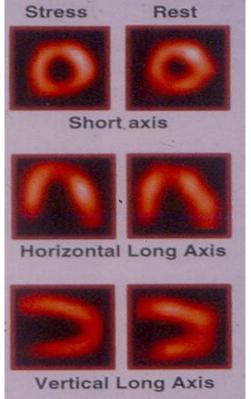
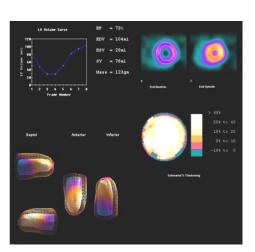
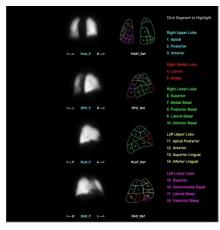
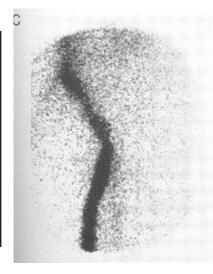
## IMAGING OF HEART, LUNGS AND VESSELS







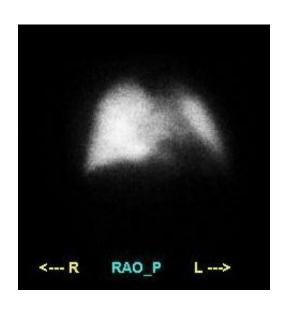




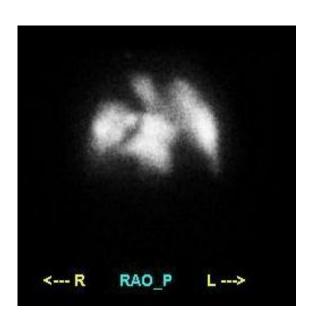
Assoc. prof. A. Punda, MD., PhD.

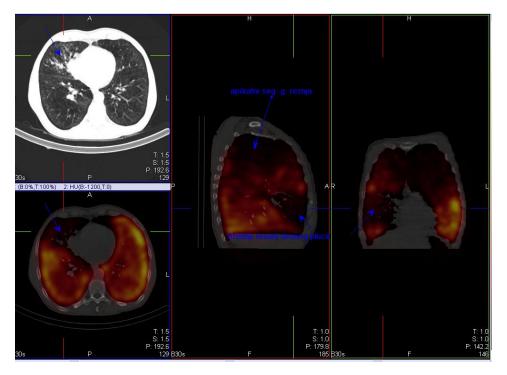
Assoc. prof. V. Marković, MD., PhD.

S. Gračan, MD., nucl. med. spec.



## Pulmology

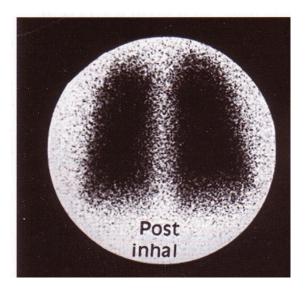




#### Lung scintigraphy

 Perfusion scintigraphy: labeled particles enbeded in the capillary net Post

 Ventilation scintigraphy: inhalation of the radioactive gasses and aerosoles



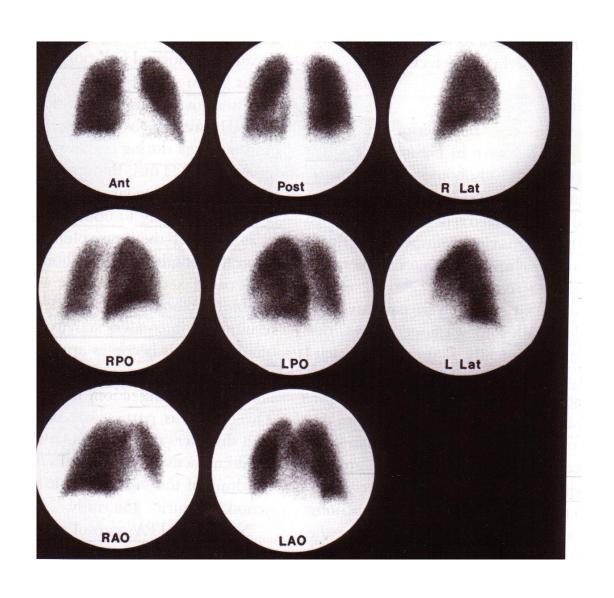
## Perfusion lung scintigraphy

- Tc-99m labeled albumin macroagregates (MAA)
- Tc-99m labeled human albumin microspheres (HAM)

