



## Learn & Improve Professional Skills (LIPS) Track – Session 11

Bone & Joint Committee

Tuesday, September 12, 15:00 – 16:30

### Session Title

**Pitfalls and Common Bony Findings in PET-CT/MRI using Novel Tracers**

### Chairpersons

**Irene Burger** (Zurich, Switzerland)

**Mohsen Beheshti** (Salzburg, Austria)

### Programme

15:00 – 15:30 **Alexander Maurer** (Zurich, Switzerland): PSMA PET/CT - atypical bony patterns using different radioligands - tips on assessment of bone metastases

15:30 – 16:00 **Kim Pabst** (Essen, Germany): FAPI PET/CT - what should be considered in interpretation of bony lesion?

16:00 – 16:30 **Simon Wan** (London, UK): PET/MRI - Pitfalls and normal variations in assessment of bone metastases

### Educational Objectives

1. To review the variations using different PSMA-radioligands, normal biodistribution and benign findings, pitfalls and artefacts associated with PSMA PET/CT, particularly in the assessment of bone metastases
2. To provide an overview of the clinical applications, normal biodistribution, variations, pitfalls and artefacts of FAPI PET/CT, focusing on the assessment of bone disease.
3. To gain knowledge of PET/MRI imaging with different radiotracers and its common challenges in the assessment of bone metastases, and to discuss current evidences and trends.

### Summary

Several potential pitfalls emerge over time and need to be summarized for the imaging community following the introduction of a new radiotracer. Challenging findings have been reported in the past for hybrid PET/CT and PET/MRI imaging using prostate specific membrane antigen (PSMA) radioligands, which have been associated with a variety of false-positive findings. In addition, promising preclinical and clinical results have been introduced with the recent development of quinoline-based PET tracers that act as fibroblast activation protein inhibitors (FAPIs). This session, review the pitfalls and common benign findings of PET/CT and PET/MRI using PSMA- and FAPI-radioligands particularly in assessment of bone metastases.

### Key Words

FAPI, PSMA, bone metastases, pitfalls, PET/CT, PET/MR