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## **DUAL TIME FDG PET/CT IN PRONE POSITION AND METABOLIC CORRELATION WITH MOLECULAR SUBTYPES AND PROGNOSTIC FACTORS IN BREAST CANCER**

D. Grigolato<sup>4</sup>, M.G. Giri<sup>2</sup>, M. Meniconi<sup>4</sup>, M. Cucca<sup>4</sup>, E. Manfrin<sup>1</sup>, E. Carmagnani<sup>4</sup>, M. Zuffante<sup>4</sup>, G. Pollini<sup>3</sup>, M. Ferdeghini<sup>4</sup>

<sup>1</sup>Department of Pathology, University Hospital of Verona, Italy

<sup>2</sup>Department of Physics, University Hospital of Verona, Italy

<sup>3</sup>Department of Surgery, University Hospital of Verona, Italy

<sup>4</sup>Nuclear Medicine Unit, University Hospital of Verona, Italy

### **BACKGROUND-AIM**

To evaluate if metabolic information with FDG PET/CT is correlated with molecular phenotypes and biologic prognostic features in breast cancer patients.

### **METHODS**

A prospective study involved 80 women with newly diagnosed breast cancer (cT2- cT3) who performed FDG PET/CT for initial staging. A standard whole body PET/CT scan was acquired (PET1) followed by a delayed prone acquisition of the thorax with a dedicated breast device 2 hours post-injection (PET2). The results were evaluated qualitatively and semiquantitatively in all lesions with SUVmax, respectively SUV1 in PET1 and SUV2 in PET2, the percentage variation between SUV values ( $\otimes$ SUV) was calculated. Hormone receptor status, HER-2 expression and biological prognostic parameters were obtained from primary tumor tissue. Tumor subtypes were classified according to the recommendations of the 12th International Breast Conference by immunohistochemical surrogates as Luminal A (n. 26), Luminal B-HER2 neg (n. 32), Luminal B-HER2 pos (n.10), HER2 pos (n. 6) and Basal Like (n. 6). Statistical analysis of variance (ANOVA), kappa and paired t tests were used to compare variables.

### **RESULTS**

SUV values were lower in LA and LB-HER2 neg (t test < 0,0001), in these phenotypes we mainly registered negative  $\otimes$ SUVs (in 14/15 tumors). Significant statistical differences were noticed between metabolic information (SUV 1, SUV2) and grading (P=0,0039), ki-67 (P=0,0439) and molecular subtypes (P=0,0069) but there was not high correlation between  $\otimes$ SUV, ki-67 and grading (respectively P= 0.1207 and P= 0.7536).

### **CONCLUSION**

FDG uptake and  $\otimes$ SUV are influenced by biological tumor features. There are subgroups of invasive breast lesions, mainly Luminal A subtype, characterized by low glycolytic metabolism and a decrease uptake over time, which could be misinterpreted as benign lesions. The knowledge of all these factors is important for a better interpretation of metabolic results.