- Particle size 20-40  $\mu m$ , usual dosage is consisted from 200 000 to 700 000 particals

- Dosage: 111-185 MBq (3-5 mCi)

#### NORMAL PERFUSION SCINITGRAMS



## Ventilation lung scintigraphy

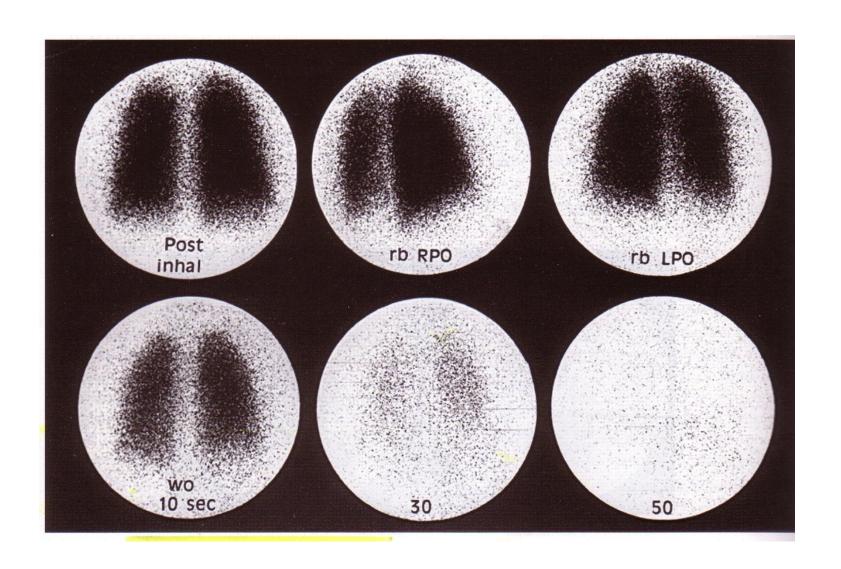
- **Xe-133:** Ey =81 keV-a,  $T_{1/2f}$ = 5,2 days,  $T_{1/2b}$ = 30 sec., activity (dosage) = 10-20 mCi

- C**r-81m**: E $\gamma$  =190 keV-a, T<sub>1/2f</sub>= 13 sec., T<sub>1/2b</sub>= 30 sec, from rubidium 81/krypton-81m generator (T<sub>1/2</sub> =4,6 hours); activity (dosage) = 10 mCi
- **Xe-127:** E $\gamma$  = 172, 203 and 375 keV-a,  $T_{1/2f}$ = 36 days,  $T_{1/2b}$ = 30 sec., activity (dosage) = 10 mCi

# Methods for the ventilation lung scintigraphy

- **Xe-133** inhalation of 370-740 MBq (10-20 mCi)
- Posterior projection three phases:
  - first phase (first-breath or wash-in)
  - equilibrium phase two images of 90 sec (breathing the mixture of air and Xe-133)
  - third phase (wash out) breathing just air; few images of 45 seconds

## NORMAL VENTILATION LUNG SCAN WITH Xe-133



## Aerosols – inhalation scintigraphy

- Tc-99m DTPA
- Tc-99m carbon particles "TEHNEGASON"
- Imaging of ventilation distribution during inhalation phase (inhalation scintigrapy). Particals are captured in the bronchoalveolar mucose long enough ( $T_{1/2} > 60$  min.) for multiple projection imaging before diffusing through the pulmonary epithelium to the pulmonary capillaries

