

## Evaluation of Absorbed Dose in Renal Function Studies Due al I<sup>123</sup>/I<sup>131</sup>(hippuran) e In<sup>111</sup>(DTPA)

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**ABSTRACT:** The estimated absorbed dose to the kidneys for renal function studies of adult patients, can be performed through the analysis of the biokinetics of radiopharmaceuticals used, containing the I-123 / I-132 (Hippuran) or In-111 (DPTA). The study is to determine whether the dosimetric contributions biokinetics organs (kidneys, whole body and your bladder) of I-123 / I-131 (Hippuran) and In-111 (DPTA), are significant in the calculation of the absorbed dose for renal function studies. To determine the dosimetric contribution of the bladder and the entire body in the kidneys of adult patients, were used MIRD formalism Cristy and Eckerman representation. The results show that the total absorbed dose due to I<sup>123</sup>, I<sup>131</sup> and In<sup>111</sup> are given by 0.0071 mGy / MBq, 0.032 mGy / MBq and 0.0168 mGy / MBq, respectively. While corresponding dosimetric contributions because their bodiesbiokinetics are given by 11.90%, 4.97% and 28.32%. In all cases, the dosimetric contribution of organs that are part of the biokinetics of radiopharmaceuticals (except kidneys) are very significant to be ignored, and are mainly due to the photons emitted by the entire body.

**Keywords:** Cristy-Eckermanphantom, DPTA, Hippuran, MIRDdosimetry, renal function

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### I. INTRODUCTION

The estimated absorbed dose to the kidneys, for renal function studies of adult patients, can be performed through the analysis of the biokinetics of radiopharmaceuticals used, containing the I<sup>123</sup> / I<sup>131</sup> (Hippuran) or In<sup>111</sup> (DPTA).

### II. MATERIAL AND METHODS

To estimate the dose due to the dosimetric contribution of the bladder and the entire body in the kidneys of adult patients, were used MIRD formalism Cristy and Eckerman representation for these bodies. Medical Internal Radiation Dosimetry considered equations [1]:

$$\frac{D_{fotones}(riñones)}{A_0} = \sum_{i=1}^3 \left[ \sum_k \Delta_k \Phi_k(riñones \leftarrow i) \right] \tau_i \quad rad / \mu Ci$$

$$\frac{D_{particle}(riñones \leftarrow riñones)}{A_0} = [\bar{E}_{particle} \frac{\tau_{riñones}}{m_{riñones}} + \bar{E}_{particle} \frac{\tau_{TB}}{m_{TB}}] \times 2,13 \quad rad / \mu Ci$$

$\tau_{TB}$ =Total residence time of the body

$m_{TB}$ = Total body mass

The absorbed fractions,  $\Phi_k$  (thyroid  $\leftarrow$  i) g<sup>-1</sup>, of "i" analyzed organs (kidneys, whole body and your bladder), for photon energies "k" off I<sup>123</sup> / I<sup>131</sup> and In<sup>111</sup> were obtained from M. Cristy and K. Eckerman[2].

Residence times of radiopharmaceuticals mentioned in each organ biokinetics, given in Table 1, were obtained from the website [3].

**Table 1:** Residence times (hours) and biokinetics of I-123/I-131 (hippuran) and In-111(DTPA)[3]

Organs RFM	Kidneys	Bladder content.	Rest of body
I-123(hippuran)	0.07	2.62	0.58
I-131(hippuran)	0.07	2.89	0.6
In-111(DPTA)	0.093	2.07	3.0

$\Delta_k = 2,13 n_k E_k \left( \frac{rad - gm}{\mu Ci - hr} \right)$ , represents average energy of the "k" photons emitted in the decay of I-123, I-131 and In-111, given in Table 2, were obtained from web page [4]

**Table 2:** Data for nuclear emitted photons (MeV) of I-123/I-131 and In-111 most significant[4]

RFM	Photons	$E_k$ (Me V)	$n_k/des$	$\Delta_k = 2,13 n_k E_k$ $\left( \frac{rad - gm}{\mu Ci - hr} \right)$
$I^{123}$	Gamma	0,159	0,833	0,2821
		0,529	0,0139	0,0157
	Characteristic Radiation	0,0272	0,246	0,01415
		0,0275	0,460	0,0269
		0,0310	0,160	0,01056
	Gamma	0,080	0,026	0,044
		0,284	0,06	0,037
		0,364	0,817	0,6334
		0,637	0,0717	0,097
		0,723	0,0177	0,027
$I^{131}$	Characteristic Radiation	0,0295	0,0138	0,00088
		0,0298	0,0256	0,0016
		0,0336	0,009	0,0006
	Gamma	0,1713	0,902	0,33
		0,2454	0,94	0,49
		0,0230	0,235	0,012
$In^{111}$	Characteristic Radiation	0,0232	0,443	0,022
		0,0261	0,145	0,0081

$E_{particle}$ (MeV/des.), represents the average energy of particles emitted by the I-123 , I-131 and In-111 , i.e., represents the electrons appearing in the decay processes for capturing and Auger electrons are given in Table 3 and were obtained from web page [4]

