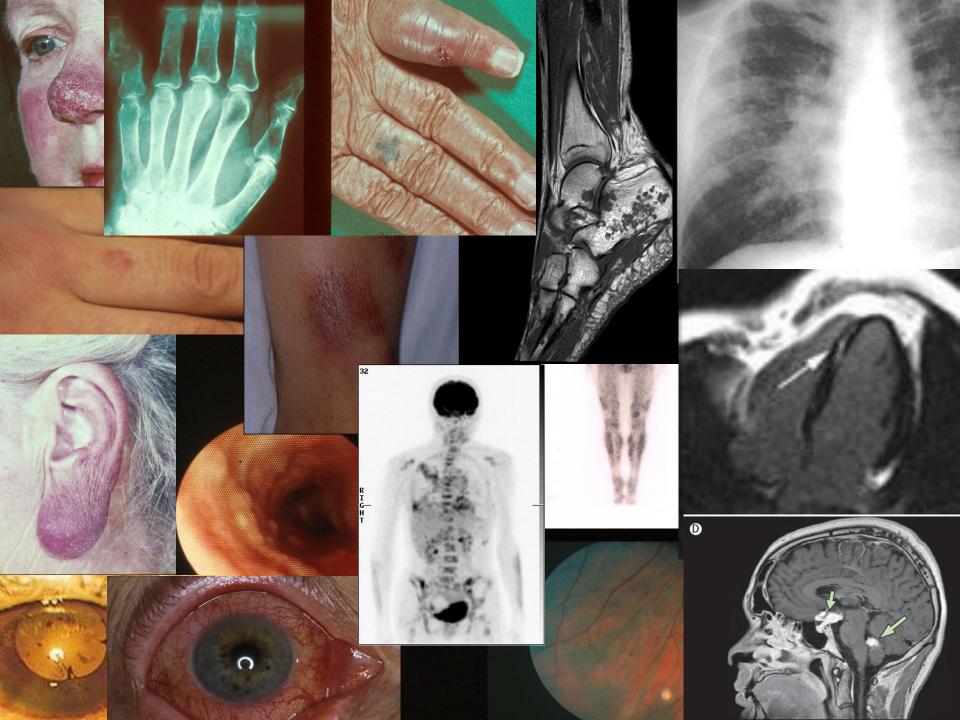
The many faces of sarcoidosis: PET

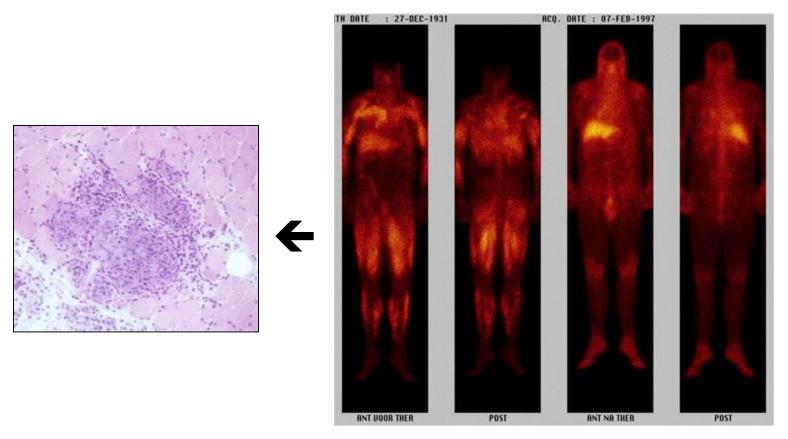




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Gallium-67 scintigraphy in sarcoidosis: extrathoracic muscle uptake



Before treatment After treatment

Liem et al J Nucl Med 1998: 39: 1605-07.