### Aerosole studies

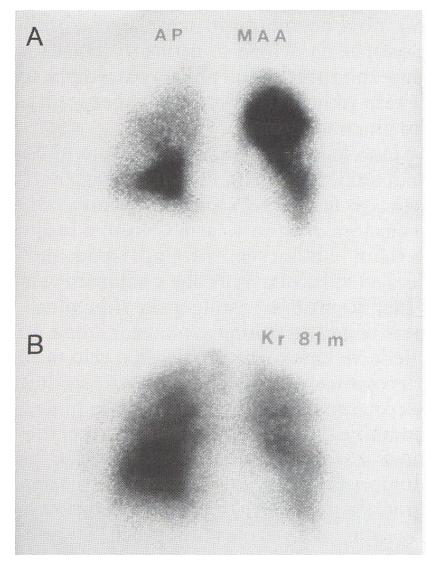
- Breath in for several minutes thorugh the mask conected to the nebulizer
- Nebulizer 1480-1850 MBq (40-50 mCi)
- Tc-99m DTPA, 5-10 % radioactivity reaches the lung
- Imaging: 6 projections, same as lung for perfusion scintigraphy

## Lung perfusion scintigraphy

- Tc-99m MAA
- six projections

### Finding interpretation

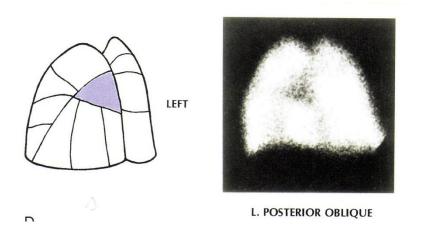
- 1. perfusion/ventilation scintigraphy mismatch (V/Q-MISMATCH)
- 2. Perfusion defect insignificant ventilation defect
- 3. perfusion/ventilation match (V/Q-MATCH) non-embolic lung diseases

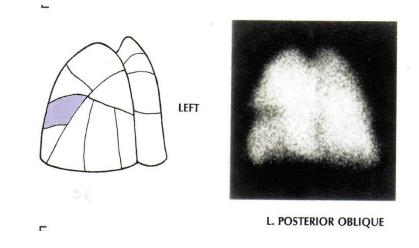


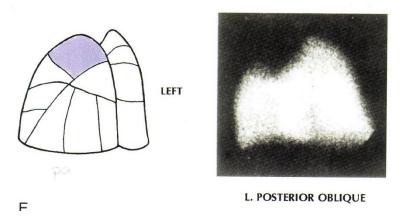
**Pulmonary emboly**. A. Perfusion scintigram, anterior image, showing perfusion defect in lower right lung lobe, B. Normal ventilation scintigram

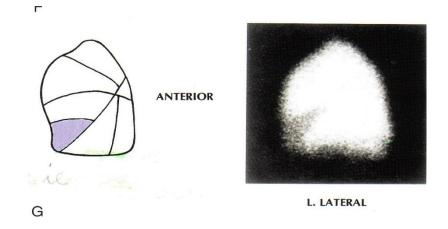
## Lung perfusion scintigraphy

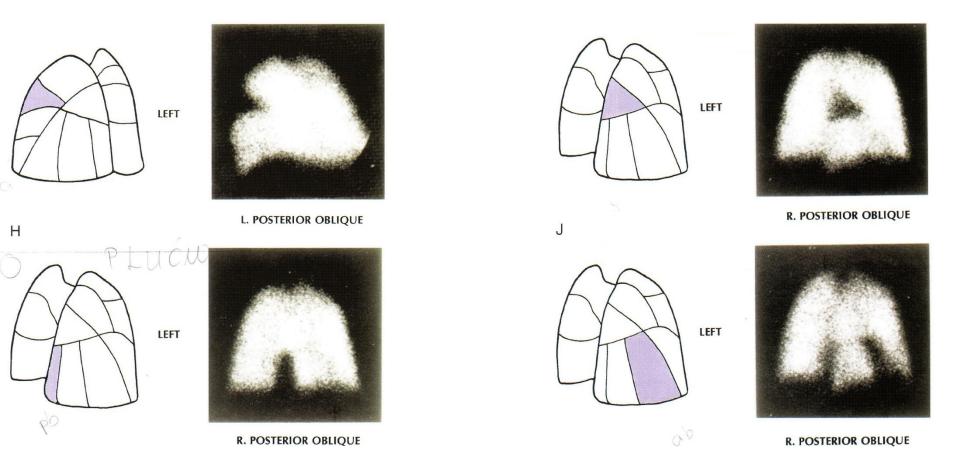
- Normal findings
- Very low probability for pulmonary emboli
- Low probability for pulmonary emboli
- Medium probability for pulmonary emboli
- High probability for pulmonary emboli
- Specificity 90%
- Sensitivity 50%

