



Radiology of the Brainstem and Cerebellum

Second Lecture

Color index

Important Doctor's note

Extra explanation

Team 437

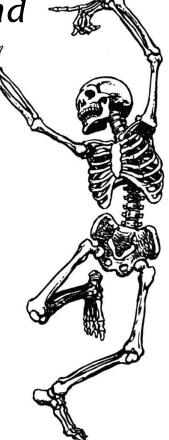
Radiology

Neuropsychiatry Block

Lecture objectives:

- 1- Identify radiological anatomy of brainstem and cerebellum.
- 2- compare CT and MRI imaging of brainstem and cerebellum.
- 3- Recognize the imaging findings in common diseases involving brain stem and cerebellum.

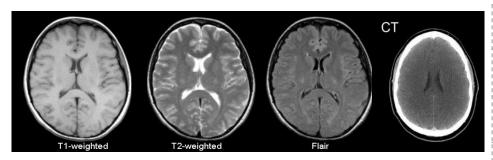




Extra information

Radiology Team 437

MRI:



how to differentiate between T1 and T2 sequences?

In general, T1- and T2-weighted images can be easily differentiated by looking at the CSF, CSF is dark on T1-weighted imaging and bright on T2-weighted imaging

how to differentiate between a CT scan and MRI?

We can use the appearance of \boldsymbol{bone} as a reference

CT scan: bright, MRI: dark

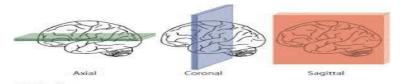
Some terms that are used in describing abnormalities:

In MRI: hypointense/dark hyperintense/bright In CT scan: hypodense /dark hyperdense/bright

The differences between MRI sequences:

Tissue	T1-Weighted	T2-Weighted	Flair
CSF	Dark	Bright	Dark
white matter	Light	Dark Gray	Dark Gray
cortex	Gray	Light Gray	Light Gray
Inflammation (infection, demyelination)	Dark	Bright	Bright

Anatomical planes:



Brain divisions:

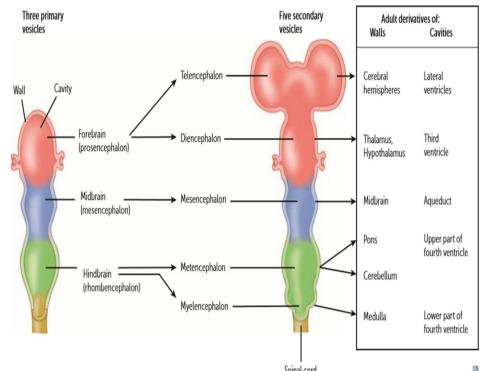


The three major divisions of the brain:

1- Prosencephalon: Forebrain Diencephalon: thalamus, hypothalamus **Telencephalon:** cerebrum

2- Mesencephalon: Midbrain

3- Rhombencephalon: Hindbrain **Metencephalon: Pons and Cerebellum** Myelencephalon: Medulla Oblongata

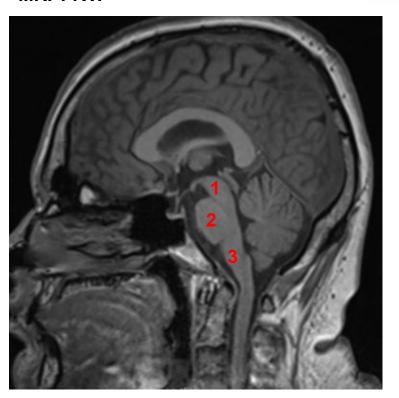


Radiology Team 437

MRI T1WI*

Brain stem:

- -Three parts from superior to inferior:
- 1-Midbrain
- 2-Pons
- 3-Medulla oblongata
- -It connects cerebral hemisphere with spinal cord.



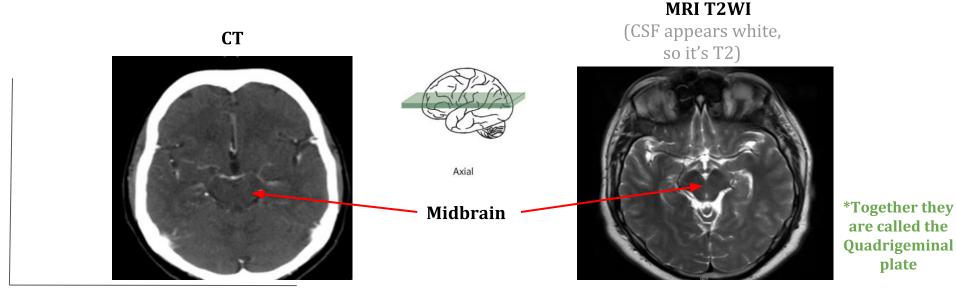
*MRI T1 Weighted: the CSF is dark.

