Interesting images

Alveolar soft part sarcoma presenting metastatic hypermetabolic cervical lymph nodes on FDG PET/CT

Sarcoma alveolar de partes blandas con presentación de metástasis hipermetabólicas en ganglios linfáticos cervicales en la FDG PET/TAC

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A R T I C L E   I N F O

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Alveolar soft part sarcoma is a rare malignant soft tissue sarcoma which accounts for less than 1% of all sarcomas. The tumor generally affects lower extremities in adults and head and neck in children. Because of confusing clinical and histopathological findings and its rarity, it is misdiagnosed in many cases. We presented the case of a 30-year-old male who had a diagnosis of alveolar soft part sarcoma from histological analysis of cervical lymph nodes. FDG PET/CT demonstrated hypermetabolic cervical lymph nodes, without any other hypermetabolic lesion suggesting primary tumor. The patient underwent right radical neck dissection. Twenty-seven of 34 lymph nodes had alveolar soft part sarcoma metastases, and the remaining lymph nodes were reactive.

FDG PET/CT is helpful for staging, monitoring therapy response, detecting recurrences of sarcomas. Alveolar soft part sarcoma is

Fig. 1. (A, B) FDG PET/CT maximum intensity projection (MIP) image (A) and axial PET, CT and fusion, and coronal fusion images (B) demonstrate multiple hypermetabolic lymph nodes at the levels of right 2B, 3, 4, 5 and right supraclavicular region, with a diameter of 2 cm and a maximum standardized uptake value (SUVmax) of 6.1 (arrows). No other pathological FDG uptake site is seen on whole-body PET images.

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very rare and there is a little literature about this type of sarcoma and PET/CT. Montgomery et al. reported a case with intensely hypermetabolic right pelvic alveolar soft part sarcoma and pulmonary nodules with slightly increased FDG uptake. In our case, there were multiple hypermetabolic lymph nodes with moderate to intense FDG accumulation in the right cervical and supravacuicular region. A primary site was not detected by PET/CT.

This rare malignancy should be kept in mind in the differential diagnosis of hypermetabolic cervical lymph nodes on FDG PET/CT (Fig. 1).

Conflict of interest

The authors have no conflicts of interest to declare.

References