LETTER TO THE EDITOR

Letter to the Editor

Victor H. Gerbaudo, Scott Britz-Cunningham

Division of Nuclear Medicine and Molecular Imaging, Brigham & Women's Hospital, Harvard Medical School, Boston, MA, USA

Dear Dr Barrio:
We read with interest the May 2009 online version of Lee et al. [1] in the journal *Molecular Imaging and Biology*.

We are pleased to find that Lee et al. have replicated our previously published findings that mesothelioma patients with metastatic disease had significantly higher metabolic activity in their primary pleural lesions when compared to those without metastases. As we stated in our 2002 paper, "FDG uptake was consistently higher in the primary lesion of patients with distant metastases, than in patients without distant disease" [2]. Again, in 2003, "Primary lesions were more 18F-FDG avid in patients with distant spread than in those without extensive disease" [3]. However, we fault Lee et al. for failing to state that this finding had been reported previously by us and for making the originality of their observation an important part of their paper's conclusion. Quite clearly, their claim to originality is not warranted.

In another place, Lee et al. cite a review paper, Truong et al. [4], as the source for the observation that the degree of FDG uptake in primary lesions has been shown to have a better correlation with surgical staging than histological grade. In fact, the primary source for this observation was our 2003 paper, which was paraphrased with an explicit 2 citation in Truong et al. [4], stating: "Gerbaudo et al. reported that the intensity of FDG uptake by the primary malignancy had a poor correlation with histologic grade, but

a good correlation with surgical stage" [3]. Yet, our paper received no mention whatsoever by Lee et al.

In summary, the report by Lee et al. appears to be flawed by omissions and miscitations, which could have been obviated by a careful reading of the background literature in this field.

Respectfully submitted,

Victor H. Gerbaudo
Scott Britz-Cunningham
Brigham and Women's Hospital
Harvard Medical School

References

1. Lee ST, Ghanem M, Herbertson RA, Berlangieri SU, Byrne AJ, Tabone K, Mitchell P, Knight SR, Feigen M, Scott AM (2009) Prognostic value of (18) F-FDG PET/CT in patients with malignant pleural mesothelioma. *Mol Imaging Biol* (in press)
2. Gerbaudo VH, Sugarbaker DJ, Britz-Cunningham S, Di Carli MF, Mauceri C, Treves ST. Assessment of malignant pleural mesothelioma with 18 F-FDG dual-head gammacamera coincidence imaging: comparison with histopathology. *J Nucl Med*. 2002;43:1144–1149.
3. Gerbaudo VH, Britz-Cunningham S, Sugarbaker DJ, et al. Metabolic significance of the pattern, intensity and kinetics of 18F-FDG uptake in malignant pleural mesothelioma. *Thorax*. 2003;12:1077–1082.
4. Truong MT, Marom EM, Erasmus JJ. Preoperative evaluation of patients with malignant pleural mesothelioma: role of integrated CT-PET imaging. *J Thorac Imaging*. 2006;21(2):146–153.