

Alberto Biggi

Nucl.Med.Department  
S.Croce e Carle Hospital  
Cuneo –Italy

# Clinical case

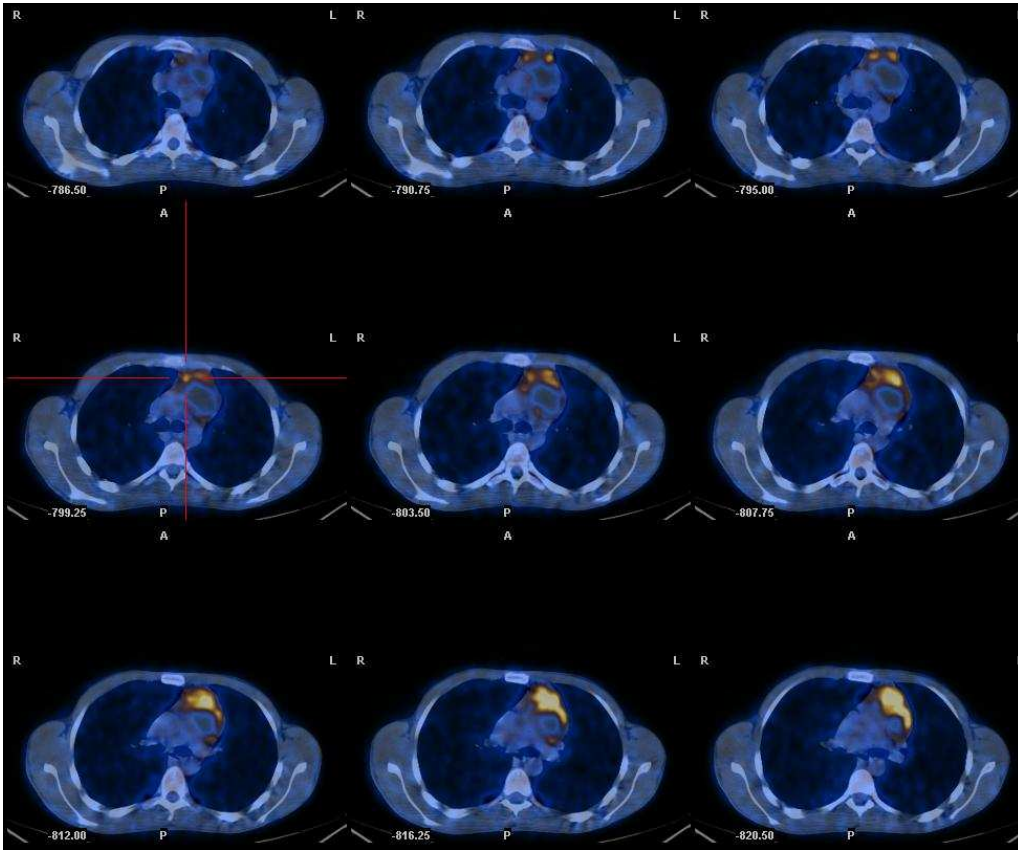
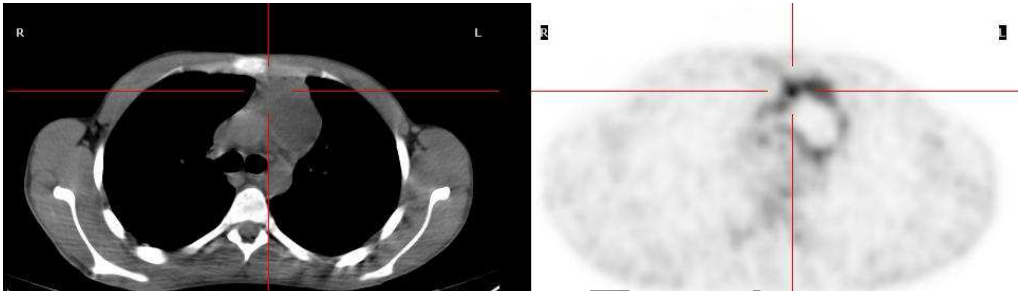
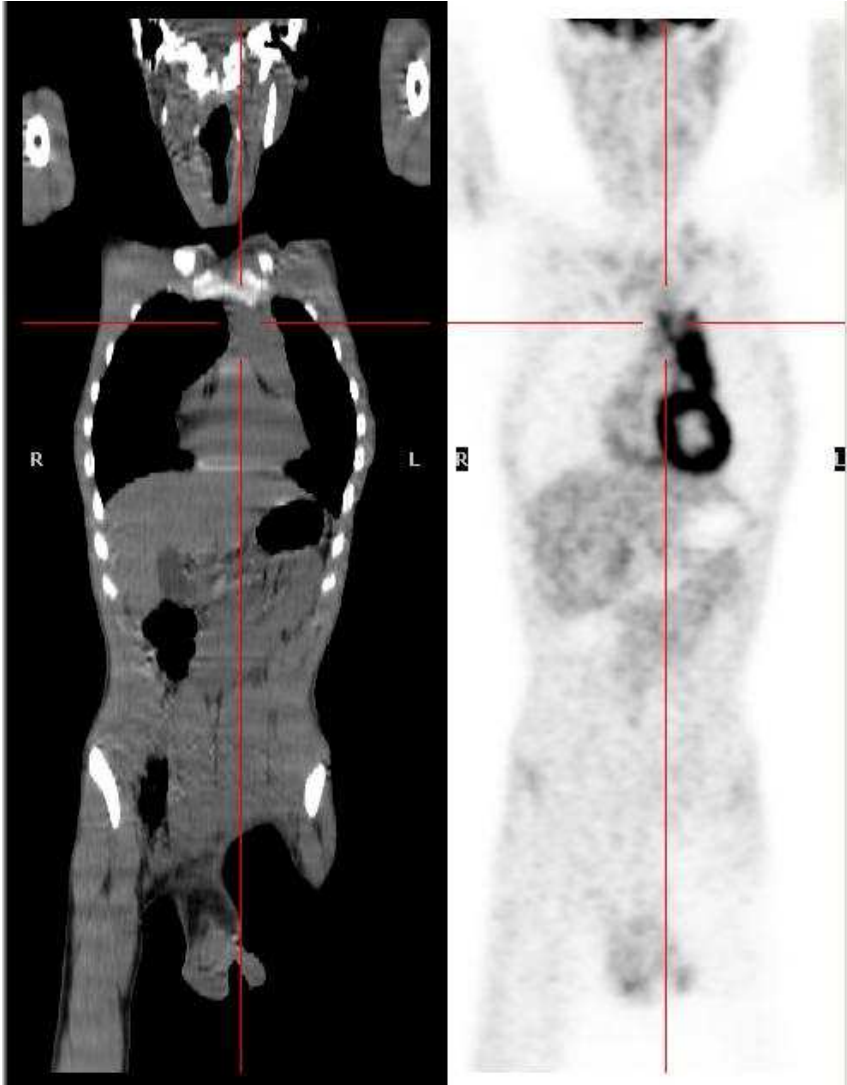
- ♂; 20 aa
- Presence of node in the left supraclavicular area at the end of april 2007
- In may 2007 the pt performed
  - **eco: left supraclavicular ipoecogenic node**
  - **CT: bulky lesion in the anterior left mediastinum (6x12 cm) extended to the retroclavicular region**
  - **Biopsy on the supraclavicular node: Hodgkin lymphoma, scleronodular**
  - **No clinical symptoms; VES 21; LDH 664**
- **PET/CT (29.5.07) : lesion in the left anterior mediastinum extended to the retroclavicular region**

