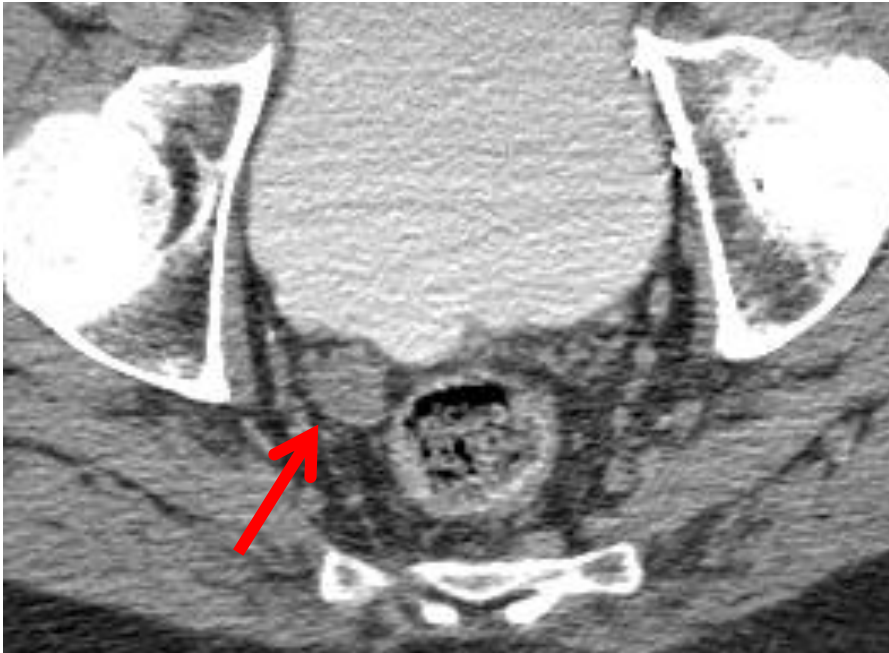


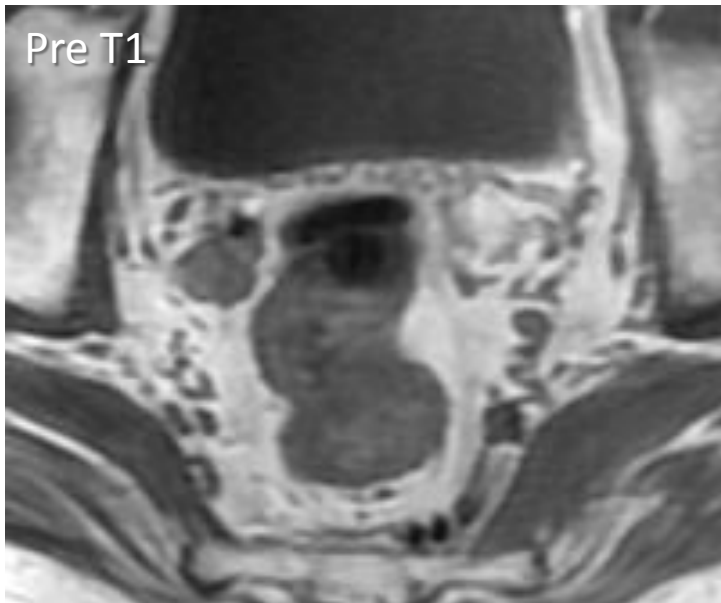
- Post prostatectomy, persistently detectable low PSA
- Patient referred for advanced management of prostate cancer recurrence after CT done elsewhere

Outside CT

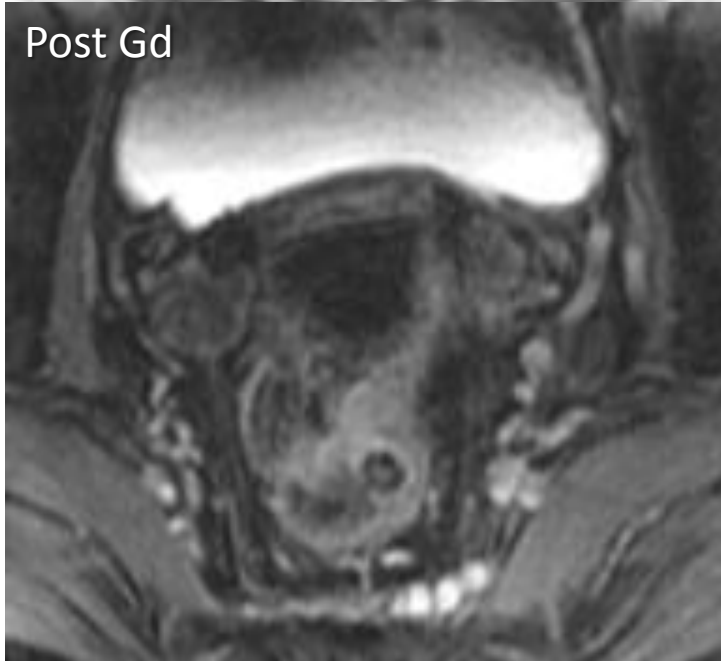


- This was read as 'positive for recurrence in the operative bed'

