



Fourth international workshop on PET in lymphoma

Under the auspices of ELI, LYSA, FIL, SFMN, EANM, EHA, EORTC



Menton October 5th 2012

Interim PET in lymphoma: 2012 consensus

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Chair: C Haioun, A Engert

Alberto Biggi Nuclear Medicine Department Cuneo - Italy Are we ready to introduce the routine clinical use of interim PET and Deauville 5-PS rules for HL?

Review process in the IVS

- Baseline and interim PET were available for the review process
- Interim PET were reviewed independently by 6 reviewers from 5 different country
- All scans were reviewed using the same software (Positoscope ®, Keosys)
- Reviewers were completely blinded to patient history, follow up and clinical data.

according to the 5-PS

and

using a set of detailed additional instructions

Deauville score - 5PS

Score 1: no uptake

Score 2: uptake ≤ mediastinum

Score 3: uptake > mediastinum but ≤ liver

Score 4: moderately 1 uptake > liver

Score 5: 11 uptake > liver and/or new sites of disease

5-PS score was applied either to nodal and extranodal disease.

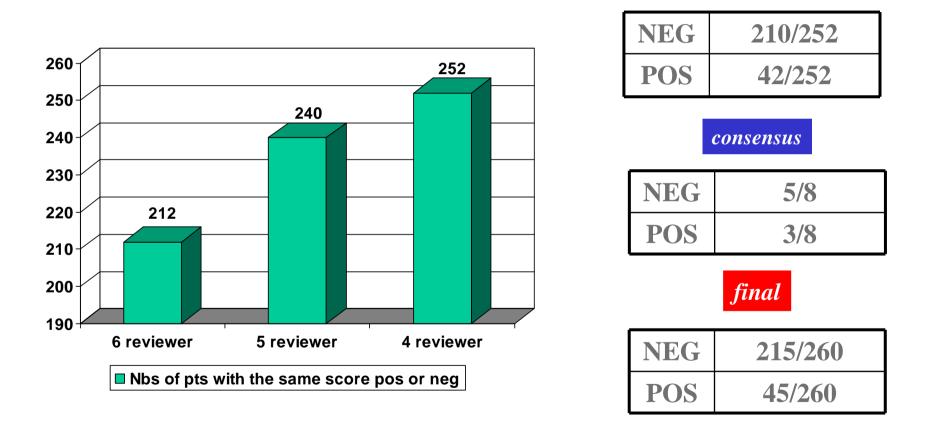
Reviewers agreed that

- •score 4-5 are positive and score 1-2-3 are negative
- the score for each patient was defined by an agreement of at least 4/6 reviewers

Additional instructions

- Positive lesion: a FDG uptake in a lesion present at baseline
- New lesion at a different site in patient otherwise in CR: probably NOT lymphoma
- New lesion in patient not in CR: new site of lymphoma.
- Diffuse uptake in bone marrow and/or spleen: no disease (Chemo effect)
- Focal cold lesion in bone marrow in a site previously involved, with/out surrounding bone marrow increased uptake: successful treatment with/out "mirror effect".
- Symmetrical tonsillar uptake: usually not disease.

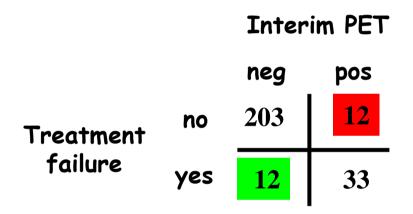
At the end of the review process the blind agreement among reviewers was reached in 252/260 patients (97%).



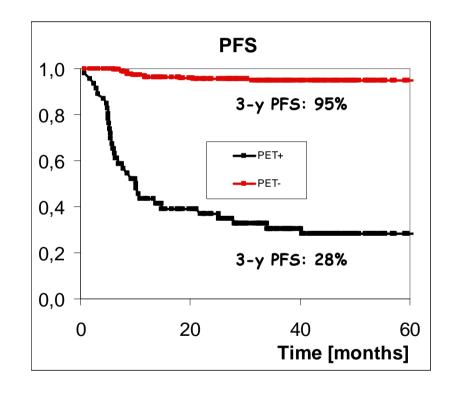
After the joint review session in London, the agreement among reviewers was 100%

