



Austin Radiological Association
BRAIN METABOLISM STUDY
(F-18-Fluorodeoxyglucose)

Overview

- The Brain Metabolism Study with F-18-fluorodeoxyglucose depicts the distribution of glucose metabolism in the brain in a tomographic fashion. The sole energy source of the brain is glucose, and the gray matter uses three to four times as much glucose on a per volume basis as the white matter.

Indications

- Differential diagnosis of dementia, and particularly Alzheimer’s disease.
- Preoperative lateralization of temporal lobe seizure foci.
- Detection of viable brain tumor post-surgery and/or radiation therapy.

Medicare PET Reimbursement Guidelines:

| Indication | CPT | Coverage Guidelines |
|---------------------|------------|---|
| Refractory Seizures | 78608 | Presurgical evaluation to localize seizure focus of refractory seizure activity. |
| Alzheimer’s | 78608 | Differential diagnosis of fronto-temporal dementia (FTD) and Alzheimer’s disease (AD) under specific requirements (please refer to separate coverage criteria guide for AD) |
| Brain Tumor | 78608 | |

NOTE:

Private payer coverage for PET often reflects that of Medicare but may vary. Providers should obtain coverage and pre-authorization guidelines for PET from their private payers.

Examination Time

- Allow approximately 1.5 hours for the entire PET/CT brain study.
- Prior to Scan: Allow 30minutes for interview, IV, BGL, followed by 30 - 45 minute uptake post injection.
- Image acquisition:

1. 78608 (Brain metabolism)
 - a. 10 minutes on Siemens scanner / 8 - 25 minutes on GE scanner

Patient Preparation

- Prior to arriving for the study:
 - > NPO for 6 hours.
 - > No nicotine or caffeine for 12 hours.
- Patient to remain on any anti-seizure medications.
- Recent interventions, i.e. surgery, radiation therapy, biopsy, and chemotherapy:
 1. Record any interventions during the last 3 months (see clinical history sheet at the end of this section).
 2. Preferably, there should have been no interventions within the last 1-2 months.
 3. Record any head trauma.
 4. Record date of last seizure (if applicable).
- Place the patient in a dimly lit, quiet room. Provide the patient with an eye mask and ear plugs prior to injection.
- Check the blood glucose level.
 - Fasting blood sugar should be obtained on all patients. PET scan preferred blood sugar ≤ 200 mg/dl.
 - Normal range 70-110 mg/dl.
 - If blood sugar is low (i.e. < 50 mg/dl) consult the radiologist.
 - If the blood glucose is between 200 mg/dl and 225 mg/dl, try oral hydration and walking the patient to lower the blood sugar.
 - If the BGL is between 225 mg/dl and 250 mg/dl, consult the radiologist.
 - If the BGL is over 250 mg/dl, cancel the exam.
- Sedation may be needed for claustrophobia. Alprazolam (Xanax) at 1 mg is commonly used to treat panic disorders including claustrophobia. Sedation for brain studies must be given approximately 30 minutes post injection to prevent interference with distribution.

Equipment & Energy Windows

- Imaging system:
 - Siemens Biograph Horizon 16 PET-CT scanner.
 - United Imaging uMI 550
- Collimators:
 - 3D mode (septa out or absent) (*Siemens Biograph 16 only has 3D function*)

- 3D mode for United Imaging uMI 550
- Energy windows (may vary with manufacturer and machine design): 30% window centered at 511 keV.

Radiopharmaceutical, Dose, & Technique of Administration

- Radiopharmaceutical: F-18-fluorodeoxyglucose.
- Dosing:

| | | |
|---------------|-----------------------|------------------|
| | <u>Siemens</u> | <u>GE</u> |
| Average Adult | 7 mCi (259 MBq) | 10mCi (370MBq) |

Pediatric Patients – use North American Consensus Guidelines for Administered Radiopharmaceuticals in Children or Adolescents.

ARA RAM licensure allows +/- 20% dose variance.

- Technique of administration: Standard intravenous injection or through an existing intravenous line.

