

Comparison between FDG-PET/CT and bone scan in bone metastasis from NSCLC

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With great interest, we read the article by Inal A. et al on the comparison FDG-PET/CT and Bone scan in bone metastasis of NSCLC (April issue 2014, Contemporary Oncology) [1]. We would like to ask the authors two questions. First, we usually take a maximum standard uptake value into consideration in evaluating metastasis in FDG-PET/CT [2]. How about the value in this study population? How much value the authors evaluated its cutoff value in evaluating bone metastasis? Second, the majority of NSCLC patients are middle-aged or elderly, and many of them have degenerative changes in vertebral bones, which may sometimes have uptake both in FDG-PET/CT and bone scan. How the authors differentiate metastasis from degenerative change in FDG-PET/CT and bone scan? How about the difference in sensitivity and specificity in vertebral bones in their patients evaluated?

References

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Editor Note

Prior to publication of the above letter, the Editors passed it to authors [1] and asked for response. Until now it has not received. Accordingly we still expect the response.

Editor-in-Chief