

Experience in HL with 5PS

Sally Barrington

 $\bullet \bullet \bullet$

Concordance between 4 European Centres of PET reporting criteria designed for use in multicentre trials in Hodgkin lymphoma

S.F. Barrington, W. Qian, E.J. Somer, A. Franceschetto, B Bagni, E. Brun, H. Almquist, A.Loft, L. Højgaard, M.Federico, A.Gallamini, P.Smith, P.Johnson, J. Radford, M.J.O'Doherty



Baseline & 'interim' PET-CT 50 patients HL scored using 5PS Anonymised saved as DICOM Reported usual workstation Independent & consensus reads





Results

Agreement on Positive (4,5) vs Negative (1,2,3) 44 patients independent read Kappa = 0.85 (95% CI 0.74-0.96) 46 patients consensus read Agreement on Positive (3,4,5) vs Negative (1,2) 41 patients independent read Kappa = 0.79 (95%CI 0.67-0.90) 44 patients consensus read

Disagreement

- Pathological vs physiological or inflammatory uptake in cervical region
- Interpreting axillary uptake in patient scanned with arms down then arms up
- Interpretation of residual hilar uptake

Conclusion

- Very good agreement between 4 European centres using 5 point scale for reporting PET-CT – now 6 Centres
- Reporting criteria are sufficiently robust to be used in a multicentre setting.
- Audit consistency can be maintained.
- The criteria remain robust if the threshold for 'positivity' is changed according to the clinical or research context.



http://www.sthpetcentre.org.uk/

Cf with Horning et al

• All PET-CT in our study

- Double reading at core labs
- More experience in interim PET in Europe
- HL vs DLBCL ?
- Role of therapy?