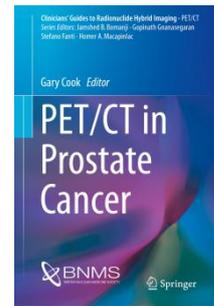


PET/CT in Prostate Cancer

Author(s): Cook
Publisher: Springer
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ISBN: 978-3-319-57623-7
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This 76-page volume on PETCT in prostate cancer gives a high level overview of the various PET tracers in clinical use for the imaging of prostate cancer. The text is clear, concise and easy to understand. Images are of high quality and lend support to the text to illustrate key learning points. The learning points of each chapter are summarised in a table at the end of each chapter for even more rapid digestion.

The book is divided into six chapters. The first four chapters are dedicated to overview of the background of prostate cancer – epidemiology, pathology, management options and non-PETCT imaging, while the last two chapters are focused on choline and PSMA respectively.

Although it is commendable and indeed necessary to expend some effort to review the background of prostate cancer, almost two-thirds of the book is taken up by this general review, leaving only one third of the content to address the title of the book. Moreover, the content of the general background overview is just that – general. The authors have included brief information on current guidelines, histological grading and general staging and management options. However, this does not go into any specific detail on how prostate cancer physiology relates to its variable avidity to different tracers; how various imaging findings affect management findings; or the dilemma of imaging bone-only disease, particularly in terms of flare phenomenon post-treatment.

Chapter five reviews the evidence and performance of choline in the various clinical applications from diagnosis, staging, radiotherapy planning, to response assessment, detection of recurrence disease and prognostication. It is well-structured and well-written. Readers are furnished with the knowledge of the appropriate use of choline and its limitations.

Chapter six is written by one of the lead developers of PSMA as a PET tracer. It reviews the evidence on the use of PSMA compared to choline and MRI, as well as the potential of using PSMA as a theranostic agent. As in other sections in the book, it is very clear and concise, presenting the early evidence of the superiority of PSMA over other existing PET agents. However, there is no mention of the various pitfalls, known causes of false positives and false negatives, or best practice in the use of this relatively new PET tracer, which is somewhat disappointing.

Overall, this book gives a useful overview of the state of PETCT imaging in prostate cancer. It can be readily consumed in one afternoon and fits well in the series titled Clinician's Guides to Radionuclide Hybrid Imaging.

***This book can be purchased through the RAD Magazine Book Service at the discounted rate of £48.12. (Price correct as at June 20, 2018).
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