

# Clinical Vignette

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## Positron emission tomography findings in systemic juvenile idiopathic arthritis

$^{18}\text{F}$ -fluorodeoxyglucose ( $^{18}\text{F}$ FDG) is known to accumulate in a large spectrum of malignant and non-malignant pathologies and PET is routinely used to image those processes [1]. We present here a case of child Still's disease with both hypermetabolic polyadenopathies and hepatosplenomegaly on PET/CT, mimicking a lymphoma.

A 16-year-old African girl, with a history of diffuse articular pain, weight loss and night sweating, and showing a back papulomatous rash, hepatosplenomegaly, diffuse lymph nodes enlargement and symmetrical polyarthritis on physical examination, was evaluated on PET/CT. This exam showed intense accumulation of FDG in almost all enlarged supra- and infra-diaphragmatic lymph nodes (maximum standardized uptake value: 4.5–10.7), and in the enlarged liver and spleen, as well (Fig. 1). A right axillary node biopsy was then performed and the pathology was consistent with reactive follicular hyperplasia, with no evidence of lymphoproliferative disease. On the basis of clinical features, inflammatory syndrome and hyperferritinaemia, patient was given the diagnosis of systemic JIA, or Still's disease. An oral corticoid treatment was established, to which she responded well.

*Disclosure statement:* The authors have declared no conflicts of interest.

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## Reference

- 1 Meller J, Sahlmann C-O, Scheel AK.  $^{18}\text{F}$ -FDG PET and PET/CT in fever of unknown origin. *J Nucl Med* 2007;48: 35–45.

**Fig. 1** Hypermetabolic polyadenopathies and hepatosplenomegaly on PET/CT.

