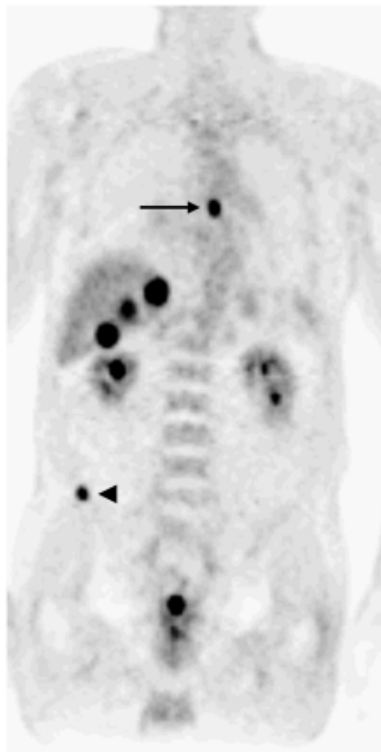
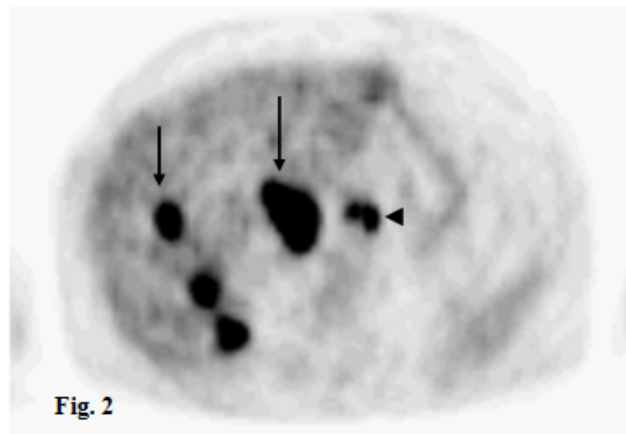
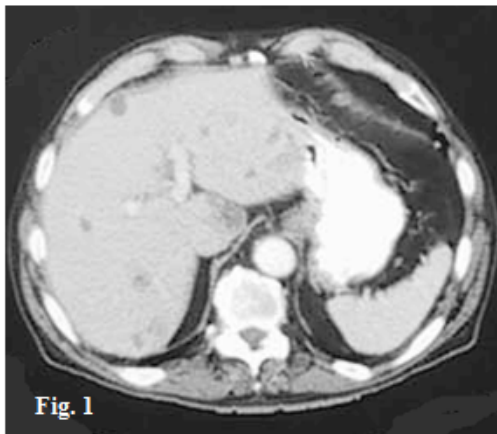




Colon Cancer



This 80 year old patient had a right hemicolectomy to resect a large moderately to poorly differentiated **adenocarcinoma of the caecum**. Seven out of sixteen pericolic nodes were involved with tumor. A CT of the abdomen (Fig. 1) obtained for staging showed “multiple hepatic lesions very suspicious for metastatic disease and multiple hepatic cysts”. A PET scan was obtained to assess whether those suspected liver metastases were in fact resectable.

The PET scan showed:

- Multiple large liver metastases in both lobes of the liver (Fig. 2)
- Peri-aortic lymphadenopathy (Fig. 2, arrow head)
- A mediastinal metastasis (Fig. 3)
- A right iliac bone metastasis (Fig. 3, arrow head)

Why did the PET help:

On the basis of the PET scan result, the patient was not considered for partial hepatectomy.

In a recent prospective study (1) including 102 patients with suspected or confirmed recurrence of colon cancer but without evidence of unresectable disease by conventional imaging including CT, PET directly influenced management in 60 patients (59%). The major benefit of PET is avoidance of inappropriate local therapies by documentation of widespread disease.

(1) J Nucl Med 2002;43:492-499