

Fissazione esterna nel trattamento delle emergenze e traumi militari, tecniche di ricostruzione degli arti e trattamento degli esiti postraumatici

ROMA





# Recent progress in bone infection diagnostic imaging

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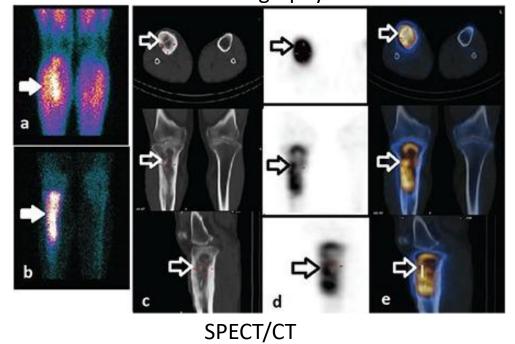




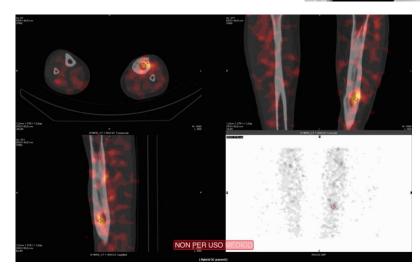


BLOOD POOL 3 h

Bone scintigraphy Courtesy of Nuclear medicine Padua University







Radiolabeled WBC scintigraphy







Radiolabeled WBC scintigraphy







- evaluation of areas of increased glucose metabolism
- larger availability, major patient comfort
- both functional and morphological information
- accuracy similar to WBC scintigraphy
- in presence of metal devices, non-attenuated images to avoid presence of artefacts
- higher accuracy for particular localizations (ei. vertebra)



Courtesy of Dr. A. Kirienko

40 y.o. male Priest from Africa (Tanzania) No comorbility

#### 2014

Motocicle incident, fracture of both bone of the left leg, no other lesions Treated in emergency with external fixation and after with a pate and screws

### **April 2015**

Local persistent infection with fistula; plate and screw removal and antibiotic therapy

#### **November 2015**

More serious pain, fever, swelling, redness

### January 2016 in Italy

MRI: cronic osteomielitis of the left tibia

### Febbruary 2016

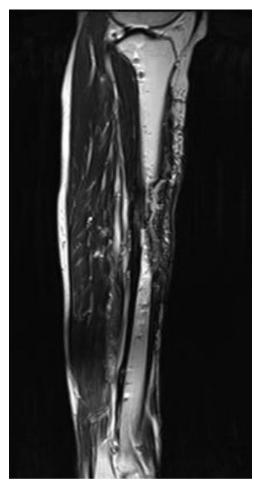
Surgery: osteotomy, debridment, stabilizzation with axial external fixator





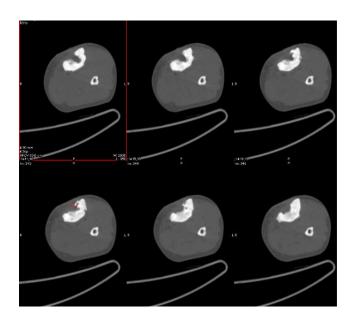




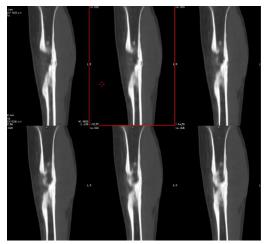






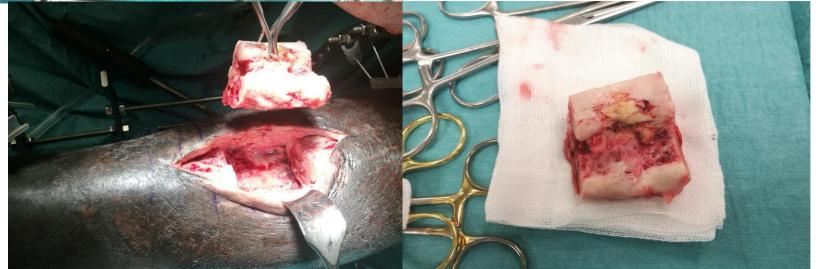


Area of intense focal uptake in the proximal part of the left tibia diaphysis. On CT images cortical interruption, sclerotic reaction, sequestrum.