⁶⁷Ga scintigraphy

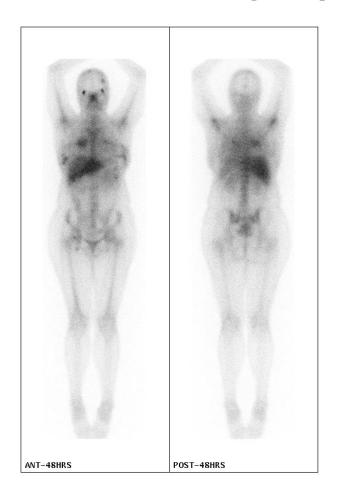
- Radiation dose: 18.5 mSv
- Acquisition after 48 hours
- Moderate resolution
- Kappa 0.19-0.59

FDG PET/CT

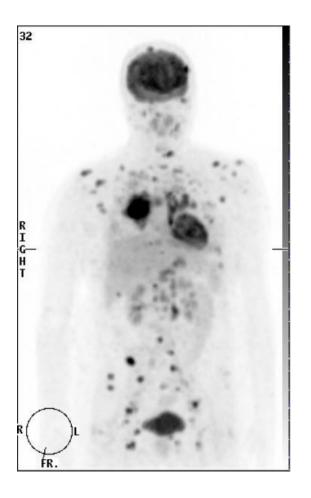
- Radiation dose: 5 mSv
- Completed within 2 hours
- Excellent resolution
- Kappa 0.65-0.84
- Significantly more lymph node and spleen involvement than 67Ga scintigraphy



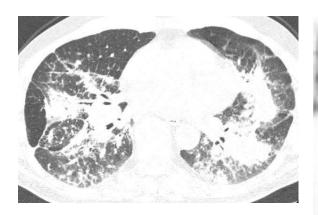
⁶⁷Ga scintigraphy



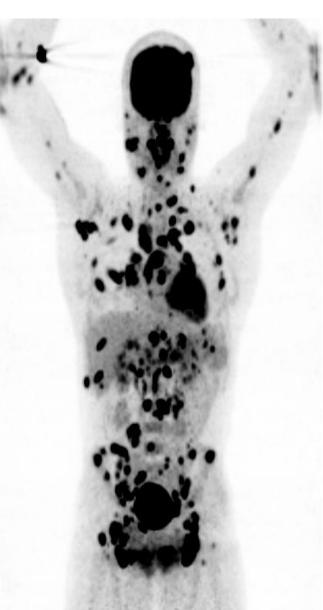
FDG PET

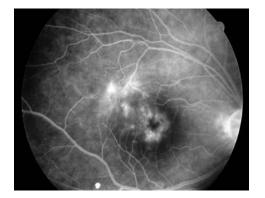


Organs involved in sarcoidosis

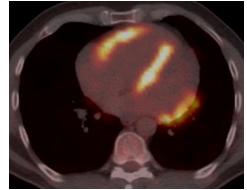








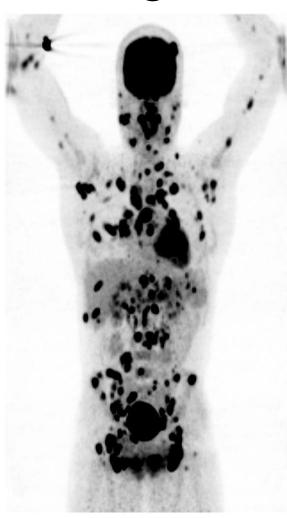








Usefulness of a PET-scan in the management of sarcoidosis

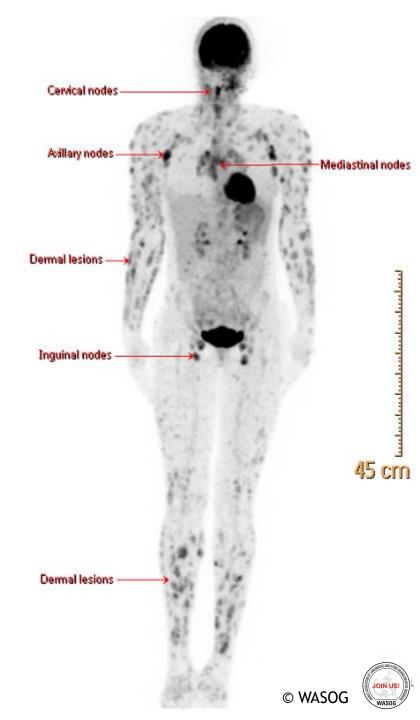


- PET sensitive to assess inflammatory activity and extent of disease
- not indicated in the standard work-up
- PET appears especially helpful in:
 - persistently symptomatic patients without serological signs of inflammatory activity
 - the detection of active cardiac sarcoidosis
 - uncover a suitable location for biopsy
 - explaining (mainly extrathoracic) symptoms
 - offering prognostic value