Patient Positioning & Imaging Field

- Patient position: Supine.
- Restrain the head: Position the patient’s head in the standard head holder.
- Imaging field of view: Cranium.

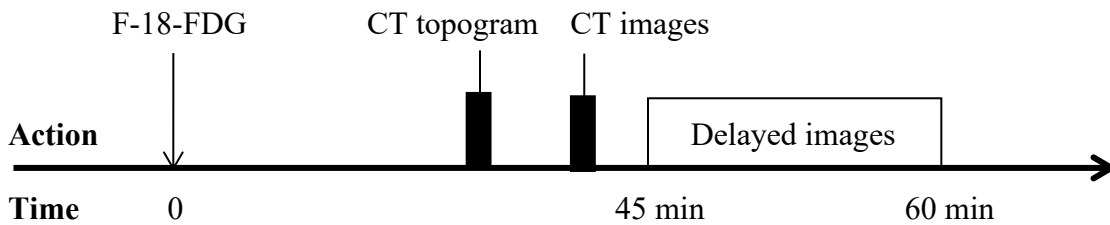
Acquisition Protocol

- Have the patient empty his/her bladder before image acquisition.
- Begin image acquisition approximately 45 minutes following injection of F-18-fluorodeoxyglucose.
- Imaging times:
 - Siemens Biograph Horizon 16***
 - Emission data acquisition: 10 minutes.
 - GE Discovery ST***
 - Emission data acquisition: 8 minutes with Dimension upgrade
- Have the patient empty his/her bladder after image acquisition.

CT parameter values vary with patient size and machine specific factors:

1. Milliampere-seconds (mAs) and Kilovolts peak (kVp) guidelines:
 - a) pediatric patient \leq 6 yrs old: 260 eff mAs, 120 kVp.
 - b) pediatric patient $>$ 6 yrs old: 300 eff mAs, 120 kVp.
 - c) average adult: 450 eff mAs, 120 kVp.
2. The care dose is not utilized on Brain studies due to the bone density in the head.

Protocol Summary Diagram



Data Processing

- The PET images are reconstructed using iterative reconstruction. Siemens settings include: matrix 360, 8 iterations, 10 subsets, Gaussian filter, filter FWHM 2.0, zoom 2.0, T.O.F. Settings for the United uMI 550 include: 3D reconstruction, HYPER Iterative, TOF, PSF, 256 matrix, measured attenuation..
- A rotating maximum intensity projection (MIP) display and surface-rendered 3D displays facilitate lesion evaluation.

Optional Maneuvers

- Attenuation correction: May be done with calculated attenuation coefficients rather than measured attenuation coefficients.

Principle Radiation Emission Data - F-18

- Physical half-life = 109.8 minutes.

| Radiation | Mean % per disintegration | Mean energy (keV) |
|-------------|---------------------------|-------------------|
| Positron | 100 | 250 |
| Gamma \pm | 200 | 511 |

Dosimetry - F-18-Fluorodeoxyglucose

| <u>Organ</u> | <u>rads/15 mCi</u> | <u>mGy/555 MBq</u> |
|--------------|--------------------|--------------------|
| Bladder | 2.21 | 22.1 |
| Heart | 0.80 | 8.0 |
| Spleen | 0.80 | 8.0 |
| Kidneys | 0.42 | 4.2 |
| Brain | 0.41 | 4.1 |
| Lungs | 0.39 | 3.9 |
| Liver | 0.38 | 3.8 |
| Testes | 0.35 | 3.5 |
| Ovaries | 0.26 | 2.6 |
| Total body | 0.20 | 2.0 |

Dosimetry - Computed Tomography

- Actual effective doses will depend on the user-specific exam protocols and the specific CT scanner used. It is important that each facility develop appropriate exam protocols and monitor the resultant patient doses for each machine in use.

| <u>Effective dose</u> | <u>rem</u> | <u>mSv</u> |
|-----------------------|------------|------------|
| Diagnostic CT | 0.15 | 1.5 |
| Low dose CT | 0.01 | 0.1 |