**STAGE: IIA**

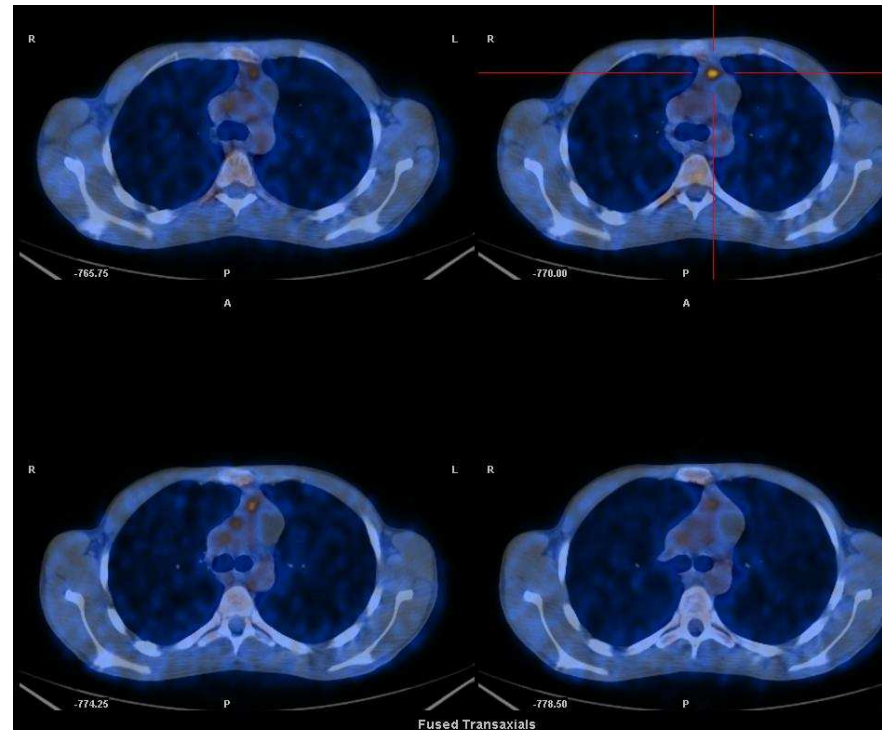
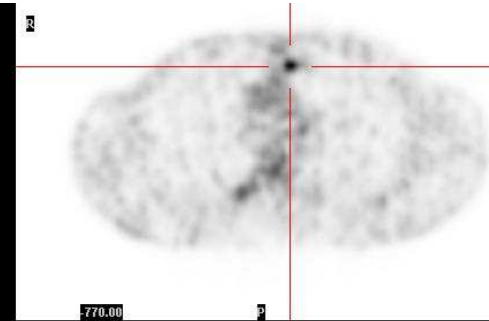
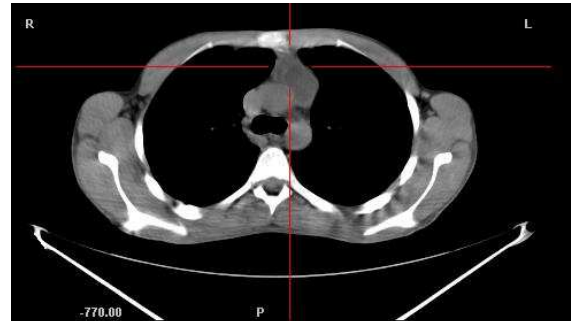
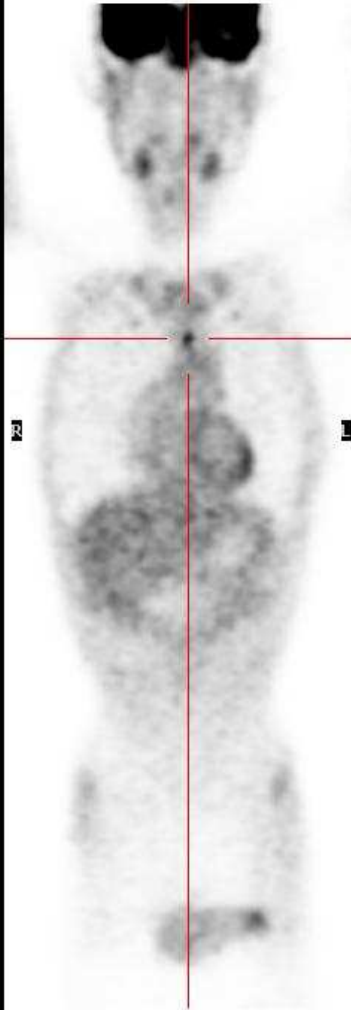
**Planned therapy**

