DETERMINATION OF HEPATITIS B VIRUS (HBV) ASSOCIATED ANTIGENS AND ANTIBODIES BY RADIOIMMUNOASSAY (RIA). T. Muro, K. Naitaka, K. Kuno, A. Sato, R. Furukawa, T. Kanamoto, T. Munehisa, S. Nakagami, N. Ishihara and T. Koji. The First Department of Internal Medicine, Nagasaki University, School of Medicine, #Health Administration Center, Nagasaki University, Nagasaki.

Serum HBV associated antigens and antibodies from 427 pupils of Tonomura-Town, Goto Island, Nagasaki prefecture, consisting of 214 male and 213 female, aged from 10 to 17 years were determined by RIA and other methods. As follows, HBs Antigen (HBsAg): RIA (Austria 11-125) and reversed passive hemagglutination (RPHA), HBs Antibody (HBsAb): RIA (Austria) and passive hemagglutination (PHA), Hbc Antibody (Anti Hbc): RIA (Anti Hbc RIA KIT) and reversed hemagglutination inhibition (RPHI). HBsAg was positive in 6 cases by RIA and RPHA, and in 1 case by RIA and PHA, and in 8 only by RIA. We defined that the positive anti Hbc was above 70% of inhibition, and anti Hbc was positive in 34 both by RIA and RPHA, in 8 only by RIA and in 2 only by RPHA. Determination of HBV associated antigens and antibodies by RIA was more sensitive compared with other methods. It would be suitable that the positive anti Hbc was estimated above 60% of inhibition by RIA, because almost all negative cases of anti Hbc by RPHI showed under 60% of inhibition by RIA.

EVALUATION OF "PORTAL SCINTIGRAPHY" BY INTESTINAL ADMINISTRATION ON OC Tc-99m USING ENDOSCOPY IN LIVER CIRRHOSIS. M. Kudo, Y. Inoue, K. Fujimori, T. Tomita, W. Komori, T. Okimoto, A. Todo, T. Kidaira, H. Tachio, Y. Sai, H. Ito, T. Ishikawa, K. Inukai, M. Mukaib, K. Torigzuka. Kobe General Hospital, Kobe. #Kobe University School of Medicine, Kyoto.

The purpose of this study was to evaluate "Portal scintigraphy(PS)" in liver cirrhosis(LC).

"PS" was performed in 36 patients with LC by intestinal administration of Tc-99m (10mCi) using endoscopy. We used endoscopy in order to put R1 into the intestine accurately and to avoid physiological shunts in the rectum. We obtained time-activity curve up to 20 min and heart/liver uptake ratio (H/L ratio) at 4 min after administration. We classified the curves into 3 types. We investigated the relationship between H/L ratio and liver and spleen volume in each type. These volumes were obtained by utilizing SPECT.

The results were as follows:(A) In the type of preceding liver uptake but finally dominant heart uptake, we found negative correlation of H/L ratio with liver volume (r=0.64) and positive correlation of H/L ratio with spleen volume (r=0.61). (B) H/L ratio in moderate esophageal varices showed higher value than that in mild varices. In conclusion, "PS" is an excellent method to analyze the various pathological states of liver cirrhosis from the viewpoint of portal circulation.