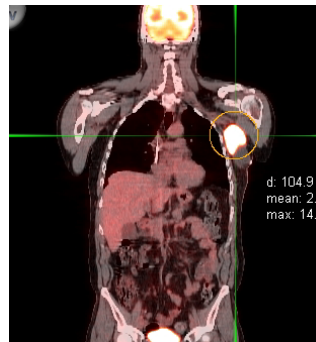


PETIMAGING

INTEGRATED PET/CT SCANNING CASE STUDY N^o 76

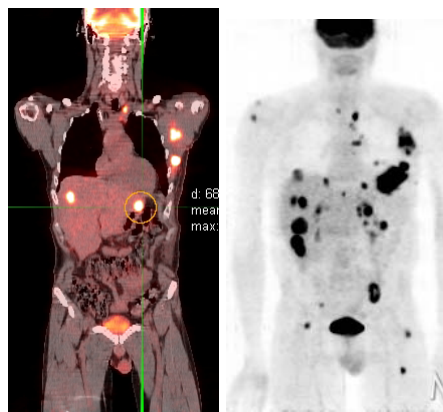
Burkitt's Lymphoma

A 35 year old male diagnosed with Burkitt's lymphoma in the left axilla undergoes a course of chemotherapy, after which CT shows that the axillary mass has decreased in size. A PET/CT scan ordered to restage his cancer reveals a hypermetabolic mass with an SUV of 15.3 in the left axilla. The patient begins radiation therapy.



After radiation therapy, the patient complains of pain and swelling in his chest. The physician suspects inflammation from the radiation therapy and recommends close monitoring. Concerned, the patient requests a PET/CT to assess therapeutic response. It reveals reduced hypermetabolic activity in the left axilla. However, new metastatic sites are identified in the left pectoralis muscle, mediastinal lymph nodes, right humeral head, liver, right femoral head, left greater trochanter, right iliac bone, and posterior left iliac bone.

Therapy with RICE is initiated.



PETIMAGING

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PET/CT ordered after 2 cycles of chemotherapy shows a reduction in size (5.4 cm x 3.3 cm) and SUV (6.9 to 3.4) of lymph nodes in the left axilla. Two mediastinal lymph nodes are no longer identified. Diminished uptake is seen in left pectoralis muscle (SUV decrease from 18.6 to 3.2) and a pleural site (SUV decrease from 15.8 to 6.2). Three hypermetabolic sites persist in the liver despite reduction in size. The physician chooses to continue with additional cycles of RICE and consideration of a stem cell transplant.

