

BREAKTHROUGH IN RADIOLOGY DIAGNOSIS

CASE OF : KOCH'S ETIOLOGY

PATIENT DETAILS

Name: TXXXX PXXXX

Age: 22 Yrs F

Investigation: MRI LS SPINE

CLINICIAN DETAILS

Name: Dr XXXXX XXXXX

RADIOLOGIST DETAILS

Name: DR KHYATI VAISHNAV
MD , RADIOLOGIST



FINDINGS

1.EVIDENCE OF ALTERED MARROW SIGNAL INTENSITY INVOLVING L1 AND L2 VERTEBRAL BODIES WITH INTERVENING L1-L2 INTERVERTEBRAL DISC. IT DEMONSTRATES HETEROGENEOUSLY HYPERINTENSE SIGNAL ON T2W IMAGES AND HYPOINTENSE SIGNAL ON T1W IMAGES.

2.P/O KOCH'S ETIOLOGY

RADIOLOGICAL FINDINGS

- 1.ALTERED MARROW SIGNAL INTENSITY INVOLVING L1 AND L2 VERTEBRAL BODIES WITH INTERVENING L1-L2 INTERVERTEBRAL DISC.
- 2.THERE IS PRE-VERTEBRAL, BILATERAL PARAVERTEBRAL AND EPIDURAL COLLECTION AT THIS LEVEL AS DESCRIBED ABOVE.
- 3.BILATERAL PSOAS COLLECTION AS DESCRIBED ABOVE.
- 4.EPIDURAL COLLECTION CAUSES COMPRESSION OVER VENTRAL ASPECT OF LUMBAR DURAL THECA, WITH NARROWING OF RIGHT LATERAL RECESS AND NEURAL FORAMINA WITH COMPRESSION OF RIGHT SIDE TRAVERSING AND EXITING NERVE ROOTS AT L1-L2.
- 5.MILD POSTERIOR DISC BULGE AT L5-S1 LEVEL, INDENTING THECAL SAC WITHOUT SIGNIFICANT CANAL STENOSIS.

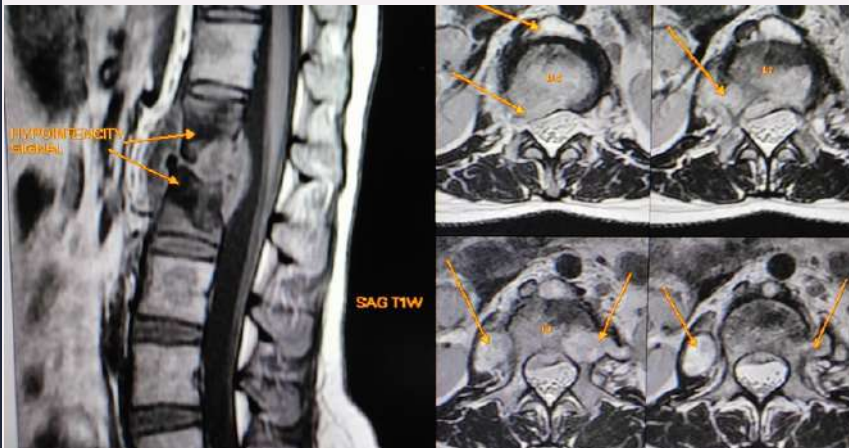
THE ABOVE DESCRIBED FINDINGS ARE SUGGESTIVE OF DISCO-VERTEBRAL OSTEOMYELITIS (KOCH'S ETIOLOGY MOST LIKELY).

CLINICAL PROFILE

C/O BACK PAIN , BOTH LOWER LIMB PAIN AND STIFNESS WITH ON / OFF FEVER.

PROCEDURE

LUMBOSACRAL SPINE WAS PERFORMED AND HIGH RESOLUTION T1- AND T2WEIGHTED SERIAL SECTIONS OBTAINED IN THE SAGITTAL AND AXIAL PLANES USING A PHASED-ARRAY SURFACE COIL ON A 1.5 TESLA SCANNER.



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