



## A Rare Plasma Cell Dyscrasia in Paraspinal Muscles Shown by <sup>18</sup>F-FDG PET/CT

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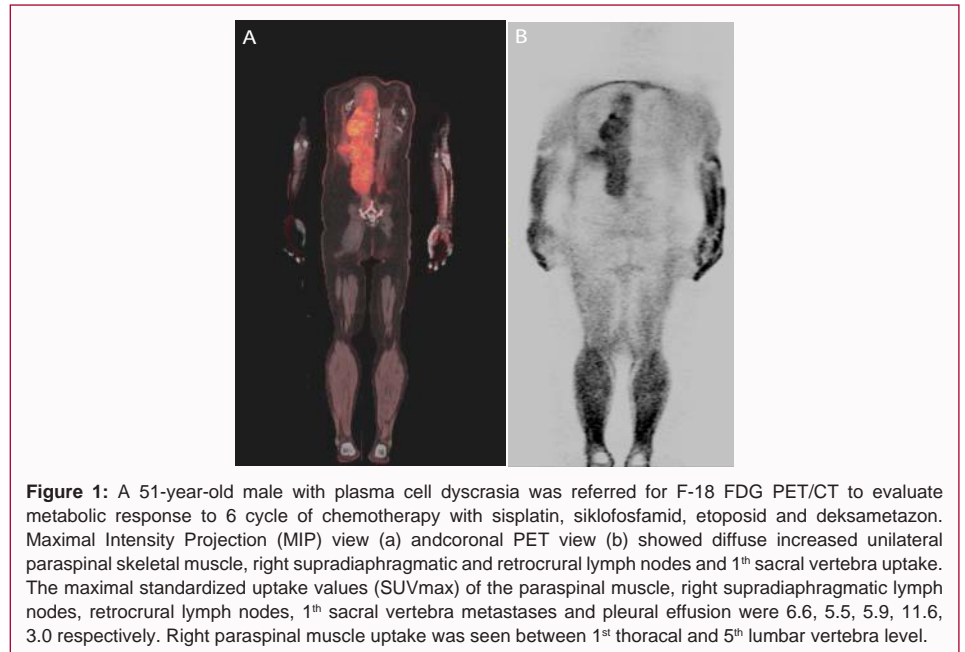
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### Keywords

Plasma cell dyscrasia; <sup>18</sup>F-FDG PET/CT; paraspinal muscle

### Clinical Image

F-18 fluorodeoxyglucose (FDG) PET/CT is a highly influential workup that provides valuable information in plasma cell dyscrasia. In this case, we report 51 years old male with plasma cell dyscrasia, who referred for F-18 FDG PET/CT as part of a reevaluation workup, with diffuse increased paraspinal skeletal muscle uptake. Additionally <sup>18</sup>F - FDG PET/CT disclosed right supradiaphragmatic and retrocrural lymph node and 1<sup>st</sup> sacral vertebra metastases.



**Figure 1:** A 51-year-old male with plasma cell dyscrasia was referred for F-18 FDG PET/CT to evaluate metabolic response to 6 cycle of chemotherapy with cisplatin, cyclophosphamide, etoposid and dexamethasone. Maximal Intensity Projection (MIP) view (a) and coronal PET view (b) showed diffuse increased unilateral paraspinal skeletal muscle, right supradiaphragmatic and retrocrural lymph nodes and 1<sup>st</sup> sacral vertebra uptake. The maximal standardized uptake values (SUVmax) of the paraspinal muscle, right supradiaphragmatic lymph nodes, retrocrural lymph nodes, 1<sup>st</sup> sacral vertebra metastases and pleural effusion were 6.6, 5.5, 5.9, 11.6, 3.0 respectively. Right paraspinal muscle uptake was seen between 1<sup>st</sup> thoracic and 5<sup>th</sup> lumbar vertebra level.

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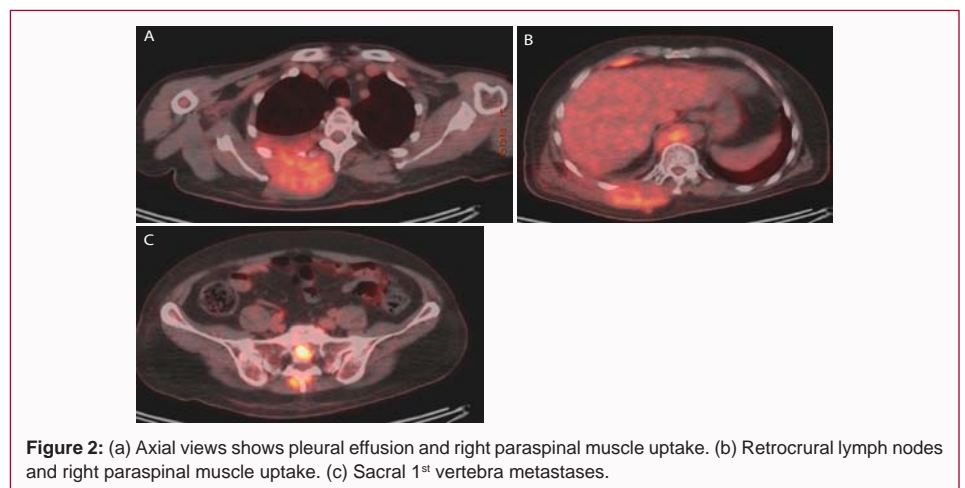
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**Figure 2:** (a) Axial views show pleural effusion and right paraspinal muscle uptake. (b) Retrocrural lymph nodes and right paraspinal muscle uptake. (c) Sacral 1<sup>st</sup> vertebra metastases.