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软骨肉瘤的CT和MRI诊断

CT and MRI diagnosis of chondrosarcoma

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中文摘要:

目的 探讨不同病理学类型软骨肉瘤的CT和MRI表现。方法 回顾性分析经病理证实的25例软骨肉瘤患者的CT和MRI表现。结果 CT表现:7例高分化普通髓腔型和1例透明细胞型仅见膨胀性骨质破坏;其余17例表现为骨质破坏伴分叶状软组织肿块。所有病变均可见到环形或絮状钙化影,其中14例高分化普通髓腔型钙化明显,1例中分化普通髓腔型、6例黏液型、3例间质型和1例透明细胞型呈局限、轻微钙化。MRI表现:10例高分化普通髓腔型呈以长T1长T2信号为主的混杂信号,5例增强扫描呈不均匀分隔状强化;3例黏液型呈以明显长T1长T2信号为主的混杂信号,1例增强扫描呈不均匀分隔状强化;2例间质型呈中等T1中等T2信号为主的混杂信号;1例透明细胞型呈明显长T1长T2信号为主的混杂信号。软组织肿块内部可见长T1短T2信号分隔。发生于长管状骨者可见骨内膜扇贝形压迹。结论 根据软骨肉瘤的影像学表现可以推测软骨肉瘤的病理学类型,为临床提供准确、可靠的信息。

英文摘要:

Objective To observe the CT and MRI findings of various types of chondrosarcomas. **Methods** CT and MRI manifestations of 25 cases of chondrosarcomas confirmed by histopathology were retrospectively analyzed. **Results** Seven cases of well differentiated ordinary medullary type and 1 case of clear cell type showed bulging bone destruction on CT imagings, the rest 17 cases showed bone destructions with extraosseous lobulated soft tissue masses. Areas of ring-like or flocculent calcification were seen in all cases. Fourteen cases of well-differentiated conventional intramedullary chondrosarcomas showed obvious calcification. One case of moderately differentiated conventional intramedullary chondrosarcoma, 6 cases of myxoid chondrosarcomas, 3 cases of mesenchymal chondrosarcomas and 1 case of clear cell chondrosarcoma showed focal or subtle calcification. On MRI, 10 cases of well-differentiated ordinary intramedullary chondrosarcomas showed heterogeneous long T1 and long T2 signal. Five cases of well-differentiated ordinary intramedullary chondrosarcomas underwent gadolinium-enhanced MR scanning showed heterogeneous septal enhancement. Three cases of myxoid chondrosarcomas showed obviously heterogeneous long T1 and long T2 signal. One case of myxoid chondrosarcoma performed gadolinium-enhanced MR scanning showed heterogeneous septal enhancement. Two cases of mesenchymal chondrosarcomas showed heterogeneously moderate signal intensity. One case of clear cell chondrosarcoma showed obviously heterogeneous long T1 and long T2 signal. Septas with long T1 and short T2 signal intensity were seen in masses. Chondrosarcomas of long tubular bones showed endosteal scalloping. **Conclusion** The pathological types of chondrosarcomas can be presumed by the radiological appearances. The radiological appearances can provide accurate and reliable messages to clinic.

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