NUCLEAR MEDICINE

DEPARTMENT OF BIO-MEDICAL IMAGING, UNIVERSITY MALAYA MEDICAL CENTRE.

HISTORY OF NUCLEAR MEDICINE

- Many historians consider the discovery of artificially produced radionuclides by <u>Frédéric Joliot-Curie</u> in 1934 as the most significant milestone in nuclear medicine.
- 2) In February 1934, they reported the first artificial production of radioactive material in the journal *Nature*, after discovering radioactivity in aluminum foil that was irradiated with a polonium preparation.



Fig. B. An illustrious mother and daughter-Mme Marie Carie and Irene, (Acme photo.)

Scanned at the American Institute of Physics





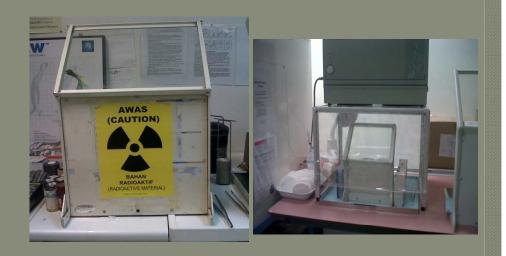
THE NUCLEAR MEDICINE RADIOGRAPHER



The Nuclear Medicine Radiographer is a multi-skilled member of the healthcare team trained in the following aspects: the receipt, preparation, dispensing and waste disposal of radionuclides; scheduling and sequencing of nuclear medicine procedures; injecting, imaging, care and management of patients; operation and care of equipment; manipulation and presentation of data and radiation protection to patients, staff and the public.

RADIATION PROTECTION

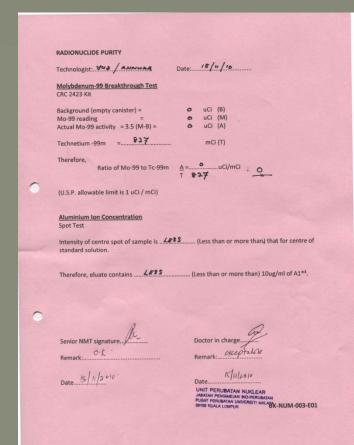
- After injection was given into IV, body patient emitted radiation (depends of half life radioactive)
- 2) Keep distance from these 3 people:
- ✓ Children below 12 years old
- ✓ Baby
- ✓ Pregnant lady







QUALITY CONTROL









HOT LAB

The Technetium-99m Generator

- 1) Technetium-99m, which is a radioactive isotope of the man-made element technetium, is the favored choice of the medical profession because the type of radiation it emits allows the practitioner to image internal body organs without causing radiation damage.
- 2) Its half life is six hours, which is long enough for a medical examination and short enough to allow a patient to leave the hospital soon afterwards.

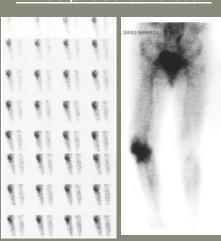




WHOLE BODY BONE SCAN

- 1) Radio-pharmaceutical
- MDP
- * HDP
- 2) Whole body bone scan is performed 2hrs after injection of Radio-pharmaceutical.
- 3) RAO/LAO/RPO/LPO spot images will be taken as standard procedures for patient's with CA BREAST.
- 4) Spect-CT images will be ordered if necessary.

Three phase bone scan





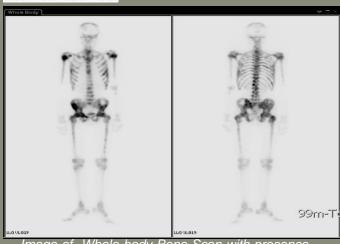


Image of Whole-body Bone Scan with presence of Metastatic Bony lesion.

CARDIAC PERFUSION SCAN

STRESS TEST

- 1) A nuclear stress test measures blood flow to your heart muscle both at rest and during stress on the heart.
- 2) It's performed similar to a routine exercise stress test, but provides images that can show areas of low blood flow through the heart and areas of damaged heart muscle.
- 3) A nuclear stress test usually involves taking two sets of images of your heart one set during an exercise stress test while you're exercising on a treadmill or with medication that stresses your heart, and another while you're at rest.

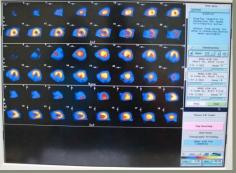


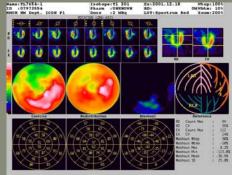


SINGLE PHOTON EMISSION COMPUTERIZED TOMOGRAPHY (SPECT)

- 1) The system detects single photons (energy emitted by the radioactive substance in the body) by rotating detectors around the body and recording events at each detector location.
- 2) A computer is used to create a three-dimensional image (or tomogram) of the radioactivity detected.
- The images produced assist in providing the highest quality of diagnosis to the ordering physician.
- A gamma camera does not emit any radiation. It may be suspended over the examination table or it may be beneath the table.







SPECT-CT

- different types of scans are taken and the images or pictures from each are fused or merged together. The fused scan can provide more precise information about how different parts of the body function and more clearly identify problems
- 2) The radiopharmaceutical is detected by a nuclear medicine gamma camera. The camera or cameras rotate over a 360 degree arc around the patient, allowing for reconstruction of an image in three dimensions



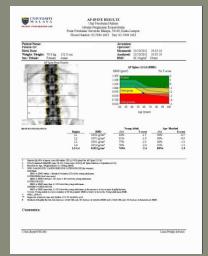


BONE MINERAL DENSITY (BMD)

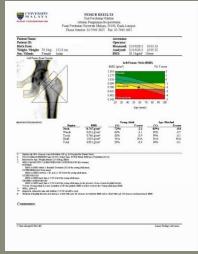
- 1. Measurements are most commonly made over the <u>lumbar spine</u> and over the upper part of the <u>hip</u>. Average density is around 1500 kg m⁻³
- 2. Bone density (or <u>bone mineral</u> density) is a <u>medical term</u> referring to the amount of matter per cubic centimeter of <u>bones</u>. Bone density (or BMD) is used in clinical medicine as an indirect indicator of <u>osteoporosis</u> and <u>fracture</u> risk.

