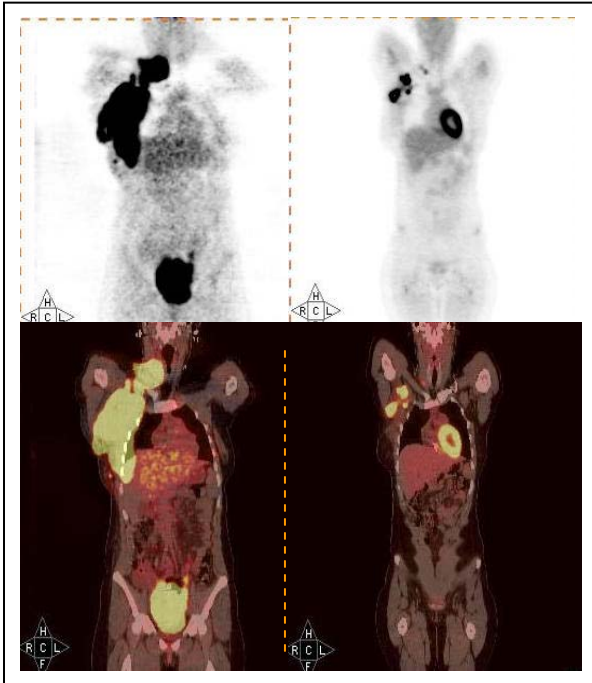


Case of the Month Lymphoma

Pre Tx

Post Tx



PET

PET/CT

Featured Indication:

LYMPHOMA

The utilization of PET and PET/CT for diagnosis, initial staging, restaging, and recurrence of lymphomas is well documented. PET has often been shown to help in identifying lesions previously undetected by CT¹. Debelke, et al, showed that 16% of patients had their lymphoma stage changed due solely to the results of their PET scan. In the same study, 13% of those patients had a major therapeutic change as a result of PET¹.

In this issue we also show the potential for PET/CT to help restage patients following chemotherapy. In a recently published paper from Kasamon, et al, the authors showed that FDG-PET is a stronger prognostic indicator of overall and progression-free survival during chemotherapy than conventional imaging (CT). Positive PET scans during treatment were associated with a 78%-100% event rate within 2-3 years; whereas negative PET scans were associated with an 8%-33% event rate. These findings suggest that FDG-PET can be used to stratify patients based on early-risk assessment of treatment outcomes.²

1. Debelke, D, et al, *Mol Imag Biol*, 2002;4:105-114.
2. Kasamon, Y, et al, *Curr Opin Oncol*, 2004;16:100-105.

PATIENT HISTORY

➤ 23 year old female with history of B-Cell lymphoma sent to us on 5/11/04 for initial staging.

PET/CT FINDINGS

➤ Staging PET/CT showed large hypermetabolic lesions involving the R supraclavicular, R axilla, retroperitoneal area and also involving the L1 vertebra. The R axillary mass measured 11cm X 11cm and had a max SUV of 15.0.

ADDITIONAL FINDINGS

➤ A re-staging PET/CT scan was performed on 7/20/04 following three cycles of CHOP. Right axillary mass now measured 8cmX4cm, however SUV remained relatively unchanged. R supraclavicular and retroperitoneal masses have also decreased significantly in their dimension.

DISCUSSION

➤ This case illustrates the ability of PET/CT to evaluate the effectiveness of Tx for lymphoma patients, and help predict Tx outcomes. In this case, the hypermetabolic regions of the lesions decreased in volume, but without complete resolution of disease, or reduction in uptake intensity. The patient subsequently underwent a salvage regimen of ESHAP, with CHOP Tx to resume at a later date.



The Stage

October 2004

Quality Company

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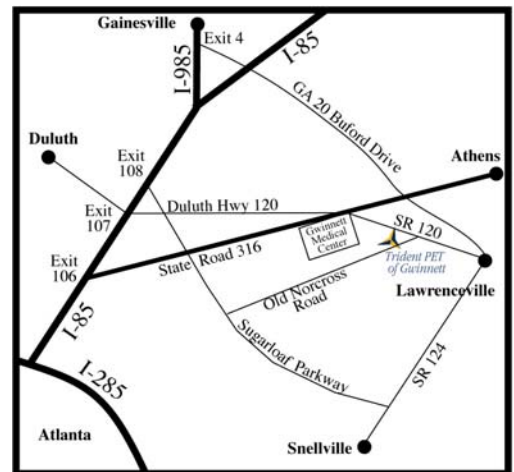
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CMS Announces Coverage of PET/CT Scans for Alzheimer's Disease



Medicare patients meeting the following criteria for assessment of dementia will be covered

- Patient has documented cognitive decline of at least six months
- Patient has a recently established diagnosis of dementia and meets diagnostic criteria for both Alzheimer's disease and fronto-temporal dementia
- Patient has been evaluated for specific alternate neurodegenerative diseases or causative factors, and for whom the cause of the clinical symptoms remains uncertain
- Patient is **NOT** being referred for assessment of mild cognitive impairment or "early dementia"



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