

STELLINGEN

1. Since cavitation does not play an important role in the clinically observed ultrasound contrast effect, the widely used term "microcavitations" should be replaced by "microbubbles."
2. It is paradoxical that contrast echocardiography is often considered a "minimally invasive" technique when cardiac scintigraphy, involving the injection of substances which expose the internal organs to ionizing radiation and are potentially more toxic, is usually considered a "noninvasive" technique.
3. Physicians should not be certified as cardiologists until they are competent in independent performance and interpretation of echocardiograms.
4. Cardiologists must be able to perform and interpret echocardiograms without the aid of a technician.
5. An echocardiography examination report should include copies of the echocardiographic tracings themselves; this is important since the quantitative measurements are not as yet as informative as the overall image.
6. It is not worth ordering an echocardiogram to search for a cardiac source of emboli if the history, physical examination and ECG do not suggest a cardiac source.
7. New medical technologies for the time being tend to be additive rather than replacements for old methods, though the latter argument is often used to justify the new methods.
8. The reason for the increased difficulty for Europeans to publish in the American literature has more to do with American parochialism than outright chauvinist discrimination.
9. Most physicians and laymen on both sides of the Atlantic have yet to realize that over the past decade northern European medicine has largely caught up to American medicine, and sometimes exceeded it, in its level of technological sophistication. If the biomedical budgetary restrictions of the Reagan administration are continued, this trend in favor of northern European medical leadership is likely to continue.
10. The referring clinical cardiologist should review catheterization data for him/herself and decide on any surgical recommendation, rather than having the catheterization team as the primary decision locus.
11. The intracoronary administration of Thallium-201 has not been sufficiently studied to justify it being used as the primary method to validate the efficacy of myocardial salvage after intracoronary streptokinase, despite its use to this end in a recent article (Markis et al, NEJM 305:777, 1981).
12. Antiarrhythmic drugs have not been shown to be of benefit to the great majority of patients who are without symptoms from their dysrhythmias.
13. Parts of Maine, Massachusetts and Alaska should be returned to the Indians/eskimos, especially considering the conservation policies of the Reagan administration.