Tc-99m 거대응집알부민을 이용한 폐관류 스캔에서 관찰되는 다발성 열소

전북대학교 의과대학 핵의학교실 의과학연구소 임상의학연구소 임석태^{1,3} · 손명희^{1,2,3}

Hot Spots on Tc-99m MAA Perfusion Lung Scan

Seok Tae Lim, M.D.^{1,3} and Myung-Hee Sohn, M.D.^{1,2,3}

Department of Nuclear Medicine¹, Institute for Medical Sciences², and Research Institute of Clinical Medicine³, Chonbuk National University Medical School, Chonju, Korea

Abstract

A 61 year-old woman underwent perfusion and inhalation lung scan for the evaluation of pulmonary thromboembolism. Tc-99m MAA perfusion lung scan showed multiple round hot spots in both lung fields. Tc-99m DTPA aerosol inhalation lung scan and chest radiography taken at the same time showed normal findings (Fig. 1, 2). A repeated perfusion lung scan taken 24 hours later demonstrated no abnormalities (Fig. 3).

Hot spots on perfusion lung scan can be caused by microsphere clumping due to faulty injection technique or by radioactive embolization from upper extremity thrombophlebitis after injection. Focal hot spots can signify zones of atelectasis, where the hot spots probably represent a failure of hypoxic vasoconstriction.

Artifactual hot spots due to microsphere clumping usually appear to be round and in peripheral location, and the lesions due to a loss of hypoxic vasoconstriction usually appear to be hot uptakes having linear borders. $^{1-3)}$ Although these artifactual hot spots have been well-known, we rarely encounter them. This report presents a case with artifactual hot spots due to microsphere clumping on Tc-99m MAA perfusion lung scan. (Korean J Nucl Med 2001;35:288-290)

Key Words: Artifact, Pulmonary hot spot, Tc-99m MAA, Lung scan

Received Apr. 19, 2001; accepted May 19, 2001 Corresponding author: Myung-Hee Sohn, M.D.

Department of Nuclear Medicine, Chonbuk National University Medical School, 634-18 Keumam-dong

Duckjin-gu, Chonju, Chonbuk 561-712, Korea

E-mail: mhsohn@moak.chonbuk.ac.kr

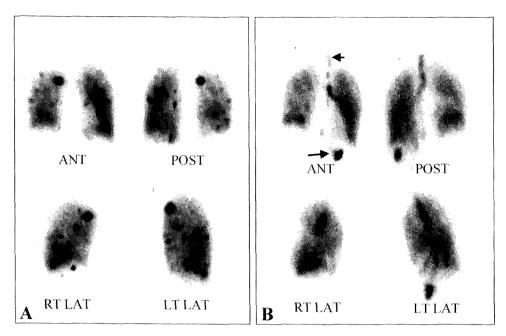


Fig. 1. The multiview images of Tc-99m MAA perfusion lung scan (A) show multiple round hot spots in both lung fields. Tc-99m DTPA aerosol inhalation lung scan (B) taken at the same time shows normal findings in both lung fields. Small and large arrows indicate the radioactive aerosol in the trachea and the stomach, respectively.

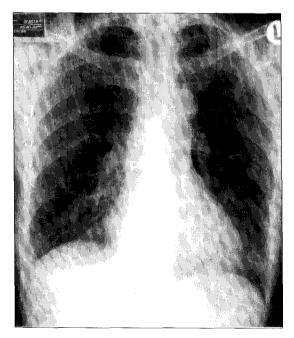


Fig. 2. The chest radiography shows normal findings

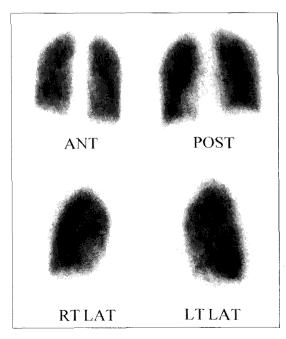


Fig. 3. The repeated perfusion lung scan taken 24 hours later demonstrates no abnormalities.

References

- 1. Ikehira H, Kinjo M, Yamamoto Y, Makino H, Furuichi Y, Nakamura H, et al. Hot spots observed on pulmonary perfusion imaging: a case report. *J Nucl Med Technol* 1999;27:301-2.
- 2. Meignan M, Palmer EL, Waltman AC, Strauss HW. Zones of increased perfusion (hot spots) on perfusion lung scans: correlation with pulmonary arteriograms. *Radiology* 1989;173:47-52.
- Massoud TF. Zones of increased perfusion (hot spots) on perfusion lung scans. *Radiology* 1990; 175:286-7.