
Magnetic resonance imaging (MRI) has some very useful merits, especially it has better spatial resolution than the nuclear medicine technique and also it has better sensitivity to the contrast agents than the X-ray CT.

We already developed and reported the renal function analysis using Gd-DTPA which was labeled by ourselves on these ideas, and then we also produced the magnetopharmacautical for the hepatobiliary metabolic function analysis, that is the Gd labeled iminodiacetic compound, Gd-HIDA (N-2,6-dimethylphenyl carbamoylmethyl-iminodiacetic acid). Gd-HIDA has the highest stability constant which was about pk=10 in these iminodiacetic compounds, and also has a good relaxivity.

For the evaluation of the normal in vivo kinetics of this tracer, the longitudinal relaxation rates (R1) of rats' livers were measured before and after intra venous administrations with some different doses (0.03 to 0.1 mmol/kg) and made the MRI hepatography using the calculated R1 image (1000/300/13) on the 0.1 Tesla Asahi-MK-J. Gd-HIDA had enough relaxivity and very useful behavior to evaluate the hepatocellular kinetic function using MRI.


Gadolinium diethylenetriaminepentaaetic acid (Gd-DTPA) has been expected as a potential MRI contrast agent. It is distributed exclusively extracellularly, and rapidly excreted into the urine.

On the other hand, iron(III) ethylene bis-(2-hydroxyphenylglycine) (Fe-EHPG) is an extremely stable complex with a formation constant of 10^3. This complex shows significant hepatocellular uptake, and appears to be excreted unaltered into the bile.

Intravenous administration of 0.3 mmol/kg of Fe-EHPG to rabbits produced a 40 % increase in the signal intensity of the normal liver, while Gd-DTPA yielded a 100 % increase, when using a T1 weighted partial saturation pulse sequence (TR/TE = 400/25) on a 1.5-T superconducting unit (GE: "Sigma"). In the liver tumor models, both complexes provided excellent discrimination between normal liver and implanted VX-2 tumor. However the degree of contrast enhancement by Gd-DTPA was higher than Fe-EHPG. Fe-EHPG demonstrated intrapathobiliary bile ducts and gall bladder and its effect increased with time and continued longer than that of Gd-DTPA.

GADOLINIUM-LABELED ANTIMYOSIN MONOCLONAL ANTIBODY. CONTRAST MATERIAL FOR MRI. J. Nishihara, K. Yoshikawa, T. Watanabe, T. Ohkake, M. Tsuchiyama, Y. Yaizuki and F. Takaku, Dept. of Radiology and The 3rd Dept. of Internal Medicine, Tokyo Univ. Hospital, Tokyo.

To depict the lesion of myocardial infarction (MI) by MRI, we produced Gadolinium (Gd) labeled antimyosin monoclonal antibody (Ab) and tried it to experimental canine MI. We labeled Gd to Ab twice in different labeling conditions, Experimental MI was made by 6 hours ligation of LAD, and MRI and tissue sampling were obtained 24 hours after Ab injection. Each in two trials, two dogs were used. At the first time, Ab was injected into one dog and Gd-DTPA into another. In the second trial, Ab was injected into one dog and Gd-DTPA into another. At the first time, MRI could not differentiate between MI and normal myocardium, but both could be differentiat ed by NMR spectroscopy. In the second trial Gd labeled Ab could shorten T1 and T2 relaxation time of the lesion of MI which was confirmed by NMR spectroscopy. The results show us that properly labeled Ab accumulated in the lesion of MI and reduced T1 and T2 relaxation time. The labeling condition from this study could be used to label Gd to antimalignant tumor antibody.