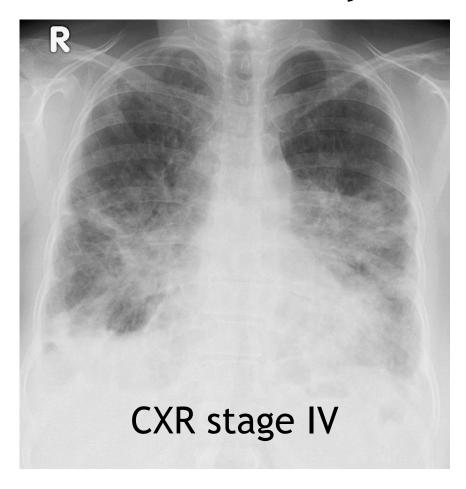




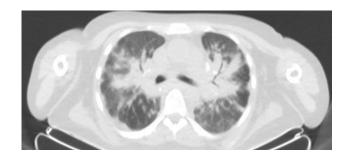


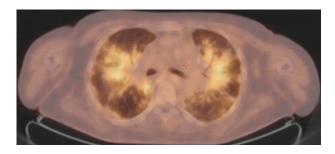
Sarcoidosis patient with inflammation

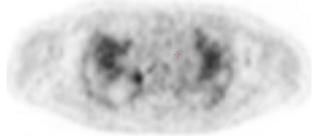
Chest X-ray



PET/CT

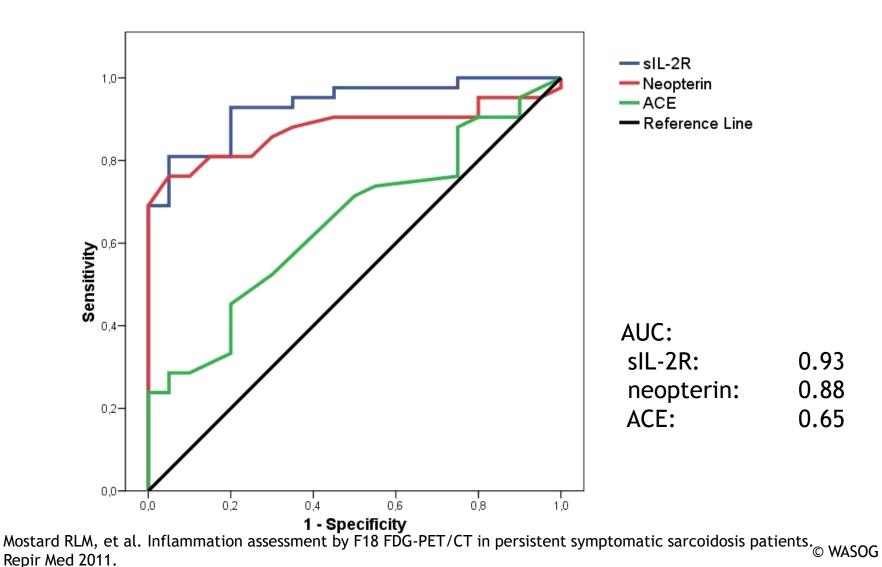








ROC Curve: association of PET positivity and serological markers



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Multiorgan involvement

monitoring with PET F¹⁸-FDG



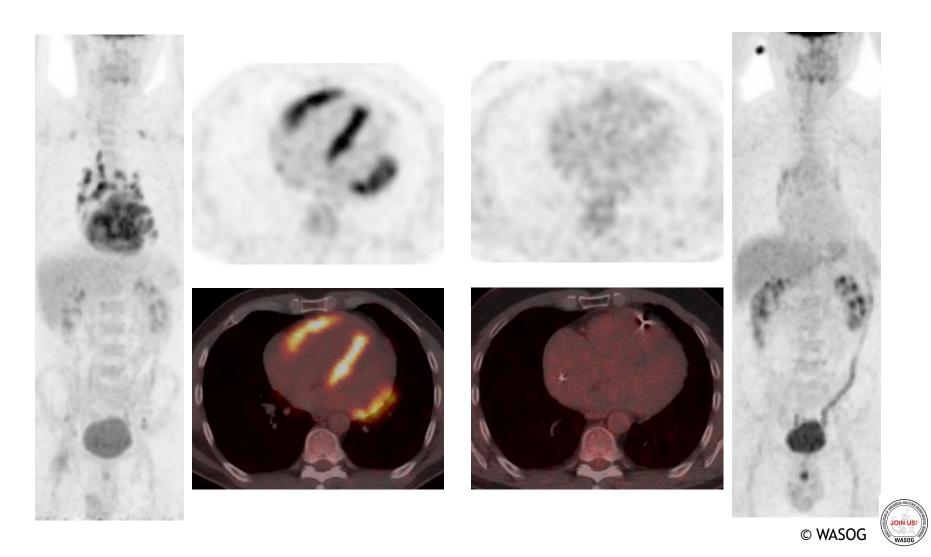
before treatment