Midbrain:

Radiology Team 437

Radiological features of the midbrain:

- -At the level of circle of willis. (The major blood supply to brain)
- -Anteriorly two cerebral peduncles separated by interpeduncular fossa.
- -posteriorly four rounded prominences (superior and inferior Colliculi).*



Midbrain:

- 1- Superior colliculus
- 2- Inferior colliculus
- **3- Cerebral peduncle**
- 4- Interpeduncular cistern

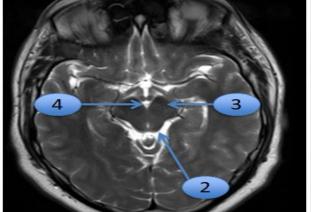
Radiology Team 437

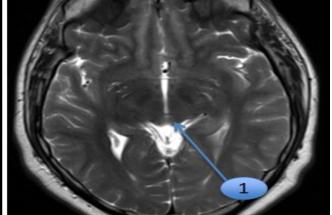
-MRI views:

T1: Dark fluid

T2: White or Bright fluid









MRI T1WI

Sagittal

MRI T2WI

Axial

Midbrain:



Internal features:

- -Substantia nigra separates crus cerebri ventrally from tegmentum posteriorly*
- -Red nuclei are dorsal to substantia nigra at the level of superior colliculi.

-Both of Red nuclei and substantia nigra appear dark in MRI T2 because they contain iron.

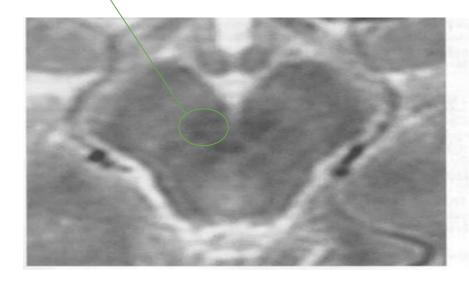


Fig. 2.14 Midbrain, axial section: (a) T₂ MRI; (b) diagram.

Mamillary body

Crus cerebri

Substatia nigra

Red nucleus

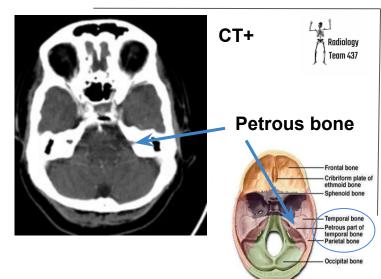
Superior colliculus

Aqueduct

Pons:

Radiological features:

- -The bulbous anterior part consists mainly of fibers continuous on each side with middle cerebellar peduncle.
- -Basilar artery lies in groove anteriorly.
- -Posterior surface of the pons forms the upper part of the floor of the 4th ventricle.
- -Bony anterior relation: clivus centrally and petrous temporal bones laterally.





Basilar Artery

Pons:

Radiology Team 437

*White because there's fluid and T2WI makes fluid appear whitish

- P- Pons
- 1- 4th ventricle*
- 2- Basilar artery
- 3- Middle cerebellar peduncle

MRI Axial T2WI MRI Sagittal T1WI

Medulla Oblongata:

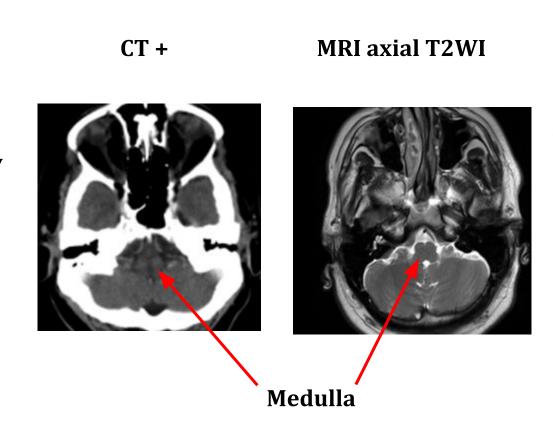
Radiology Team 437

radiological features:

MRI imaging of the medulla gives superior images to CT due to lack of bony artifact.

The ventral median fissure is seen anteriorly with the pyramid laterally.

The 4th ventricle is seen posteriorly.



