

91. 乳癌のリンパ節転移の診断 (ラジオコロイドによる)

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乳癌患者のリンパ節転移の有無はその予後にたいし大きな意義をもっている。われわれはラジオコロイドを用いて簡易におこなえる方法を用いている。この方法により術前リンパ節転移の診断を行なうことは有意義であろう。

^{198}Au colloid あるいは ^{131}I macro aggregated albumin を両側上腕内側皮下および胸骨体下端両側の肋軟骨付着部に 150~200 μc をスプレーゼとともに注入し、約70時間後第 3~4 肋間の放射能を 100%になるように scanner を設定 scintigram を鎖骨上部までとっている。これにより腋窩、鎖骨上、鎖骨下、Halsted 氏リンパ節の部分より胸骨傍リンパ節の像がえられる。scintigram の像を cold, warm, normal とわけ、cold を転移 (+), warm を疑転移として、これらのリンパ節群についてみると診断率は約75%で、疑診中転移(-)は25%であった。シンチグラムを供覧し、リンパ管造影と比較検討した。

92. A clinical application of ^{131}I -labeled antibodies to fibrinogen

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The ability to detect thrombi by scintillation scanning techniques would be a valuable addition to the diagnostic procedures now available. With this in view, ^{131}I antibodies to human fibrinogen were prepared and injected intravenously into patients with suspected deep venous thrombi. They were scanned one day later and the thrombosed areas found by this procedure were compared with those detected by

phlebography. In fifteen consecutive patients injected with this preparation, femoral, popliteal and calf lesions were located by this technique. In animal experiments, autoradiographs made from thrombi induced one to three days before the I.V. injection of radioactive preparation demonstrated concentration of ^{131}I in the adventitia of the vein and the periphery of the vein. Detection of such thrombi should be successful not only during the period of active propagation but also in the initial phases of clot organization.

In another study, scintillation scanning to detect atrial thrombi was performed on 30 patients scheduled for open-heart surgery for mitral valve disease. The patients were scanned two days after administration of ^{131}I antibodies to human fibrinogen and 1~3 days before surgery. Twenty-six patients had negative scans and at surgery twenty-five had no thrombus. Of the four patients with positive scans, three had left atrial thrombi at surgery and one had a highly calcified valve. ^{131}I determinations on blood, normal cardiac tissue and clots demonstrated that the clot, if not highly organized could have as much as 25 times more ^{131}I than an equivalent amount of blood.

It is suggested that the technique of scintillation scanning after administration of ^{131}I antihuman fibrinogen may be a valuable screening and diagnostic procedure for localizing peripheral thrombi as well as atrial thrombi.

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