**ABVD x 4 cycle + Rxtherapy of the bulky disease**

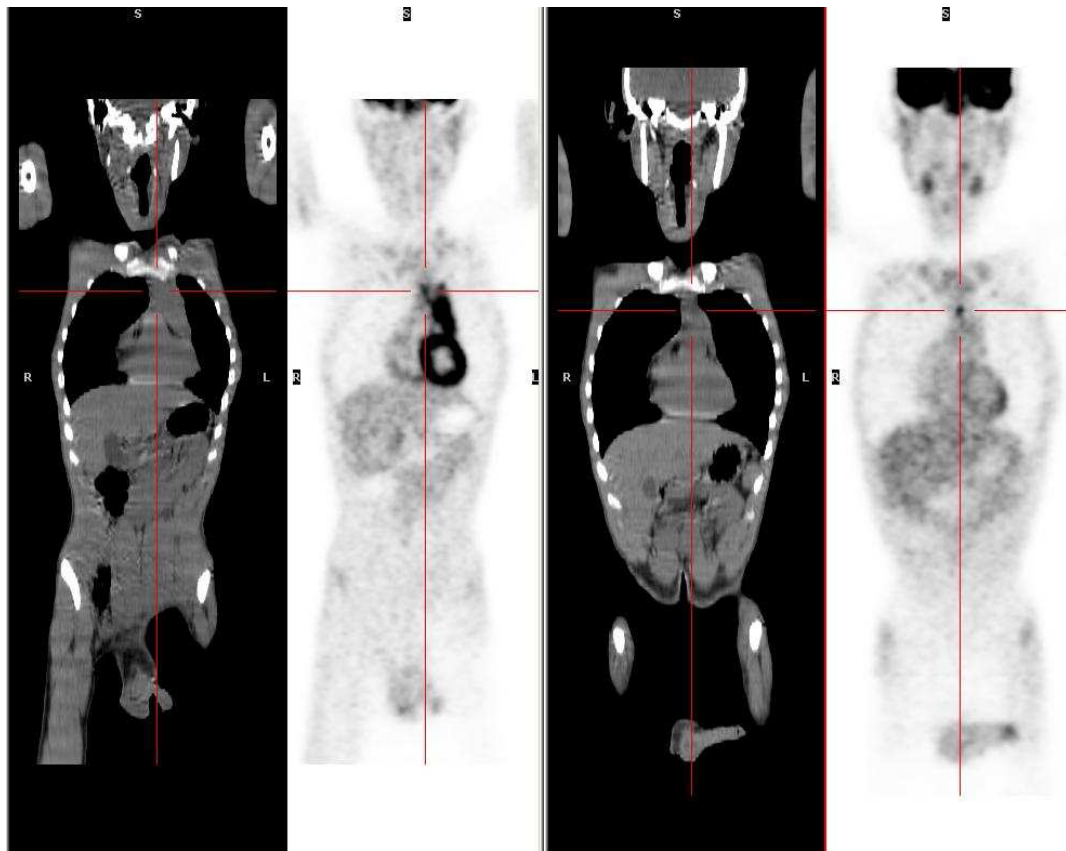
# Baseline PET/CT



**Interim PET/CT after 2 ABVD → residual node in the anterior mediastinum**



## Baseline



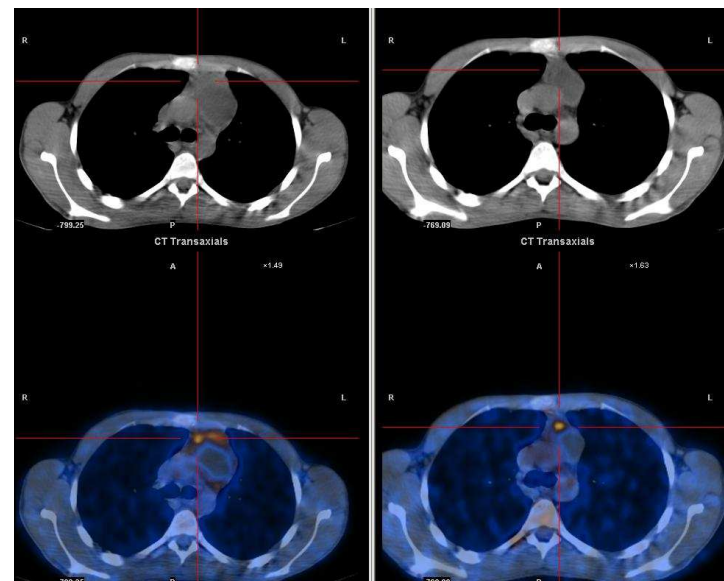
**Score 4  
SUVMax**  
• lesion 4.9  
• Liver 3.1

