



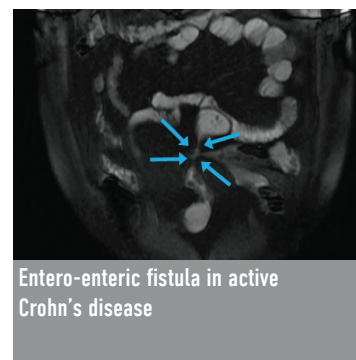
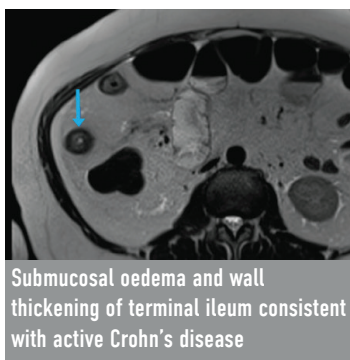
Thank you to Deepak Prasad from PRP Hornsby for contributing this issue.

ABDOMINOPELVIC APPLICATIONS OF MAGNETIC RESONANCE IMAGING

The applications of MRI in diagnosis and management of abdominopelvic pathology are ever expanding due to advancement in scanner technology and development of rapid sequences, which allow adequate imaging on shorter breath-holds. MRI has superior tissue contrast resolution that allows accurate assessment of tissue characteristics and inflammation, in addition to providing exquisite anatomic detail. We discuss a few clinical applications in this article.

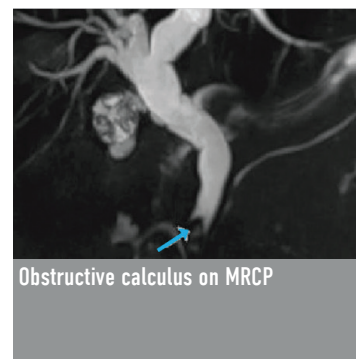
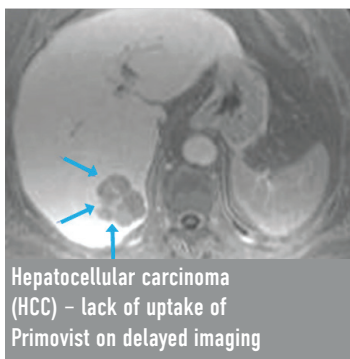
1. MR ENTEROGRAPHY (MRE)

This is the imaging modality of choice for assessment of active vs quiescent fibrostenosing Crohn's disease. MRE is preferable over CT as it avoids ionising radiation in this patient group, who are usually young and present repeatedly during the course of disease. MRE also acts as a problem-solving tool and guides management.



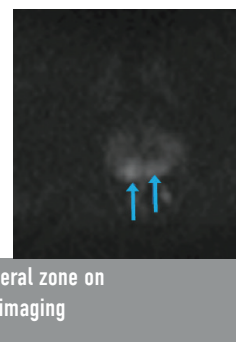
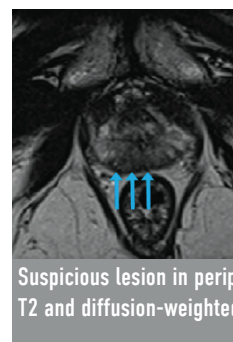
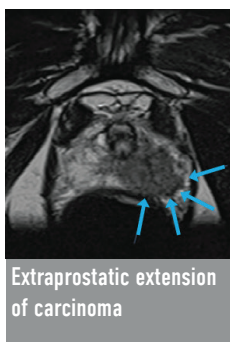
2. MR LIVER

This is the modality of choice for accurate assessment and characterisation of focal liver lesions and preoperative assessment of curative resection of liver metastases, aided by liverspecific contrast agents. It is also the modality of choice for assessment of ductal pathology.



3. MR PROSTATE

MR has been in use to differentiate between organ-confined and extraprostatic disease. Currently MRI is also utilised to evaluate for presence of clinically significant carcinoma, which can then direct biopsy or active surveillance.



MRI is also routinely used in evaluation of perianal fistula, staging rectal, cervical and endometrial carcinoma, pelvic floor assessment and characterisation of indeterminate pelvic and Ovarian masses.