

PET-CT CASE OF THE MONTH

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Fig. 1

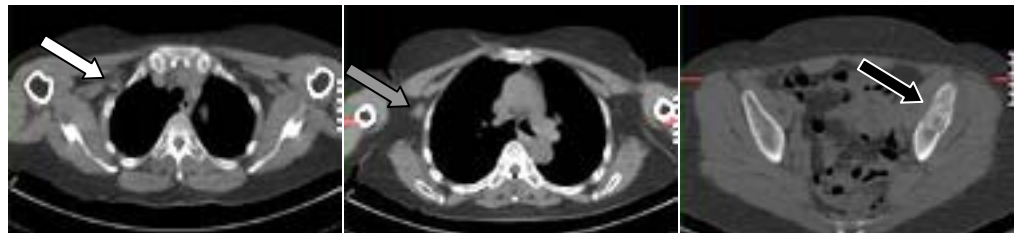


Fig. 2

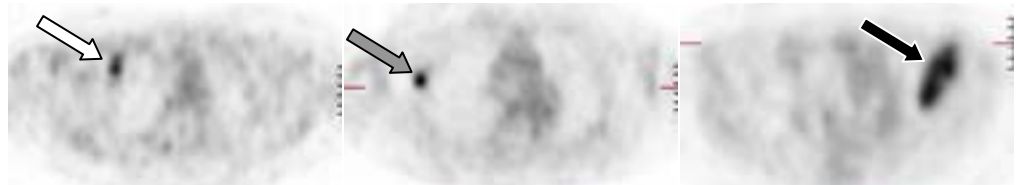


Fig. 3

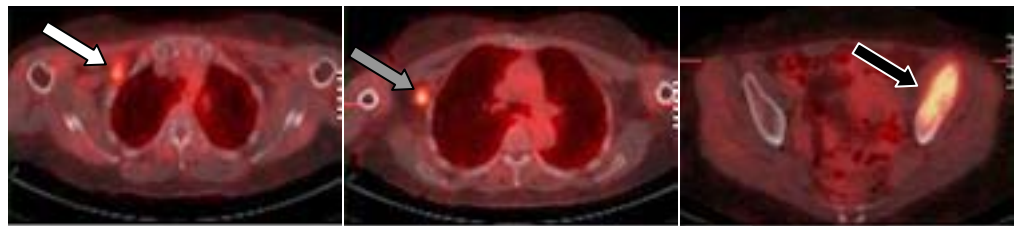


Fig. 4

This 55 year old postmenopausal woman presented with an enlarging right breast mass that she first noticed six weeks earlier. On physical exam she had a 3 cm right-sided periareolar mass with a 2 cm palpable lymph node in the right axilla. A PET-CT scan was ordered for additional staging information.

The PET-CT showed increased FDG uptake in the primary tumor (Fig. 1, arrowhead) and in a clump of right axillary lymph nodes (Figs. 1 and 3, gray arrows), as well as in a retropectoral lymph node (Figs. 1 and 2, white arrows). There was also a large area of increased tracer uptake in the left iliac bone (Figs. 1 and 4, black arrows). This lesion was biopsied, revealing metastatic poorly differentiated carcinoma compatible with the previous right breast biopsy.

How did the PET-CT help? :

PET-CT demonstrated the distant bone metastasis, upstaging the patient to Stage IV. There was a substantial difference in the treatment options recommended for the patient, with the goal of therapy changed from an attempt to cure to a palliative approach.

Recent studies have shown the utility of PET for staging women with breast carcinoma, especially in high risk settings^{1,2}.

(1) Br J Surg. 2005 Nov;92:1363-7

(2) J Clin Oncol. 2004 Apr 1;22:1253-9