ADDENDUM TO

BREAST CANCER: EVALUATING TUMOR ESTROGEN RECEPTOR STATUS WITH MOLECULAR IMAGING TO INCREASE RESPONSE TO THERAPY AND PATIENT OUTCOMES

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Addendum

As the author of BREAST CANCER: EVALUATING TUMOR ESTROGEN RECEPTOR STATUS WITH MOLECULAR IMAGING TO INCREASE RESPONSE TO THERAPY AND PATIENT OUTCOMES published in the September 2020 edition of the JNMT (J. Nucl. Med. Technol. 2020 48:191-201), I am writing this addendum to help clarify information regarding 18F-fluoroestradiol that was published online ahead of printed (February 28, 2020), and what was published in print in the September 2020 edition of the JNMT Vol. 48 No.3 (191-201).

In the online version of my article published ahead of print (February 28, 2020 10.2967/jnmt.119.239020), 18F-fluoroestradiol was not an FDA-approved product as correctly stated in my article. However, as of May 20, 2020, 18F-fluoroestradiol has since become an FDA approved product and goes by the trade name of Cerianna. So, the information that was published in the September 2020 JNMT stating that 18F-fluoroestradiol was not an FDA approved product was an inaccurate statement because it was approved as stated above on May 20, 2020 but was never updated to reflect its recent FDA approval prior to going to print. For more information about the FDA approved product Cerianna, its clinical indication, imaging protocol and safety information please go to www.cerianna.com.

I also wanted to clarify and correct a discrepancy within the article on page 194 pertaining to the Nottingham Grading System – Table 3 compared to what was printed in the body of the article. The description of a Grade 3 tumor in the table is correct. In the body of the article on page 194, it states “a grade 3 tumor (8-9 points) is considered to be of high grade (well-differentiated), fast growing, and more likely to spread (11).” The sentence should read “a grade 3 tumor (8-9 points) is considered to be of high grade (poorly-differentiated), fast growing, and more likely to spread (11).”