after 6 months treatment

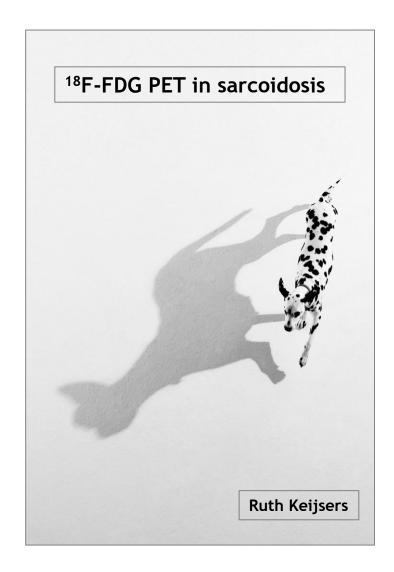


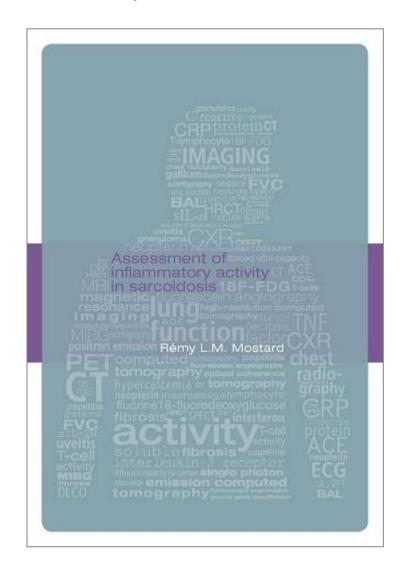
PET-scan cardiac involvement: pre and after treatment



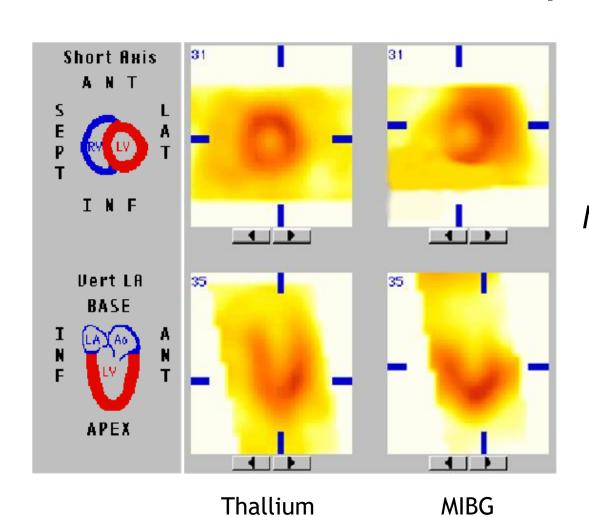
¹⁸F-FDG PET:

assessment of inflammatory activity in sarcoidosis





MIBG versus Thallium scintigraphy in a sarcoidosis patient



Impaired I-123
Metaiodobenzylguanidine
(MIBG) uptake
without myocardial
perfusion disturbances
assessed by Thallium
scintigraphy



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