**NAME: OMOSOR CHINYERE**

**MATRIC NUMBER: 17/MHS06/057**

**COURSE CODE: MLS314**

**COURSE: MEDIAL PHYSICS**

**QUESTION1: WHAT ARE RADIOACTIVE TRACERS?**

A radioactive tracer, radiotracer, or radioactive label, is a chemical compound in which one or more atoms have been replaced by a radionuclide so by virtue of its radioactive decay it can be used to explore the mechanism of chemical reactions by tracing the path that the radioisotope follows from reactants to products. Radio labeling or radio tracing is thus the radioactive form of isotopic labeling. Some uses of radioactive tracers are:

* Nuclear medicine uses radiation to provide diagnostic information about the functioning of a person's specific organs, or to treat them. Diagnostic procedures using radioisotopes are now routine.
* Radiotherapy can be used to treat some medical conditions, especially cancer, using radiation to weaken or destroy particular targeted cells.
* Sterilization of medical equipment is also an important use of radioisotopes.
* Nuclear medicine uses radiation to provide information about the functioning of a person's specific organs, or to treat disease. In most cases, the information is used by physicians to make a quick diagnosis of the patient's illness. The thyroid, bones, heart, liver, and many other organs can be easily imaged, and disorders in their function revealed. In some cases radiation can be used to treat diseased organs, or tumors. Five Nobel Laureates have been closely involved with the use of radioactive tracers in medicine.

The most common radioisotope used in diagnosis is technetium-99 (Tc-99), with some 40 million procedures per year, accounting for about 80% of all nuclear medicine procedures and 85% of diagnostic scans in nuclear medicine worldwide.

**QUESTION2: DISCUSS EXPLICITLY ONE APPLICATION OF TRACERS IN MEDICINE**

 There is widespread awareness of the use of radiation and radioisotopes in medicine, particularly for diagnosis (identification) and therapy (treatment) of various medical conditions. Radiology, as dual PET/CT (positron emission tomography with computerized tomography) procedures have become established, increasing the role of accelerators in radioisotope production. However, the main radioisotopes such as Tc-99m cannot effectively be produced without reactors.

Nuclear medicine diagnosis

Radioisotopes are an essential part of medical diagnostic procedures. In combination with imaging devices which register the gamma rays emitted from within, they can study the dynamic processes taking place in various parts of the body.

In using radiopharmaceuticals for diagnosis, a radioactive dose is given to the patient and the activity in the organ can then be studied either as a two dimensional picture or, using tomography, as a three dimensional picture. Diagnostic techniques in nuclear medicine use radioactive tracers which emit gamma rays from within the body. These tracers are generally short-lived isotopes linked to chemical compounds which permit specific physiological processes to be scrutinised. They can be given by injection, inhalation, or orally. The earliest technique developed uses single photons detected by a gamma camera which can view organs from many different angles. The camera builds up an image from the points from which radiation is emitted; this image is enhanced by a computer and viewed on a monitor for indications of abnormal conditions. Single photon emission computerized tomography (SPECT) is the current major scanning technology to diagnose and monitor a wide range of medical conditions.

A more recent development is positron emission tomography (PET) which is a more precise and sophisticated technique using isotopes produced in a cyclotron. A positron-emitting radionuclide is introduced, usually by injection, and accumulates in the target tissue. As it decays it emits a positron, which promptly combines with a nearby electron resulting in the simultaneous emission of two identifiable gamma rays in opposite directions. These are detected by a PET camera and give very precise indications of their origin. PET's most important clinical role is in oncology, with fluorine-18 as the tracer, since it has proven to be the most accurate non-invasive method of detecting and evaluating most cancers. It is also well used in cardiac and brain imaging. New procedures combine PET with computed X-ray tomography (CT) scans to give co-registration of the two images (PET-CT), enabling 30% better diagnosis than with a traditional gamma camera alone. It is a very powerful and significant tool which provides unique information on a wide variety of diseases from dementia to cardiovascular disease and cancer. Positioning of the radiation source within (rather than external to) the body is the fundamental difference between nuclear medicine imaging and other imaging techniques such as X-rays. Gamma imaging by either method described provides a view of the position and concentration of the radioisotope within the body. Organ malfunction can be indicated if the isotope is either partially taken up in the organ (cold spot), or taken up in excess (hot spot). If a series of images is taken over a period of time, an unusual pattern or rate of isotope movement could indicate malfunction in the organ.

 A distinct advantage of nuclear imaging over X-ray techniques is that both bone and soft tissue can be imaged very successfully. This has led to its common use in developed countries where the probability of anyone having such a test is about one in two and rising.