

# Eddie George



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Dr. Christopher Palestro  
Chairman of the Advisory Committee  
Medical Use of Isotopes

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Dear Dr. Palestro,

I want to share with you my experience and thoughts following the diagnosis and treatment for Stage 4 Lymphoma. I am not in the medical field and quite frankly, had basically no experience with cancer or cancer treatment in my 56 years. However, I have gained considerable knowledge and experience in this area over the past twelve months.

On the afternoon of July 17, 2018, I had a PET scan at Wake Forest Baptist in Winston Salem, NC. During the twenty-minute ride home from the scan, I got a call from Dr Vaidya, my oncologist, advising me that I would begin chemo at Baptist the following morning. Based on the scan, my cancer was so extensive (from my neck to my left thigh) and aggressive that treatment must be immediate. Also, the scan found a crack in my lower back (hip) believed to be a result of the cancer and it caused great concern. I checked into Baptist at 7:45am the following day and life was changed.

I was infused with chemo drugs (R-EPOCH) for five straight days (in the hospital) and then allowed to “recover” the next sixteen days. This twenty-one-day cycle would repeat six times over the next five months. On August 23<sup>rd</sup> (after round two), I had a second PET scan at Baptist to verify my progress. Remarkably (according to Dr. Vaidya), the visible signs of the cancer were no longer visible on the scan! This was terrific news! The treatments continued over a six-month period and January 12<sup>th</sup>, 2019, I had a third PET scan to evaluate the full results of the chemo treatments. The scan showed no “hot spots” and I was believed to be cancer free! Certainly, that is awesome!



My reason for writing and sharing this background is a concern I have over the results of the PET scan. During my first two scans, Baptist had a technology in place so they could evaluate the effectiveness of the radioactive dye injection as part of the PET scan. This was great comfort to me to be able to know the dye was injected properly and was circulated throughout my body. I knew then that the results of the PET scan could be trusted!

During my last PET scan in January, this technology was no longer being used and I was alarmed by this. What if the dye didn't fully make its way throughout my body? What if it wasn't done well? Who would know? Nobody! The results of the PET scan didn't show any "hot spots" but can I be sure there isn't some cancer remaining and growing due to a poor injection?

I have a six-month check-up coming in August 2019 and another PET scan. My hope is that this technology can and will be used for my PET scan so I can trust the results of the scan are complete and accurate. Without this technology, I don't know. I understand that the NRC does not currently require infiltrations to be reported, even if patients are being exposed to high levels of radiation that exceeds the NRC reporting limits. This policy should be changed.

I am not a doctor and am not even in the medical field. However, I do understand the need for encouraging and possibly even mandating the use of this technology for cancer patients. Why would we not want to monitor and document the success of the dye injection, which gives us the most accurate PET scan. For people like me, it is life and death.

Warm regards,  
Eddie George

