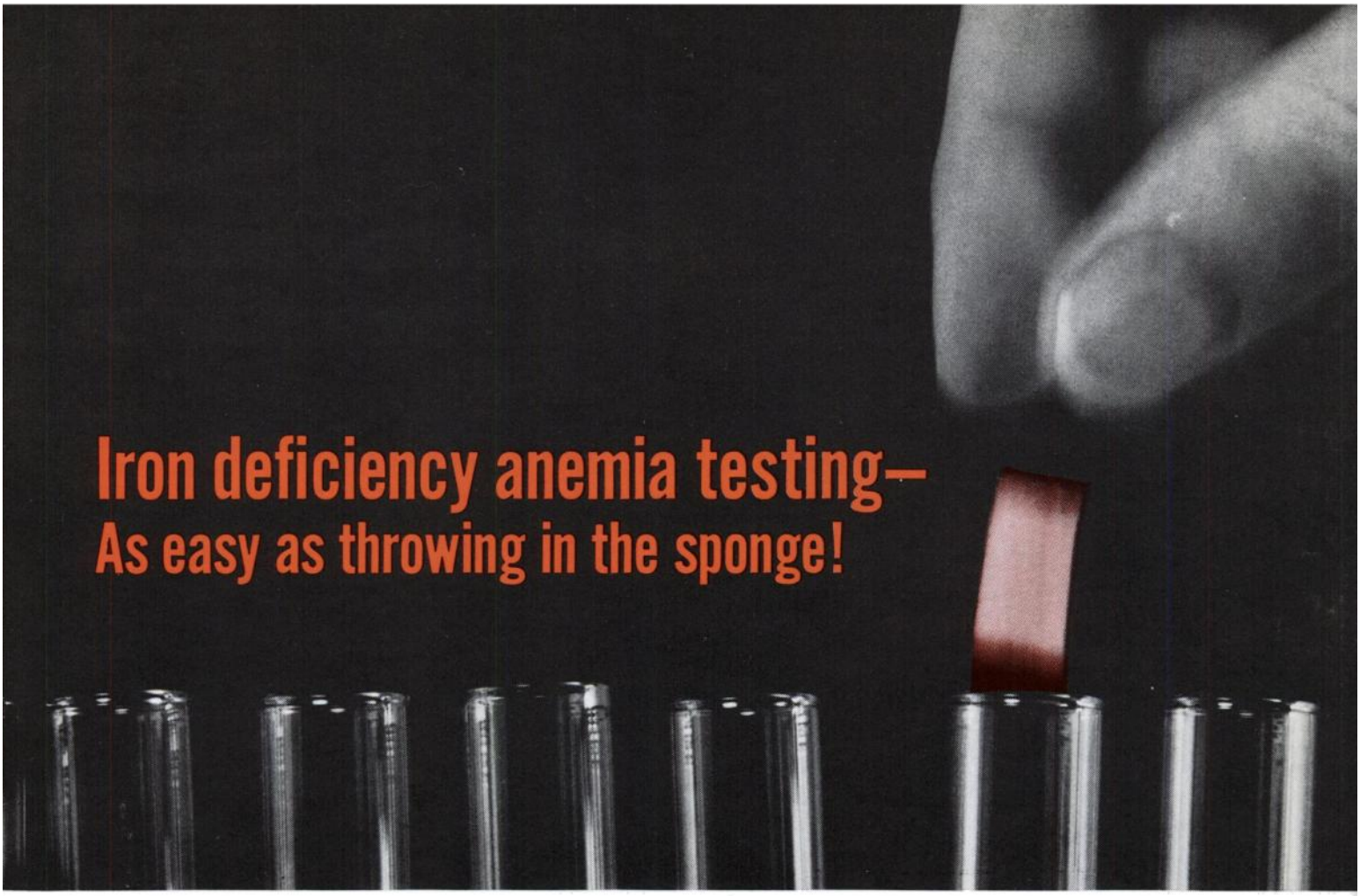

Irosorb-59 is the second in a series of **in vitro** radio-pharmaceutical tests developed by Abbott Laboratories. **The Irosorb-59 Sponge offers a remarkable degree of accuracy and simplicity that makes routine screening a practical matter.**

Accuracy: The diagnostic accuracy of the test is unsurpassed in measuring latent iron-binding capacity. What's more, unlike other methods, it can be used following the administration of a hematinic.

Speed: Irosorb-59 can be washed quickly, there being only 3 washes. No incubators or shakers are needed.

Convenience: Irosorb-59 is in a disposable kit form ready for immediate use at room temperature.

Safety: No dilution or pipetting of radioactive material is necessary. Since the patient receives no radioactive materials, the test can be used in children, pregnant women, or in adults without any hazard of radioactivity.

Flexibility: The test does not require the presence of the patient for the determination of the radioactivity. Serums can be frozen and saved until a sufficient number has been collected to run a rack full of tubes at one time, or serum samples can be mailed to personnel performing the test.

Irosorb-59 is available to all doctors, hospitals and clinical laboratories— AEC licensing is not required.

709418

IROSORB-59®
DIAGNOSTIC KIT

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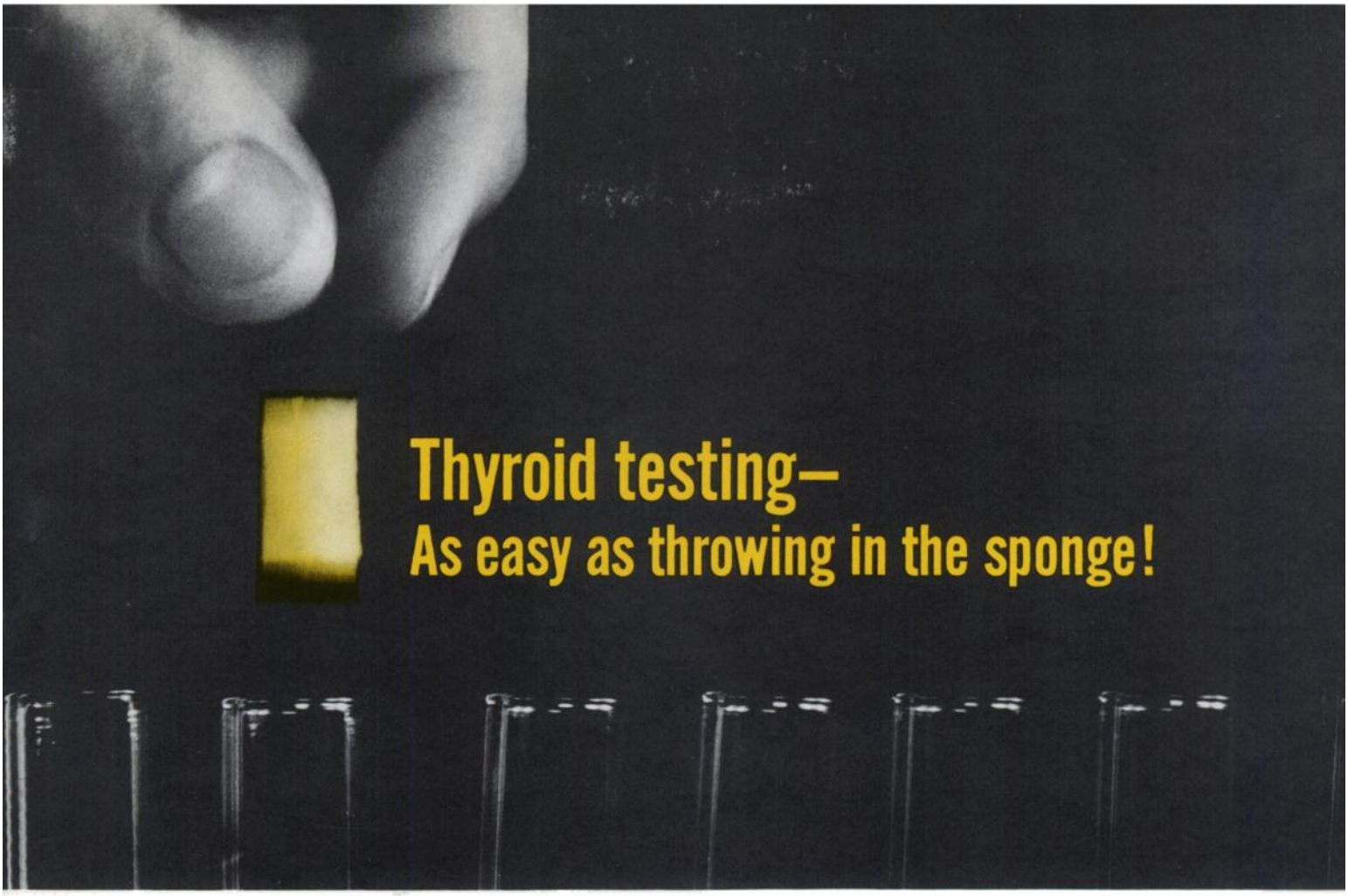
Abbott Laboratories, S.A., 2, rue Thalberg, 1201 Geneva, Switzerland