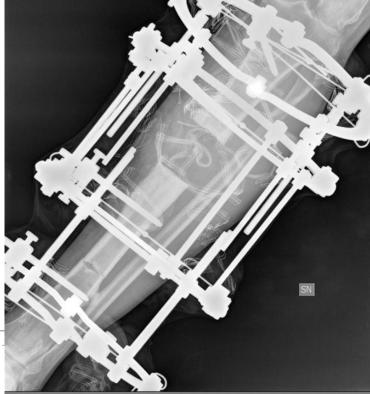














#### MICROBIOLOGIA

Esito

ESAME COLT. FRAMMENTO OSSEO

- 1 Staphylococcus aureus
- 2 Pseudomonas aeruginosa
- 3 Enterococcus faecalis

Nota isolato

Daptomicina MIC= 2 mg/L Per gli isolati classificati come resistenti alla gentamicina di alto livello (HLGR), non è possibile ottenere sinergismo di tutti gli aminoglicosidi (eccetto streptomicina e arbekacina) con beta-lattamici o glicopeptidi.

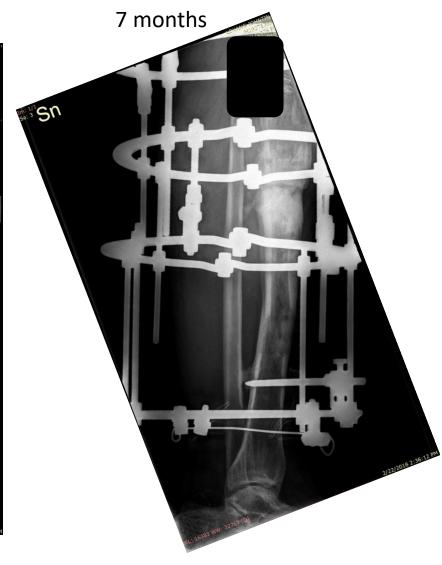
**Positivo** 























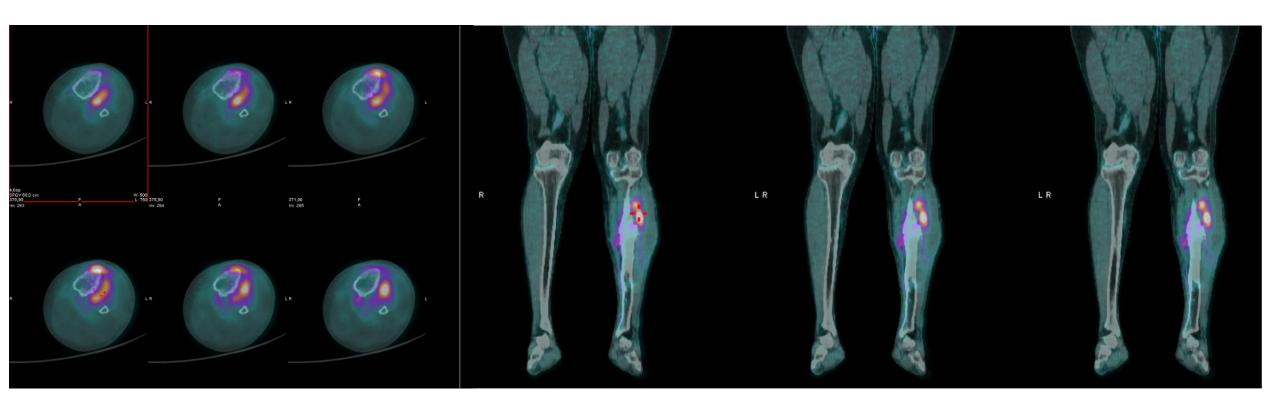




23.04.2018









30.08.2018



24.07.2019



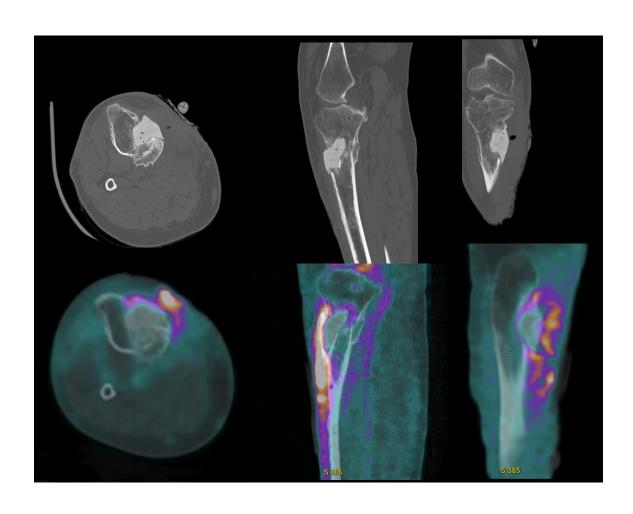


16.05.2019.









Car incidence 08/2023, after 14 months plate and screws were removed, after a short period od time development of fistula, surgical debredment;

Now again the fistula is open.



# 16-17 MAGGIO 2025

## <sup>18</sup>F-FDG PET/CT

#### Visual analysis

PET

CT



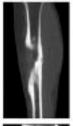
 i) Asymmetrical [<sup>18</sup>F]FDG uptake in the non-union region, compared to the contralateral area



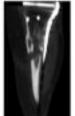
 ii) Distinguished areas of focal [18F]FDG uptake involving bone fragments of the non-union



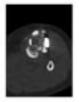
iii) Increased diffuse uptake along the bonemetallic devices or bonebone or bone-graft surfaces.



 a) Sclerotic and rounded bone profiles with an important interfragmentarial gap (calus fracture sign)

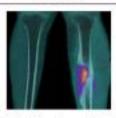


