Gallium-67 Scintigraphy Findings in a Patient with Early Takayasu’s Arteritis

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A 32-year-old woman was admitted to our hospital with fever and shoulder pain. Gallium-67 scintigraphy revealed uptake in the anterior chest region corresponding to the descending thoracic aorta (Picture 1). Although the findings of enhanced magnetic resonance imaging (MRI) and MRI angiography appeared normal, the scintigraphy results indicated a diagnosis of early Takayasu’s arteritis (TA). Following treatment with prednisolone, the uptake in the anterior chest region was no longer detected (Picture 2). There are no specific serological tests for TA (1). Recently, it has been reported that fluorodeoxyglucose positron emission tomography/CT (FDG-PET/CT) is useful for making an early diagnosis of TA (2). However, it is difficult to select this imaging method as a first choice for the diagnosis of TA, because this modality is not covered for this purpose by medical insurance in Japan. Nevertheless, the present case suggests that gallium-67 scintigraphy is useful for making an early diagnosis of TA.

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References