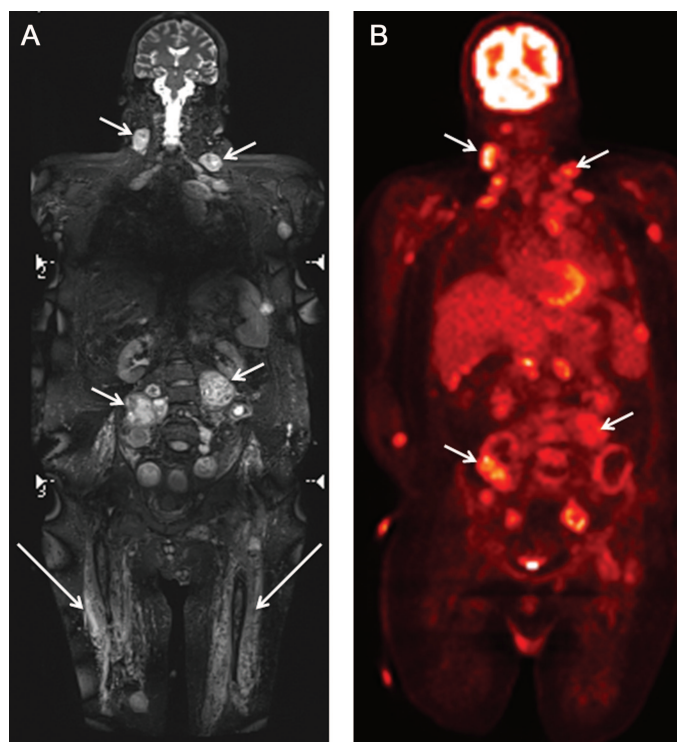


# Whole-body imaging in schwannomatosis

**Figure**     **Imaging**



Coronal whole-body MRI (A) showing numerous mass lesions (short arrows) in a patient with schwannomatosis. FDG-PET (B) also shows the lesions, but MRI better depicts anatomy and displays lesions of any etiology regardless of FDG avidity. Muscle denervation (large arrows) is seen as edema-like T2 hyperintensity without perifascial edema on MRI.

A 23-year-old man with schwannomatosis<sup>1</sup> was imaged with whole-body MRI and <sup>18</sup>F FDG-PET to assess the extent of disease prior to initiating systemic therapy for new and growing tumors. The patient had undergone multiple prior resections of schwannomas from peripheral nerves. He had ongoing pain, diffuse dysesthesias, and bilateral upper extremity weakness. Assessment of disease burden was similar on both modalities (small arrows). MRI (figure, A) has superior demonstration of tumor localization and muscle denervation changes (large arrows) due to better contrast and spatial resolution than FDG-PET (figure, B).<sup>2</sup> FDG-PET demonstrated avid uptake in these benign lesions.

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