CLINICAL EVALUATION OF TC-99M LABELED RED BLOOD CELL SCAN IN DETECTION OF LOWER GASTROINTESTINAL HEMORRHAGE. T. Akashi, N. Aizawa, Y. Suzuki, K. Tsuda, T. Moriya, and T. Mitsui. Chigasaki Tokushukai Hospital, Chigasaki, Tokai University School of Medicine, Isehara.

A 3 years' experience with Tc-99m labeled red blood cell scan (Tc-99m RBC Scan) performed in 68 cases of suspected lower gastro-intestinal (LGI) bleeding was reviewed in retrospect. Of the 36 scans performed within 24 hours from the clinical detection of active LGI hemorrhage on emergency basis, 27 cases were positive (75% positivity). Of the total 45 positive scans, 21 (46.67%) became positive one or more hours after injection.

All studies were completed without untoward effects which confirmed the non-invasive nature of the study. Detection and localization of the site of LGI bleeding directed the precise modality to be chosen subsequently and greatly facilitated in performing the invasive procedures such as angiography and endoscopy with further selectivity.

Tc-99m RBC Scan is a completely non-invasive, simple and sensitive procedure which may be used initially in routine in detecting and localizing LGI bleeding.