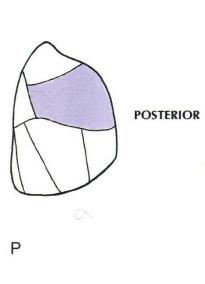






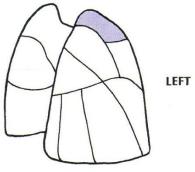




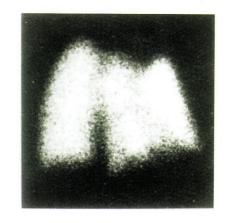




**ANTERIOR** 



R. LATERAL

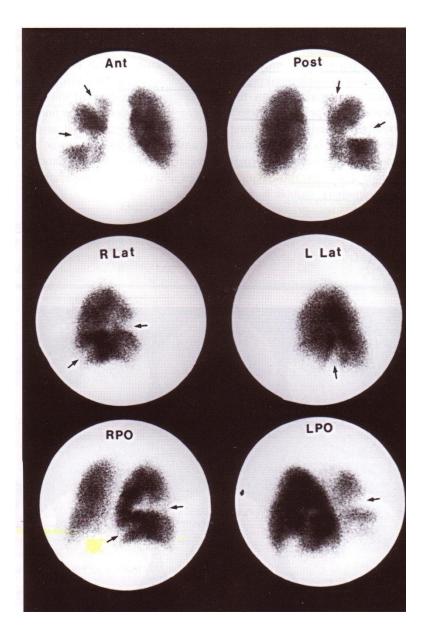


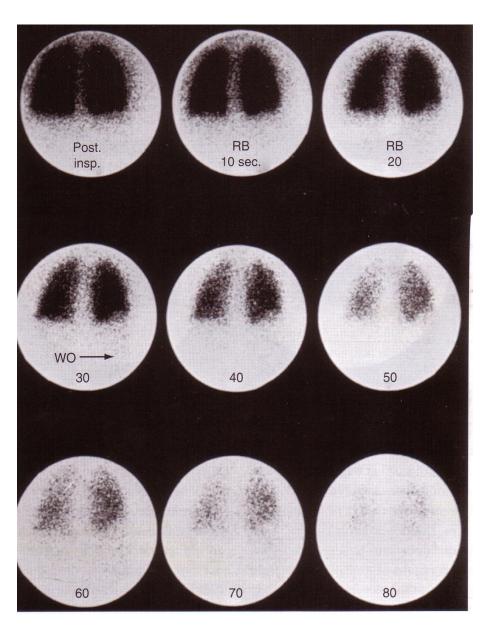
RIGHT

R. POSTERIOR OBLIQUE

