THE ROLE OF COMPUTED TOMOGRAPHY "IN THE DIAGNOSIS OF URINARY BLADDER CARCINOMA"

THESIS

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By

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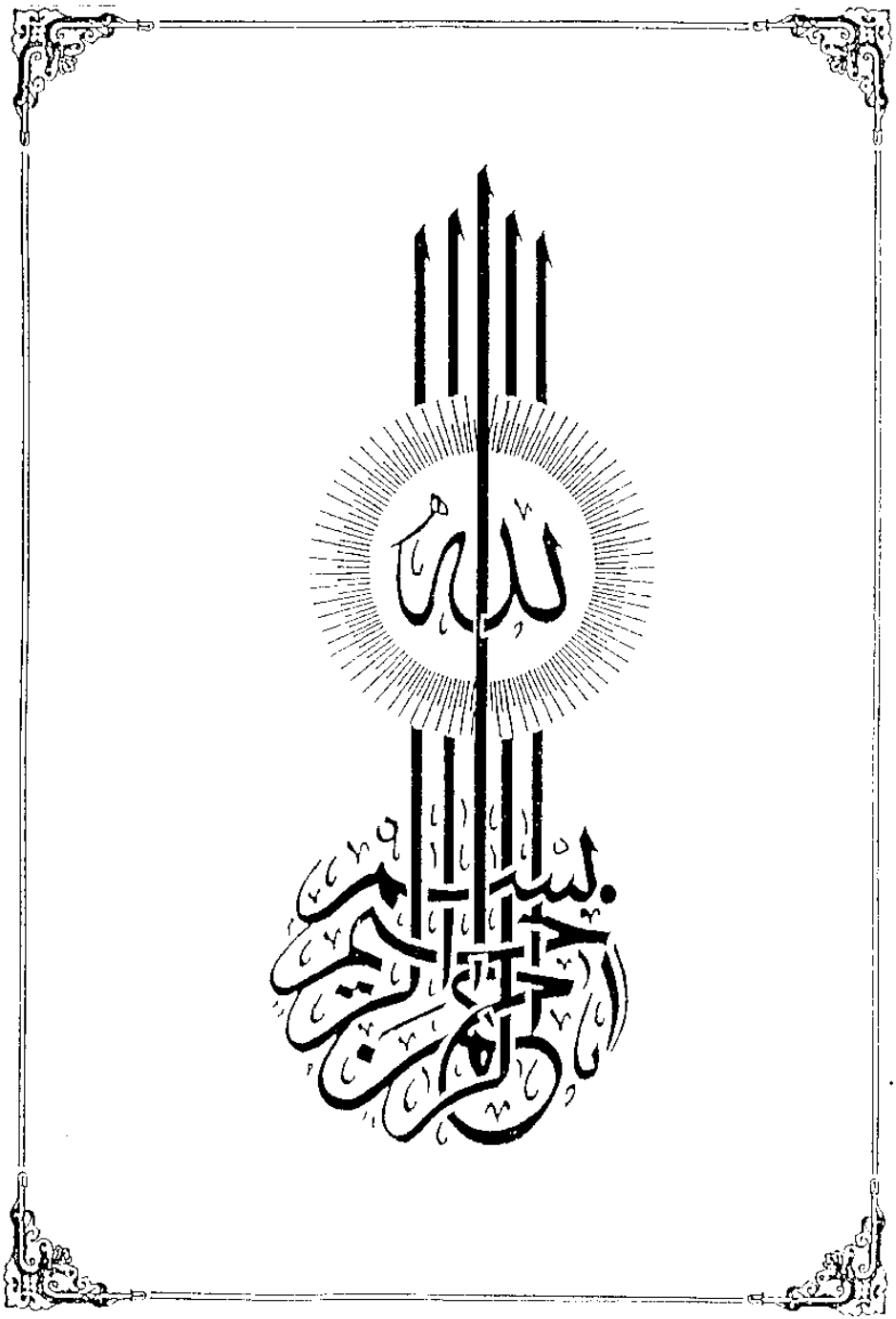

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ABSTRACTS

This study was conducted on 61 cases, 54 males and 7 females.

Their age ranged between 30 - 70 years. The result of study are classified according to the stage of tumor extension deteted by CT scan.

Group I (20 cases): showed infiltration of superficial and deep muscles of urinary bladder.

Group II (14 cases): Showed perivesical fat extension.

Group III (16 cases): Showed infiltration of adjacent organs pelvic lymph nodes or distant metastases to paraortic lymph nodes.

Group IV: follow up after postoperative radical cystectomy, local recurrence was detected in pelvic lymph nodes or illiopsas muscles or distant metastases to the liver, bones and paraortic lymph nodes in 9 out of 11 cases. No evidence of recurennce was detected in the remaining 2 cases.

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INTRODUCTION AND AIM OF THE WORK

Radiologic evaluation of the urinary bladder has undergone progressive changes as a consequence of rapid technologic advances.

Before the advent of computed tomography (CT) excretory urography had been the most commonly used radiographic examination to detect and characterize bladder wall abnormalities. Execretory urography is relatively limited as a method for assessing bladder tumors particularly for staging. ***(Hillman et .al., 1981).***

Urologist can accurately define the intraluminal portion of the lesion by cystoscopy, but can only assess extravesical extension crudely using bimanual palpation under anaethesia. The radiologist can provide more precise information about the degree of extravesical tumor extension. Radiological examination used most often include fractionated cystography, arteriography, lymphangiography, intravesical and perivesical insufflation with tomography. But with the introduction of new imaging modalities such as MRI, CT and sonography, the invasive radiological techniques do not find widespread acceptance.

So, any new technique therefor which improves the accuracy of staging and helps to restore the urologist dilemma must be welcomed.