




# RADIOLOGY OF THE ABDOMEN

(LECTURE 1)

Radiology

# OBJECTIVES

- To know radiology modalities used in abdomen imaging mainly GI tract.
- To know advantages and disadvantages of each modality.
- To know indications and contraindications of each modality.
- Overview on normal abdomen appearance and common pathologies including:
  - Pneumoperitomium
  - Peptic ulcer
  - Bowell obstruction
  - Inflammatory bowel disease
  - Large bowel masses/malignancies



What radiobiological modalities are **GOOD**  
in imaging the abdomen mainly the **GI**  
tract?

❖ What radiological modalities are **GOOD** in imaging the abdomen mainly the **STOMACH** and **BOWEL LOOPS**?

- ✓ **X-ray**
- ✓ **Fluoroscopy**
- ✓ **CT scan**
- ✓ **MRI**

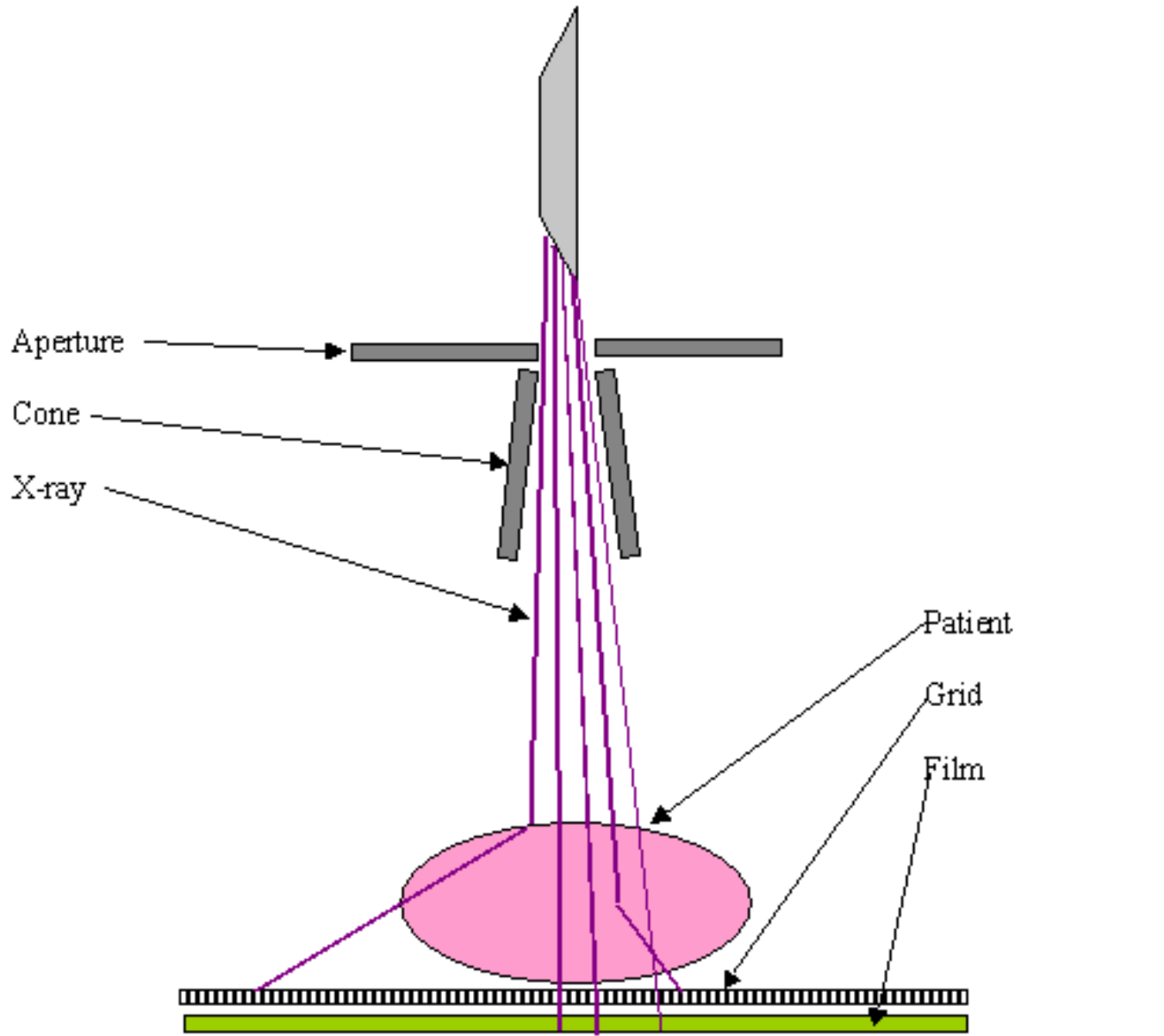
?? **US**

# X-Ray



# Abdominal x-ray

- X-ray is a form of radiation, that are focused into a beam
- X-ray can pass through most objects including the human body.
- When X-rays strike a piece of photographic film, they make a picture.





