

陈耀庭,许林锋,孙宏亮.介入治疗后CT表现不典型的肝癌残留和复发病灶的早期诊断[J].中国医学影像技术,2012,28(5):948-952

介入治疗后CT表现不典型的肝癌残留和复发病灶的早期诊断

Early diagnosis of residual and recurrent tumor of hepatocellular carcinoma with atypical CT features after interventional therapies

投稿时间: 2011-10-09 最后修改时间: 2011-12-16

DOI:

中文关键词: [癌,肝细胞](#) [体层摄影术,X线计算机](#) [放射学,介入性](#) [诊断显像](#)

英文关键词: [Carcinoma, hepatocellular](#) [Tomography, X-ray computed](#) [Radiology, interventional](#) [Diagnostic imaging](#)

基金项目:

作者	单位	E-mail
陈耀庭	中山大学孙逸仙纪念医院介入放射科, 广东 广州 510120	
许林锋	中山大学孙逸仙纪念医院介入放射科, 广东 广州 510120	xulf1@21cn.com
孙宏亮	中山大学孙逸仙纪念医院介入放射科, 广东 广州 510120	

摘要点击次数: 444

全文下载次数: 127

中文摘要:

目的 探讨MRI、PET/CT早期诊断肝细胞癌(HCC)介入治疗后CT表现不典型的残留及复发病灶的价值。方法 回顾性分析19例接受介入治疗的HCC患者的资料,术后定期复查发现蛋白(AFP)升高,螺旋CT三期增强扫描呈不典型表现,经MR和(或)PET/CT检查发现HCC残留和复发病灶。对所有病灶均获得病理结果。比较治疗前、后的AFP。结果 对19例HCC患者R检查25例次,发现31个结节;PET/CT检查14例次,发现17个结节,MRI、PET/CT联合检查共发现35个结节;诊断HCC残留和复发病灶31个,直径0.90~2.50 cm,平均(1.50±0.32)cm。介入治疗4周,AFP明显降低,与治疗前相比差异均有统计学意义(P 均<0.05)。MRI、PET/CT诊断肝内残留和复发病灶的敏感度分别为87.10%(27/31)、89.47%(17/19),MRI联合PET/CT的诊断敏感度0%(31/31)。结论 MRI、PET/CT均能较好地早期诊断HCC患者介入治疗后CT表现不典型的残留及复发病灶;MRI联合PET/CT能进一步提高早期诊断率,减少假阴性和假阳性。

英文摘要:

Objective To investigate the optimal strategies for early diagnosis of residual and recurrent tumor of hepatocellular carcinoma (HCC) with atypical CT features after interventional therapies. **Met** Nineteen patients with HCC after interventional therapies were enrolled. The alpha-fetoprotein (AFP) level of all the patients rose during regular postoperative following-up. Triple-phase spiral CT s did not detect any intrahepatic lesions due to atypical CT features of HCC, while abdominal MRI and/or PET/CT were performed and residual or recurrent lesions were found. All the lesions were confirmed pathologically and received interventional therapies according to MRI and/or PET/CT findings. The pre- and post-treatment AFP levels were compared. **Results** Thirty-one nodules were f in 25 procedures in 19 patients with MRI and 17 in 14 procedures with PET/CT. Thirty-one residual or recurrent lesions of HCC were diagnosed by MRI and PET/CT. The diameters of these lesion ranged from 0.90 cm to 2.50 cm (mean cm). All the lesions received interventional therapies, and postoperative following-up showed that AFP level decreased obviously compared with pre-treatment $P<0.05$. The sensitivity of MRI, PET/CT and MRI combined with PET/CT in early diagnosis of residual or recurrent lesions of HCC was 87.10% (27/31), 89.47% (17/19) and 100% (31/31), respec **Conclusion** Both MRI and PET/CT are useful for early detection of residual and recurrent tumor of HCC with atypical CT features after interventional therapies. MRI combined with PET/CT can r better sensitivity of early diagnosis and reduce false positive and false negative.

[查看全文](#) [查看/发表评论](#) [下载PDF阅读器](#)