

## 원발성 간비장 B세포성 림프종에서 치료전과 치료 후 F-18 FDG PET/CT 소견

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### Primary Hepatosplenic B-cell Lymphoma: Initial Diagnosis and Assessment of Therapeutic Response with F-18 FDG PET/CT

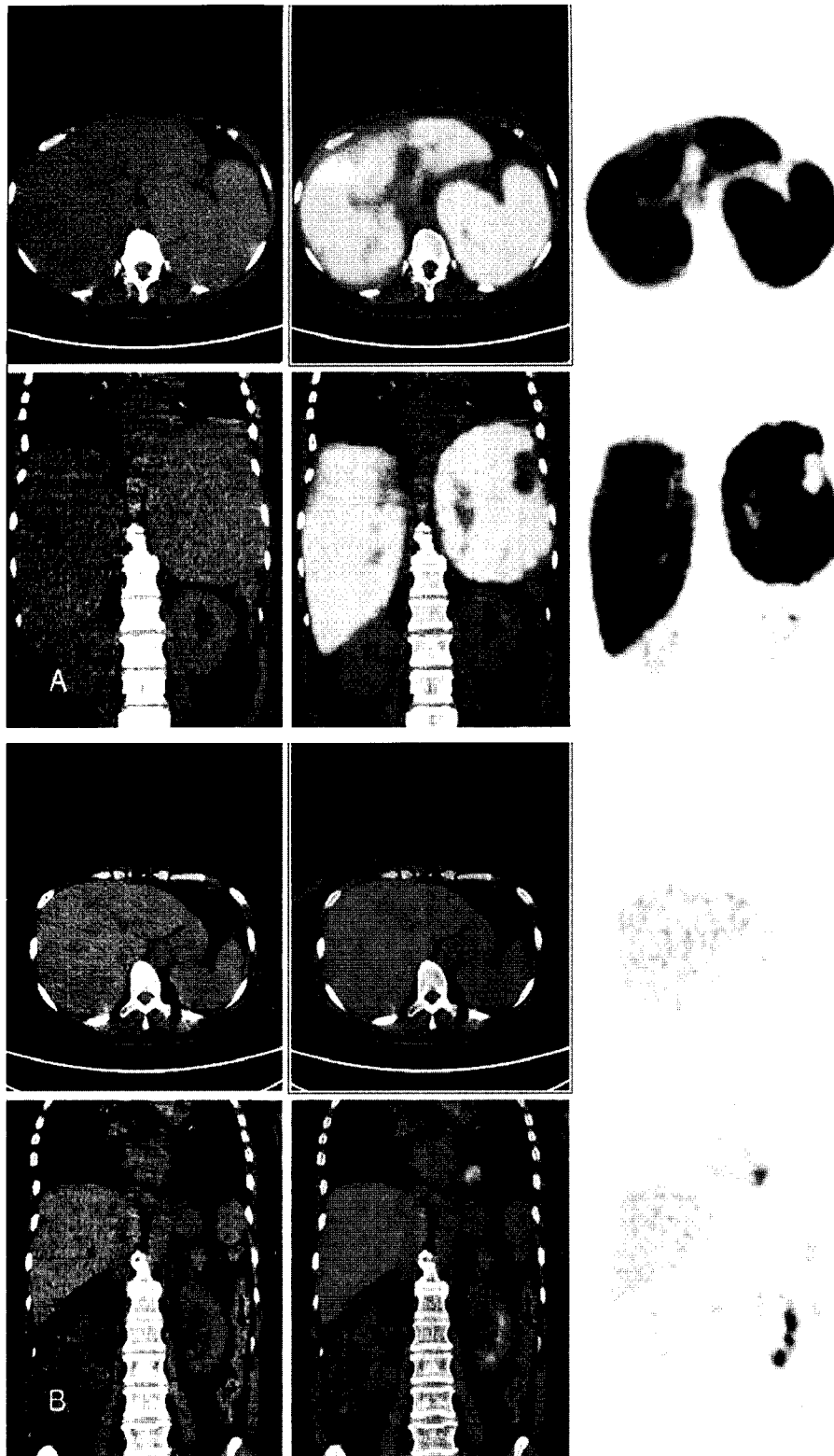
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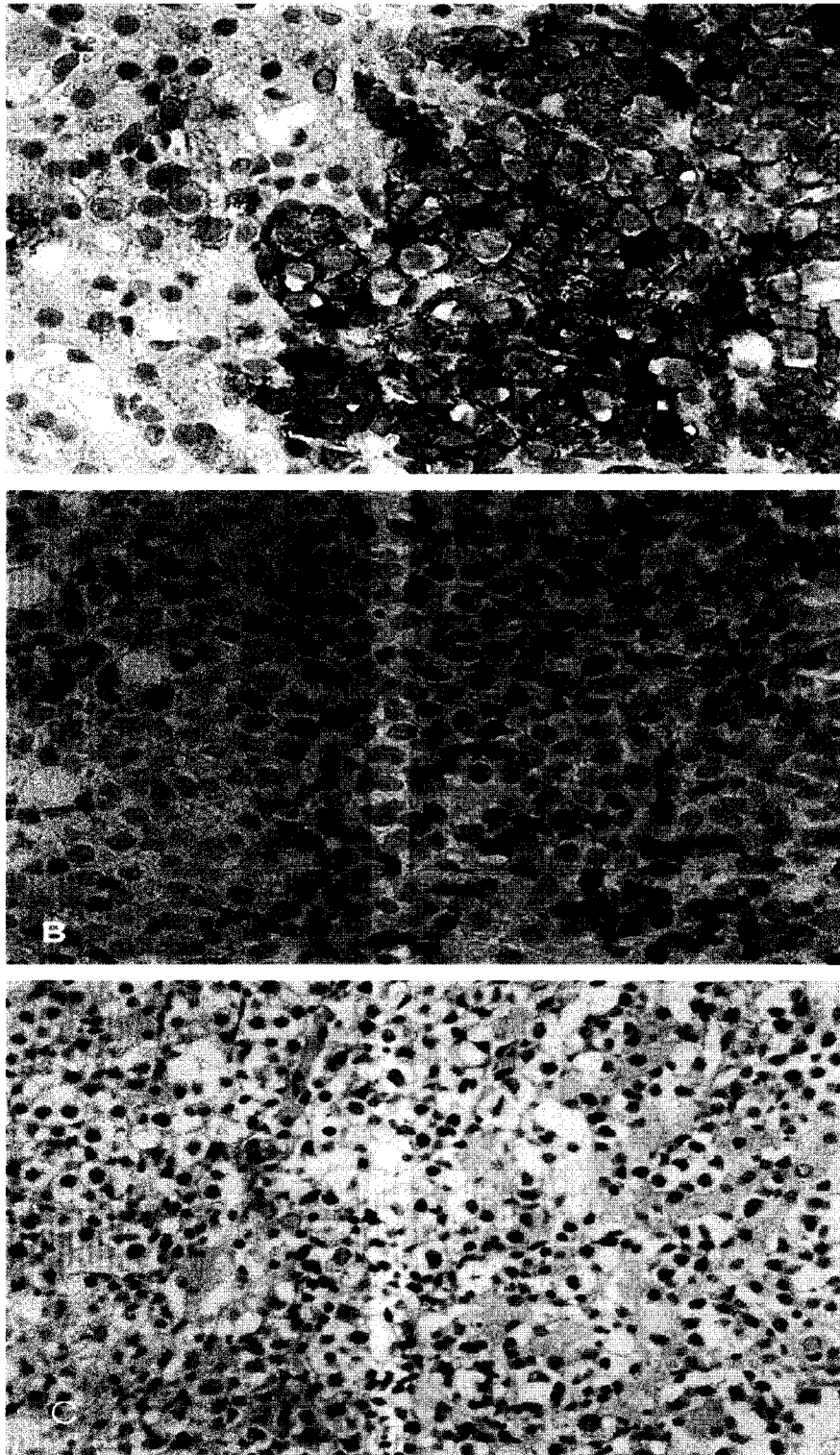
A 52-year-old woman with a history of general weakness, fatigue, weight loss, elevated serum levels of liver transaminase enzyme for three months underwent an F-18 FDG PET/CT scan to evaluate a cause of the hepatosplenomegaly found on abdominal ultrasonography. Initial PET/CT revealed markedly enlarged liver and spleen with intense FDG uptake. Otherwise, there were no areas of abnormal FDG uptake in whole body image. Histological evaluation by a hepatic needle biopsy demonstrated diffuse large B cell type lymphoma and final diagnosis for this patient was hepatosplenic B-cell lymphoma. She received five cycles of CHOP chemotherapy, and second PET/CT scan was followed after then. Follow-up PET-CT revealed normal sized liver with disappearance of abnormal FDG uptake. Hepatosplenic B-cell lymphoma is relatively rare and mostly presents as single or multiple nodules.<sup>1,2</sup> Diffuse type hepatosplenic lymphoma is extremely rare and poorly recognized entity.