

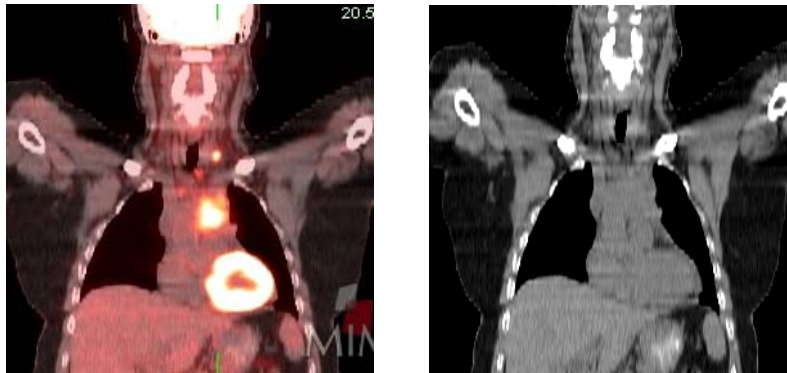
# PETIMAGING

## INTEGRATED PET/CT SCANNING CASE STUDY N<sup>o</sup> 92

### Hodgkin's Lymphoma- Residual Mediastinal Mass

A 50 year old female non-smoker presents with chief complaints of neck swelling and pain and is referred for a neck CT which reveals the upper portion of a mediastinal mass. A chest CT confirms a 6 x 3cm mass extending into the A/P window, pleural thickening and atelectasis in the lung fields bilaterally, and a 1.5 cm right paratracheal lymph node.

PET/CT ordered to characterize the mediastinal mass reveals the mass to be hypermetabolic at the periphery (SUV 6.6) with central necrosis as well as multiple lymph nodes, including two subcentimeter, left supraclavicular lymph nodes, a 1 cm A/P lymph node, a 1.5 cm azygoesophageal lymph node, and a 1 cm infra hilar lymph node all with SUVs ranging from 3.7-6.8. No additional disease is noted below the diaphragm. Biopsy results are consistent with Hodgkin's lymphoma which is staged as a IIA. The physician initiates treatment with ABVD.



PET/CT, conducted after 3 cycles of chemotherapy, reveals resolution of the previously identified areas of uptake with reduction of the mediastinal mass to 2 x 2.7cm with activity only slightly greater than mediastinal blood pool (SUV 2.3). The patient completes the prescribed course of therapy.