Case of the Month—August 2003
Melanoma Recurrence

History
A 75-year-old female presented with a history of Stage III melanoma of the left mid back. Negative for sentinel node biopsy. Staging CT and MRI were negative for metastasis. The patient underwent melanoma resection.

The patient was planning to participate in a clinical trial. Six months following original resection of the melanoma, a PET scan was requested as part of the pre-clinical trial evaluation.

PET Findings
The PET demonstrated focal intense FDG uptake in the right axilla, consistent with malignancy.

Follow-up
The patient underwent right axillary node resection.

Subsequent pathology reports confirmed metastatic melanoma.

How Did PET Help?
The PET study detected unexpected metastasis, changing the patient’s staging and treatment planning. Metastatic disease in the axillary region had not been detected by prior conventional imaging studies.

Discussion
The value of PET in recurrent melanoma was studied by Mijnhout et al. In about 10% of the cases, diagnosis was based solely on PET. PET contributed to a positive change of planned treatment in 40% of patients, and increased confidence in the chosen treatment in another 40% of patients.