for the renogram test was summarized as follows: 1) it is good test for screening, 2) it is used combined with other tests, 3) conditions of measuring and analysis of waves should be done under the standardized method.

The followings were our result of the renogram test for the patients with the cervical carcinoma of the uterus. N-type of renogram according to the classification by Machida and Seki was found in 77 out of 121 cases tested at the time of hospitalization. The other cases showed the unilateral or bilateral delay of secretion. The cases which showed the delay of secretion was much more found in the advanced stadium of the disease and the positive correlation was seen in both parameters.

The renogram test after the surgical operation and radiotherapy against the cervical carcinoma showed marked difference. Eighty per cent of the N-type cases at the hospitalization changed to M₂-type after 2 weeks from the surgical operation, and then gradually they recovered to N-type, but still 10 per cent remained M₂-type even after 9-14 weeks. By the radiotherapy, only 6.7 per cent showed slight disturbances in renogram after the therapy.

The renogram of the 4 cases of pelvic recidivation showed L-type in 1 case and M₂-type in 3 cases. So the renogram seems to be useful for the diagnosis of the pelvic recidivation, of course this is not decisive and the combination with other tests is necessary.

The all cases complicated with ureterovaginal fistula showed high disturbances of secretion in renogram which coincide with the side of the fistula. So it seems that the renogram is diagnostic on the decision of the side of the fistula and the time of ureterostomia.

Scintillation Camera Renography in the Renal Function Studies of Human Renal Allografts

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Renal homotransplantations were performed in 9 patients (10 times) during the past 3 years at the Department of Urology, Faculty of Medicine, The University of Tokyo, Japan.

Serial renograms were made in these patients to follow up the renal function, especially to distinguish between the various complications.

Deterioration of renal function in the renal homotransplants poses the question of rejection, arterial occlusion or ureteral obstruction.

It seemed reasonable that the combination of renography and scintillation scanning, already used in a variety of clinical conditions, would supply information about the renal function that could not be obtained from either procedure alone.

Our technic is designed to visualize the transplanted kidney and bladder separately.

Concomitant with the intravenous injection of 200 microcuries of labeled Hippuran, the scaler is activated and the film exposed.

A combination of one-minute counts and two-minute scintiphotos (scintillation camera renography) permits the plotting of a renogram curve and assures accumulation of sufficient information on film to permit direct monitoring of the passage of labeled Hippuran.

In some patients, the diagnosis of obstructive diseases were suggested by renograms, but were ruled out by serial scintiphotos which showed labeled Hippuran accumulating in the bladder.

Scintillation camera renography represents a significant advance over conventional renogram studies in the evaluation of renal homotransplants.