

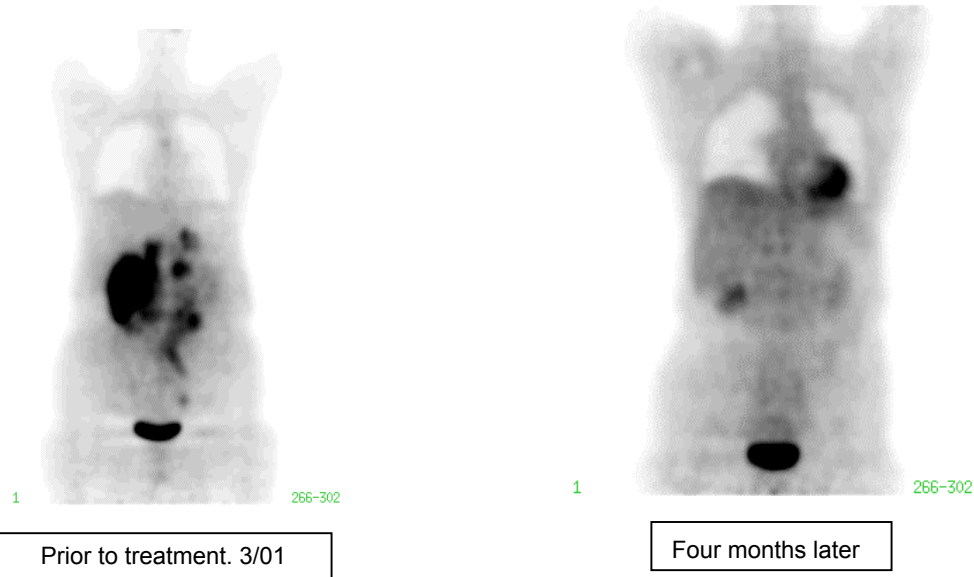


# Positron Emission Tomography Case Study

**Clinical Area:**  
**Clinical Diagnosis:**

**Oncology**  
**Non Hodgkin's Lymphoma**

## RESPONSE TO TREATMENT



**History:** Patient is a 56-year old woman who presented with abdominal pain. A CT of the abdomen and pelvis two weeks prior revealed significant abnormalities in these areas.

A PET scan was undertaken prior to treatment. Following the IV administration of 3.7 mCi F18-FDG, whole body images were obtained on an ADAC CPET Plus Scanner utilizing the transmission, correction and non-corrected emission images. This was correlated with the previous CT image. A second PET scan was performed four months later, following a course of chemotherapy.

### PET Scan Findings:

Patient was determined to have a massive abdominal lymphadenopathy. Examination of the subdiaphragmatic region after the first PET scan revealed intense activity involving the bowel, omentum and mesentery, corresponding to the findings of the CT examination. There was also focal uptake in the para-aortic and celiac region consistent with adenopathy in this region. There was no abnormal activity identified in the neck or supraclavicular region, including the axillary areas.

The second PET scan following treatment revealed complete resolution of the previously noted massive abdominal lymphadenopathy. Images from this scan were correlated with the previous scan, and the original CT scan. There was no abnormal uptake identified in the mediastinum, hilar regions or neck to indicate adenopathy. Physiologic activity is noted in the kidneys. Physiologic activity is noted in the kidneys.

**Follow-up: As of 12/01 Patient is considered to be in remission.**

Scanner: CPET Plus/Philips ADAC  
Study images from: Havertown PET Associates, LLC, Havertown, PA  
Case Study Courtesy of: Dr. Gary S. Greene, M.D.

Case study developed by:  
Integral PET Associates, LLC



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