 b) Absence of trabecular bone structure, increased intramedullary density, with eventual presence of Brodie abscess or sequestrations



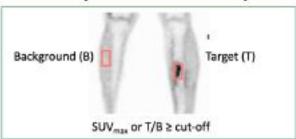
 c) Increase of the soft tissue density, tumefaction, periosteal effusions, eventual presence of fistula





At least one PET (i-iii) and one CT (a-c) criteria for positivity or consensus in discordant cases

#### Semi-quantitative analysis



#### Visual plus semi-quantitative analysis

Presence of at least one PET and one CT criteria or consensus in discordant cases

and

SUV<sub>max</sub> ≥ or T/B ≥ cut-off

European Journal of Nuclear Medidne and Molecular Imaging (2019) 46:1605–1615

#### ORIGINAL APTICLE



[18F]FDG PET/CT in non-union: improving the diagnostic performances by using both PET and CT criteria

Martina Sollini <sup>1</sup> - Nicoletta Trenti <sup>2</sup> - Emiliano Malagoli <sup>3</sup> - Marco Catalano <sup>4</sup> - Lorenzo Di Mento <sup>3</sup> - Alexander Kirienko <sup>3</sup> -Marco Berlusconi <sup>3</sup> - Arturo Chiti <sup>1,5</sup> - Lidija Antunovic <sup>5</sup>0



Metric	visPET	visCT	visPET/ CT	SUV <sub>max</sub> ≥5.92	T/ B≥2.74	visPET/ CT+SUV <sub>max</sub> ≥5.92	visPET/ CT + T/B ratio≥2.7
Sensitivity	92%	88%	92%	60%	88%	41%	80%
Specificity	64%	55%	68%	86%	55%	80%	77%
PPV	74%	69%	77%	83%	69%	81%	80%
NPV	88%	80%	88%	66%	80%	39%	77%
Accuracy	79%	72%	81%	72%	72%	55%	79%
LR+	2.53	1.94	2.89	4.40	1.94	2.03	3.52
LR-	0.13	0.22	0.12	0.46	0.22	0.74	0.26
Post-test proba- bility	74%	69%	77%	83%	69%	81%	80%
Post-test odds	2.88	2.20	3.29	5.00	2.25	433	4.00



