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Human biodistribution and radiation dosimetry of ^{82}Rb .

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Abstract

Prior estimates of **radiation**-absorbed doses from (^{82}Rb), a frequently used PET perfusion tracer, yielded discrepant results. We reevaluated (^{82}Rb) **dosimetry** using **human** in vivo biokinetic measurements.

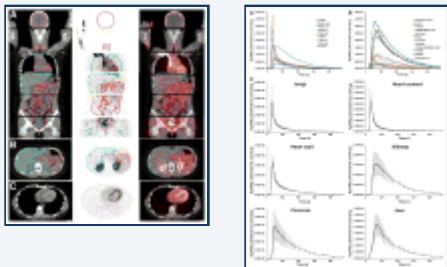
METHODS: Ten healthy volunteers underwent dynamic PET/CT (6 contiguous table positions, each with separate (^{82}Rb) infusion). Source organ volumes of interest were delineated on the CT images and transferred to the PET images to obtain time-integrated activity coefficients. **Radiation** doses were estimated using OLINDA/EXM 1.0.

RESULTS: The highest mean absorbed organ doses ($\mu\text{Gy}/\text{MBq}$) were observed for the kidneys (5.81), heart wall (3.86), and lungs (2.96). Mean effective doses were 1.11 ± 0.22 and 1.26 ± 0.20 $\mu\text{Sv}/\text{MBq}$ using the tissue-weighting factors of the International Commission on Radiological Protection (ICRP), publications 60 and 103, respectively.

CONCLUSION: Our current (^{82}Rb) **dosimetry** suggests reasonably low **radiation** exposure. On the basis of this study, a clinical (^{82}Rb) injection of $2 \times 1,480$ MBq (80 mCi) would result in a mean effective dose of 3.7 mSv using the weighting factors of the ICRP 103-only slightly above the average annual natural background exposure in the United States (3.1 mSv).

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