

عنوان مقاله:

The value of lateral lymphoscintigraphy images of the pelvis for gynecological cancers: Are they necessary

محل انتشار:

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خلاصه مقاله:

Introduction: In the current study we evaluated the incremental value of lateral pelvic lymphoscintigraphy imaging of endometrial or cervical cancer patients who underwent sentinel node mapping. Methods: Operable endometrial and cervical cancer patients without clinical or paraclinical evidence of lymph node involvement were included in the study. The day before surgery the patients were sent to the nuclear medicine department for injection of the radiotracer. All patients received two intra-cervical injection of 1 mCi/0.2 cc radiotracer in the 6 and 12 hour locations. 18-24 hours after the radiotracer, lymphoscintigraphy imaging in anterior/posterior and lateral views was done. After induction of anesthesia, 2 mL Methylene blue in two aliquots was injected intra-cervically in the same location as the radiotracers. During operation, any hot and/or blue node was harvested as sentinel nodes. Results: Overall 40 patients were included in the study (30 endometrial and 10 cervical cancers). Sentinel node visualization was achieved in 30 patients. These sentinel nodes were all visualized on the ANT/POST views. Only in 7 patients sentinel nodes could be visualized on the lateral views. Intra-operative sentinel node detection rate was 38 out of 40 (95%). Radiotracer detection rate was 37/40 (92.5%) and blue dye detection rate was 17/40 (42.5%). Conclusion: Anterior/Posterior pelvic lymphoscintigraphy imaging is sufficient for imaging in cervical and endometrial cancer patients undergoing .sentinel node mapping. Lateral views can be omitted due to limited valued of these projections

کلمات کلیدی:

Sentinel node, Lymphoscintigraphy, Lateral view, Radiotracer, Blue dye

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