## Comparison of different diagnostic modalities

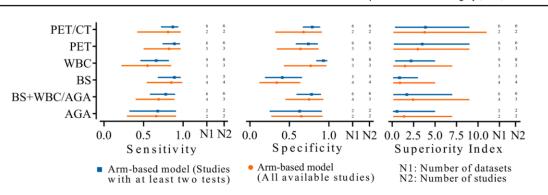
lmaging modality	Advantages	Disadvantages	Comments
СТ	Good indicator of bone changes and fracture consolidation	Lower soft tissue contrast, lack of bone marrow oedema, disturbed by metallic implants, radiation burden	Intermediate sensitivity and specificity; new CT techniques for metallic artefact reduction
MRI	Excellent soft-tissue contrast, bone marrow oedema, no radiation burden, fast technique completed in one session	Hampered in postoperative/posttraumatic conditions up to 1 year and by metallic implants, expensive, not widely available	High sensitivity and intermediate specificity; new MRI sequences for metallic artefact reduction
WBC/AGA SPECT-CT	Good localisation between bone and soft tissue infections, also in the immediate postoperative period, altering the surgical approach, high interobserver agreement	Serial time-point imaging necessary, needs specialized equipment and trained personnel (WBC), no standardized protocol, radiation burden, expensive	Intermediate to high specificity and sensitivity
FDG PET-CT	Excellent localisation between bone and soft tissue infections, altering the surgical approach, fast technique completed in one session, high interobserver agreement	No universal accepted interpretation criteria, false- positive test results in recent fractures, expensive, not widely available, radiation burden	Intermediate to high sensitivity and specificity; highest anatomic resolu- tion among functional techniques

#### Review article

Hybrid imaging of complicating osteomyelitis in the peripheral skeleton

Filip Gemmel<sup>a,b</sup>, Bliede Van den Broeck<sup>b</sup>, Silvie Vanelstraete<sup>c</sup>, Benoit Van Innis<sup>d</sup> and Wouter Huysse<sup>e</sup> Nuclear Medicine Communications

#### Archives of Orthopaedic and Trauma Surgery (2021) 141:1115–1130







## <sup>18</sup>F-Fluoride PET/CT

Bone vitality

• Indication for surgical bone resection

## Clinical Case-Fluoride

53 y.o. female with the transverse midshaft humerus fracture;

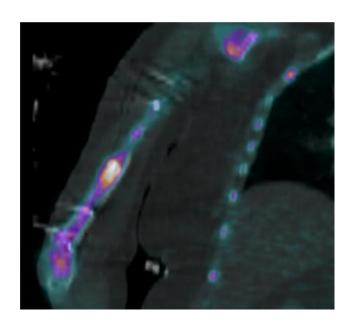
attempt for reaming and nailing, but in wain, because of the narrow endomedullary canal. 2 mm K wire osteosynthesis with «sufficient stability»;

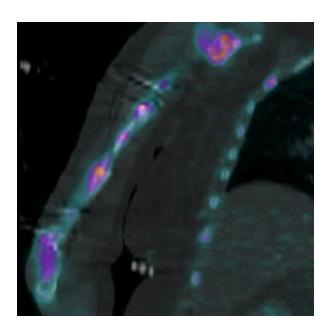
Complicated with infection, removed K wires, debridment and External fixation.

