

“Image guided treatment is the future”

Jim Reekers, MD, Professor of Radiology at the Academic Medical Center, University of Amsterdam, will speak about “Diabetic foot perfusion imaging: The truth behind arterial tubes” in this year’s Röntgen lecture at the German Röntgen Congress in Leipzig. In our interview he elaborates on today’s challenges for radiology and why he would advise young radiologists to specialise in interventional radiology.

Professor Reekers, in your Röntgen lecture you speak about diabetic foot perfusion imaging. What sparked your interest in this topic?

As a researcher you should always be focused on the things that do not follow the expected pathway. Analyzing failure often gives more inside information than successes. Why do diabetic patients lose their limb despite optimal visual revascularization? Why is 20 percent failure after endovascular treatment for CLI never reduced? The answer is that these 20 percent are probably different from the 80 percent

successful procedures. Finding this difference will hold the answers to improve our results.

You are a renowned interventional radiologist. Would you advise young radiologists to specialize in any field – and would you especially recommend interventional radiology? If yes – why?

I would certainly advise young radiologists to go for IR. This is an optimal combination between imaging, treatment and being a clinician. Image guided treatment is the future and radiologists should be leading. However, the training should change as more clinical experience is needed to be successful.

From your point of view: what are the biggest challenges right now for interventional radiology?

The biggest challenges are to develop IR to a full clinical specialty with direct referral, admission rights and financial independence from the imaging part of radiology.



Jim Reekers, MD

However, it is good not to leave the house of radiology because imaging is the cornerstone of everything we do.