The Triosorb Sponge is an in vitro test providing accuracy, speed and convenience.

Accuracy: Because factors such as red blood cells and exogenous iodine have been eliminated from consideration in the Triosorb Test, it is unsurpassed in accuracy.

Speed: With only 3 washes and no need for double pipettings, shakers, or incubators, the Triosorb Test can be more rapidly performed than any other T-3 test.

Convenience: Available in a disposable kit ready for immediate use at room temperature. There is no dilution or pipetting of radioactive materials with Triosorb. It is the simplest and most convenient thyroid function test to perform.

"The resin sponge (Triosorb) technique is superior to the erythrocyte method for performing the I^{131} T3 test in terms of simplicity, convenience and elimination of errors characteristic of the erythrocyte procedure."[1]

"The T-3 uptake test was vastly improved by a resin-sponge . . . (Triosorb) . . . which is offered as a replacement for the red cells as well as for the loose granular resin which varies from day to day."[2]

Triosorb is available to all doctors, hospitals and clinical laboratories—AEC licensing is not required.

1. McAdams, G. B., and Reinfrank, R. F., J. Nuclear Med., 5:112, 1964.
2. Manfredi, O. L., et al., J. Nuclear Med., 7:72, 1966.

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TRIOSORB®-131
TRIOSORB-125
T-3 DIAGNOSTIC KIT

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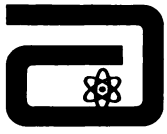
Announcing

TETRASORB™-125

T-4 DIAGNOSTIC KIT

On the opposite page,
Abbott announces its
3rd "sorb" product–
Tetrasorb-125.
Please lift this page
for information about
Triosorb® and Irosorb-59®.



This sponge puts the squeeze on the PBI!

"For many years the protein-bound iodine (PBI) has been used as an indirect index of the level of thyroid hormones; however, in an appreciable number of cases it does not provide an accurate measurement, because compounds containing iodine or mercury are present."[1]

It is now generally recognized that a quantitative **direct measurement** of thyroid hormones in serum is the most valuable single laboratory aid in assessing thyroid function.

"Using a resin-sponge and thyroxine tagged with I-125, a simple method was developed to determine serum thyroxine."[2]

That method is Tetrasorb-125, the first diagnostic kit offering a direct measurement of thyroid function by determining serum thyroxine. Hypothyroid patients show a decrease in serum thyroxine while hyperthyroid patients show an increase.

Tetrasorb-125 is based on the principle of saturation analysis for measuring total serum thyroxine (T-4). Prior to the availability and convenience of the Tetrasorb-125 Kit, these results were reported for the T-4 test:

"When T_4 and PBI values were compared, a good correlation (r=0.823) was obtained with a higher diagnostic accuracy for the T_4 determination. All euthyroid individuals with PBI's elevated due to iodine had T_4 values in the normal range. . . . The T_4 level correlated well with the clinical status in hypothyroid subjects receiving T_4 or hyperthyroid subjects receiving various forms of therapy."[1]

"Unlike the protein-bound iodine determination, this technique is entirely unaffected by iodine or mercury, an important advantage from the clinical point of view."[3]

"These results proved that this method could be used as a routine clinical diagnostic test in place of the determination of PBI."[4]

By requesting both Tetrasorb-125 (a direct measure of thyroid activity) and Triosorb® (an indirect measure of thyroid activity) for his patient, the physician is provided with more information than ever before possible.

Tetrasorb-125 is available to all doctors, hospitals and clinical laboratories—AEC licensing is not required.

1. Murphy, B. P. and Pattee, C. J., J. Clin. Endocr., 26:247, 1966. 2. Kaplan, B. C., AAAS Meeting, Dec., 1966.
3. Murphy, B. P., J. Lab. & Clin. Med., 66:161, 1965. 4. Nakajima, H., et. al., J. Clin. Endocr., 26:99, 1966.

Announcing **TETRASORB™-125**

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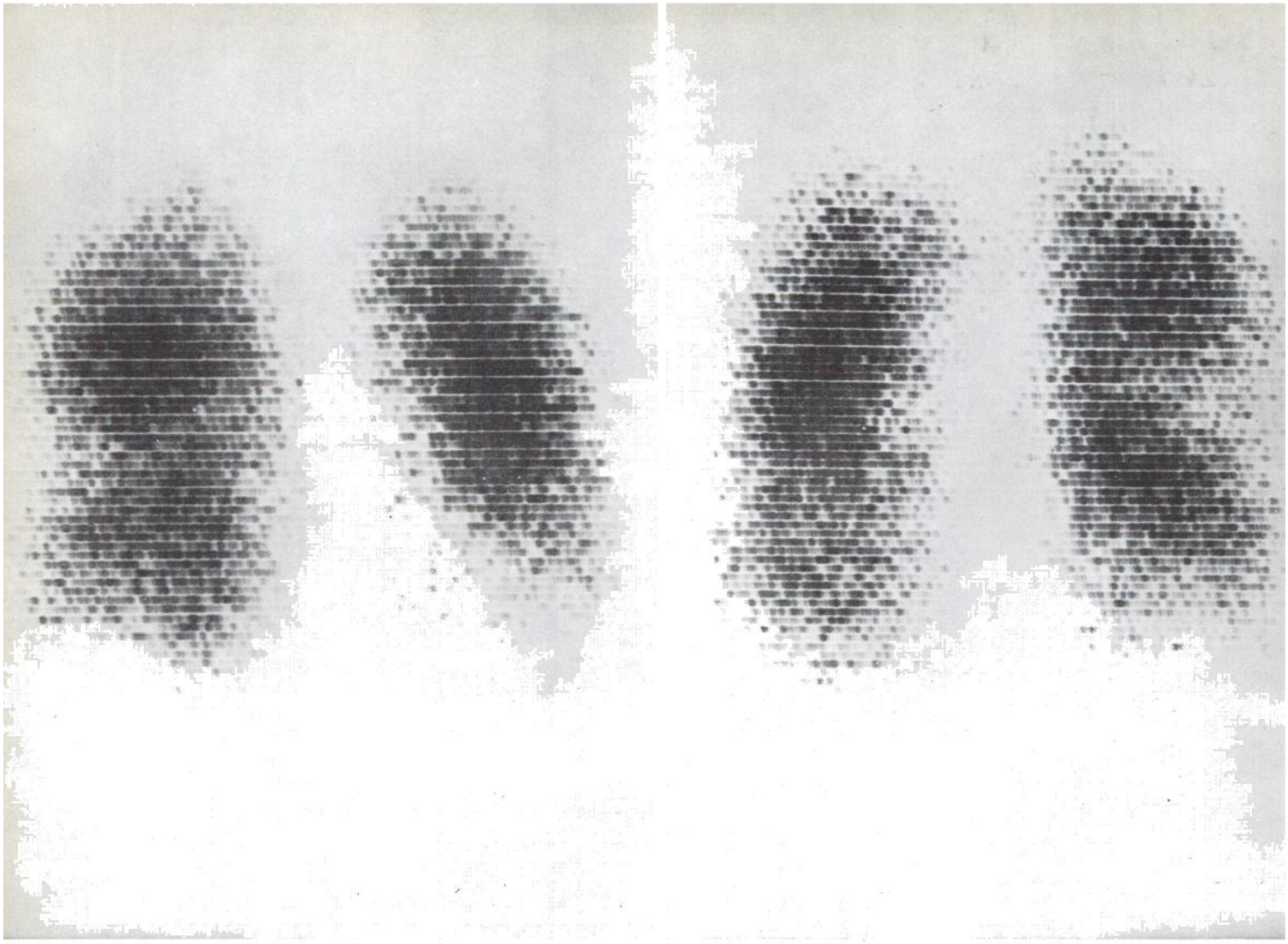

