

# 18F-fluoride PET-scan as complementary diagnostic medium for patients with otosclerosis - A pilot study

Published: 14-02-2011

Last updated: 04-05-2024

To measure the 18F-fluoride activity of otosclerosis in patients diagnosed with otosclerosis (by audiometry, CT scan and/or operative findings) in a different stage of their disease. If this diagnostic proves to be reliable and reproducible, this...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Will not start
<b>Health condition type</b>	Ear and labyrinthine disorders congenital
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON36729

### Source

ToetsingOnline

### Brief title

18F-fluoride PET-scan for otosclerosis

### Condition

- Ear and labyrinthine disorders congenital
- Middle ear disorders (excl congenital)

### Synonym

fixation of the stapes, otosclerosis

### Research involving

Human

### Sponsors and support

**Primary sponsor:** Medisch Universitair Ziekenhuis Maastricht

**Source(s) of monetary or material Support:** Ministerie van OC&W

## Intervention

**Keyword:** 18F-fluoride, otosclerosis, PET-scan

## Outcome measures

### Primary outcome

Primary study parameter:

To demonstrate that the 18F-fluoride PET scan has an additional value in the diagnostic process in patients with otosclerosis.

Other research questions:

1. Is the bone metabolism in patients with otosclerosis in the area of interest (inner ear) higher than in individuals without this disorder?

Outcome measure: Standard Uptake Value (SUV)

2. Is there a correlation between the abnormalities found on CT scan and the abnormalities found on PET scan?

3. Can the PET scan predict the course of the process of otosclerosis/otospongiosis in an individual patient?

### Secondary outcome

4. Is there a correlation between the bone activity measured with PET scan and the perioperative findings?

## Study description

## **Background summary**

Otosclerosis is diagnosed in many patients based upon the clinical symptomatology and the audiologic examination. A high-resolution CT scan can confirm the diagnosis. Until now only static diagnostics have played a role. Static diagnostics exhibit the damage caused by otosclerosis until the moment of the test. In certain cases there is a need for a dynamic diagnostic. With a dynamic diagnostic the activity of the disease can be investigated and the future hearing damage can be more accurately predicted. Other dynamic diagnostics have been proposed in the past, without success due to different reasons.

## **Study objective**

To measure the  $^{18}\text{F}$ -fluoride activity of otosclerosis in patients diagnosed with otosclerosis (by audiometry, CT scan and/or operative findings) in a different stage of their disease. If this diagnostic proves to be reliable and reproducible, this can be of important value in the process of planning surgery or conventional hearing revalidation.

## **Study design**

Observational patient-control study in which 3 groups of 10 patients with confirmed otosclerosis undergo a  $^{18}\text{F}$ -fluoride PET/CT scan. The control group consists of 10 individuals without an otologic history. 10 control patients will be selected that have undergone a similar scan for other diagnostic reasons.

## **Intervention**

Patient population: PET/CT scan with  $^{18}\text{F}$ -fluorine. The tracer is administered by means of an intravenous injection. After one hour the actual PET/CT scan is performed. This is combined with a diagnostic CT scan of the skull base and a low-dose CT scan for attenuation.

Control subjects: no intervention. This group is selected retrospectively for analysis.

## **Study burden and risks**

Radiation:

- $^{18}\text{F}$ -fluoride scan: 5.4 mSv
- diagnostic CT scan of the inner ear area: 0.3 mSv (patients only)
- attenuation low-dose CT scan of the head: 0.5 mSv (all individuals)

Compared to the average annual background radiation in the Netherlands: 2.0 mSv

Injection:

- possible redness or haematoma
- risk of phlebitis or lymphangitis

Logistic burden:

- PET scan is more time consuming than the conventional CT scan, around 2 hours.

## Contacts

### Public

Medisch Universitair Ziekenhuis Maastricht

P. Debyelaan 25  
6229 HX Maastricht  
NL

### Scientific

Medisch Universitair Ziekenhuis Maastricht

P. Debyelaan 25  
6229 HX Maastricht  
NL

## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

Elderly (65 years and older)

## Inclusion criteria

Otosclerosis patients:

- \* fenestral otosclerosis

- \* cochlear otosclerosis;Control patients:

- \* Clinically relevant reason to undergo a PET/CT-scan with 18F-fluorine, in which the head & neck region is scanned as part of the protocol. The indication for the scan will be set by the nuclear specialist and the referring specialist.

## Exclusion criteria

Otosclerosis patients:

- \* Prior ear surgery at the concerning ear

- \* Chronic otitis media or chronic mastoiditis

- \* Tympanosclerosis diagnosed at previous ear surgery

- \* Claustrophobia or the inability to lie still during the scan

- \* Active malignancy

- \* Generalised bone condition (except osteoporosis)

- \* Pregnancy or lactation

- \* Patient refuses to be notified about additional findings on the PET-scan;Control patients:

- \* A history of ear surgery, with the exception of ear grommets

## Study design

### Design

Study type:	Interventional
Intervention model:	Other
Allocation:	Non-randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Diagnostic

### Recruitment

NL	
Recruitment status:	Will not start
Enrollment:	40

Type: Anticipated

## Ethics review

Approved WMO

Date: 14-02-2011

Application type: First submission

Review commission: METC academisch ziekenhuis Maastricht/Universiteit Maastricht, METC azM/UM (Maastricht)

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

Register	ID
CCMO	NL31709.068.10