

## عنوان مقاله:

Role of Pre-therapeutic 18F-FDG PET/CT in Guiding the Treatment Strategy and Predicting Prognosis in Patients with Esophageal Carcinoma

## محل انتشار:

مجله پزشکی هسته ای و زیست شناسی آسیا اقیانوسیه, دوره 4, شماره 2 (سال: 1395)

تعداد صفحات اصل مقاله: 7

## نویسندگان:

Teik Hin Tan - *Department of Nuclear Medicine, National Cancer Institute, Putrajaya, Malaysia*

Chin Yeen Boey - *Department of Nuclear Medicine, National Cancer Institute, Putrajaya, Malaysia*

Boon Nang Lee - *Department of Nuclear Medicine, National Cancer Institute, Putrajaya, Malaysia*

## خلاصه مقاله:

**Objective(s):** The present study aimed to evaluate the role of pretherapeutic 18fluorine-fluorodeoxyglucose positron emission tomography/computed tomography (18F-FDG PET-CT) and maximum standardized uptake value (SUVmax) in guiding the treatment strategy and predicting the prognosis of esophageal carcinoma, using the survival data of the patients. **Methods:** The present retrospective, cohort study was performed on 40 consecutive patients with esophageal carcinoma (confirmed by endoscopic biopsy), who underwent pre-operative 18F-FDG PET-CT staging between January 2009 and June 2014. All the patients underwent contrast-enhanced CT and non-contrasted 18F-FDG PET-CT evaluations. The patients were followed-up over 12 months to assess the changes in therapeutic strategies. Survival analysis was done considering the primary tumor SUVmax, using the Kaplan-Meier product-limit method. **Results:** In a total of 40 patients, 18F-FDG PET-CT scan led to changes in disease stage in 26n (65.0%) cases, with upstaging and downstaging reported in 10n (25.0%) and 16n (40.0%) patients, respectively. The management strategy changed from palliative to curative in 10 out of 24 patients and from curative to palliative in 7 out of 16 cases. Based on the 18F-FDG PET-CT scan alone, the median survival of patients in the palliative group was 4.0n (95 % CI 3.0-5.0) months, whereas the median survival in the curative group has not been reached, based on the 12-month followup. Selection of treatment strategy on the basis of 18F-FDG PET/CT alone was significantly associated with the survival outcomes at nine months ( $P=0.03$ ) and marginally significant at 12 months ( $P=0.05$ ). On the basis of SUVmax, the relation between survival and SUVmax was not statistically significant. **Conclusion:** 18F-FDG PET/CT scan had a significant impact on stage stratification and subsequently, selection of a stage-specific treatment approach and the overall survival outcome in patients with esophageal carcinoma. However, pre-treatment SUVmax failed to establish its usefulness in the assessment of patient prognosis and survival outcome.

## کلمات کلیدی:

FDG, PET/CT, esophageal carcinoma, Prognosis

## لینک ثابت مقاله در پایگاه سیویلیکا:

<https://civilica.com/doc/887455>