## Interim

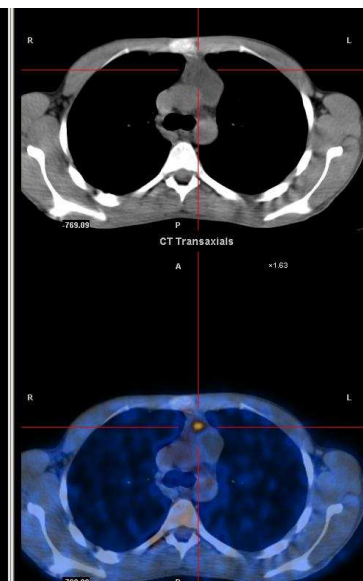


**Score 4  
SUVMax**  
• lesion 5.5  
• Liver 3.6

## Baseline

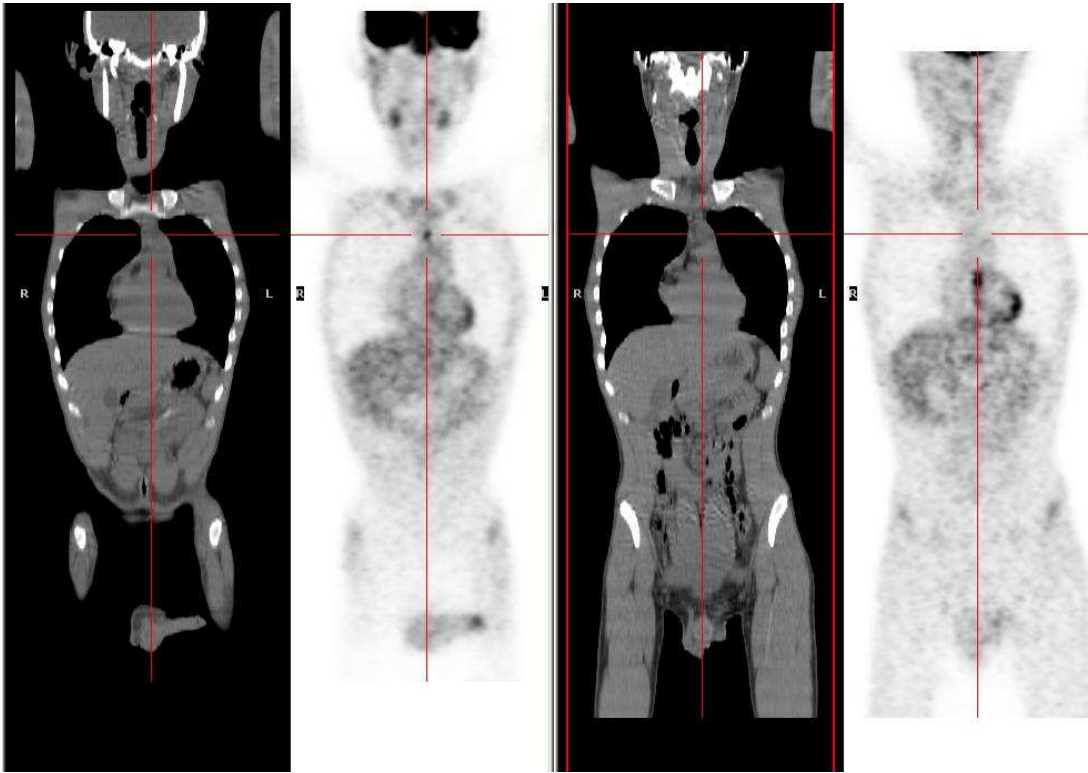


## Interim



**Interim**

**End of therapy → CR**

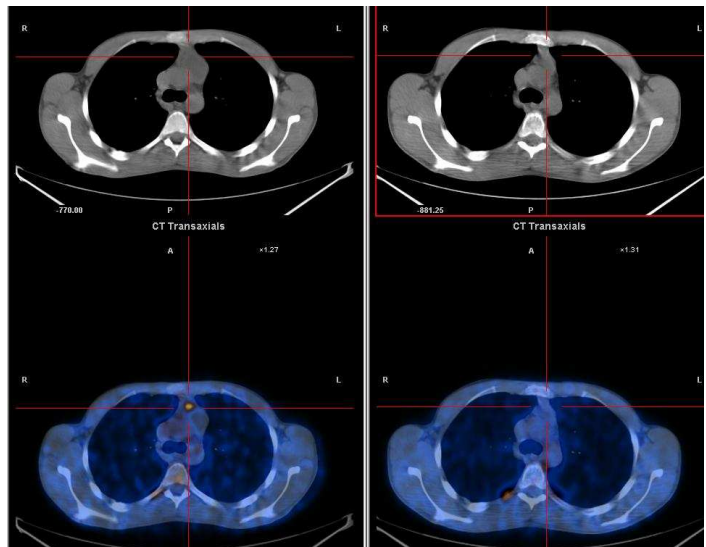


**Score 4  
SUVMax**  
• lesion 5.5  
• Liver 3.6

**Score 2  
SUVMax**  
• lesion 2.8  
• Liver 4.2

**Interim**

**End of therapy**



**End of therapy PET/CT  
12.3.2008**

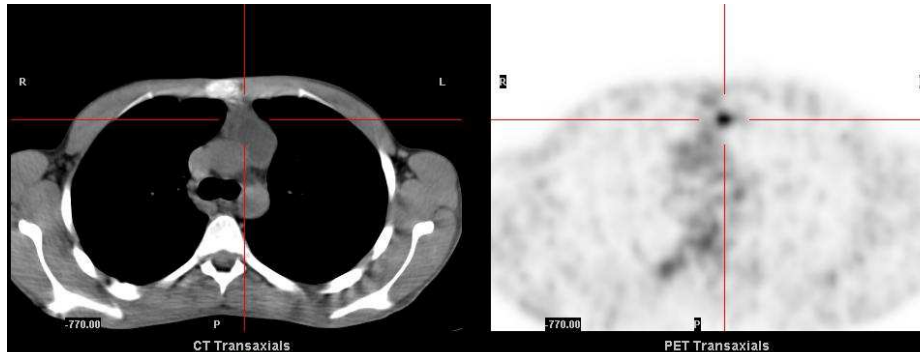
# Follow up

- PET/CT 28.10.08 neg
