



## **Dear Sirs and Madams,**

It is nice to introduce the second issue in 2014 of *Nuclear Medicine Review*. The Iranian authors open the chapter *Original articles* with the paper "Lymphatic mapping and sentinel node biopsy in endometrial cancer — a feasibility study using cervical injection of radiotracer and blue dye". They showed that lymphatic mapping and sentinel node biopsy is feasible and accurate in endometrial cancer patients using combination of these methods. Frozen section accuracy was lower which underscores the importance of expert pathologists for sentinel lymph node mapping technique.

The second article titled "New advances in assessment of the individual renal function in chronic unilateral renal obstruction using functional CT compared to "99mTc-DTPA renal scan" from Egypt indicates that CT scan can be used as an integrated modality to assess the functional and morphological status of unilateral chronic renal obstruction, however "99mTC-DTPA renal scan is a safe choice with less radiation exposure.

Based on the next article from Great Britain titled "Automated quantification with BRASS reduces equivocal reporting of DaTSCAN (123I-FP-CIT) SPECT studies", it appears that automated quantification of DaTSCAN studies with BRASS and the use of numerical limits can decrease the number of equivocal reports without affecting report accuracy.

"Comparison between 99mTc-sestamibi gated myocardial perfusion SPECT and echocardiography in assessment of left ventricular volumes and ejection fraction — effect of perfusion defect and small heart" is the title of the next original paper from Iran. The authors concluded that there was good agreement between EDV, ESV and LVEF derived from GSPECT and ECHO. There was a significant difference between two modalities in small hearts and in patients without perfusion defect, although in larger ventricles or in the presence of myocardial infarction no remarkable difference between two modalities was noticed.

The fifth article in this chapter concerns "Cardiac sympathetic hyperactivity in chronic kidney disease — a comparison between haemodialysis and peritoneal dialysis patients" by Polish authors. They noticed that there was no significant influence of the applied method of the renal replacement therapy on global activity of cardiac sympathetic nervous system assessed by the semi-quantitative analysis of <sup>123</sup>I-MIBG myocardial uptake. Italian and Polish authors in

a paper titled "Effect of furosemide administration before F-18 fluorodeoxyglucose positron emission tomography/computed tomography on urine radioactivity and detection of uterine cervical cancer" concluded that furosemide premedication before FDG PET/CT scanning may enable improved evaluation of activity and extension of cervical cancer. This chapter finishes with an article "The role of 18F-Fluorodeoxyglucose Positron Emission Tomography in patients with suspected recurrence or metastatic differentiated thyroid carcinoma with elevated serum thyroglobulin and negative I-131 whole body scan" by Polish investigators. They proved that 18F-FDG PET/CT is useful in the diagnosis of radioiodine avid DTC in patients with high levels of stimulated Tg and the sensitivity of 18F-FDG PET/CT increases with stimulated Tg levels. At stimulated Tg > 28.5 ng/ml, the sensitivity of the study reaches 100%.

In the recent issue of Nuclear Medicine Review there are six very interesting clinical cases discussed: "FDG-PET positive pilomatrixoma: reconsidering multicentricity in Langerhans cell histiocytosis" from Czech Republic, the next two from Bulgaria: "Cervix carcinoma and incidental findings of medullary thyroid carcinoma by 18F-FDG PET/CT" and "Impact of single photon emission tomography combined with computed tomography (SPECT/CT) in pulmonary examinations — short review with two case reports". Authors from India presented a patient with multiple hepatic lesions in a case of isolated hepatic tuberculosis simulating metastases on 18F-FDG PET/CT imaging. The next two clinical cases are from Poland: "Radioguided surgery in patient with pancreatic neureoendocrine tumour followed by PET/CT scan as a new approach of complete resection evaluation" and "Complex Regional Pain Syndrome type I with atypical scintigraphic pattern — diagnosis and evaluation of the entity with three phase bone scintigraphy".

The chapter *Past Events* includes relations from the very successful XIV International Congress of The Polish Society of Nuclear Medicine which took place in Lublin 28–30 of May 2014 written by: Prof. Beata Chrapko, Rafał Czepczyński (see interesting highlights!) and Your Editor. During that congress, the editors of *Nuclear Medicine Review* (NMR) and the President of the Polish Society of Nuclear Medicine started a new initiative: a dedicated scientific session with the prizes for the best paper, best abstract and most cited paper published in the NMR. You will find more inside this issue.

Grzegorz Kamiński

G. Kallinisla

Editor-in-Chief Nuclear Medicine Review

www.nmr.viamedica.pl 53