Cerebellum:

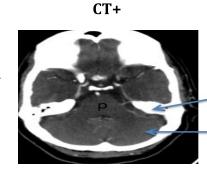
Radiology Team 432

- -Cerebellum is connected to the brainstem by three pairs of cerebellar peduncles:
 - Superior.....connected to the midbrain
 - Middle.....connected to the pons
 - Inferior.....connected to medulla oblongata

Radiological Features:

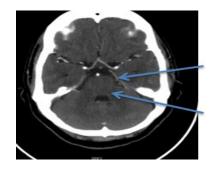
-On axial CT & MRI the cerebellum is separated from the Pons by the $4^{\rm th}$ ventricle and is connected to the Pons on each side by the middle cerebellar peduncle, it is bounded anteriorly by petrous temporal bone.

-On higher slices it is separated from the temporal and occipital lobes anterolaterally by tentorial margins, tentorium can be seen on contrast enhanced studies owing to the contained superior petrosal sinus



Petrous bone

Cerebellum



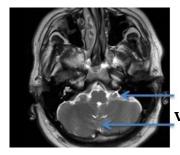
Tentorium

Middle cerebellar peduncle

Cerebellum:

- -Two cerebellar hemisphere with midline vermis.
- -Flocculus is a small ventral portion of the hemisphere.
- -Tonsils are the most anterior inferior part of the hemispheres that lie close to the midline.
- -The superior vermis can be seen between occipital lobes on section through the thalamus.

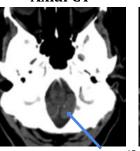






flocculus vermis

Axial CT

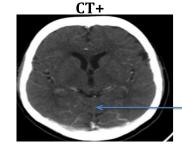


MRI Sagittal T1 WI



tonsil

tonsil



Superior vermis

Cerebellar Vermis:

Fig. 2.16 Midline sagittal T, MRI to show vermis of cerebellum.

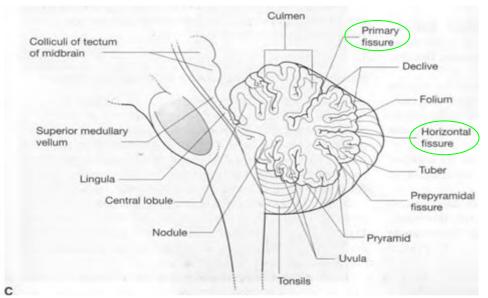


- Lingula on superior medullary velum
- 2. Primary fissure

- 3. Horizontal fissure
- 4. Prepyramidal fissure
- 5. Foramen of Magendi

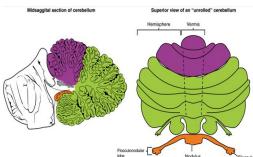
-Most important fissures are the Primary and Horizontal fissures.





-Cerebellar vermis is only visible through the midline

-The cerebellar vermis has 3 Fissures and 9 Lobules



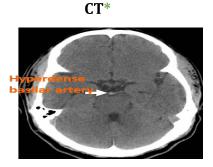
Common diseases of brainstem and cerebellum:

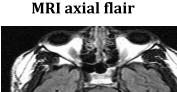
Radiology Team 437

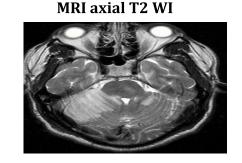
1-Acute infarction due to basilar artery thrombosis

-MRI is better in detecting infarctions than CT

*Normally vessels don't appear bright, The bright appearance indicates a thrombus

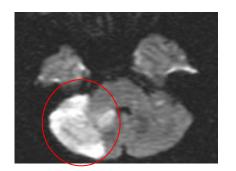


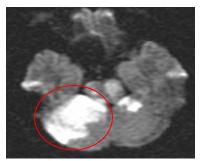




Diffusion sequence

-The infarcted tissue appears very white





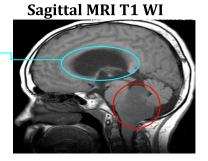
-Diffusion- Weighted MRI is very sensitive in detecting infractions very early, that's why it's very important in such cases.

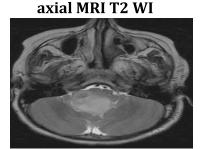
2. Brainstem Glioma

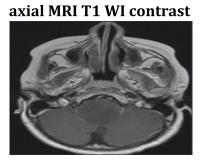
-The **Tumor** is arising from the posterior part of the **Medulla Oblongata** the mass is compressing the 4th ventricle

Radiology Team 437

-Obstruction of the 4th ventricle leads to hydrocephalus _



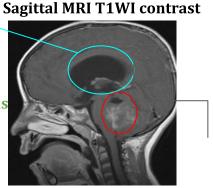


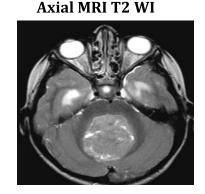


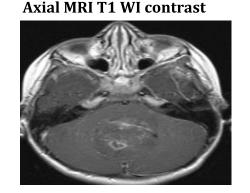
3. Medulloblastoma -The **Tumor** is arising from the **Cerebellum** and part of the 4th Ventricle.