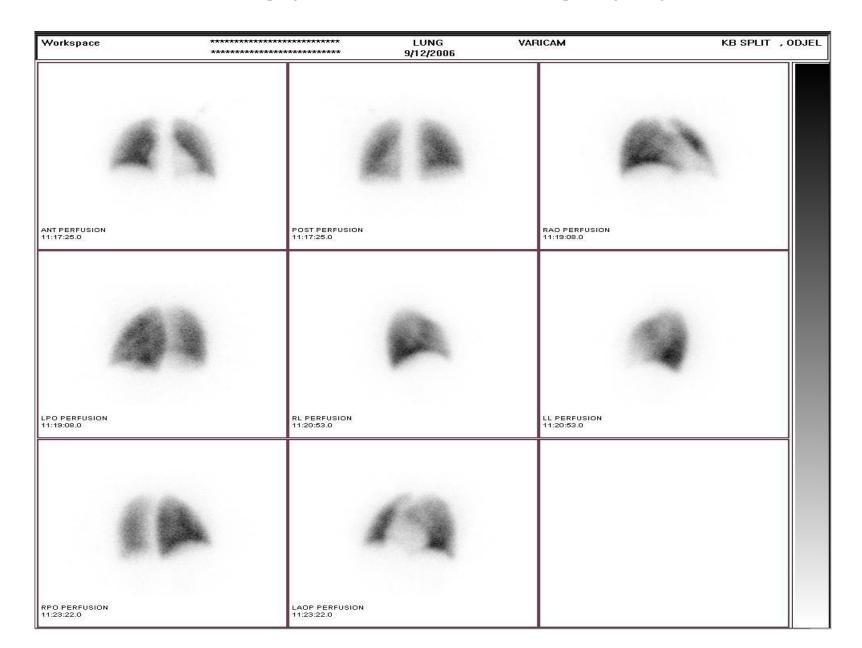
Multiple perfusion defects

Normal ventilation scintigraphy with X-131

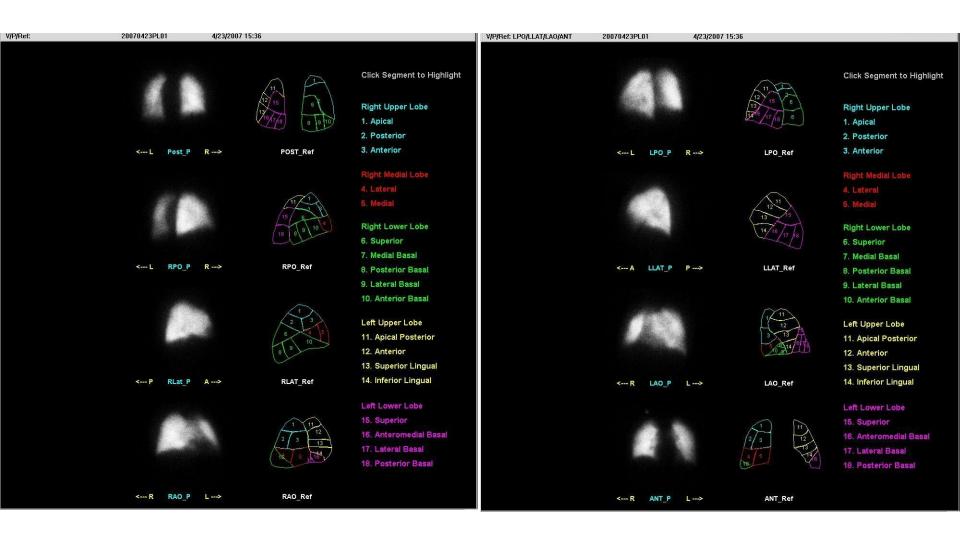




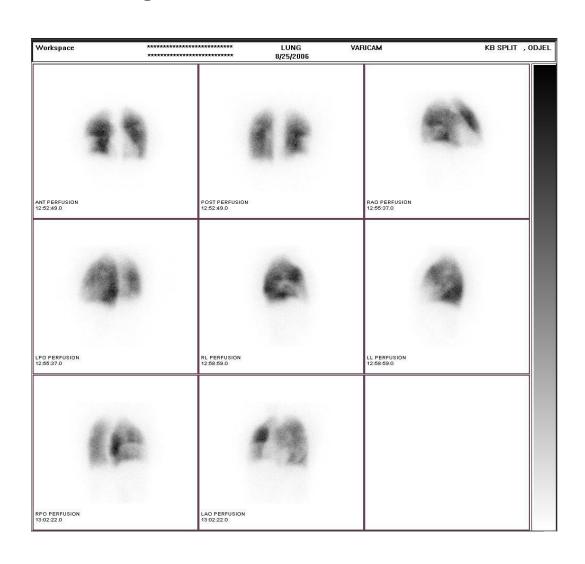
## Normal lung perfusion scintigraphy



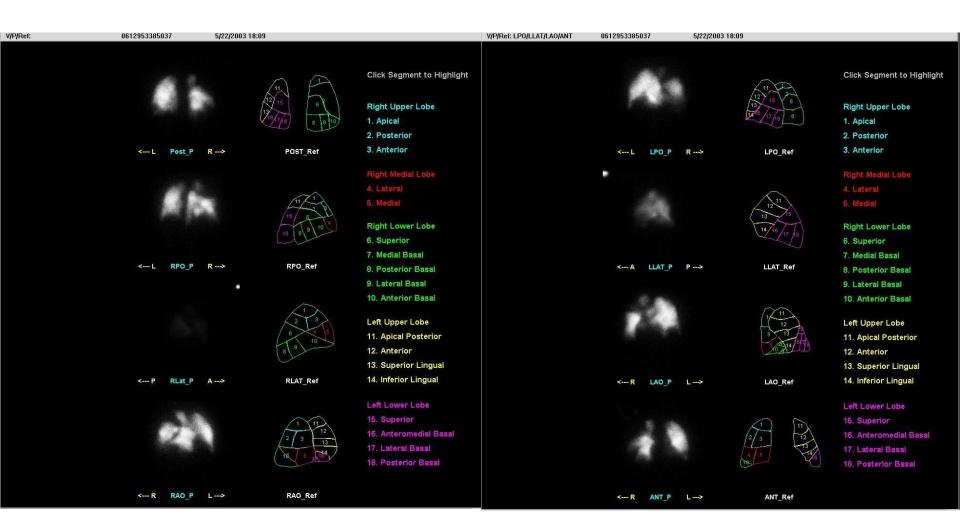