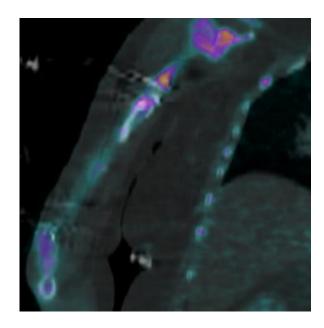




# <sup>18</sup>F-Fluoride PET/CT



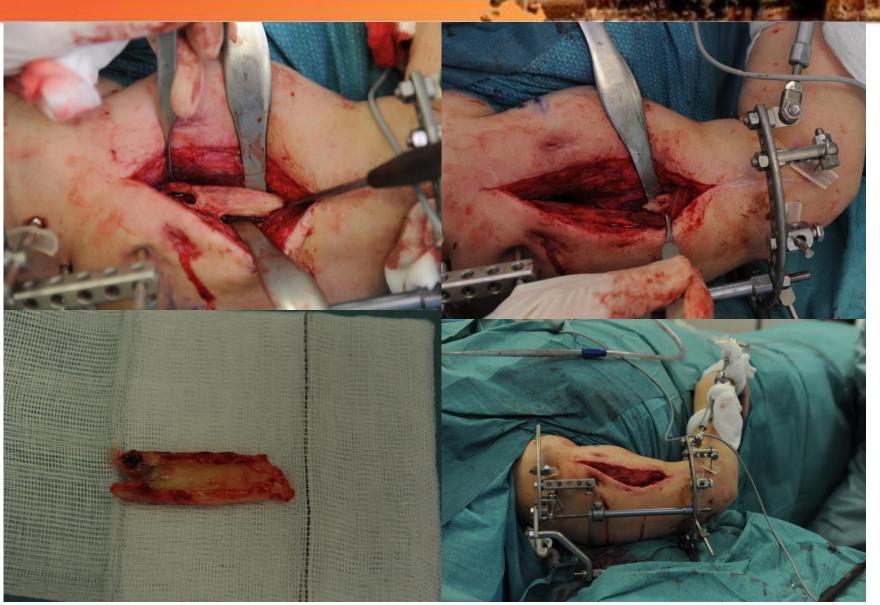


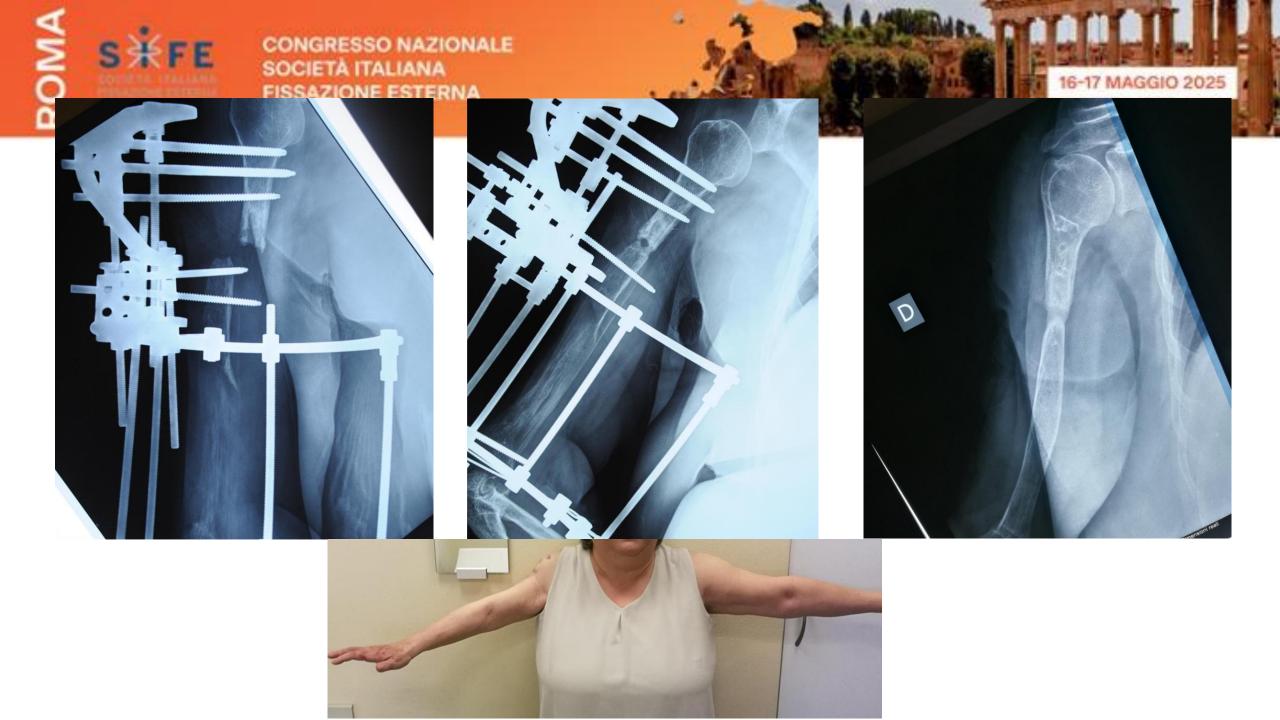


Alternation of areas of normal or increased tracer uptake (normal vital bone tissue) and areas of reduced uptake corresponding to bone tissue necrosis.











## **Conclusions:**

- Hybrid imaging offers anatomical and funtional information;
- Variety of tracers exploring different pathophysiological procceses;
- Need for high expertise in image interpretation;
- Impact on surgical decisions.









Thank you!





