

石海峰,杨小庆,杨明.64排螺旋CT后处理技术诊断机械性肠梗阻[J].中国医学影像技术,2009,25(1):103-106

64排螺旋CT后处理技术诊断机械性肠梗阻

Sixty-four slice spiral CT evaluation of mechanical bowel obstruction——the value of post-processing technique

投稿时间: 2008-07-16 最后修改时间: 2008-10-16

DOI:

中文关键词: [肠梗阻](#) [体层摄影术](#) [X线计算机](#) [图像重建](#)

英文关键词: [Ileus](#) [Tomography, X-ray computed](#) [Imaging reconstruction](#)

基金项目:

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中文摘要:

目的 探讨64排螺旋CT后处理技术对机械性肠梗阻的诊断价值。方法 回顾性分析50例经手术证实的肠梗阻CT扫描图像,主要采用MPR技术对CT原始数据进行多平面重建,必要时进行CPR、MIP及VRT对图像进行二维或三维重建。结果 50例中,包括肠道肿瘤16例,粘连19例,胆石性2例,腹外疝9例,肠扭转2例,肠套叠2例。CT轴位图像及后处理图像均显示了肠梗阻的存在,单独根据轴位图像能确定42例(84.00%)梗阻部位及46例(92.00%)梗阻原因;而结合后处理图像能确定49例(98.00%)梗阻部位及49例(98.00%)梗阻原因。横断面图像结合后处理图像,医生的诊断信心明显高于单纯横断面($P<0.05$)。结论 64排螺旋CT后处理图像能更直观的显示梗阻部位及梗阻原因,其中MPR应作为首选技术。

英文摘要:

Objective To investigate the value of post-processing technique in the diagnosis of mechanical bowel obstruction. **Methods** Fifty patients with surgical proved bowel obstruction underwent 64-slice CT examination of the entire abdomen. In addition to the conventional axial images, the original CT raw data were then reconstructed into MPR images and CPR, MIP and VRT if necessary. **Results** Among the 50 patients with bowel obstruction, there were 16 cases caused by tumor, 19 by adhesion, 2 by gallstone, 9 by abdominal external hernia, 2 by volvulus and 2 by intussusception. Both axial and post-processing images correctly depicted the presence of bowel obstruction. Based on the CT axial view, the site and the etiology of bowel obstruction were determined in 42 (84.00%) and 46 (92.00%) respectively, while the combination with post-processing images improved the diagnosis performance to 49 (98.00%) and 49 (98.00%) respectively. All readers interpreted axial plus post-processing images with a significantly higher confidence level than that of axial or coronal views alone, either for the detection of the sites ($P<0.05$) or for the identification of the causes ($P<0.05$). **Conclusion** The post-processing images can show more intuitively information about the site and etiology of bowel obstruction than axial images. MPR should be regarded as the optimal post-processing technique for the diagnosis of bowel obstruction.

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