## Normal lung perfusion scintigraphy



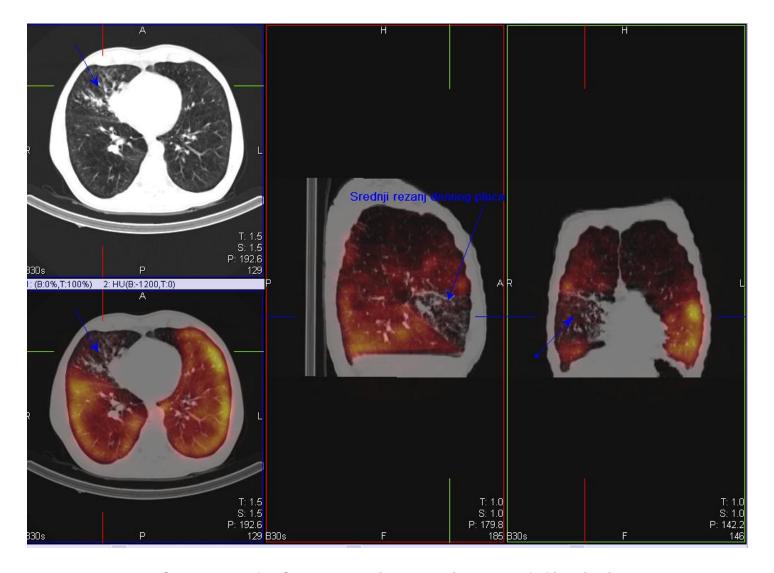
## Perfusion defect in the lateral basal segment of the right lower lobe



Perfusion defects in the right superior lobe (posterior and anterior segment) and in the part of basal segments in both lower lung lobes

