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## <sup>18</sup>F-FDG PET/CT半定量分析诊断颈部淋巴结转移癌的价值

### Diagnostic value of <sup>18</sup>F-FDG PET/CT semi-quantitative analysis for cervical lymph node metastases

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中文关键词: [淋巴结](#) [肿瘤转移](#) [<sup>18</sup>F 氟脱氧葡萄糖](#) [正电子发射型体层摄影术](#) [体层摄影术](#),[X线计算机](#)

英文关键词: [Lymph nodes](#) [Neoplasm metastasis](#) [Fluorodeoxyglucose F18](#) [Positron-emission tomography](#) [Tomography, X-ray computed](#)

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中文摘要:

目的 探讨<sup>18</sup>F-FDG PET/CT诊断颈部淋巴结转移癌的价值。方法 回顾性分析48例颈部淋巴结肿大患者的CT、PET及PET/CT图像,在CT图像上分别以淋巴结最短径>0.5 cm(A标准)短径>1.0 cm(B标准)及最长径>1.0 cm(C标准)为判定淋巴结转移的诊断标准;在PET图像上,以淋巴结出现异常<sup>18</sup>F-FDG摄取浓聚灶最大标准化摄取值(SUV<sub>max</sub>)>2.5(D标准),SUV<sub>max</sub>>1.93(E标准)、T<sub>SUVmax</sub>/N<sub>SUVmax</sub>>3.11(F标准)为判定淋巴结转移的诊断标准;在PET/CT图像上,将结合CT图像A标准及PET图像E标准确定的G标准为判定以淋巴结转移的诊断标准。以病理诊断为准,比较不同影像标准在颈部淋巴结转移中的诊断价值。结果 颈部阳性淋巴结与阴性淋巴结在最长径、最短径、SUV<sub>max</sub>值之间的差异均有统计学意义。7种标准中,PET(E标准)及PET/CT(G标准)具有较高的诊断准确率与病理吻合度,与单纯CT比较具有较高诊断价值。不同PET及PET/CT诊断标准差异无统计学意义。结论 <sup>18</sup>F-FDG PET/CT对颈部淋巴结转移的诊断具有较临床价值。

英文摘要:

**Objective** To explore the diagnostic value of <sup>18</sup>F-FDG PET/CT semi-quantitative analysis for cervical lymph node metastases. **Methods** Forty-eight patients with cervical lymphadenectasis examined with <sup>18</sup>F-FDG PET/CT were enrolled, their CT, PET and combined PET/CT images were analyzed retrospectively. As for CT images, if the shortest diameter of lymph node was longer than 0.5 cm (criterion A), 1.0 cm (criterion B), and the longest diameter of lymph node was longer than 1.0 cm (criterion C), these lymph nodes were diagnosed as metastatic ones. As to PET images, when the maximum standardized uptake value (SUV<sub>max</sub>) of the lymph nodes which appeared abnormal <sup>18</sup>F-FDG radioactive uptake was more than 2.5 (criterion D), 1.93 (criterion E) and T<sub>SUVmax</sub>/N<sub>SUVmax</sub> of lymph nodes was more than 3.11 (criterion F), these lymph nodes were considered as metastatic ones. For combined PET/CT images, criterion G compositing criterion A of CT images and criterion E of PET images was a standard of diagnosing metastatic lymph nodes. All results were compared with histopathologic findings. The diagnostic value of these criterions of cervical lymph node metastases was compared. **Results** The longest diameter, the shortest diameter, SUV<sub>max</sub> of positive cervical lymph nodes and negative cervical lymph nodes were statistically different between lymph node metastases and lymph nodes without metastases. Criterion E of PET images and criterion G of PET/CT images which had higher accuracy and degree of coincidence with histopathologic results as well as good diagnostic value compared with CT images in detecting cervical lymph node metastases. PET standards and PET/CT standard had no statistical difference. **Conclusion** <sup>18</sup>F-FDG PET/CT has good clinical value in diagnosing cervical lymph node metastases.

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