Clinical findings

- Male 56 year-old with T4N1M0 squamous cell carcinoma of the oropharynx
- Presents 2 months following completion of chemoradiotherapy for restaging PET/CT
PET/CT findings

PET/CT shows extensive local uptake in the large right tonsils extending from the skull base to the base of tongue, across the midline, with ipsilateral level 2 cervical lymphadenopathy. No abnormal uptake on post-treatment scan consistent with complete metabolic response to treatment.
Clinical findings

- Female 35 year-old with nasopharyngeal carcinoma
- For baseline PET/CT prior to radiotherapy, followed by repeat PET/CT 4 months after completion
Intense FDG uptake in the nasopharyngeal lesion extending into oropharynx distally on baseline PET/CT scan. Post-treatment scan shows no residual FDG activity consistent with a complete metabolic response.
Teaching points

• FDG PET/CT is useful in assessing treatment response, as it may alter patient management.

• PET should be performed not earlier than 8-10 weeks post-radiotherapy to avoid false positive inflammatory changes.

• Post-radiotherapy disease status at this site is difficult to assess by clinical assessment and conventional imaging in view of location and inflammatory changes masking any residual disease.