European Respiratory Society Annual Congress 2013

Abstract Number: 4774

Publication Number: P2895

Abstract Group: 11.1. Lung Cancer

Keyword 1: Lung cancer / Oncology Keyword 2: No keyword Keyword 3: No keyword

Title: Impact of PET scan on staging and management of lung cancer patients in Indian scenario

Dr. Kinjal 33956 Modi drkinjalmodi@gmail.com MD and Prof. Dr Jyotsna 33957 Joshi drjoshijm@gmail.com MD . ¹ Department of Pulmonary Medicine, TN Medical College & BYL Nair Hospital, Mumbai, Maharashtra, India, 400008 .

Body: Introduction: To see how this new modality changes management of lung cancer patients. Aim: To observe the effect of PET scan on staging and treatment of lung cancer patients over CT scan. Method: In our prospective study(2007-09),57 patients diagnosed as lung cancer based on histopathology were classified as small cell carcinoma (SCC) or non- small cell carcinoma (NSCC). NSCC patients were staged by revised TNM staging (I to IV) and SCC ones as limited and extensive with CT scan of thorax/abdomen/brain & PET scan. Patients were advised surgery, chemotherapy, radiotherapy or palliative care based on the stage. Results: 22 patients agreed for PET scan due to its high cost. Cancer stage changed in 11(50%) patients. 9(82%) patients were already non operable (IV & IIIB) in the unchanged group.

Effect of PET scan on cancer stage

Type of cancer	Stage before PET scan	Stage NOT changed with PET scan	Stage changed with PET scan
		No. of patients	No. of patients
NSCC	IA	0	1
	IB	1	0
	IIA	0	2
	IIB	1	2
	IIIA	0	4
	IIIB	1	0
	IV	8	0
SCC	Limited	0	1
	Extensive	0	1
Total no. of patients		11	11

Treatment modality changed in 8(36%)patients with 7 becoming non operable.

Change in stage and treatment of lung cancer with PET scan

Type of cancer	Stage before PET scan	Stage after PET scan	Need to change treatment modality
NSCC	IA	IIA	No
	IIA	IIIA	No
	IIA	IIIB	YES
	IIB	IIIA	No
	IIB	IV	YES
	IIIA	IV	YES
SCC	Limited	Extensive	YES
	Extensive	Limited	YES

Conclusion: PET scan should be used as a screening tool prior to surgery for apparently operable cases as the benefit will be lost if metastasis pre-exists with discretion in developing nations due to cost factor. drkinjalmodi@gmail.com.