- PET/CT 23.9.2009 neg
- 13.4.2011 CR

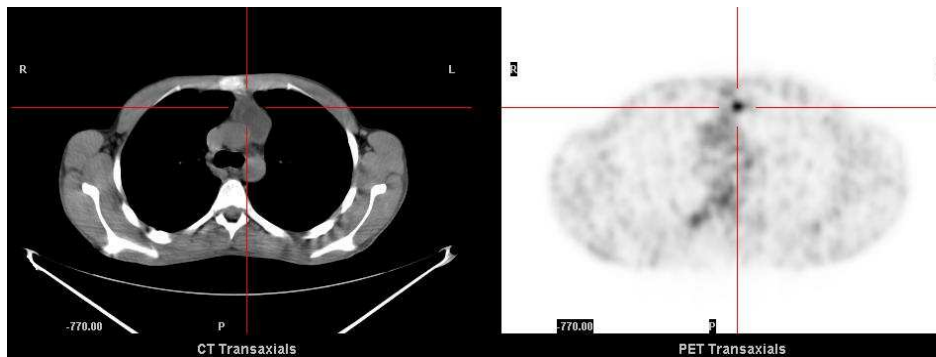
Considerations: according to both qualitative (score) and semiquantitative (SUV) analysis the patient had residual disease in the interim PET but the Patient is still in CR after 4 years.

**How can we improve the specificity of both qualitative and semiquantitative interpretation?**

# Dual point acquisition



60' : SUVMax  $\rightarrow$  4.8



120' : SUVMax  $\rightarrow$  4.1

$\Delta$  SUV  $\rightarrow$  - 15%