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PET/CT in gynaecological cancer with special focus on cervical cancer

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Gynaecological cancers are staging by FIGO classification however more often nuclear medicine techniques are used to complete FIGO stage and determine the appropriate stage of disease. Nuclear medicine techniques has advantages over conventional imaging methods cause they gives us information not only about anatomical changes taking place in the body, but more important about functional changes which usually occurs earlier than anatomical changes. The most common radiotracer 18F-FDG is used in gynaecological malignancy for diagnosis, staging and treatment planning in endometrial cancer, ovarian cancer and cervical cancer. PET/CT provides whole-body imaging including primary tumor, lymph nodes and

distant metastasis. The assessment of metabolic activity and the extent of the tumor mass has an increasing importance for radiotherapy planning. In cervical cancer FDG-PET/CT has a special application. Based on our preliminary results in over 30% PET/CT examination changed radically the treatment method. Recently, more and more interest has been generated focused on more specific radiotracers that do not accumulate in the inflammatory process and might be helpful in radiotherapy planning like the thymidine analog - 3'-deoxy-3'-[18F]fluorothymidine (FLT). The aim of this presentation is to discuss the potential role of PET/CT with different radiotracer in gynaecological malignancy with special focus of cervical cancer.

Biography

Paulina Cegla has graduated from the University of Medical Science in 2013 with Master of Electroradiology degree. Currently she is pursuing PhD at the same University. Since 2011 she works as a Nuclear Medicine Radiographer at Department of Nuclear Medicine in Greater Poland Cancer Centre. She presented over 20 scientific works in European and world conferences of nuclear medicine and several articles in reputed journals.

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