<sup>3</sup> The diagnosis is very difficult and complicated by the presence of misleading symptoms.<sup>4</sup> In this rare hepatosplenic B-cell lymphoma case, F-18 FDG PET/CT scan provided a initial diagnostic clue of hepatosplenic lymphoma and an accurate chemotherapy response.(Nucl Med Mol Imaging 2008;42(4):333-336)

**Key Words:** Hepatosplenic B-cell lymphoma, F-18 FDG PET/CT

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**Figure 1.** (A) F-18 FDG PET/CT was performed 40 minutes after intravenous injection of 15 mCi (555 MBq) of F-18 FDG. F-18 FDG PET/CT scan revealed marked hepatosplenomegaly with intense tracer uptake shown in transverse and coronal images. (B) Follow-up F-18 FDG PET/CT after five cycle of CHOP chemotherapy demonstrated normal looking liver with disappearance of abnormally increased uptake. Chemotherapeutic response was assessed by a follow-up F-18 FDG PET/CT.



**Figure 2.** Immunochemical stain shows positive reactivity for CD20( $\times 200$ , image A.) and negative reactivity for CD3( $\times 200$ , image B.) in infiltrating tumor cells in liver. Hematoxylin & Eosin stain shows diffuse infiltration of monotonous medium to large sized atypical lymphocytes in portal areas and sinusoids ( $\times 400$ , Image C). These pathologic findings reveal diffuse large B cell lymphoma.

## Reference

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