348

TSH BINDING INHIBITING ANTIBODY(TBIAB), SERUM CONCENTRATION OF THYROGLOBULIN (Tg) and T₃ SUPPRESSION TEST IN TREATED PATIENTS WITH GRAVES DISEASE.

T.Tanabe, M. Izumi, N. Yokoyama, S. Morita, S. Yamashita, H. Hirayu, I. Kubo, K. Sato, S. Okamoto, S. Nagataki. The First Department of Internal Medicine, Nagasaki University, School of Medicine.

The correlation between TBIAb, the concentrations of serum Tg and the results of T_3 suppression test in treated patients with Graves' disease were investigated. In patients with Graves' disease who became euthyroid with the treatment of antithyroid drug, TBIAb was measured and T_3 suppression test was undertaken. The concentrations of serum Tg were measured in the patients who were negative for antiTg antibody in serum.

A positive correlation was observed between serum concentration of Tg and TBIAb. The concentrations of serum Tg were increased in all the patients with positive TBIAb.

A positive correlation was observed between the thyroidal uptake of I-123 after the administration of 75 μ T₃ daily for 7 days and TBIAb. All the patients with positive TBIAb were unsuppressive to T₃. The concentrations of serum Tg in T₃ unsuppressive patients were significantly higher than those in T₃ suppressive patients. It seems that there are relationships between the increase of serum concentration of Tg and TBIAb and between T₃ suppressibility and TBIAb in patients with Graves' disease.

349

CLINICAL SIGNIFICANCE OF TC-99m PERTECHNETATE EARLY UPTAKE RATE IN THYROID SUPPRESSION TEST. Y.Inoue, M.Maki, S.Nara, T.Nishioka, M.Hiroe, K.Kusakabe *Y.Fujimoto, **T.Yamazaki Department of Radiology, *Department of Endocrine Surgery, Tokyo Women's Medical College, Tokyo **National Institute of Radiological Sciences, Chiba

Eighty two patients with hyperthyroidism on antithyroidal agents were studied to determine the usefulness of thyroidal Tc-99m pertechnetate(Tc) early uptake rates in T3suppression tests. Following suppression by T3 for 8 days, each patient was administered Tc of 300 micro Ci intravenously and thyroidal 20 min uptake rate was measured with a scintillation camera and a computer system.Simultaneously, I-131 20 min uptake rate was measured by the same way as Tc.True injected counts were obtained by using a neck phantom. In 92 studies of the 82 patients, Tc uptake rates were shown highly to correlate to I-131 uptake rates(r=0.92). A study on 64 patients revealed a significant relation between required dose of antithyroidal agent and Tc uptake rate. In a study of 46 patients, titres of antimicrosomal antibody were found to depend fairly on Tc uptake rates. These findings indicate that in T3suppression test, Tc-99m pertechnetate early uptake rate has a significant potency to select appropriate treatment and estimate prognosis in antithyroidal treatment, hence a replacement of I-131 early uptake rate.

350

ACUTE CHANGES IN THYROID HORMONES AFTER I-131 TREATMENT IN GRAVES' DISEASE.
Y.Matsuoka, K.Ito, S.Iino and N.Hamada. Ito Hospital, Fujigaoka Hospital Showa University and Osaka City University. Tokyo, Yokohama and Osaka.

Twentyone hyperthyroid patients were followed with serum thyroid hormone and Tg levels for 10 days after I-131 treatment. One group (3 patients) had increases of hormone levels at Days 1-3. Other group (18 patients) had decreases of hormone levels at Days 3-7. On the other hand, Tg levels increased in most of patients. There was no relation between the dose of I-131, the initial T₄ and changes in serum Tg levels in these groups. And there was no correlation of changes in thyroid hormone levels with rate of decrease in goiter weight 1 year after I-131 treatment. This suggests that I-131 may have some effects on mechanism in release of thyroid hormone.

352

THE NEW PLAN OF I-131 TREATMENT FOR GRAVES' DISEASE. N.Ishikawa, M.Hasegawa, N. Momotani, Y.Manabe, O.Ozaki, Y.Nishikawa, K.Ito, N.Hamada and Y.Matsuoka. Ito Hospital, Osaka City University and Fujigaoka Hospital Showa University. Tokyo, Osaka and Yokohama.

One thousand and six hundred twenty patients were treated with an averaged I-131 dose of 7500 rad from 1963 to 1967 and we surveied of 208 patients out of 1620 patients 10 years after I-131 treatment. (I-131 high dose therapy) In the same way, 655 patients were treated with an average I-131 dose of 3000 rad from 1975 to 1976 and surveied of 264 patients out of 655 patients 5 or 6 years after I-131 treatment. (I-131 low dose therapy) Compaired the result of I-131 high dose therapy with I-131 low dose therapy, we obtained that the result of I-131 treatment was influenced by goiter weight. So, we make the new plan of I-131 treatment for Graves' disease that the dose of this treatment correspond with goiter weight.

oiter weight	Dose
~ 29 g	2500 rad
30 ~	3000
40 ~	3500
50 ~	4000
60 ~	4500
70 ~	5000
80 ~	6000
100 ~	7000
120 ~	8000
140 ~	9000