# ΔSUV evaluation in DLBCL

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### Criteria for interim PET assessment Quantitative analysis in AOM00152

Retrospective analysis

92 pts with DLBCL, median f-u 4 y

- Baseline PET :
  - SUVmax in the most active lesion
    whichever CT size or location
- Interim PET :
  - if (+)  $\rightarrow$  in the most active lesion
  - if (–)  $\rightarrow$  in the area of PET\_0 tumor
- Calculation of % of SUVmax reduction
- Optimal cut-offs determined by ROC



### Visual vs. quantitative analysis 2 cycles, n=92



 $\rightarrow$  Reduction of 14/17 false positives  $\rightarrow$  Cut-off may vary with histology, treatment, PET center

Lin, Itti et al. J Nucl Med 2007;48:1626-32

### Visual vs. quantitative analysis 4 cycles, n=80



→ Reduction of false positives if we wait for 4 cycles → Juweid criteria acceptable, Créteil slightly better → Visual analysis reliable,  $\Delta$ SUV more objective

### Qualitative assessment at 4 cycles Independent prognostic factor

#### Overall Model Fit

Null model -2 Log Likelihood	154,74219
Full model -2 Log Likelihood	134,96769
Chi-square	19,7745
DF	5
Significance level	P = 0,0014

#### **Coefficients and Standard Errors**

	Covariate	b	SE	P	Exp(b)	95% CI of Exp(b)
1	PET4vis	1,9252	0,4775 🤇	0,0001	6,8563	2,7023 to 17,3960
	IPI	0,2145	0,1907	0,2606	1,2392	0,8545 to 1,7973
	ASCT	-1,1057	0,5192	0,0332	0,3310	0,1203 to 0,9110
	GC_NGC	0,0465	0,4602	0,9196	1,0476	0,4270 to 2,5701
	Ritux	-0,3421	0,4812	0,4771	0,7103	0,2779 to 1,8152

### $\rightarrow$ Independent from IPI, treatment regimen, gene profiles

# Quantitative assessment at 2 cycles

Independent prognostic factor



 $\rightarrow \Delta SUV$  reflects tumoral destruction kinetics

### Association of both ASUV-PET2 and visual-PET4

#### Overall Model Fit

Null model -2 Log Likelihood	154,74219
Full model -2 Log Likelihood	130,92093
Chi-square	23,8213
DF	5
Significance level	P = 0,0002

#### **Coefficients and Standard Errors**



# Limitations of $\Delta$ SUV

- Necessity of a baseline PET
- Tumors with baseline uptake <10.0</p>
- SUV variability/normalization to internal bkg
- No external validation

# Tumors with baseline uptake <10.0 influence of baseline SUV on ∆SUV



 $\rightarrow$  3 FP pts w/ baseline SUV<10.0,  $\Delta$ SUV<66%, no event

### SUV variability normalization to liver activity



$$\Delta SUV = 100 \times \frac{SUV_{T1}/SUV_{L1} - SUV_{T2}/SUV_{L2}}{SUV_{T1}/SUV_{L1}}$$

### SUV variability normalization to MBP activity



$$\Delta SUV = 100 \times \frac{SUV_{T1}/SUV_{M1} - SUV_{T2}/SUV_{M2}}{SUV_{T1}/SUV_{M1}}$$

# Conclusions

- Must follow strict procedure for injection, delay between injection and scanning, glucose level
- Same procedure to identify SUVmax, with help of the MIP, graded color scale
- No need for an internal reference
- External validation : ongoing (PETAL, IVS)