2216


to-99m PHYTAPE LIVER SCINTIGRAPHY AND CONGENITAL BILARY ATRESIA.
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dai, M. Inoue, K. Okamoto*, K. Takeo*, K. Ishii**
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After the report of Kasai's hepatic port-
enterostomy the subject of treatment has
been changed from the surgical technique
to the management of secondary liver cir-
hrosis and portal hypertension in congenital
iliary atresia. Liver scintigrams using
99m Tc phytape have been performed as a
routine clinical study for detecting the
liver cirrhosis and portal hypertension.

The results of these analyses will be pre-
pared and both posterior and oblique views
have been assessed solely by visual analysis of the analogue images, i.e.
posterior and both posterior oblique views.

The DMPS scans have been assessed solely by

2218

FOURIER PHASE ANALYSIS IN PAEDIATRIC CARDIOLOGY. David L. Gilday Department of Radiology, University of Toronto &
Division of Nuclear Medicine, The Hospital for Sick Children, Toronto, Canada.

Fourier Phase Analysis has rapidly become
an integral part of Nuclear Cardiology.

P. Pediatrics

2219

99m Tc DTPA scan compared to 99m Tc DMSA
scan in renovascular hypension.
I. Gordon, R. de Bruyn, D.A. Stringer.

Paediatric patients with systemic hyperten-
sion are investigated extensively. 10 pa-
ients with renovascular hypertension have
undergone intravenous urography, abdominal
ultrasound, selective renal and inferior
cava venous renin sampling and arterio-
graphy including selective renal arterio-
ography as well as both a 99m Tc DTPA scan
and separate 99m Tc DMSA scan. The diagno-
sis of renovascular hypertension has been
established on either the arteriographic
findings or on the selective venous renin
results or a combination of both.
Analysis of the DTPA scans include
1. Perfusion during the first 40 seconds of
the whole kidney as well as segmental
areas of kidney.
2. Whole kidney transit time analysis.
3. Differential renal function at 1 minute
has been estimate.
4. The DMPS scans have been assessed solely by

2220

Investigation of the Small Lung
in Paediatrics.
I. Gordon. Ph. D.

This study evaluates the role of 81m Kryp-
ton ventilation/99m Technetium macroagre-
gate (V/Q) lung scans in the small loun.
18 children were admitted for investigation,
each child underwent a barium swallow, chest
fluoroscopy and chest radiography; in selected
cases pulmonary angiography, bronchosco-
py and bronchography were undertaken.

There were 3 children with an absent pulmo-

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