Role of Nuclear medicine in breast cancer

Whole Body Bone Scan in Metastatic Disease:

Bone metastases are present in 80% of four women metastatic disease that highlights breast speculation cancer cells to metabolize bone marrow. Once a bone metastases found, average survival is between 2.1 and 6 years. Additionally, patients may experience a deterioration of their quality of life from related complications of metastatic disease. As a result, the first stage and the standard follow-up test recovery is important in improving quality of life as well survival. WB scan is a less expensive testing and not importing that accurate measurement of disease burden is recommended and follow-up tests with symptoms or high risk patients.

WB bone scanning using plan, SPECT, and / or SPECT / CT is the first powerful tool for stage and response therapy. WB bone scintigraphy uses bone that seeks out radiopharmaceuticals found in the genital area increased perfusion and bone changes feature bone metastases making it a very sensitive tool finding mixed osteoblastic and lytic / sclerotic lesions. Adding data for different components from SPECT has shown to detect more than planar lesions as well improve clarity especially on the axial skeleton there wound healing is difficult to discriminate against or otherwise degenerative absorption. In addition, integration hybrid SPECT / CT data can better diagnose abnormalities tracer detection in benign skeletal pathology as degenerative changes or cysts. Registered data and can confirm lytic ulcers, which if repaired the process that is done will appear cold in the edited images and thus it has been difficult to see. The study of Igbal et al. received an improvement in 6.1% to 78.8% on an assessment of the accuracy of vertebral separation metastases when adding SPECT / CT data to the planar. the predictable number of jointly registered SPECT / CT can be identified results from a recent survey of 33.8% and increased by 2.1% of breast cancer patients there compared to planar and SPECT bone scan. Systemic testing (chemotherapy or hormone therapy) or a local (radiotherapy) treatment response is local where nuclear drugs can thrive. WB bone scanning provides pre-existing and other information as it stands indicates the body's response to treatment intervention also generally provides a better predictable value

there is an anatomical response. In some cases, bone Scintigraphy may highlight the osteoblastic bone reaction commonly referred to as the bone flare phenomenon which is characterized by an increase in radiotracer detection as a result of extended treatment of osteoblastic activity showing cooling bone. Flare appears in WB bone scan as an exaggerated appearance of the disease or representing a healing or previously invisible bone ulcers. In both cases, the appearance of the flare response to bone scintigraphy may provide important information prognostic information indicating healing or the progression of the disease.