PET IMAGING

B. Donati, M. Casali, A. Fama, B. Puccini, et al.

A GENE EXPRESSION-BASED SCORE TO PREDICT INTERIM PET POSITIVITY IN HODGKIN LYMPHOMA PATIENTS TREATED WITH ABVD

Authors Conclusion from the abstract: In HL interim metabolic response measured with PET after 2 ABVD cycles is associated with a genetic signature and can be predicted applying an integrated gene-based model on the diagnostic biopsy.

M. Novo, G.S. Nowakowski, T.M. Habermann, T.E. Witzig, et al.

PERSISTENT MEDIASTINAL POSITRON EMISSION TOMOGRAPHY (PET)-POSITIVITY AFTER FRONTLINE THERAPY FOR HODGKIN LYMPHOMA IS BEST MANAGED BY CLOSE OBSERVATION

Authors Conclusion from the abstract: Within the limitations of this small retrospective cohort, biopsy of post-treatment persistent mediastinal PET-positivity in cHL patients is positive in less than half the cases and DS was relatively unhelpful in selecting patients with potentially refractory disease. We conclude that adopting a "wait-and-see" strategy with a repeat PET scan reassessment 8-12 weeks later increases the likelihood that the subsequent biopsy will be positive without compromising the outcome and may be the preferred approach.

A. Cottereau, L. Vercellino, O. Casasnovas, H. Tilly, et al.

HIGH TOTAL METABOLIC TUMOR VOLUME AT BASELINE ALLOWS TO DISCRIMINATE FOR SURVIVAL PATIENTS IN RESPONSE AFTER R-CHOP: AN ANCILLARY ANALYSIS OF THE REMARC STUDY

Authors Conclusion from the abstract: TMTV measured on baseline PET/CT is the strongest

prognosticator of outcome in DLBCL, even in patients in responding after R-CHOP. High TMTV at baseline was significantly associated with inferior PFS and OS in patients receiving either PBO or LEN.

M. Trněný, I. Canales Ruiz, M. Martell, L.H. Sehn, et al.

[BASELINE TOTAL METABOLIC TUMOUR VOLUME IS HIGHLY PROGNOSTIC FOR REFRACTORINESS TO IMMUNOCHEMOTHERAPY IN DLBCL: AN ANALYSIS OF THE PHASE 3 GOYA TRIAL](#)

Authors Conclusion from the abstract: TMTV was the only independent prognostic factor for primary refractoriness in previously untreated pts with DLBCL, suggesting that responsiveness to immunochemotherapy is associated with tumour burden. Considering TMTV as a prognostic factor may assist in the identification of high-risk pts who may benefit from an alternative therapeutic strategy.

S. Chauvie, F. Dalmasso, L. Pierce, U. Vitolo, et al.

[RADIOMICS INCREASE THE PROGNOSTIC VALUE OF CLINICAL AND PET RISK FACTORS IN DLBCL: RESULTS FROM THE PHASE 3 GOYA STUDY](#)

Authors Conclusion from the abstract: A prediction model based on quantitative image texture analysis by radiomics signatures increased the prognostic value of risk prediction of DLBCL patients at baseline. Further analyses with different algorithms are underway to improve the predictive value of radiomics and to develop an effective nomogram to stratify DLBCL pts by risk prior to first-line treatment.

P. Strati, M. Ahmed, N. Fowler, F. Hagemeister, et al.

[PROGNOSTIC VALUE OF PRE-TREATMENT PET SCAN IN PATIENTS WITH FOLLICULAR LYMPHOMA RECEIVING FRONTLINE THERAPY](#)

Authors Conclusion from the abstract: In conclusion, pre-treatment SUV_{max} has prognostic value in patients with advanced stage FL receiving rituximab-based therapies, as it may suggest undiagnosed transformation and/or a more aggressive biology. Evaluation in prospective studies is needed to further confirm these findings.