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Thallium-201 myocardial SPECT findings at rest in sarcoidosis

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In 41 patients with sarcoidosis (diagnosed according to criteria recommended by the Committee on Diffuse Pulmonary Disease, Ministry of Health and Welfare, Japan 1988), thallium-201 (^{201}TI) myocardial SPECT was performed to investigate: (1) the ability of ^{201}TI SPECT to detect cardiac involvement of sarcoidosis with images recorded at rest and 2 hours later, and (2) the relationships between ^{201}TI myocardial SPECT findings and the activity of sarcoidosis or endomyocardial biopsy findings. As to the abnormal findings in ^{201}TI myocardial SPECT, (1) a low density area was seen in 13 of 41 cases (31.7%) and non-uniform uptake was found in 17 cases (41.5%), (2) the mean washout ratio ($n=39$) was $16.5 \pm 7.4\%$, which is significantly ($p < 0.05$) lower than that found in normal subjects, $23.9 \pm 7.5\%$ ($n=10$). Of the 19 patients judged visually to be normal, 5 patients had a reduced mean washout ratio less than 12%. Thus, the incidence of abnormal findings including all types of abnormality, on ^{201}TI myocardial SPECT in sarcoidosis was 63.4% (26/41 cases). In studying the relationship between ^{201}TI myocardial SPECT findings and the activity of sarcoidosis (as measured by the serum ACE (angiotensin converting enzyme) or lysozyme level, or the presence of more than 30% lymphocyte fraction in BALF (broncho-alveolar lavage fluid)), 20 (80%) of 25 cases with ^{201}TI abnormality were judged to be active sarcoidosis, while only 6 (37.5%) of 16 cases with normal findings on ^{201}TI SPECT were judged to be active. This suggests that there is a significant ($p < 0.01$) relationship between the presence or absence of an abnormal finding on ^{201}TI myocardial SPECT and the activity of sarcoidosis. Among 13 patients examined by endomyocardial biopsy, 10 patients had abnormal findings on ^{201}TI myocardial SPECT and 7 of these 10 patients had no histological evidence of cardiac sarcoidosis. In all of these 7 patients, however, sarcoidosis was judged to be active. This suggests that endomyocardial biopsy is of limited value in the diagnosis of cardiac sarcoidosis.

Key words: cardiac sarcoidosis, ^{201}TI myocardial SPECT, activity of sarcoidosis