Lung scan demonstrating abnormal perfusion of right lung, female patient, age 58; courtesy Washington University School of Medicine. (AP view at left, PA view at right.)

Proven Advantages of Lung Scanning

". . . indicate the site and magnitude of pulmonary arterial obstruction before this is recognizable radiographically."[1]

". . . delineate normally vascularized pulmonary tissue and assess the pulmonary vascularization of roentgenographically obvious abnormalities . . ."[2]

". . . estimating the differences in pulmonary arterial perfusion between regions of the same lung."[3]

". . . locates the nonfunctional or avascular region and thus supplements conventional pulmonary function tests and can replace differential bronchospirometry."[4]

". . . estimation of regional pulmonary function, particularly in patients with emphysema, bronchiectasis, and chronic pulmonary tuberculosis."[5]

1. Taplin, G.V., et al., Scientific Exhibit, Society of Nuclear Medicine, June, 17-20, 1964.
2. Quinn, J. L., III, Whitley, J. E., Scintillation Scanning in Clinical Medicine, Quinn, J. L., III, Editor, W. B. Saunders Co., Philadelphia & London, 1964, p. 148.
3. Lopez-Majano, V., et al., Radiology, Vol. 83: No. 4, Oct. 1964, p. 698.
4. Taplin, G. V., et al., Radioactive Pharmaceuticals, AEC Symposium Series #6, USAEC, Apr. 1966, p. 542.
5. Taplin, G. V., et al., Radioactive Pharmaceuticals, AEC Symposium Series #6, USAEC, Apr. 1966, p. 541.

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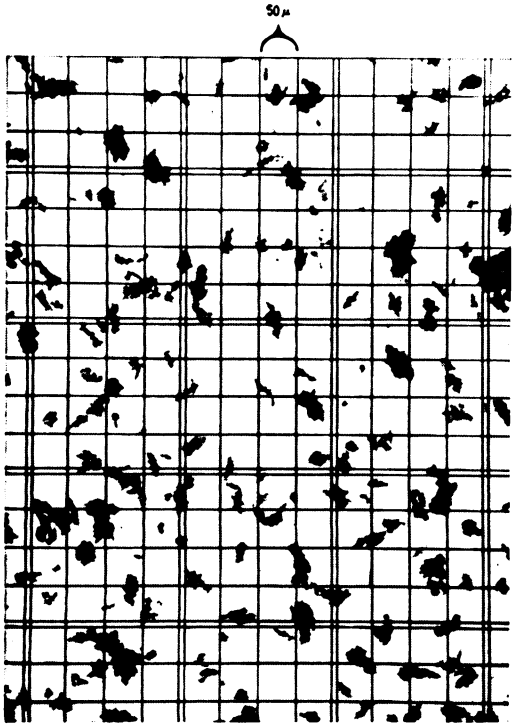
This "controlled uniformity" makes a positive contribution to good scan resolution, providing highly efficient temporary deposition of the scanning agent in the capillary field.

MAA I 131 is available in convenient source sizes as small as 500 microcuries. It may be used with reliance on its proven safety, shown by thousands of scans in hospitals all over the country. Lung excretion half-time is approximately 1 – 6 hours, and urinary excretion of 50 to 80% of the injected dose occurs in approximately 24 to 48 hours.[3]

Mallinckrodt/Nuclear (formerly Nuclear Consultants) produces a complete line of radiopharmaceuticals for scanning, diagnostic tests and therapy. For further information: call collect to the Mallinckrodt/Nuclear laboratory nearest you.

1. Wagner, H. N. Jr., Scintillation Scanning in Clinical Medicine, Quinn, J. L., III, Editor, W. B. Saunders Co., Philadelphia and London, 1964, p. 158.
2. Taplin, G. V., et al., Radioactive Pharmaceuticals, AEC Symposium Series #6, U.S.A.E.C., April 1966, p. 547.
3. Taplin, G. V., Health Physics, Dec. 1964, p. 1219.



Photomicrograph of MAA I 131 aggregates

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Specifications
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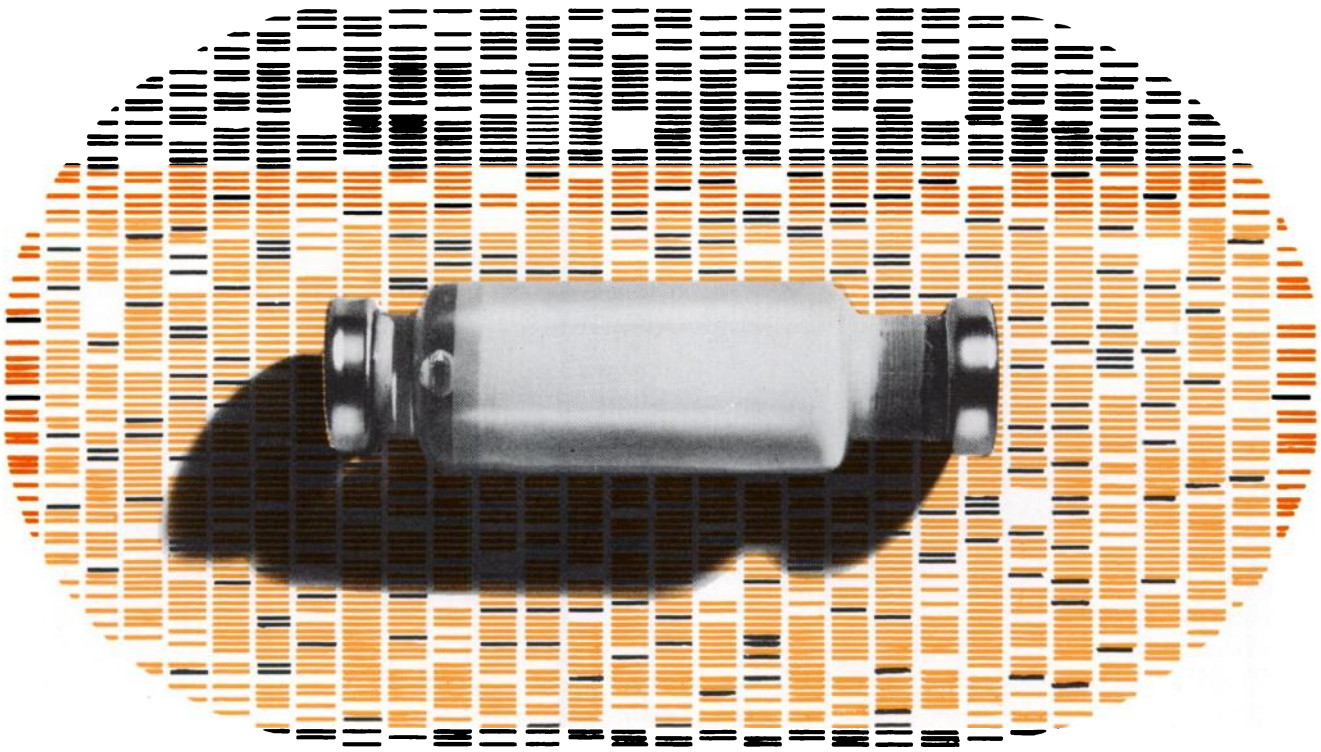
Concentration is approximately 500 μc/ml and specific activity approximately 500 μc/mg at time of calibration.