RADIATION EXPOSURE

The radiation received by the patient during the scan is less than that of an airline flight from California to New York and back





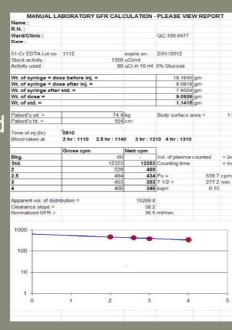




GLOMERULUS FILTRATION RATES (GFR)

- 1) Glomerulus Filtration Rate (GFR) is the volume of fluid filtered from the renal (kidney) glomerular capillaries into the Bowman's capsule per unit time. ^[2] Central to the physiologic maintenance of GFR is the differential basal tone of the afferent and efferent arterioles (see diagram).
- 2) Glomerular filtration rate (GFR) can be calculated by measuring any chemical that has a steady level in the blood, and is freely filtered but neither reabsorbed nor secreted by the kidneys. The rate therefore measured is the quantity of the substance in the urine that originated from a calculable volume of blood.







VENTILATION-PERFUSION (V/Q) SCINTIGRAPHY

- 1) V/Q scintigraphy has been used since 1964 for the diagnosis of PE; long before the advent of CT Pulmonary.
- 2) V/Q scan became the routine clinical procedure for diagnosis of pulmonary embolism (PE) and was one of the commonest nuclear medicine procedure in the 1990's till early 2000.

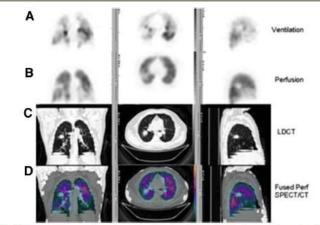
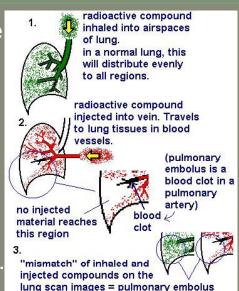


Figure 5 V/Q SPECT/CT scan confirms a lung cancer in the right middle lobe (RML) as the cause of the perfusion defect.

(A) Ventilation SPECT and (B) Perfusion SPECT in the 3 orthogonal planes demonstrating a matched defect in the RML,

(C) with a corresponding lung tumor identified on low-dose, (D) Fused SPECT/CT images show that the area of absent ventilation and perfusion corresponds with the RML tumor.





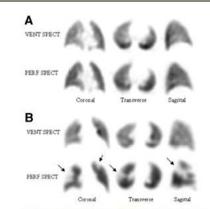


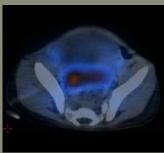
Figure 2 (A) A normal ventilation and perfusion lung scan showing uniform uptake of both Technegas and [9hoTc]-MAA (macro aggregated albumin) in the lung fields in both studies. (B) Multiple mismatched ventilation and perfusion defects in a patient with multitole PC.

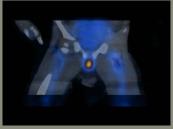


99m-Tc RBC GIT. BLEED SCINTIGRAPHY

- 1) 99mTechnetium-labelled red blood cell scintigraphy (99mTc RBC scintigraphy) was used as the second-line investigation to localise bleeding.
- 2) Scintigraphy was available on a 24 h basis
- 3) 99mTc RBC scintigraphy was less useful in patients who were not bleeding actively or who were being investigated for chronic anaemia.





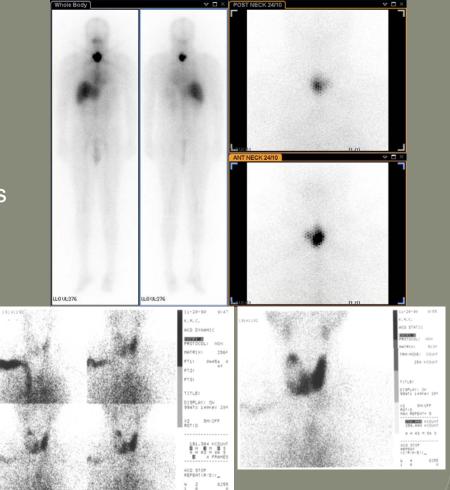




I-131 WB SCAN

- 1) It is used in <u>nuclear</u>
 <u>medicine</u> therapeutically and can
 also be seen with diagnostic
 scanners if it has been used
 therapeutically.
- 2) Use of the ¹³¹I as iodide salt exploits the mechanism of absorption of iodine by the normal cells of the <u>thyroid</u> gland.
- 3) Examples of its use in <u>radiation</u> therapy are those where tissue destruction is desired after iodine uptake by the tissue.





RENAL IMAGING

- 1) 99mTc-DMSA scan is a <u>radionucleotide</u> scan that uses <u>dimercaptosuccinic acid</u> in assessing the <u>renal function</u>,
- 2) It is now the most reliable test for the diagnosis of <u>Acute</u> <u>pyelonephritis</u>.
- 3) The major clinical indications for this investigation are the detection and/or evaluation of a renal scar, the small or absent kidney, an occult duplex system, certain renal masses, systemic hypertension or suspected vasculitis.

