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## Preface

Oncological imaging has thoroughly changed in the past decade, especially due to the introduction of PET and  $^{18}\text{F}$ FDG. For the first time, technology was challenged to provide evidence of (cost-) effectiveness, and this demand has resulted in many excellent trials. Meanwhile, PET-CT was introduced, and this made the PET technology even more appealing for those who were still getting used to the anatomy-deprived PET images. At the same time, oncological patient care evolved toward a truly multidisciplinary effort, combining the expertise of oncologists, surgeons, radiotherapists, radiologists, nuclear medicine physicians, and pathologists.

The current challenge is to use common language and develop skills at the boundaries of each other's area of expertise. There is more to that than providing accurate scan reports accurately describing the findings of the technology at hand. The communicative competences need to be improved: to communicate scan findings so that the referring specialist receives proper advice from the imager, and that, alternatively, the referring one provides the imager with appropriate clinical details to allow for a proper interpretation, and that the referring specialist is aware of possibilities and limitations of the requested technology. With PET-CT, the first challenge is to properly combine the expertises of nuclear medicine and radiology.

This book aims to help and bridge some of the knowledge gaps in several oncological domains. Chapters are typically written by a referring specialist and an imager so that either discipline can benefit. The focus is clearly on applications with FDG PET, but, where appropriate, other radiopharmaceuticals are covered as well.

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