Contraindications
Radiopharmaceuticals are contraindicated in pregnancy and during lactation and in persons less than 18 years old unless, in the judgment of the physician, the situation requires their use. In acute cor pulmonale, the procedure may be hazardous due to the temporary small additional mechanical impediment to pulmonary blood flow.

Side Effects
The results of extensive clinical studies with MAA I 131 have shown it to be extremely well tolerated. However, the literature does reveal one case in which administration of the product was associated with the death of a patient seriously ill with extensive adenocarcinoma involving the lungs. Antigenic reactions have not been reported, but the possibility of such reactions attendant to the introduction of serum albumin into the patient's immunological system should be considered.



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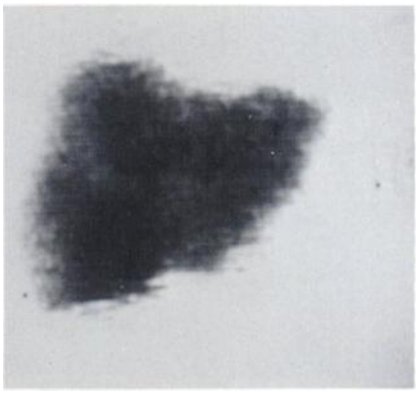

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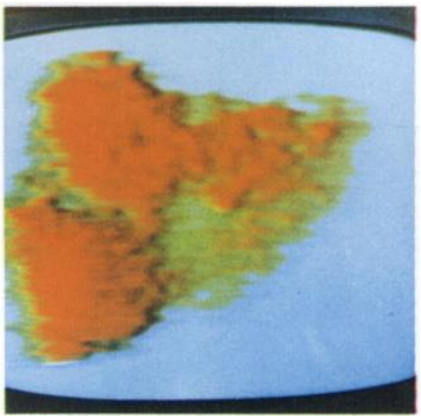

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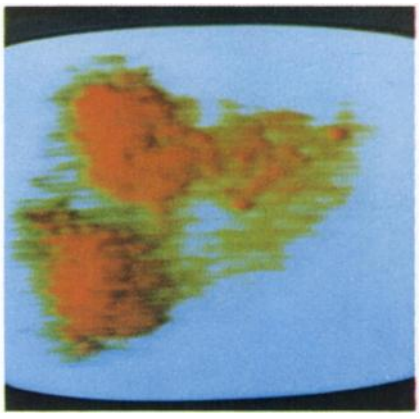

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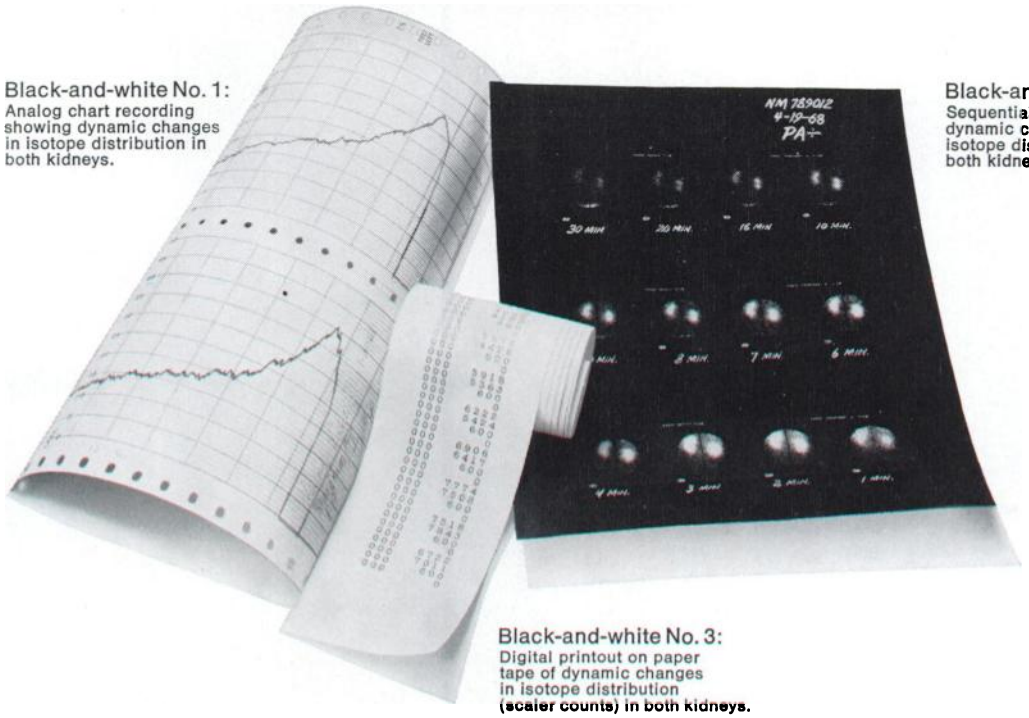


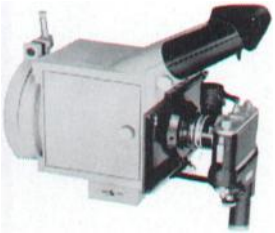
Black-and-white No. 1:
Analog chart recording showing dynamic changes in isotope distribution in both kidneys.

Black-and-white No. 2:
Sequential scintiphotos of dynamic changes in isotope distribution in both kidneys.

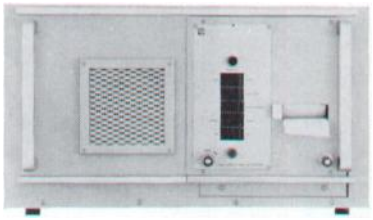
Black-and-white No. 3:
Digital printout on paper tape of dynamic changes in isotope distribution (scaler counts) in both kidneys.

Here's the new accessory trio for Pho/Gamma III that makes it possible:

Dual-Pen Chart Recorder & Dual-Channel Ratemeter.



35-mm Automatic Time-Lapse Camera.



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We're introducing three new ways to record and follow the dynamic distribution of radioisotopes in body organs as visualized by Pho/Gamma III: Analog. Digital. Or photographic. Take your choice.