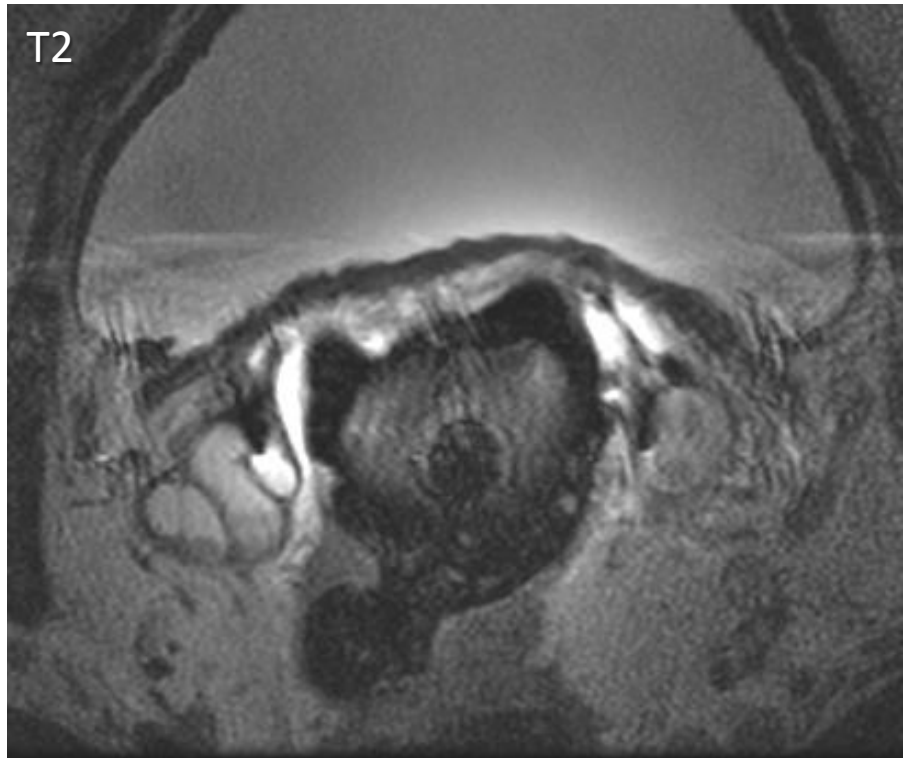
Pre T1



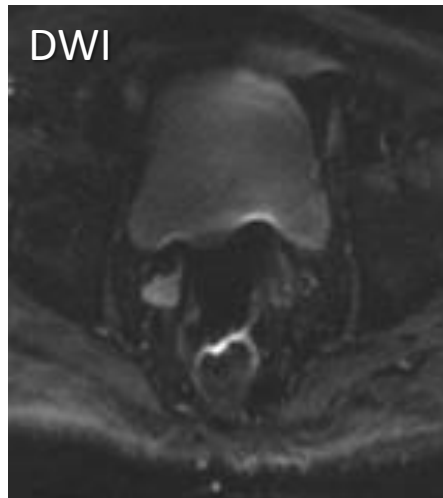
Post Gd



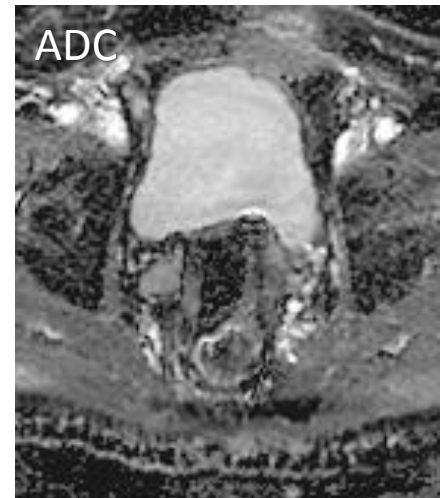
T2



DWI



ADC



- MRI nicely showed the 'nodule' detected by CT to be a serpentine fluid filled tubular structure ending at the SV bed clips
- Residual seminal vesicle tissue after prostatectomy
 - This can be a source of persistently detectable or recurrent PSA, usually low level with long PSADT
 - This patient is now 10 years post RRP, with PSA = 0.18 and stable with no treatment
 - This can just be benign tissue from an incomplete resection, like in this case, or also have residual cancer