Accuracy and PFS

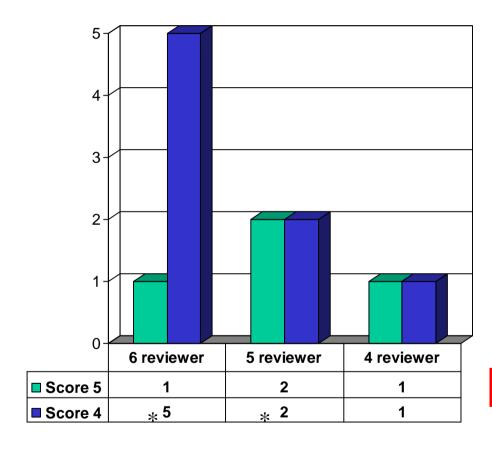
Prediction of outcome







False positive results



12 pts

- 5 mediastinum
- 2 laterocerv.
- 1 right pulmonary hilum
- 1 axilla
- 1 lung
- 1 bone
- · 1 different site

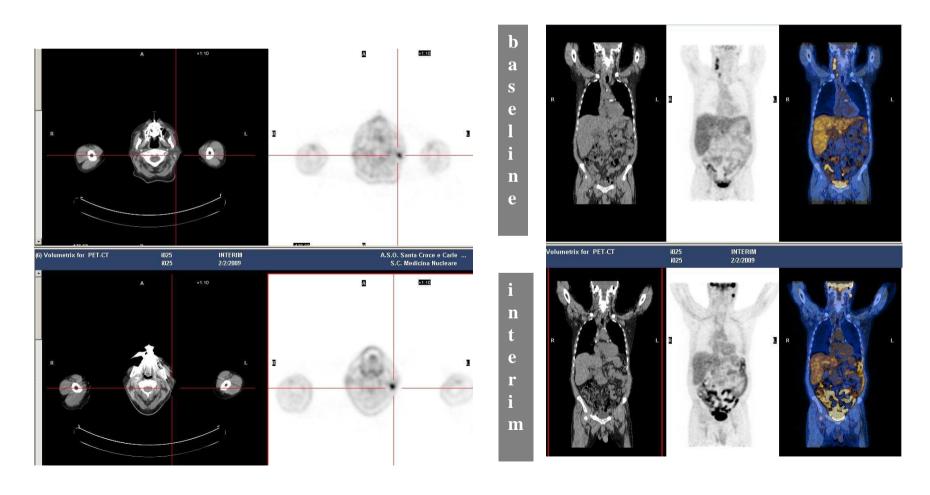
4/12 FP pts in bulky lesion

All 12 pateints were alive after a mean follow up of 51 months

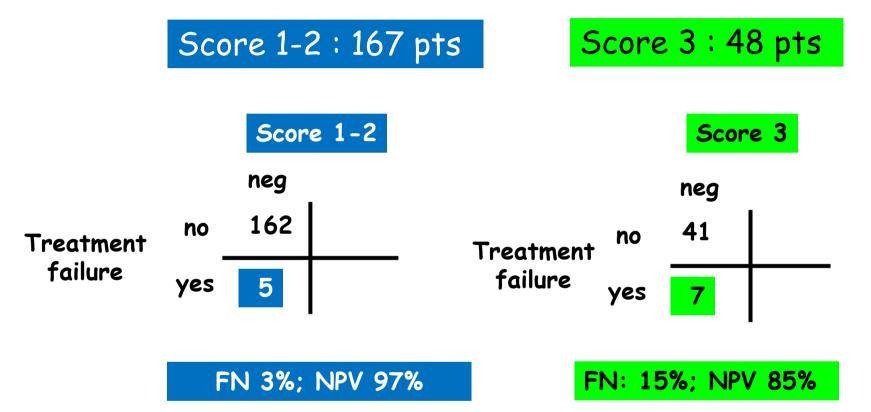
^{*}One pts after consensus Meeting in London

False positive results

- Reviewers were completely blinded to the clinical data
- In one case only clinical information were required to confirm left parotid adenoma

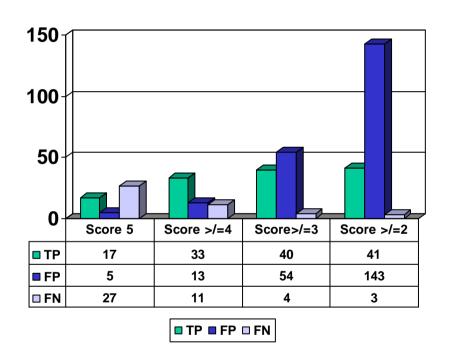


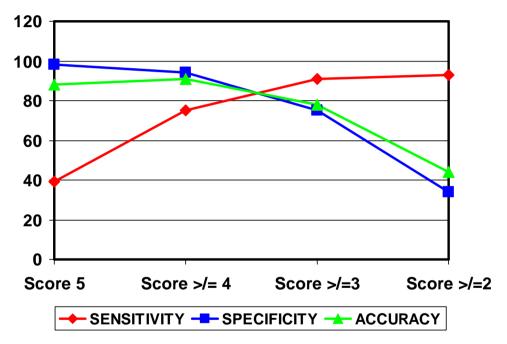
False negative results

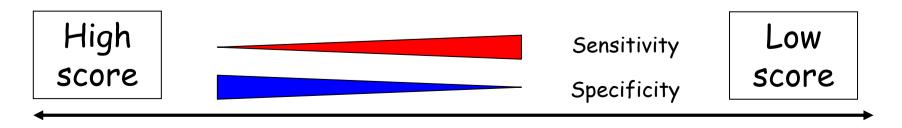


All 12 patients relapsed after a mean follow up of 40 months.

