Follow-up data from a lung cancer trial examined the cost of treating solitary pulmonary modules that were managed by Positron Emission Tomography (PET).

Patients with cancer incurred much higher cost and had much poorer prognosis than those who had a benign nodule. High costs were also associated with false-positive PET scans. Most patients who had a negative PET scan were managed by watchful waiting, at a much lower cost. This study is the first to identify the cost of managing solitary pulmonary nodules in patient groups defined by PET scan results, information that will be helpful in more accurately assessing the cost-effectiveness of PET for lung cancer.