malformations indicates that these lesions are best visualized when scanning is performed immediately following administration of either substance. RIHSA was found to give scans that were technically superior to those obtained with Chlormerodrin ^{197}Hg.

Note: Fig. 3 is reproduced with permission from Blau and Bender (10).

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The following Letter to the Editor is herewith repeated from the August, 1967 issue of The Journal of Nuclear Medicine incorporating several changes requested by the author, Dr. C. M. E. Matthews:

LETTER TO THE EDITOR

I am writing to correct the impression given in an article by Mrs. M. B. Glos in Nucleonics, February, 1967, about ^{123}I labeled albumin for brain scanning. In fact, I have not actually used this radioactive substance in patients and do not claim that it is definitely "superior to almost any other isotope." What I have done, is to calculate a Figure of Merit for a number of different possible substances and also, the probable minimum size of brain tumor which could be detected with each of them (*J. Nucl. Med.* 6:155, 1965. *Acta Radiologica,* In press).

Using this criterion, ^{99m}Tc pertechnetate came at the top of the list of those substances which have been actually used and for low energy gamma ray emitters ^{123}I albumin was the next on the list. Highest values of Figure of Merit were obtained for short lived positron emitters, but the use of these would depend on finding a suitable labeled compound which could be made quickly enough.

Dr. D. J. Silvester has prepared ^{123}I on the Medical Research Council cyclotron, here, but it has not been used for brain scanning, because the proportion of other iodine isotopes produced at the same time is too high.

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