

Patient Name		ID No	
Exam Type	MRI SINUSES	Exam Code	70540
Exam Date		DoB	
GESY Reg No		GESY Ref No	

MRI OF THE PARANASAL SINUSES WITH IV CONTRAST

TECHNIQUE:

The examination was conducted on a SIEMENS MAGNETOM Avanto 1.5 T scanner. Multiplanar multisequence magnetic resonance images through the face were obtained before and after the uneventful administration of intravenous contrast (Gadolinium).

FINDINGS:

Comparison is made with the images of a previous MRI study dated 14/10/2021. There is new evidence of an irregular homogeneously enhancing tissue at the superior, lateral and inferior walls of the right maxillary sinus that seems to cause bone erosions/destruction and extends posteriorly to involve the medial and lateral pterygoid muscles and laterally involving the right masseter muscle. The post-contrast images demonstrate enhancement within the right buccinator and temporalis muscles. Homogeneous enhancement is also noted at the right cavernous sinus, adjacent to the right carotid artery and the temporal lobe of the brain. Erosive changes of the sphenoid bone are noted, an intracranial infiltration cannot be excluded. The coronal T1-weighted contrast enhanced images demonstrate soft tissue enhancement within the floor of the right orbit which comes into contact with the right inferior rectus muscle. They also show progressive thickening and enhancement of the right side of the hard palate.

The contents of the right ethmoid and sphenoid sinuses now show lower T2 signal intensity and a progressive enhancement compared to the previous examination. There is still evidence of extensive fluid accumulation within the right mastoid cells.

CONCLUSION:

- -Compared to the previous MRI study dated 14/10/2021, there is evidence of an irregular enhancing soft tissue material within the right maxillary sinus that results in bone erosions/infiltration and extends into the surrounding soft tissues. These findings are highly suspicious of disease recurrence.
- -There is new evidence of enhancement within the right cavernous sinus, close to the right internal carotid artery and the temporal lobe associated with erosive changes of the sphenoid bone. There is also evidence of contrast enhancement within the floor of the right orbit. A CT scan is recommended to assess bone integrity and to exclude an intracranial involvement.



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Endoscopic assessment and histopathological evaluation is advised.

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