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Quantitative study of ischemic cerebral damage from ^{99m}Tc-hexamethylpropylenaminoxyme (^{99m}Tc-HMPAO) SPECT.

Use of Technetium - labelled radiopharmaceuticals, primarily of ^{99m}Tc-hexamethylpropyleneamineoxym (HMPAO) for qualitative diagnosis of cerebrovascular disease is nowadays routinely employed.

We have here designed a method for quantitative in vivio calculation of volume of cerebral ischemic damage, that is based on 99mTc-HMPAO single photon emission computer tomography (SPECT) data. 64 patients with chronic cerebrovascular disease were studied. 740 MBq of 99mTc-HMPAO (from Diamed Ltd, Moscow) were injected at rest. Axial 16 mm thick slices were reconstructed immediately from 64-128 planar projections acquired over 360° in 64x64 matrix. Quantitative 99mTc-HMPAO distribution maps were calculated for every slice. Normal uptake was derived before from SPECT performed in 16 neurologically healthy subjects. Also 99mTc-HMPAO cerebral extraction fraction was calculated from dynamic studies which was in ranges 0.82 - 0.93 and did not differ between ischemic and normal regiones. Values below {(regional normative of uptake) - 2*SD} had been postulated as border value for recognition of cerebral ishemia. The volume of cerebral ishemic damage (VCI, cm³) was calculated as integral: VCI = V_{VOX} * \((N_r -Ur) dV, where Nr - regional normative of 99mTc-HMPAO accumulation, Ur - actual uptake of 99mTc-HMPAO, Vvox - volume of voxel. VCI values were calculated for anterior, middle and posterior cerebral arteries vascular regiones as well as for both hemispheres and for the brain as a whole.

The mean value of whole brain VCI was in patients who underwent repeat multiple transient ischemic attacks as much as $80 \pm 16 \text{ cm}^3$, in patients after cerebral stroke with moderate functional deficit as much as $213 \pm 38 \text{ cm}^3$, and in patients with severe post-stroke neurologic functional deficit $339 \pm 42 \text{ cm}^3$.

In patients treated by carotid endarterectomy (CE) the local and global VCI values decreased as a result of surgery by 12-25 %. Nevertheless, the effective functional restoration of neurologic state by CE was possible only in patients, whose whole brain VCI value was before CE lower than 100 cm³.

Thus we conclude, that ^{99m}Tc-HMPAO provides quantification of volume of cerebral ischemic damage in various forms of cerebrovascular disease.