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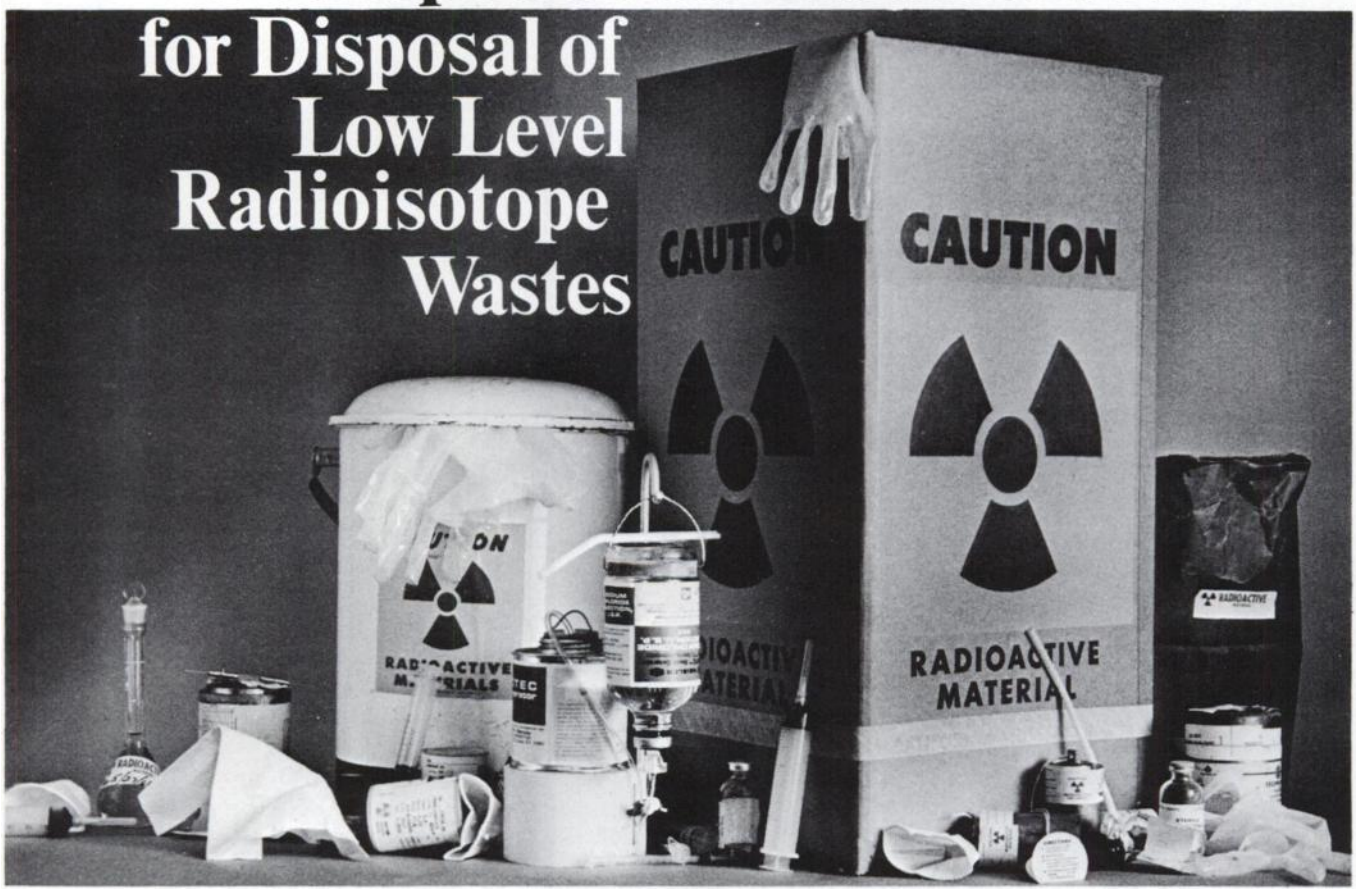

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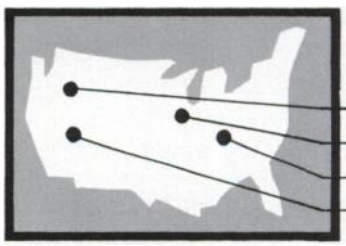

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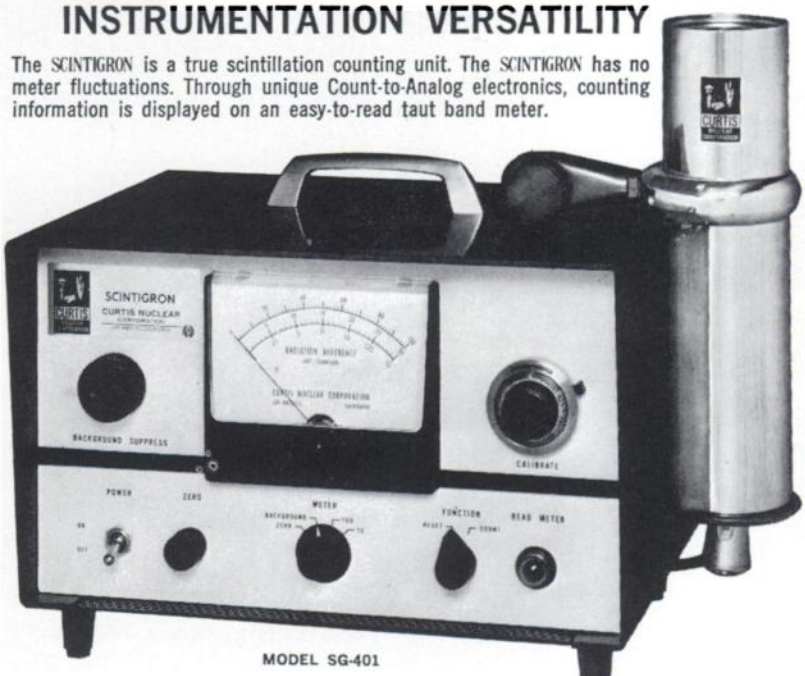

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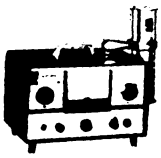

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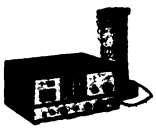

