

2nd Jaipur Surgical Festival (JSF)
HPB Oncology
2-4 December 2022
Mahatma Gandhi Medical College & Hospital (MGMCH)
Jaipur Rajasthan India

PET IN HPB Cancers

Speaker: Shivendra Singh, RGCI New Delhi

1. 18-Fluoro de-oxy glucose commonly used radio-pharmaceutical agent
2. New tracers- FAPI, C11 acetate, PSMA – improve accuracy in future
3. Parameters used to measure the activity are- maximum and mean standardized uptake value (SUV max and SUV mean), newer ones like metabolic tumor volume (MTV), total lesion glycolysis (TLG)

HEPATOCELLULAR CARCINOMA

- Not recommended as a routine investigation for staging (NCCN)
- High SUV indicates aggressive disease and predict less optimal response to locoregional treatment
- Avoids unnecessary transplant in 11% patients (rules out poor prognosis and aggressive patients)
- Confirm nature of tumor thrombus in portal vein
- Dual tracer FDG with C-11/ fluoro choline – better results in detecting metastasis

CARCINOMA GALLBLADDER

- Recommended for all cases including incidental carcinoma gallbladder
- Pet avoids unnecessary surgery in t1b OR MORE
- BETTER THAN CT + tumor markers to diagnose port site/LRR
- Role of PET in thick-walled gallbladder- still controversial?

CARCINOMA PANCREAS

- Recommended for staging in high-risk cases (large primary tumors/ locally advanced tumors, markedly elevated CA19-9, severely symptomatic) (NCCN)
- Assess response, extent of residual disease, detects recurrence earlier
- To be included in borderline pancreatic cancer
- Altered management in 45% patients, prevented surgery in 20%

INTRAHEPATIC CHOLANGIOCARCINOMA

- Not recommended as a routine staging investigation (NCCN), however changes management in 1/4th of cases

HILAR CHOLANGIOCARCINOMA

- Not a routine recommendation
- May be useful for detecting primary lesion in Primary sclerosing cholangitis
- Dual phase pet—with an additional delayed phase (1-2 hrs.)- increased sensitivity and accuracy and better lymph node detection but no additional benefit for metastasis

COLORECTAL LIVER METASTASIS

- Rules out extra hepatic disease-
- NCCN recommends PET before taking up for locoregional treatment

NEUROENDOCRINE TUMOR

- For diagnosis, staging and to characterize and assess response, detects small primary tumors/LN mets/multifocal lesion
- Grade 1 tumors- DOTA NOC to be done

- Grade 2/3 tumors- FDG + DOPA PET to be done

**Summary prepared by
Rapporteur**

**Kruthika S
JR (MS) AIIMS New Delhi**