IV. Spleen and Blood

Splenic Scan for Congenital Heart Disease Patient

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To know the abnormality of the spleen prior to the operation will produce an important factor towards the indication and prognosis of cardiac surgery.

This is a report of the splenic scans performed at Tokyo Women's Medical College between september 1968 and september 1969.

All of these patients had proven diagnosis of congenital heart disease and clinical diagnosis of asplenism.

The scanning methods were red blood cell heating methods for 3 cases and Hg-203-MHP methods for 11 cases.

In 9 out of 14 cases, the splenic uptake was identified. Four out of 9 cases were normal and 5 out of 9 cases showed abnormal positions.

By using Hg-203-MHP method, the splenic uptake was identified in 8 out of 11 cases.

There were 11 cases with pre-scan diagnosis of asplenism. Seven out of 11 cases showed

splenic uptake by scanning method.

By using Hg-203-MHP method, 6 out of 9 cases with pre-scan diagnosis of asplenism showed an splenic uptake.

It is impossible to make a diagnosis of asplenism in case of poor uptake in the region of the spleen.

No case of polysplenism was identified in our series.

The splenic scan seems to be helpful in making a diagnosis of congenital abnormality of the spleen such as asplenism or an abnormality in position.

The role of the splenic scan would be valuable in light of its easy procedure to preforme and the least load to the patient.

However the problem exist in making a definite diagnosis in the case of poor uptake, lobulated spleen or polysplenism.

Study of the Influence of Splenomegaly in Shistosomiasis on Plasma Volume, Red Cell Volume and Total Blood Volume

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The purpose of this report is to evaluate the influence of the enlarged spleen on plasma volume, red cell volume and total blood volume in splenomegaly of shistosomiasis. Our twelve patients were studied. (5: liver cirrhosis with splenomegaly, 2: liver cirrhosis without splenomegaly, 3: splenomegaly, 2: the other)

1) In slenomegaly the red cell volume (RCV),