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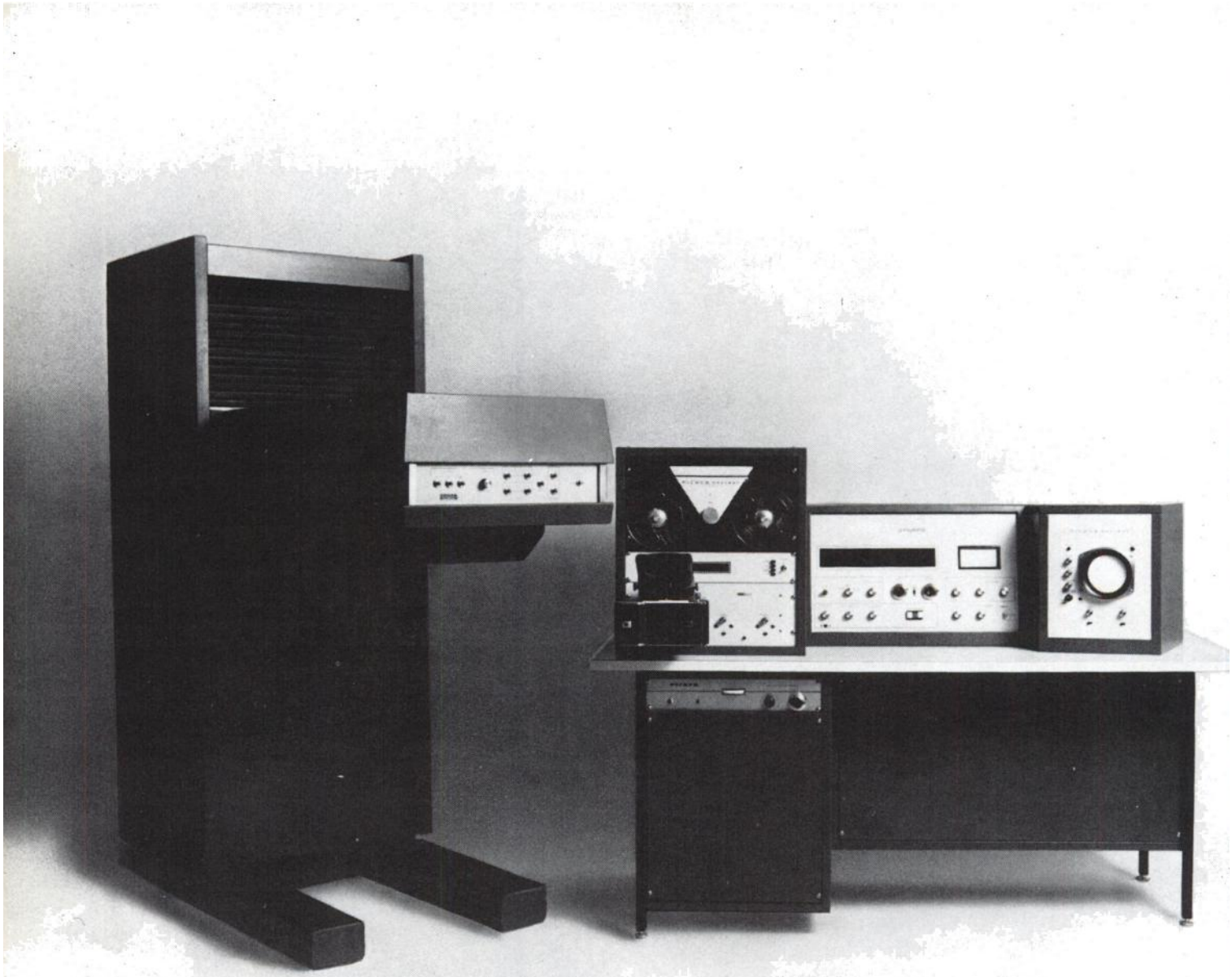

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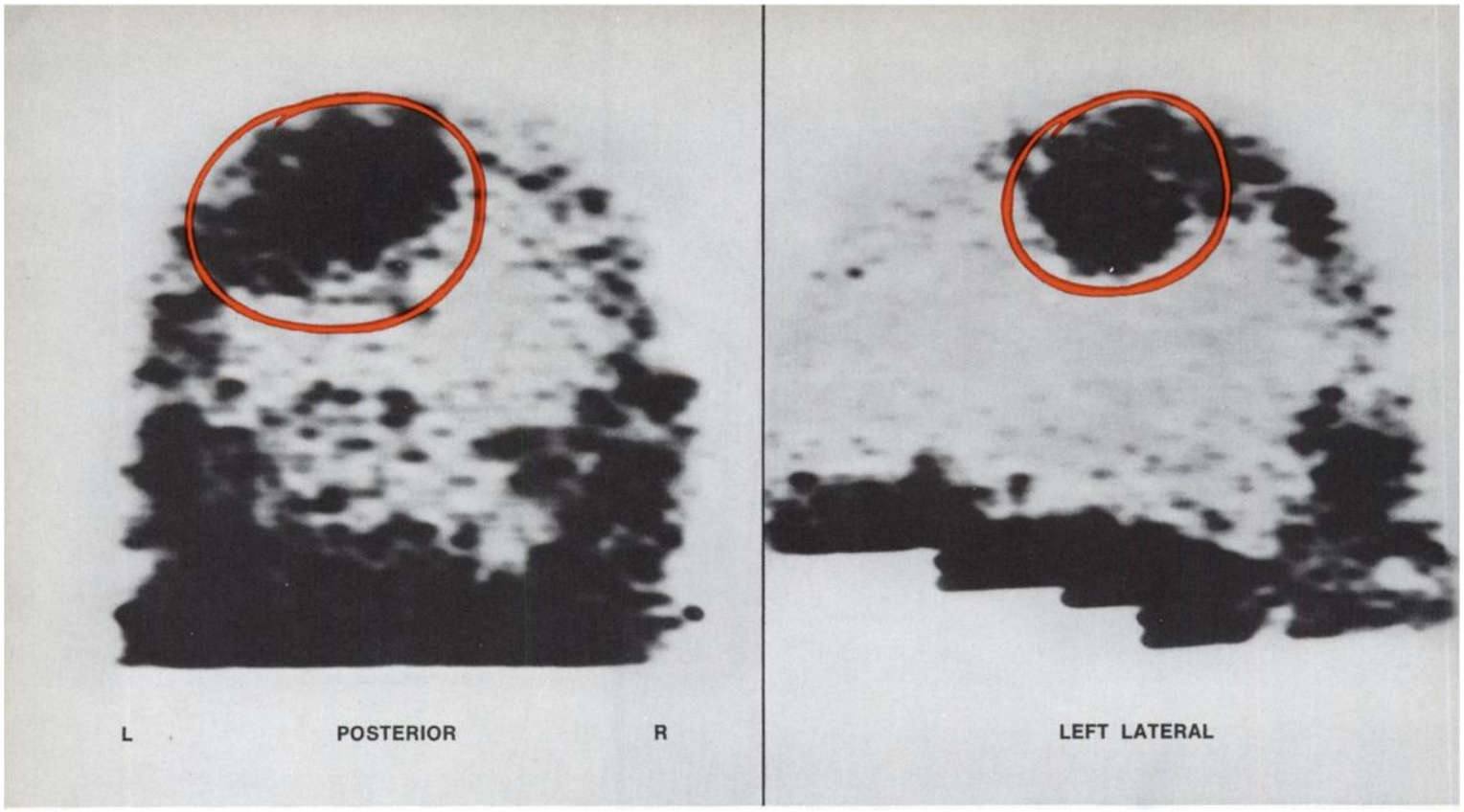

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PRECAUTIONS: Care should be taken to ensure minimum radiation exposure to the patient as well as all personnel; to prevent extracranial contamination because this can lead to erroneous interpretation; and to differentiate areas of abnormal activity from areas of normal vascular activity. 804464

