I. Digestive Tracts (GI Tract and Pancreas)

Diagnostic Significans of the Pancreatic Displacement on Scintigram

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Pancreatic scintigraphy has been accepted as an easy procedure of obtaining pancreatic image, though ⁷⁵Se-Selenomethionine available for its purpose has many problems. A localized or total defect is a common abnormal finding on the pancreas scintigram, but occasionally pancreatic displacement is observed. We reported that the pancreatic displacement associated with an area of low activity adjacent to the pancreas was of value in the differential diagnosis of the upper abdominal tumor.

Materials and Method

855 pancreatic scintigraphy performed from June 1968 to May 1974 in our department were reviewed. Scintigraphic examinations were carried out as follows. No premedication was done. 250μCi of ⁷⁵Se-Selenomethionine was given intravenously. Pancreatic image was obtained 30 min. after the injection by Scintillation Camera(Nuclear Chicago, Pho/Gamma III).

Results

Scintigraphic findings of the pancreas were classified into 5 groups; normal, faint visualization, non visualization, localized defect and displacement. Scintigraphic examination revealed the pancreatic displacement in 18 cases and an area of lower activity than background adjacent to the pancreas in 19 cases. Both findings were demonstrated in 12 cases. Of these cases, 7 cases (58%) were pancreatic cyst and 2 choledochal cyst, 1 retroperitoneal tumor, 1 splenic cyst and 1 hepatic cyst. On the other hand, there were 13 cases of pancreatic cyst in this series. In 7 cases (54%) out of 13 pancreatic cyst, both findings were concomitantly present on scintigram. We conclude that the pancreatic displacement associated with an area of lower activity than background adjacent to the pancreas is highly suggestive of the cyst of the retroperitoneal organ, especially the pancreatic cyst.

Clinical Assessment of Scintigraphic Detection of Mobility of the Pancreas

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The pancreas image in upright position may

add another important information to covent-