## Diagnostic Scignificance of Scintigraphy in Diffuse Liver Diseases I. Differentiation Between Acute Hepatitis and Acute Exacerbation of Chronic Hepatitis

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Scintigraphy has mainly been utilized in the diagnosis of space occupying lesions, and little emphasis has been placed on its value in the diagnosis of diffuse liver disease. This report concerns the diagnostic value of scintigraphy in the early diagnosis of acute exacerbation of chronic hepatitis which is often misdiagnosed as acute hepatitis. The clinical material for the study consisted of 26 cases of acute hepatitis, 8 cases of chronic persistent hepatitis and 8 cases of chronic active hepatitis; the diagnosis was established by various examinations including laparoscopy, biopsy and blood chemistry. The results revealed that, although these were some

overlappings in the findings, the changes in the liver configuration in the anterior (frontal plane) view were most pronounced in chronic active hepatitis, which included enlargement of the left lobe relative to the right, shrinkage of the right liver, and visualization of the spleen. In acute hepatitis, the liver configuration was little changed, and the spleen was faintly visualized in a small percentage. Chronic persistent hepatitis was somewhere inbetween in the extent of these alterations. It is recommended that scintigraphy be carried out in patients with transaminasemia, to diagnose acute exacerbation in its early stage.

## Diagnostic Value of Liver Scintigraphy for Chronic Diffuse Liver Disorders, with Special Reference to Correlation with Histological Findings

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Diagnostic value of liver scintigraphy for diffuse liver disorders, especially for chronic liver diseases, is assessed by comparing histological findings with scintigraphic findings.

Materials and Methods: For March 1967 to December 1972, liver scintigrams of 1500 cases were obtained in the Department of Radiology, Kyushu Univ., and 99 cases of them were biopsied in the IIIrd Department of Internal Medicine.

These 99 cases proven histologically were analized.

15–30 minutes after the intravenous injection of 200–300  $\mu$ Ci of <sup>198</sup>Au-colloid, liver scintigraphy was taken with Shimazu SCC-150S scanner. (Crystal:  $5\phi \times 2$  inches, Collimator: 37 holes honey comb corn, Scanning speed: 80–120 cm/min.)

Scintigraphic findings of each case were eval-