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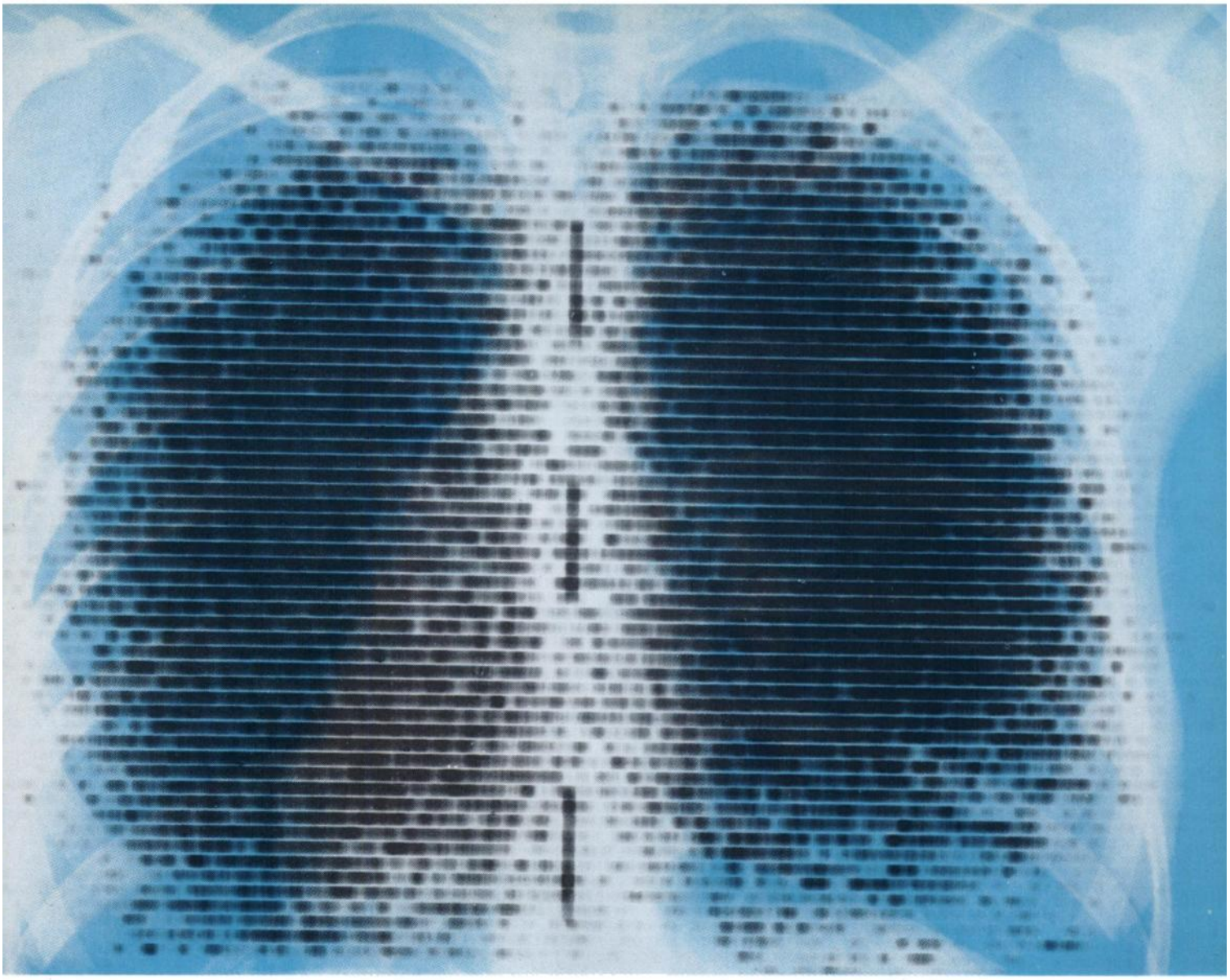

Abbott announces

Macroscan™-131

AGGREGATED RADIO-IODINATED (I^{131}) ALBUMIN (HUMAN)

If it's a pulmonary problem, Macroscan-131 pictures it!

Pulmonary embolism, suspected: To confirm (or rule out) its occurrence.

Chronic pulmonary tuberculosis: To estimate unilateral and regional function and perfusion of the lungs.

Emphysema: To evaluate the degree of focal lack of perfusion.

Pneumonitis: To evaluate the decreased regional blood flow that occurs without obstruction of vessels.

Lung tumors: To evaluate the regional ischemia resulting from compression or obstruction of pulmonary arteries.

Surgery and/or other therapy for lung disorders: To evaluate the effectiveness of therapeutic measures.

Macroscan-131 is sterile and non-pyrogenic. It is ready to use and should not be heated prior to use.

INDICATIONS: For scintillation scanning of the lungs to evaluate total, unilateral, and regional arterial perfusion to the lungs.

CONTRAINDICATION: Radio-pharmaceutical agents should not be administered to pregnant women, nursing mothers, or to persons less than 18 years old unless the indications are very exceptional.

PRECAUTIONS, SIDE EFFECTS: Care should be taken to administer the minimum dose consistent with safety and validity of data. The possibility of an immunological response to albumin should be kept in mind when serial scans are performed. There is a theoretical hazard in acute cor pulmonale, because of the temporary small additional mechanical impediment to pulmonary blood flow. A possible case of urticara has been related to a similar preparation. The thyroid gland should be protected by prophylactic administration of concentrated iodide solution.

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The
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Abbott Radio-Pharmaceuticals
since Abbott's entry
into the nuclear field.

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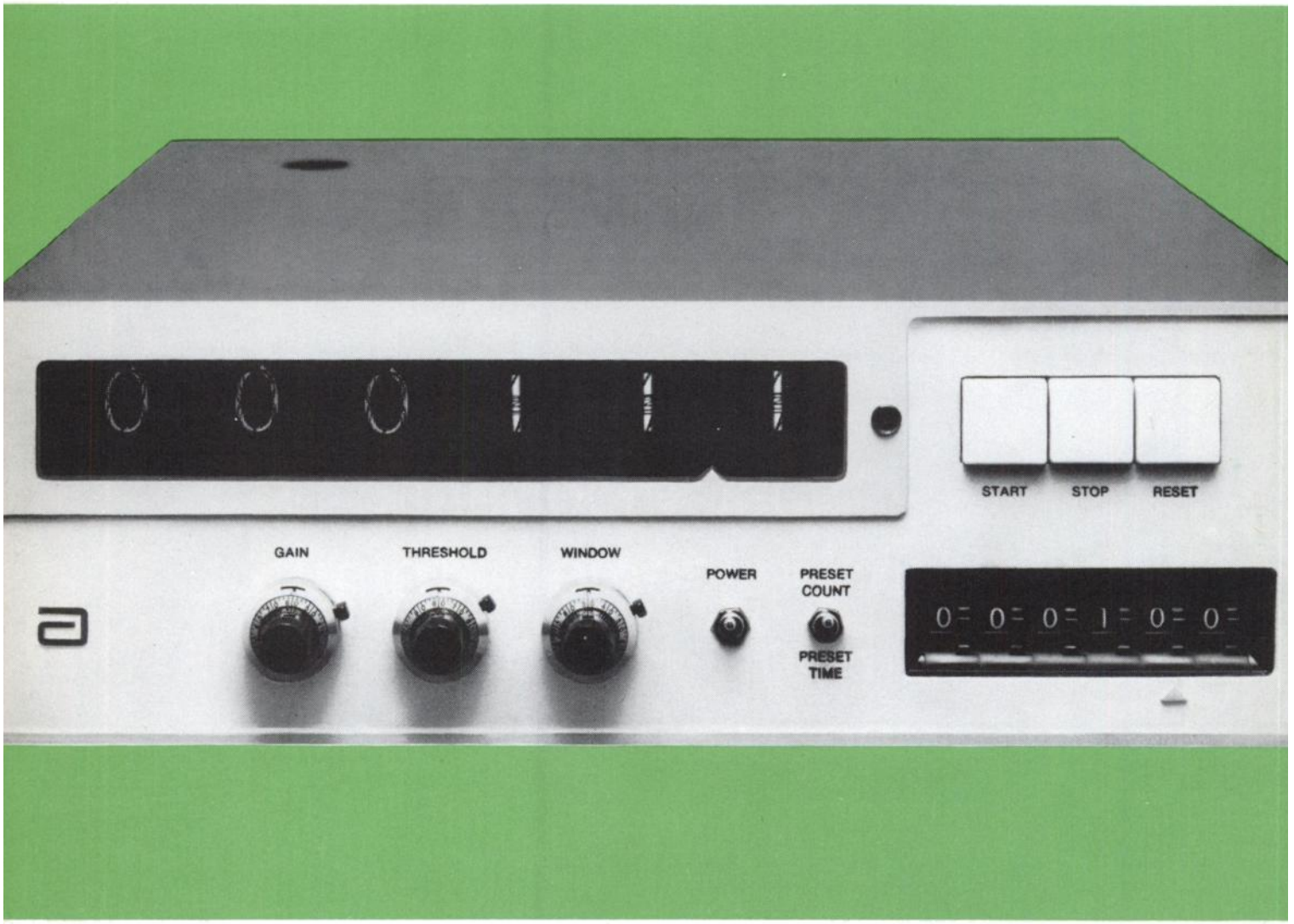

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only inches larger than this page
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The LOGIC Series—the most compact counting systems ever designed—is available now in 3 models.

