to that used for doctors and engineers. We are not considered as members of the hospital professional staff who deserve similar working conditions as radiotherapists and medical engineers, concerning salary structure, promotional avenues, career opportunities, and other professional privileges. We hope that IOMP would play an important role in raising the status of medical physicists in the developing countries which still lags behind. We wish every success to its efforts with the International Labour Classification of Occupation, which would help greatly in achieving our goal. So we may need in future—for facilitating recognition

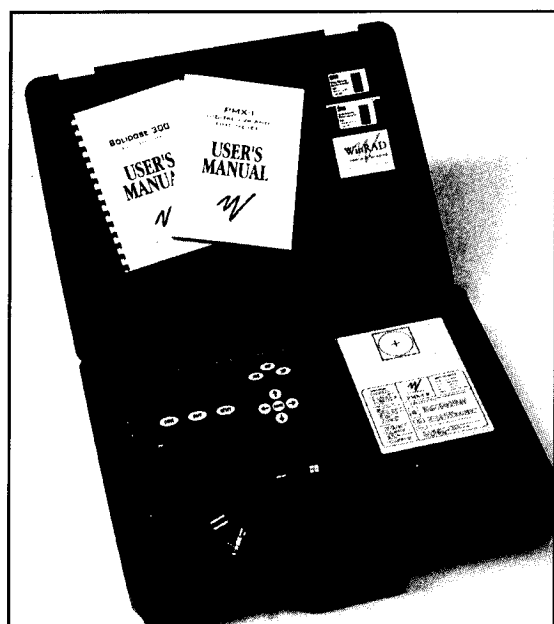
by Health authorities—to issue some sort of legal mandatory requirements for professional qualifications prior to employment, and to develop framework of competency approach through accredited scheme of training, registering, and chartering.

Lastly, we look forward to the future—whose perspective is promising—for enlarging the scope of medical physics applications in Jordan. We hope in the course of time as facilities develop in Jordan, there will be more growing demand for medical physicists, and so more consideration and weighting will be given to the profession. Nevertheless, the practice of medical physics although poor in material award, but it is technically valuable, gratifying, and an interesting career.

Rihab Hatough, M.S.
President, JAMP

Polish Journal of Medical Physics and Engineering

The Polish Society of Medical Physics (PSMP) publishes the official "Polish Journal of Medical Physics and Engineering" on a quarterly basis since 1995. PSMP requests collaboration from international colleagues to send their scientific articles for publication in this journal. PSMP is also interested to send this journal to the IOMP libraries or to exchange it with other societies publications. Interested individuals or societies should contact Ewa Zalewska, editor in chief at Centrum Naukowe Medycyny Kolejowej Ul. Grojecka 17a, 00-973 Warsaw, Poland.



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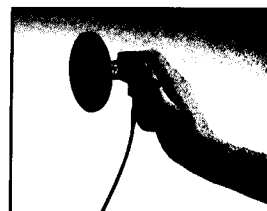
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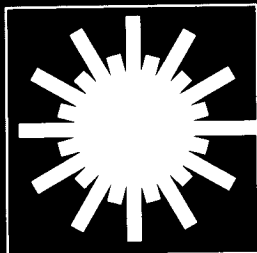
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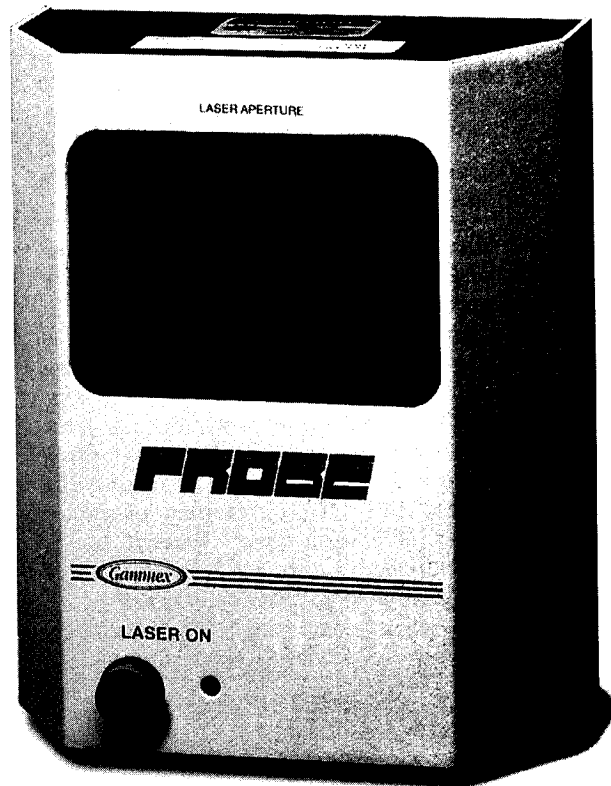
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