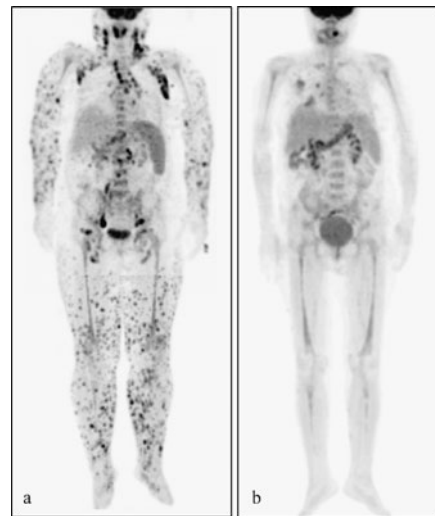


## Before and after treatment $^{18}\text{F}$ -FDG PET/CT images in a patient with cutaneous T-cell lymphoma

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Cutaneous T-cell lymphomas are also known as mycosis fungoides. Cutaneous T-cell lymphomas are indolent lymphomas in which patients often have eczematous or dermatitic skin lesions for several years. Early in the disease, biopsies are often difficult to interpret, and the diagnosis may only become apparent by observing the patients over time. In advanced stages, the lymphoma can metastasize to the lymph nodes and visceral organs [1, 2]. We report on the imaging findings and treatment response of a patient with a cutaneous T-cell lymphoma using  $^{18}\text{F}$ -FDG PET/CT. A 65-year-old woman visited our dermatology clinic with a 4-year history of pruritic, erythematous papules and nodules involving the entire body, and which had progressed 1 month ago. She was initially treated with a course of oral antibiotics without improvement. A chest CT scan was performed due to progressive dyspnoea which showed multiple enlarged lymph nodes in the neck, axilla and mediastinum. The diagnostic imaging work-up was completed by an  $^{18}\text{F}$ -FDG PET/CT study which demonstrated extensively scattered FDG-avid skin lesions throughout the entire body and multiple FDG-



avid lymph nodes (a). The maximum standard uptake value of these lesions was 12.33. The skin and cervical lymph nodes were surgically excised. The histological investigation confirmed the diagnosis of a cutaneous T-cell lymphoma. She was treated with three cycles of chemotherapy. A follow-up  $^{18}\text{F}$ -FDG PET/CT scan noted complete metabolic remission (b). These results demonstrate that  $^{18}\text{F}$ -FDG PET/CT is a valuable tool for the diagnostic work-up, staging and response monitoring in patients with cutaneous T-cell lymphomas.

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