



Learn & Improve Professional Skills (LIPS) Track – Session 3

Thyroid Committee

Sunday, September 10, 15:00 – 16:30

Session Title

Rational Use of PET/CT with 18F-FDG in DTC

Chairpersons

Petra Petranović Ovčariček (Zagreb, Croatia)

Alexis Vrachimis (Limassol, Cyprus)

Programme

15:00 – 15:30 **Lioe-Fee de Geus-Oei** (Leiden, The Netherlands): Adding FDG-PET to the diagnostic work-up of indeterminate thyroid nodules: expensive gadget or cost-effective?

15:30 – 16:00 **Sanja Kusacic Kuna** (Zagreb, Croatia): 18F-FDG in staging DTC: when and why

16:00 – 16:30 **Murat Tuncel** (Ankara, Turkey): Role of 18F-FDG in restaging DTC and as a tool for response evaluation

Educational Objectives

1. Rationale of use of FDG PET/CT in DTC
2. Cost effectiveness of the examination in the preoperative setting
3. Clinical problems/pitfalls of FDG in DTC

Summary

DTC experience in most cases a favourable prognosis. Nevertheless, some DTC withdraw from detection and therapy with radioiodine by the loss of NIS expression. In these situations, 131I-whole body scans fail to identify cancer sites, a clinical scenario which is termed TENIS syndrome. In this scenario, FDG-PET/CT is the currently the most effective tool to identify dedifferentiated tumour foci. These iodine-ve/FDG+ve thyroid carcinomas correlate with more aggressive tumors and significantly poorer prognosis and require alternative therapies.

Key Words

Dedifferentiation, TENIS syndrome, cost-effectiveness, preoperative, thyroid nodules, metastases, iodine refractory