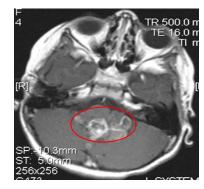
3-Ependymoma

-Within the 4th ventricle, the tumor extends through the outlet foramina beyond the 4th ventricle into the foramen of magendie "characteristic for Ependymoma"

Radioloay Team 437

axial MRI T1 WI contrast Coronal MRI T1 WI contrast **Sagittal MRI T1 WI contrast**







4. Hemangioblastoma

- -Vascular tumor.
- -The mass is bright on T1
- -Not within the 4th ventricle
- -The mass is within the cerebellar hemispheres

Sagittal MRI T1 WI



appear only with contrast **Axial MRI T2 WI**

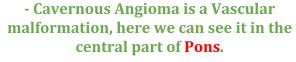


Coronal | MRI T1 WI contrast

-Multiple small other lesions

5. Cavernous Angioma

-Benign tumor







Radiology

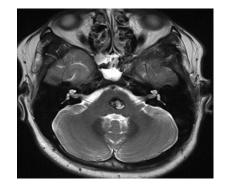
Team 437

CT

Sagittal MRI T1 WI



Axial MRI T2 WI



Axial MRI SWI*

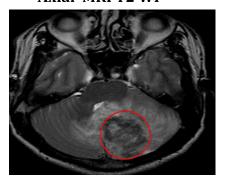


6. Cerebellar tuberculosis



-Extensive edema

Axial MRI T2 WI



Axial MRI T1 Contrast



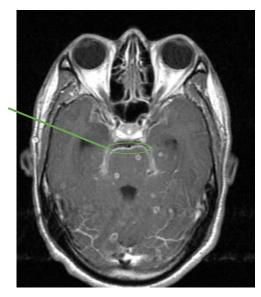
-Tiny nodules around the mass indicate an infection



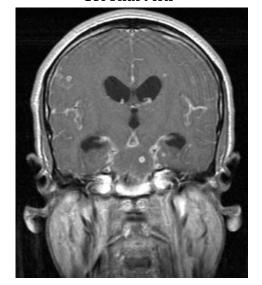
7. TB meningitis with multiple tuberculomas

-Affecting the left side of the Pons.

Axial MRI T1 Contrast



Coronal MRI

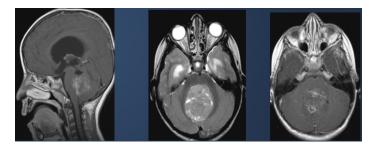


-Thickening of the Dura in.

MCQs:

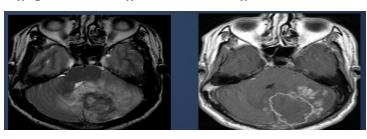
Q1:The MRI is showing Medulloblastoma.. from which part is it is arising from ?

A)) pons B)) cerebellum. C))medulla D))midbrain

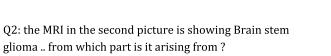


Q3: the MRI in the picture is showing Cerebellar tuberculosis .. from which part is it arising from ?

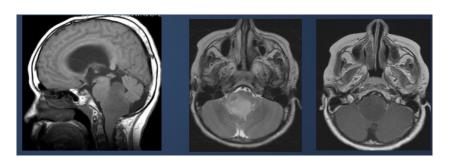
A))right cerebellar B))middle cerebellar C))left cerebellar



1 B. 2 C. 3 C. 4 C.

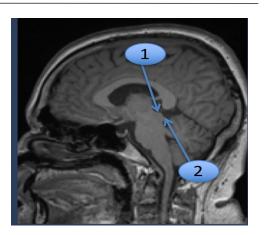


A)) pons B)) cerebellum. C))medulla D))midbrain



 $Q4: the \ arrow \ of \ number \ 1 \ is \ showing \ ..$

A))lateral ventricle B)) inferior colliculus C))superior colliculus



Radiology Team 437





Team Leaders:

Faisal Alqusaiyer

Aljoharah Alshunaifi

Team members:

Afnan Almustafa

Adel alzahrani

Rawan Alrehaili

Abdullah alsergani

Abeer Alabduljabbar

Abdulmalik alsharhan

Contact us on:

🧷 @Radiology437

Radiology437@gmail.com