CONSECUTIVE-DAY SCHILLING TESTS

The recently published study by Grames, et al (*1*) brings up the question of the relative merits of diagnostic procedures. The lack of objective criteria will usually make the choice of a particular procedure one based on personal preference. In this instance I would like to propose that a previously described modification of the Schilling test with simultaneous administration of free and intrinsic factor (IF)-bound vitamin B_{12} (B_{12}) is the preferred procedure.

Grames, et al conclude from their study that "patients suspected of having pernicious anemia can be studied with the baseline Schilling test on one day and the repeat Schilling test with IF on the following day." Although one cannot argue with this conclusion, I would like to suggest from my experience that simultaneous measurements of free and IF-bound B_{12} in either urine (*2*) or plasma (*3*) have all the advantages of the consecutive-day measurement mentioned by the authors and, in addition, that they eliminate the problems of incomplete specimen collection or poor renal function. I would like to suggest also that the only reason the authors have not considered using this procedure with simultaneous administration of free and IF-bound B_{12} is that until recently free and IF-bound B_{12} have not been available in a commercial kit.

WOLFGANG HAUSER
St. Mary's Hospital
Montreal, Quebec, Canada

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THE AUTHORS' REPLY

The simultaneous technique with free and intrinsic-factor-bound B_{12} was not unknown to the authors. Our study did not compare various techniques nor did we claim that consecutive-day urinary excretion was preferred over the simultaneous method. The primary purpose for publishing the results of this study was to dispel the commonly held concept that a prior flushing dose of unlabeled B_{12} would invalidate a repeat examination.

GEORGE M. GRAMES
ROBERT REISWIG
CARL JANSEN
RAYMOND HERBER
Loma Linda University School of Medicine
Loma Linda, California

RADIOZINC AS A SCINTIGRAPHIC AGENT FOR THE HUMAN PROSTATE

We read with interest the paper by Chisholm, et al (*1*). Because of the well-known high zinc content of the human prostate (*2*), we also investigated the possible use of radiozinc as an agent for scintigraphic visualization of this gland. Our attempts failed and we did not report these negative results feeling that they were of little interest to most clinicians. At the present time, we consider that our results may be complementary to those of Chisholm, et al and may emphasize how disappointing this field of nuclear medicine is.

We used ^{69m}Zn, which has a physical half-life of 13.8 hr and a 440-keV gamma ray emission, allowing us to use the scintillation camera for visualiza-