The LOGIC Counting Systems offer:

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- Portability (25-35 lbs.)
- Versatility (choice of 3 models)
- Quality (backed by Abbott)

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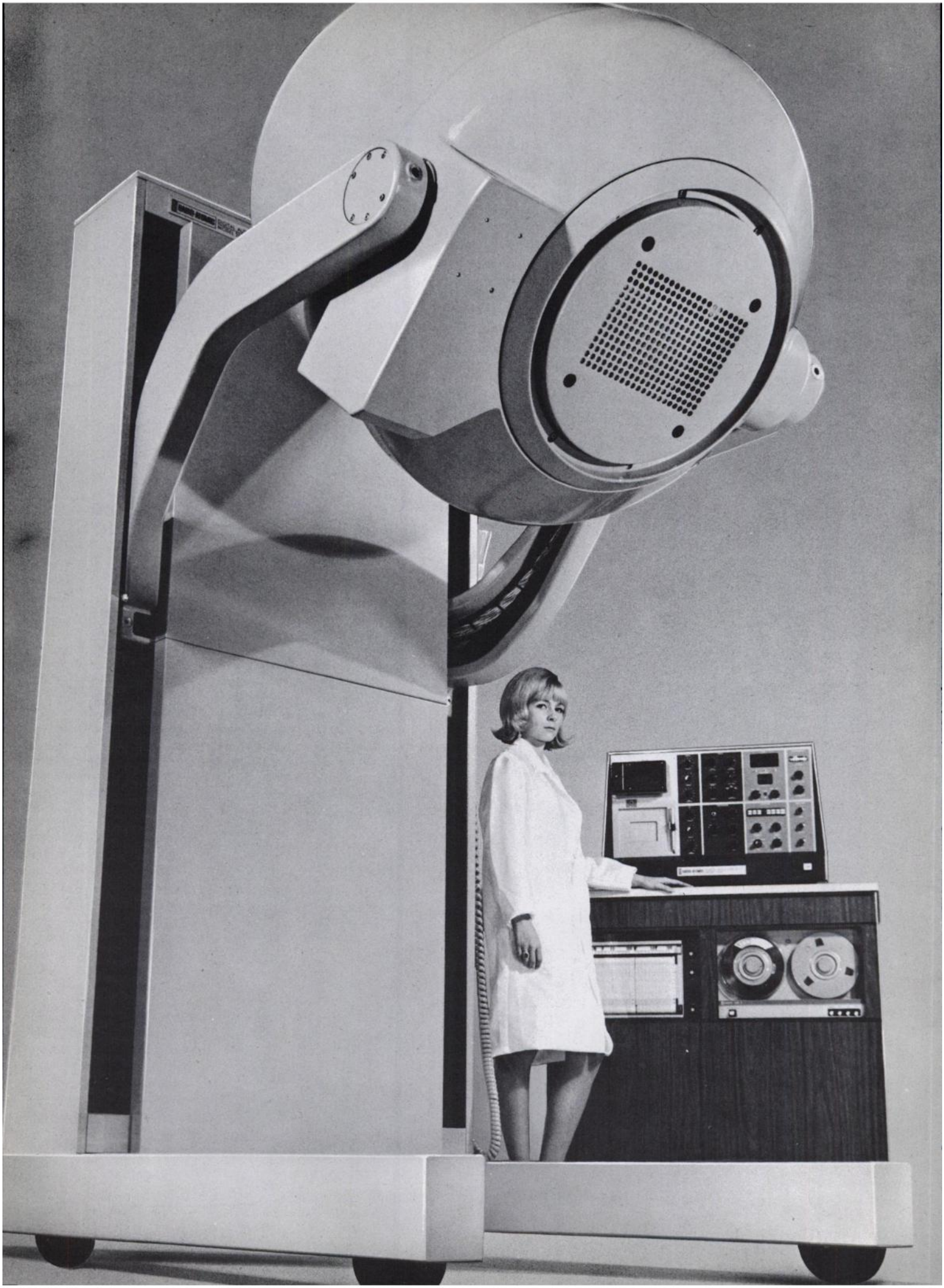

The Baird-Atomic Autofluoroscope® can do things that no other scintillation camera can.

Fact: The Baird-Atomic Scintillation Camera is the only Camera that can provide quantitation of patient data with real numbers as read directly from the front panel. You can do cardiovascular dynamics and cerebral blood flow dynamics both visually and quantitatively. And you can do lung, pancreas, thyroid, placenta, and other static analyses. The Autofluoroscope is the only system that can provide permanent patient record storage with instant recall of all the originai data in unaltered form.

Up to three areas of quantitation can be outlined by a light pen and presented to the multiple pen recorder for a graphic display of total organ activity versus time. It is the only complete instrument having all the high demand computer functions built into the system. Let us prove to you that the Baird-Atomic Scintillation Camera will do everything we say it will. 33 University Road, Cambridge, Mass. 02138, Telephone 617 864-7420 • Baird-Atomic Europe, The Hague, The Netherlands. Baird-Atomic Ltd., Hornchurch, England.

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Follow these simple directions for magnetic-tape storage, manipulation, and analysis of data from our Pho/Gamma® III Scintillation Camera:

1.
To the Pho/Gamma III...

2.
Add our multidimensional analyzer...

3.
Connect to our magnetic tape transport, and...

4.
Make tracks.

Now, Nuclear-Chicago makes it possible to realize even more of the clinical potential of Pho/Gamma III.

Because, information on radioisotope distribution in body organs, as visualized by Pho/Gamma III, can now be recorded —in digital form—on magnetic tape.

That's the function of our Magnetic Tape System. It consists of a multidimensional analyzer and the magnetic tape transport itself.

When connected to the Pho/Gamma III, this system permits you to record clinical data for later evaluation. And to manipulate this data at any time—to play it back, to change its mode of display, to re-record it on alternate readout devices (such as a digital printer or self-developing camera for making the familiar 15-second scintiphoto).

And, if you have access to an off-line computer, our Magnetic Tape System can be even more valuable. The data from Pho/Gamma III can be recorded in computer-compatible form and then fed into the computer (properly programmed, of course). You can thereby generate essentially automatic analysis, which can bring you entirely new insights into the organs under investigation.

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Which is why, in addition to the Magnetic Tape System, we also are introducing a fast digital printer, an automatic 35-mm time-lapse camera, and a dual-channel ratemeter/dual-pen recorder as accessories for the Pho/Gamma III.

Your Nuclear-Chicago sales engineer can tell you all about Pho/Gamma III and its expanded range of accessories, including the Magnetic Tape System. Please call him. Or write directly to us.

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