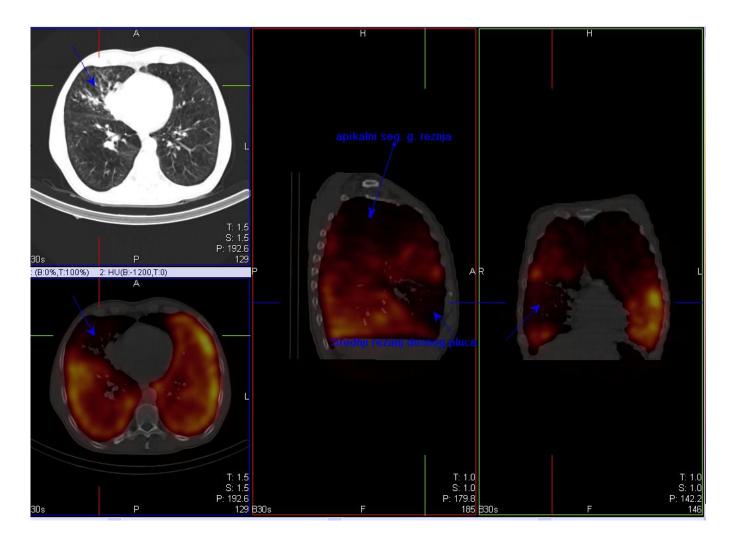


#### Perfusion lung scintigraphy – SPECT/CT



Perfusion defect in the right middle lobe

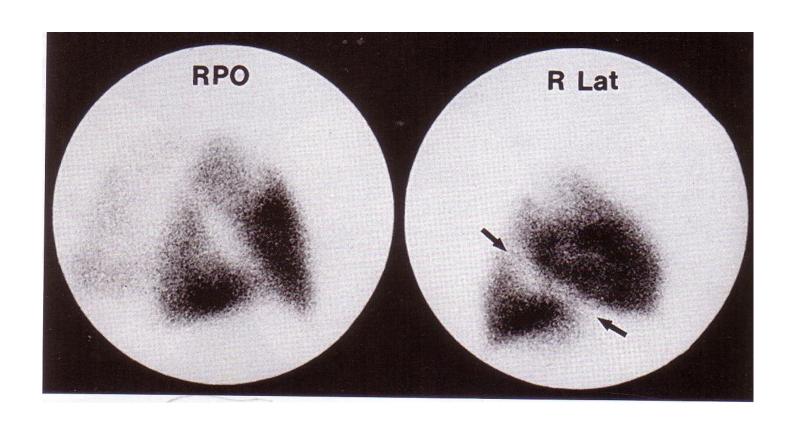
#### Perfusion lung scintigraphy – SPECT/CT



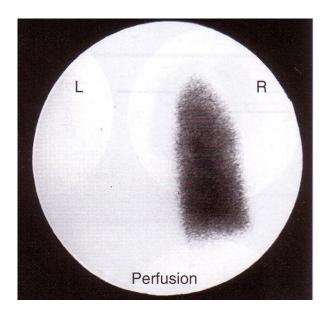
Perfusion defects in the apical segment of the right superior lobe and in the right middle lobe

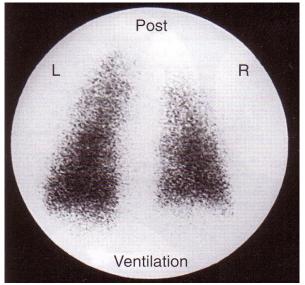
#### **FISSURE SIGN**

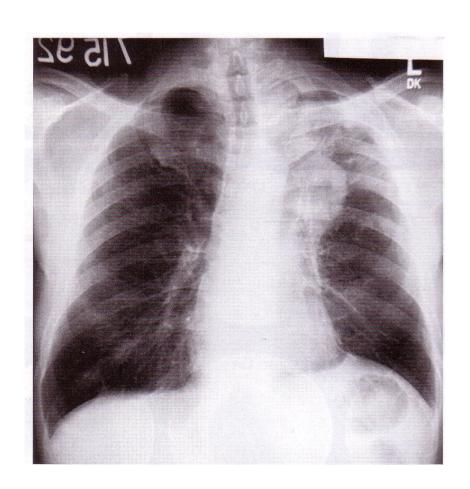
• Linear perfusion defect in the area of the right large fissure (fissura obliqua) because of the liquid in the fissure (pleural effusion in heart decmopensation)



## **Lung carcinoma**







The end