Two study has been performed in a series of 103 cases of normal pancreas, 17 cases of acute pancreatitis, 59 cases of chronic pancreatitis, 20 cases of the carcinoma of the pancreas head, 26 cases of the carcinoma of the pancreas body, 2 cases of the carcinoma of the pancreas tail, 36 cases of metastatic carcinoma of the pancreas, 6 cases of partial resection of the pancreas, a case of lithiasis of the pancreas, a case of diverticulum of the duodenum and 2 cases of the pseudo-cyst of the pancreas. As summarized result, was shown negative PDS (Pancreas Duct Stenosis) and positive M (Mobility) in all cases of 103 normal pancreas (100%), 8 cases out of 17 acute pancreatitis (47.1%) and 33 cases out of 59 chronic pancreatitis (55.9%).

As a malignant series, was shown positive PDS and negative M in all cases of 20 case of the carcinoma of the pancreas head (100%), 26 cases of the carcinoma of the pancreas body (100%) and 34 cases out of 36 cases of metastatic carcinoma (94.4%).

Dual pancreatic information checking of pancreas duct stenosis and pancreas mobility in combination with two colouring (red and blue) will be provided a valuable adjunct in differentiating the pancreas carcinoma from chronic pancreatitis or normal.

A Preliminary Study of Angioscanography with ^{99m}Tc-MAA in Cancer of Thoracic Esophagus

T. KUMAZAKI, Y. YAMAGISHI, T. ITO, H. WATANABE, J. YUKUTAKE, S. SHIIBA, M. KARASAWA, K. HONDA, H. NISHIKAWA, S. SHIDA, H. SHIMIZU and T. SAITOH
Department of radiology, NIPPON MEDICAL SCHOOL

Angioscanography (named by Viamonte, Jr. in 1964) with ^{99m}Tc-MAA was performed on 14 patients with cancer of thoracic esophagus. Except two patients selective injection of an arbitrary dose (500 μCi) was succeeded via feeding arteries.

Thirty minutes after the injection of ^{99m}Tc-MAA, scanning was carried out in four projections and scintigram was compaired with angiogram taken prior to MAA study. Good accumulation was clearly visualized in 13 patients out of 14, the positive ratio of 92.8%. In two cases, other hot spots apart from the main tumors were observed in the right hilar lesion and in the right side of lower mediastinum, which could not be opacified by selective angiographies.

The procedure, results and the possibility of further usefulness of this study in clinical radiology was discussed.