

Paget's Disease Mimicking Bone Metastases in Prostate Cancer Patient - A Case Report

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Abstract

Background. Prostate cancer is one of the most common diagnosed cancers in male globally. Bone metastases are one of the hallmarks of advanced stage prostate cancer. However, in some cases become difficult to distinguish metastatic lesions from benign lesions in some imaging techniques due to similar characteristics. Paget's Disease is an example in which bone lesions seems to mimicking osseous metastases. It requires a careful diagnostic and imaging modality to clarify these types of lesions in order to have the correct diagnose and stage of the disease.

Case report. This report presents a clinical case of a 76 -year-old man diagnosed with prostatic adenocarcinoma Gleason 6 (3+3). Initial MRI

and bone scan indicated the probability of multiple bone metastasis being evident. Further imaging modalities were sought such as CT scan, which was negative for distant metastases. Taking into consideration all the clinical, pathological and imaging features of the disease, a PSMA PET/CT was performed to achieve a high level of certainty about the nature of these lesions and the staging of the disease. The latter result made a major impact on clinical and treatment decision for this patient, indicating that skeleton lesions may be associated with Paget's disease.

Conclusion. This case highlights the importance of utilizing modern, advanced imaging techniques to ensure an accurate diagnosis, which

directly impacts disease staging and treatment planning. Correlating clinical symptoms and pathological findings with imaging results is crucial to selecting the most appropriate therapeutic approach. Differentiating accurately between Paget disease and bone metastases is vital to avoid misdiagnosis. In prostate cancer patients, such an error could result in the unjustified exclusion from curative treatment options or the initiation of unwarranted systemic therapy.

Keywords: bone metastases, Paget's disease, Prostate cancer, PSMA PET/CT.