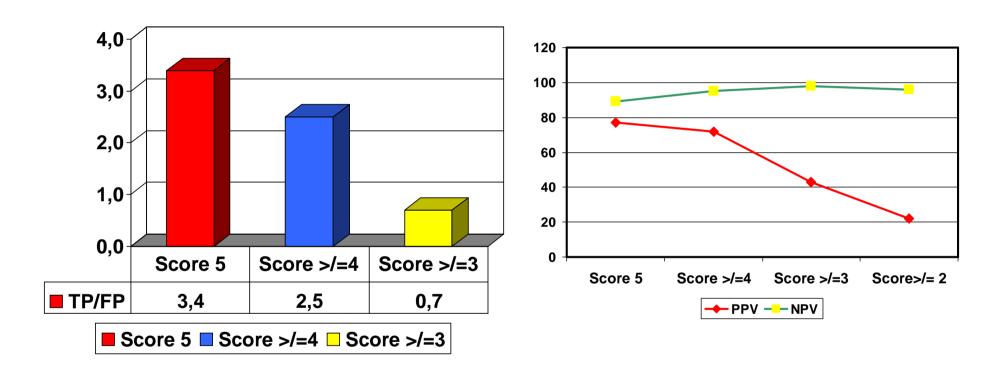
Overall accuracy & score







Score >/= 4 is the optimal treshold for treatment escalation



	Score 5	Score	Score	Score 2
Krippendorf α	.0.706	0.758	0.536	0.274

Agreement between reviewers

Binary concordance:

-ve vs. +ve

Cohen's K	
>0.81	very good

Cohen's Kappa:

сопен з карра.	Mean						
·	0.75	1	0.73	0.77	0.78	0.75	0.73
r	0.73	0.73	1	0.75	0.75	0.70	0.71
E	0.78	0.77	0.75	1	0.83	0.77	0.77
ŀ	0.81	0.78	0.75	0.83	1	0.84	0.84
E	0.77	0.75	0.70	0.77	0.84	1	0.78
(0.77	0.73	0.71	0.77	0.84	0.78	1

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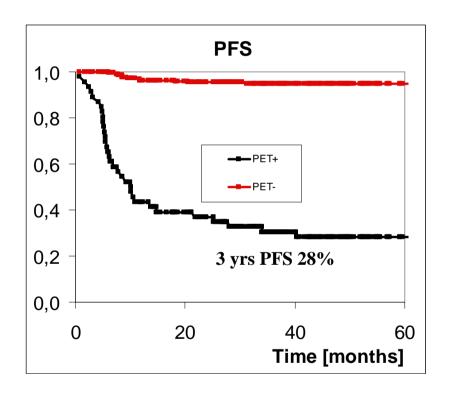
Alpha	D-obs	D-exp	N	R	Reviewers
0.758	118.400	489.908	261	6	Hutchings, Meignan, Barrington, Kostakoglu, Biggi, Gregianin

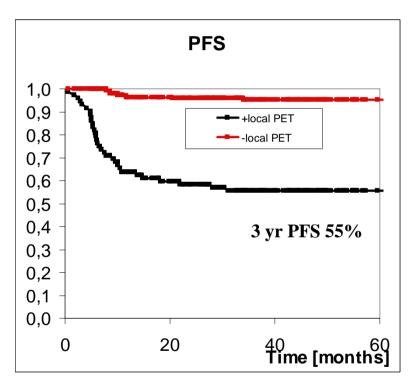
Experience from FIL HD0607 (prospective studies)

	Mean						
	0.85	1	0.84	0.86	0.85	0.94	0.76
	0.86	0.84	1	0.86	0.96	0.86	0.78
	0.87	0.86	0.86	1	0.92	0.92	0.78
	0.90	0.85	0.96	0.92	1	0.88	0.88
	0.88	0.94	0.86	0.92	0.88	1	0.82
c	0.80	0.76	0.78	0.78	0.88	0.82	1

Alfa di Krippendorf = 0.84

Review panel vs. local interpretation





Review panel

Local centers

Are we ready to introduce the routine clinical use of interim PET and Deauville 5-PS rules for HL?

YES we are ready!!