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LONG TERM OBSERVATION ON THE PATIENTS WITH NEUROBLASTOMA WITH I-131-MIBG SCINTIGRAPHY AND BLOOD MSE LEVELS. Tadayoshi MIYAZAKI, Masato YAHASHITA, Kunio OKAMOTO, Atsushi SAWADA and Narumi HIBI. Kyoto prefectural University of Medicine, Kyoto.

It had been reported that I-131-MIBG is useful in seeking the location of neuroblastoma and also blood MSE level reflects effectiveness of treatments. On 4 patients with neuroblastoma I-131-MIBG scintigraphic studies (6-7 times) and measurements of blood MSE level (once within 2 weeks) were performed and followed for 9 months to over 1 year. All the patients (Stage III - IV) were received chemotherapies.

The results from our study suggests that MIBG scintigraphic findings and the MSE blood levels reflect the effectiveness of treatments. It is possible to estimate the course of the disease and to monitor whether the disease is in regression or in progression by evaluations of MIBG study and blood MSE levels for long term.

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RADIONUCLIDE HYSTEROSALPINGOGRAPHY IN STERILITY PATIENTS. A.Tada, I.Tatuno, T.Takanaka, T.Matuyama and R.Kawahara. Department of Radiology and Gynecology, Kanazawa National Hospital, Kanazawa.

Radionuclide hysterosalpingography (RNHSG) was performed to evaluate patency of the fallopian tube in the 16 sterility patients. First, in 3 out of 16 cases, technetium-99m macroaggregated albumin (Tc-MAA) was deposited on the posterior fornices of vagina, as described by Iturralde and Venter. But all of the 3 cases did not demonstrate spontaneous migration of Tc-MAA from vagina to the uterus and the ovaries. Therefore in the other 13 cases Tc-MAA particles were applied directly onto the internal cervical mucosa through the cervical canal. This method was compared with contrast hysterosalpingography (CHSG).

In the evaluation of 26 tubes, we found that the accuracy of RNHSG for evaluation of the fallopian tube patency was over 88%. RNHSG could demonstrate functional fallopian tube obstruction in an immotile but anatomically patent tube, RNHSG is a particularly attractive method for the evaluation of functional and mechanical tube obstruction in sterility patients.

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GRADING OF VARICOCELE BY SCINTIGRAPHY USING Tc-99m LABELED RBC. T.Hamada, K.Sugimura, M.Hirata, K.Kanegawa, K.Yamasaki, R.Matsui, S.Nishiyama, M.Kono, O.Matsumoto and S.Kamidono. Kobe University School of Medicine, Kobe.

Varicocele scans using <sup>15m</sup>Ci Tc-99m labeled RBC were performed in 81 patients suspected with varicocele by inspection and palpation.

It was showed that 70 cases were positive and 11 cases were negative. Positive cases had various findings such as localized accumulation, broad accumulation, delayed pooling, early visualization, bilateral accumulation and demonstration of left testicular vein. According to these findings and clinical information, grading of varicocele by scintigraphy was attempted as follows, Grade 1:simple accumulation, Grade 2:broad accumulation with hot spots, including early visualization and delayed pooling, Grade 3:higher accumulation than those of great vessels. While clinically mild cases tended to show simple accumulation, most cases with moderate to severe varicoceles showed various findings with high accumulation. Varicocele scan may be useful for not only diagnosis but also evaluation of severity.