cases (89%) with extrahepatic obstruction.

From the present study nuclear medicine imaging should be used as the screening procedure of focal hepatic disease, and on the other hand ultrasound should be used as a first procedure in differential diagnosis of obstructive jaundice. However, the combination of both examinations could offered more diagnostic efficacies.

**Comparative Study on Small Defects in Hepatic Scintiphotogram and Liver Surface Findings in Peritoneoscopic Examination**

--- Special Reference to Cirrhotic Patients

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The subjects studied were 128 cases with liver cirrhosis, 48 cases with hepatocellular carcinoma, 26 cases with metastatic liver tumor and 26 cases with chronic hepatitis, which were histologically confirmed, and 14 cases of other liver diseases. A lesion of 3 cm in diameter can be detectable by a high-resolution camera even differentiate the true focal defect from the physiological idcntation or extrahepatic compression.

In order to confirm small defects in hepatic scintiphotograms with 99mTc-Sn colloid or phytate, peritoneoscopic examinations celiac angiography and serial determination of serum AFP and CEA concentrations were performed.

In 52 out of 128 cases with liver cirrhosis (LC), small focal defects (Φ<3 cm) could be detected on hepatic scintiphotograms. In 29 out of 52 cases with LC, small focal defects could be confirmed as follow; 3 cases of hepatoma, 5 of a potato liver, 9 of postnecrotic and nodular liver cirrhosis, 2 of regenerative liver nodes, 2 of concavity of the surface for liver fibrosis after sublobular hepatic necrosis, 2 of a funnel-shape liver, 6 of inter lobular hypersegmentation, 1 of small metastatic tumor with LC, 1 of small liver cyst, 3 of hemangioma, 3 of rib impression, 1 of hemangioma with LC, 1 of dilatation of the common bile duct, and 4 of unknown origin.

Small focal defects on hepatic scintiphotogram in the patients with LC were composed of the postnecrotic liver nodule, liver fibrosis, funnel-shape liver and regenerative liver, in addition to various tumors, dilatation of the common bile duct, gall bladder fosa, and rib impression.

**Correlation of Computed Tomography, E. R. C. P. and Radionuclide Examination of the Liver and Pancreas**

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In this report, a diagnostic method of the liver and pancreas, that to be used together with radionuclide examination and computed tomography (histogram of EMI unit on 64 × 64 matrix), and the clinical results were described.

The data of computed tomography were performed by the gamma camera system with two discriminaters (Nuclear-Chicago PHO Gamma HP6406 type) and central processing unit (Nova 1200 16 kwds with moving head disk 4047A, Diablo 31, Tektronix, and magnetic tape recorder TMZ).

The subjects of this study were 97 cases of the liver, and 10 cases of the pancreas, which were examined together with computed tomography and radionuclide examination.