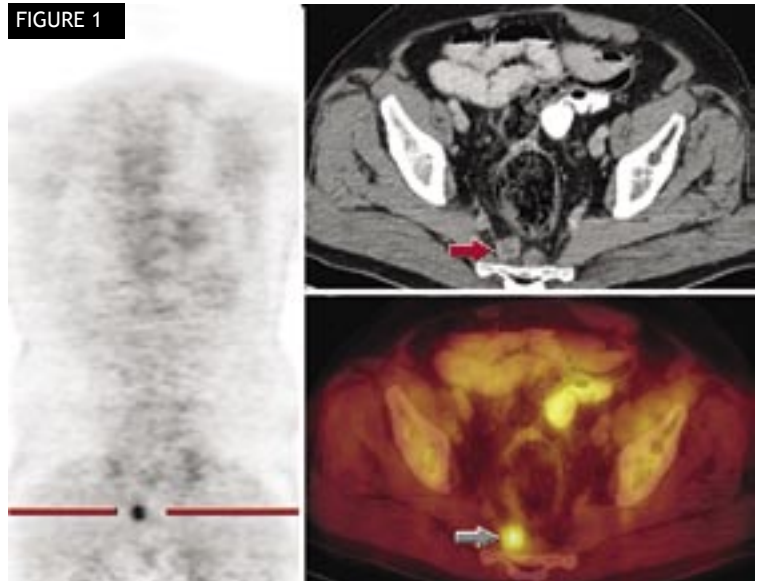


CT/PET Imaging of Colorectal Cancer

CASE 1

This patient is a 70-year-old man with a Dukes B1 colon cancer originally diagnosed in 1994. He subsequently developed hepatic metastatic disease, treated with successive wedge resections and radiofrequency ablation, as well as chemotherapy. He now presents with a rising CEA level. A PET/CT study was ordered (Figure 1) and reveals a small focus of FDG activity in the pelvis corresponding to an enlarged presacral lymph node. Biopsy confirmed a metastasis and helped guide subsequent therapy.

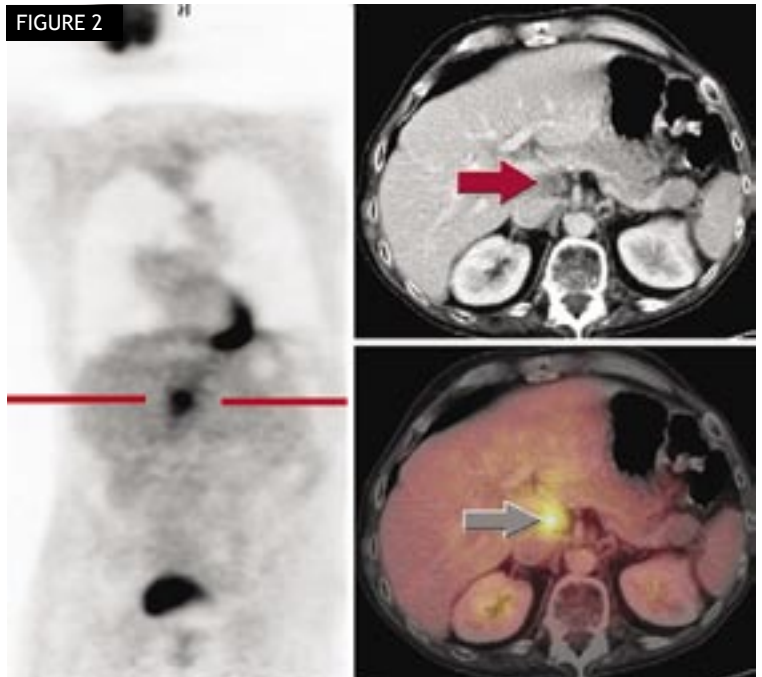
FIGURE 1



CASE 2

The second patient is a 64-year-old male with recent diagnosis and resection of a rectal carcinoma. There were perirectal lymph node metastases at the time of surgery. A PET/CT study was ordered for further staging. This study (Figure 2) revealed a mildly enlarged porto-caval lymph node with increased FDG activity. Fine needle aspiration was performed under computed tomography guidance and revealed metastatic adenocarcinoma of colorectal origin.

FIGURE 2



Continued on reverse...

PET/CT Imaging at Evergreen Radia Imaging Center

Indications for PET/CT imaging in colorectal carcinoma

- Initial staging of colorectal carcinoma (detection of distant metastases)
- Restaging of colorectal cancer after therapy
- Evaluate for recurrent tumor with rising CEA level
- Equivocal findings on conventional imaging
- Restaging prior to curative resection of metastasis

Other services at Evergreen Radia Imaging Center:

- CT
- MRI
- X-Ray
- Ultrasound
- Fluoroscopy/Pain Management

To schedule any of these procedures, call 425-899-2831.

To schedule PET/CT at Evergreen Radia, please call 425-952-6111 or toll-free 877-738-7226

OR

Download a PET/CT referral form from <http://www.radiax.com/pdf/EvergrnRadiaPETImagForm.pdf>

Complete all information required and fax to (425) 952-6110.

EVERGREEN RADIA IMAGING CENTER

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Did You Know...?

FDG PET has significant impact on management of patients with suspected recurrent colorectal cancer. In a study of 102 patients with suspected recurrent colon cancer, FDG PET imaging was shown to be more accurate than conventional staging exams and changed management in 65% of patients. PET was helpful both in preventing unnecessary surgery in patients with advanced disease and in selecting additional patients with limited disease for potentially curative treatment.

Clin Positron Imaging. 2000 Jul;3(4):183.

According to the American Cancer Society an estimated 104,950 colon and 40,340 rectal cancer cases are expected to occur in 2005. Colorectal cancer is the third most common cancer both in men and in women. An estimated 56,290 deaths are expected to occur in 2005, accounting for about 10% of cancer deaths. Mortality rates continue to decline in both men and women, reflecting decreasing incidence rates and improvements in survival.

Early diagnosis of this disease is one of the key elements to its cure. Colorectal cancers probably develop slowly over a period of several years. Before a true cancer develops, there are often earlier changes in the lining of the colon or rectum. If found early, before colorectal cancer has spread, the disease is considered curable. If colon cancer is detected in its early stages, it is up to 90% curable. However, as the tumor spreads to the lymph nodes, a patient's chance of living at least five years drops to 40 - 60%. If the cancer has already spread to distant organs, the long-term survival rate decreases substantially.

www.RadiaPet.com

"(FDG-PET) alters patient management in that it enables appropriate selection of patients for different treatments based on accurate results regarding the presence and extent of recurrence."

Arulampalam T, et al Eur J Nucl Med. 2001;28:1758-1765.

Dear Colleague:

We're pleased to send you the latest issue of "PET/CT Report" from Evergreen Radia Imaging Center. Six times a year, we will send you information about the benefits of the state-of-the-art technology and expertise we provide. Your questions/comments are welcome.

- Lloyd Stambaugh, MD, Medical Director, Evergreen Radia Imaging Center
- Sanjiv Parikh, MD, Diagnostic Radiology, Nuclear Medicine and Interventional Radiology
- David Atkins, MD, Diagnostic Radiology and Nuclear Medicine