**Table 3:** Data for nuclear emitted particles (MeV) of I-123/I-131 and In-111 most significanteRadionuclide [4]

RFM	Particles	$E_k$ (MeV)	$n_k/des$	$n_k E_k$ (MeV / des)	$\bar{E}_{particle} = \sum n_k E_k$ (MeV / des)
$I^{123}$	ElectronsConversion	0,1272	0,136	0,0173	0,0205
		0,1540	0,0177	0,0027	
		0,1580	0,0035	0,00055	
	ElectronsAuger	0,0032	0,94	0,0030	0,0058
		0,0227	0,1235	0,0028	
$I^{131}$	Beta	0,0694	0,021	0,00145	0,1818
		0,0966	0,073	0,007	
		0,1916	0,899	0,1722	
		0,283	0,0048	0,00135	
	ElectronsConversion	0,0456	0,0354	0,0016	0,0076
		0,359	0,0025	0,00089	
		0,3299	0,0155	0,0051	
		0,2497	0,003	0,00075	
	ElectronsAuger	0,0034	0,051	0,00017	0,000317
		0,0246	0,006	0,000147	
$In^{111}$	ElectronsConversion	0,1446	0,078	0,0113	0,02559
		0,1673	0,010	0,00167	
		0,2187	0,049	0,01071	
		0,2414	0,0079	0,00191	
	ElectronsAuger	0,0027	0,980	0,00265	0,00566
		0,0193	0,156	0,00301	

Mass values of the kidneys, bladder content, and total body , are given in Table 4, and were obtained from M. Cristy and K. Eckerman [5].

**Table 4:** Mass values (g) for adult kidney ,bladder ,andtotal body representing-Cristy -Eckerman representation [5]

Organs Adult	Mass (grams)
Riñones	299
Cuerpo total (TB)	73700
Contenido vejiga urinaria	211

Using the methodology MIRD and representation of Cristy-Eckerman in kidney of adults, bladder ,and whole-body , the study is to demonstrate whether the dosimetric contributions of the organs that are part of the biokinetics of I-123 /I-131 (hippuran) and In-111 (DTPA) , are significant in the estimated absorbed dose for renal function studies.

### III. RESULTS AND DISCUSSIONS

**Table 5:** Absorbed dose in adult kidneys, due to  $I^{123}$ ,  $I^{131}$  and  $In^{111}$ , in the representation Cristy – Eckerman and MIRD formalism (mGy / MBq)  $\times 10^{-3}$

RFM	emissions	$D(r_{in} \leftarrow r_{in})/A_o$	$D(r_{in} \leftarrow i)/A_o^*$		Sub-total	TOTAL
			TB	bladder		
$I^{123}$ (Hippuran)	Photons : $\gamma$ X	1,32 1,33	0,27 0,36	0,22 0,0	3,50	7,1
	$e^-$ conversion's $e^-$ Auger	2,80 0,81	-	-	3,61	
$I^{131}$ (Hippuran)	Photons : $\gamma$ X	3,90 0,05	0,78 0,004	0,81 0,0	5,54	32,0
	Beta emitter $e^-$ conversion's $e^-$ Auger	25,36 1,06 0,04	-	-	26,4 6	
$In^{111}$ (DPTA)	Photons : $\gamma$ X	4,87 1,58	3,84 0,38	0,54 0,00	11,21	16,8
	$e^-$ conversion's $e^-$ Auger	4,47 1,13	-	-	5,6	

(\*) i = all source organs except the thyroid

The results of kidneys **absorbed dose** in adults, mGy / MBq , they are given in Table 5 and show that:

- (1)  $I^{123}$  (hippuran): 0.0071 mGy / MBq: 88.16% correspond to the *self-dose* (37.3% gamma / photon radiation characteristic, and 50.84% to Auger electrons and internal conversion); and the remaining 11.96%, the organs of the biokinetics.
- (2)  $I^{131}$  (hippuran): 0.032 mGy / MBq: 95.03% of the dose corresponding to *self-dose* (12.34% to gamma / photon radiation characteristic, and 82.69% due to beta / Auger electron emission and internal conversion); and the remaining 4.97%, the organs of the biokinetics.
- (3)  $In^{111}$  (DTPA): 0.0168 mGy / MBq: 71.68% correspond to the *self-dose* (38.37% to gamma / photon radiation characteristic, and 33.31% to Auger electrons and internal conversion); and the remaining 28.32%, the organs of the biokinetics.

In all cases, the dosimetric contribution of organs that are part of the biokinetics of radiopharmaceuticals (except kidneys) are very significant to be ignored and must be mainly the photons emitted by the entire body.

Depending on the type of radiopharmaceutical used and biokinetics, shall the significance of his contributions to the absorbed dose estimated by the kidneys [6, 7]

#### IV. CONCLUSIONS

Using the MIRD formalism and representation Cristy-Eckerman in the kidneys of adults patients , demonstrated that during studies of renal function, the dosimetric contribution of organs that are part of the biokinetics of  $I^{123}/I^{131}$  (hippuran) and  $In^{111}$  (DTPA), are very significant in the estimated absorbed dose to the patient.

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