Summary
A Case Report of Distant Lymph Nodes Metastases from Prostate Cancer Imaged with $^{201}$Tl and $^{99m}$Tc-MIBI
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Prostate cancer most often metastasizes to regional lymph nodes and bones by hematogeneous or lymphatic spread. The authors present a rare case of metastatic prostate cancer to supradiaphragmatic lymph nodes that were detected on $^{201}$Tl and $^{99m}$Tc-MIBI imaging and confirmed on a CT scan.

An 81-yr-old man with bilateral painful cervical lymphadenopathies was referred to our hospital with suspected thyroid cancer. The US and thyroid scan indicated no abnormalities in his thyroid gland. Both $^{201}$Tl and $^{99m}$Tc-MIBI scans showed multiple areas of abnormally increased radioactivity in both supraclavicular, anterior mediastinum, and bilateral hilar regions. A CT scan also revealed multiple lymphadenopathies in the same regions as radionuclide scans.

Prostate cancer was diagnosed from the results of immunohistochemical staining for PSA examination of a biopsy specimen of the mediastinal lymph node. The serum PSA concentration was markedly elevated at 490 ng/ml (normal, < 40 ng/ml). Both $^{99m}$Tc-HMDP bone and $^{67}$Ga scans were normal. All supradiaphragmatic lymph nodes on CT images disappeared 2 months after subcapsular orchiectomy and endocrine treatment with Bicalutamide.

Metastatic prostate cancer should be considered when metastatic adenocarcinoma is discovered in the supraclavicular lymph nodes of elder men.

Key words: Prostate cancer, Supraclavicular lymph nodes metastases, $^{201}$Tl, $^{99m}$Tc-MIBI, PSA.