# ABDOMINAL X-RAY

**White** ----- bone and calcification

**Grey** ----- soft tissue

**Black** ----- air





## ❖ ADVANTAGES:

- Widely available
- Cheap
- Excellent in diagnosing free air in the abdomen
- Good in diagnosing bowel obstruction & stones/calcifications

## ❖ DISADVANTAGES:

- Radiation
- Poor soft tissue details



## ❖ INDICATIONS

- Abdominal pain
- Bowel obstruction
- Stones
- Masses
- Trauma
- Others, foreign body, supportive lines.. Etc

## ❖ CONTRAINDICATIONS:

- pregnancy

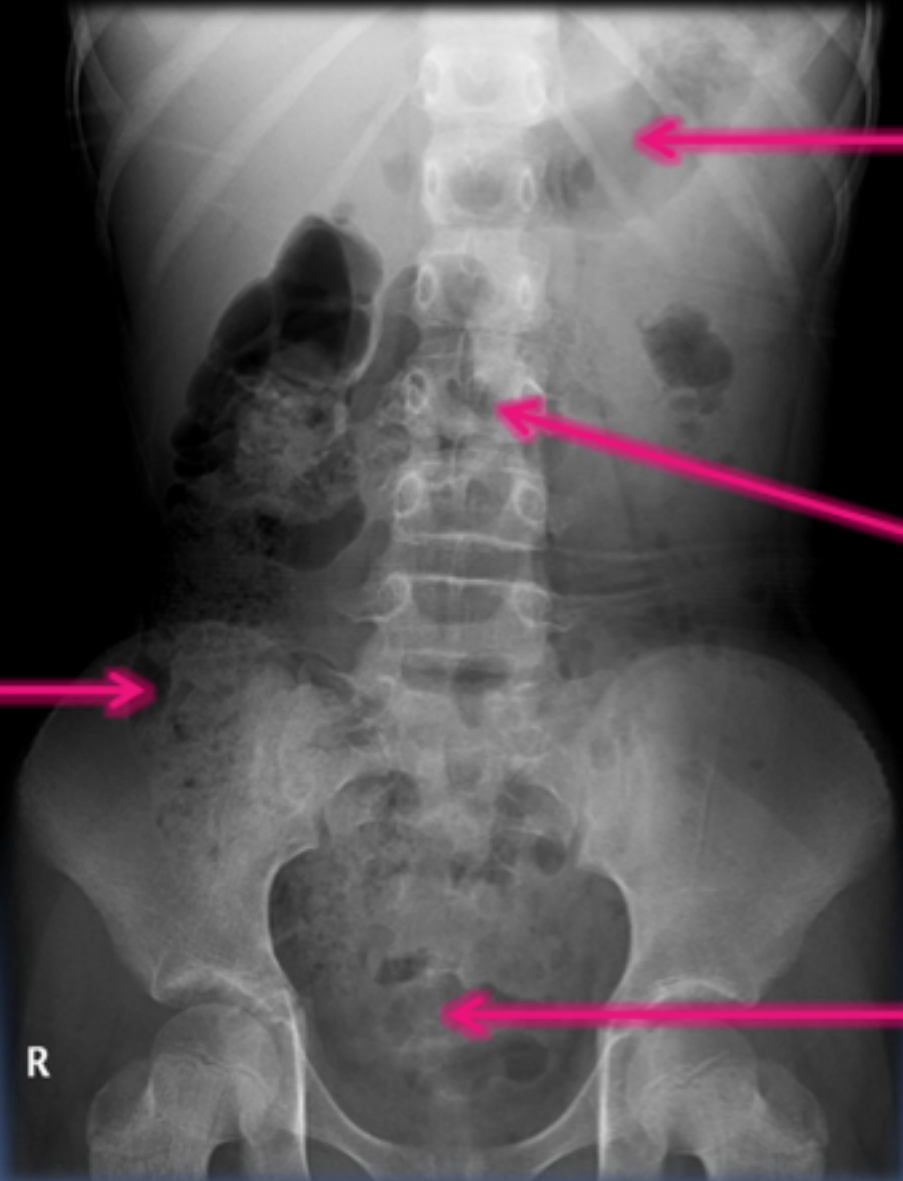
# NORMAL ABDOMEN X-RAY



**Standing**



**Supine**



**STOMACH**

**SMALL BOWEL**

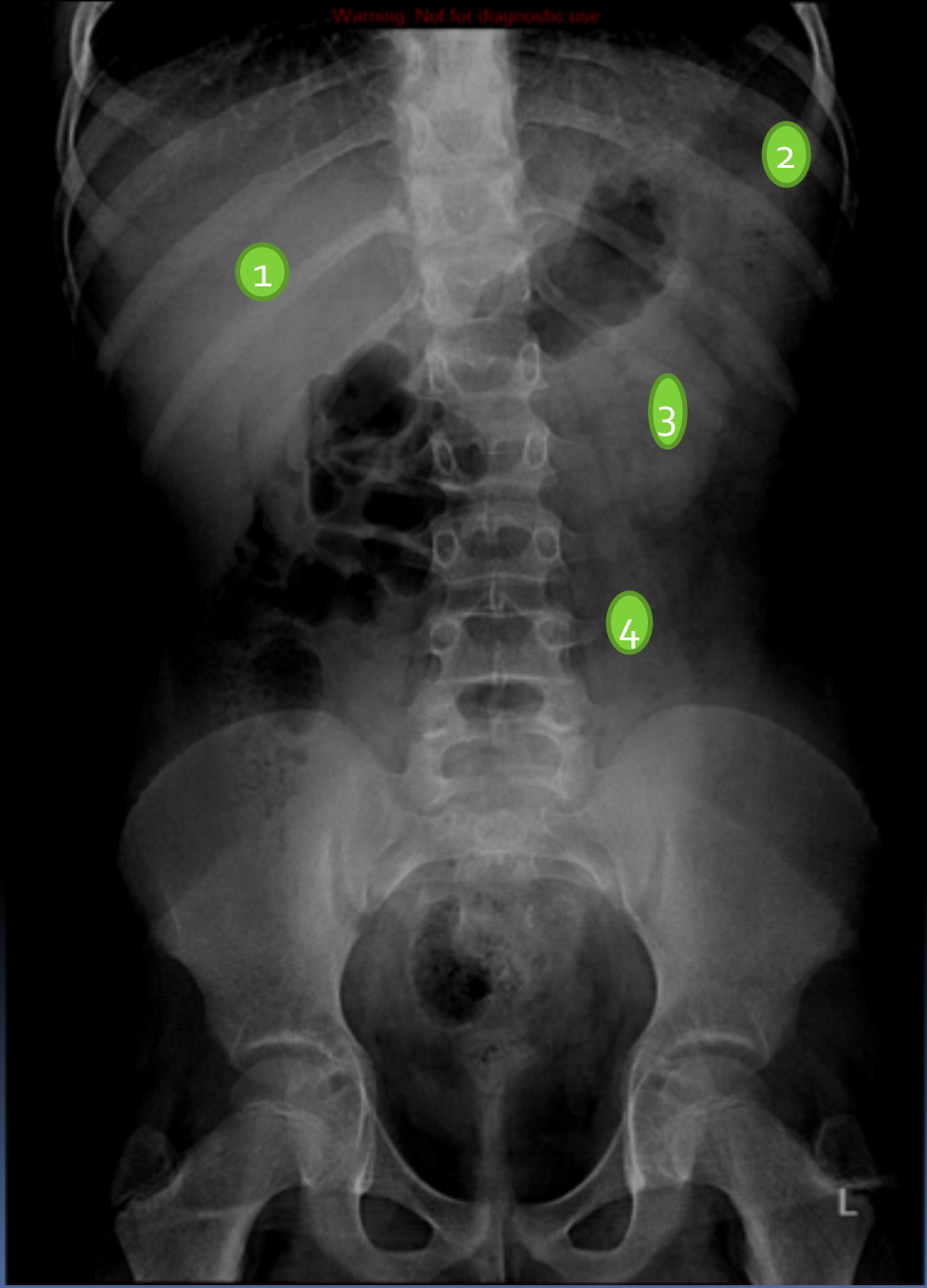
**LARGE BOWEL**

**RECTUM**

**R**



# Soft tissues



# Soft tissues

Liver

Spleen

Kidneys

Psoas muscles



Warning: Not for diagnostic use

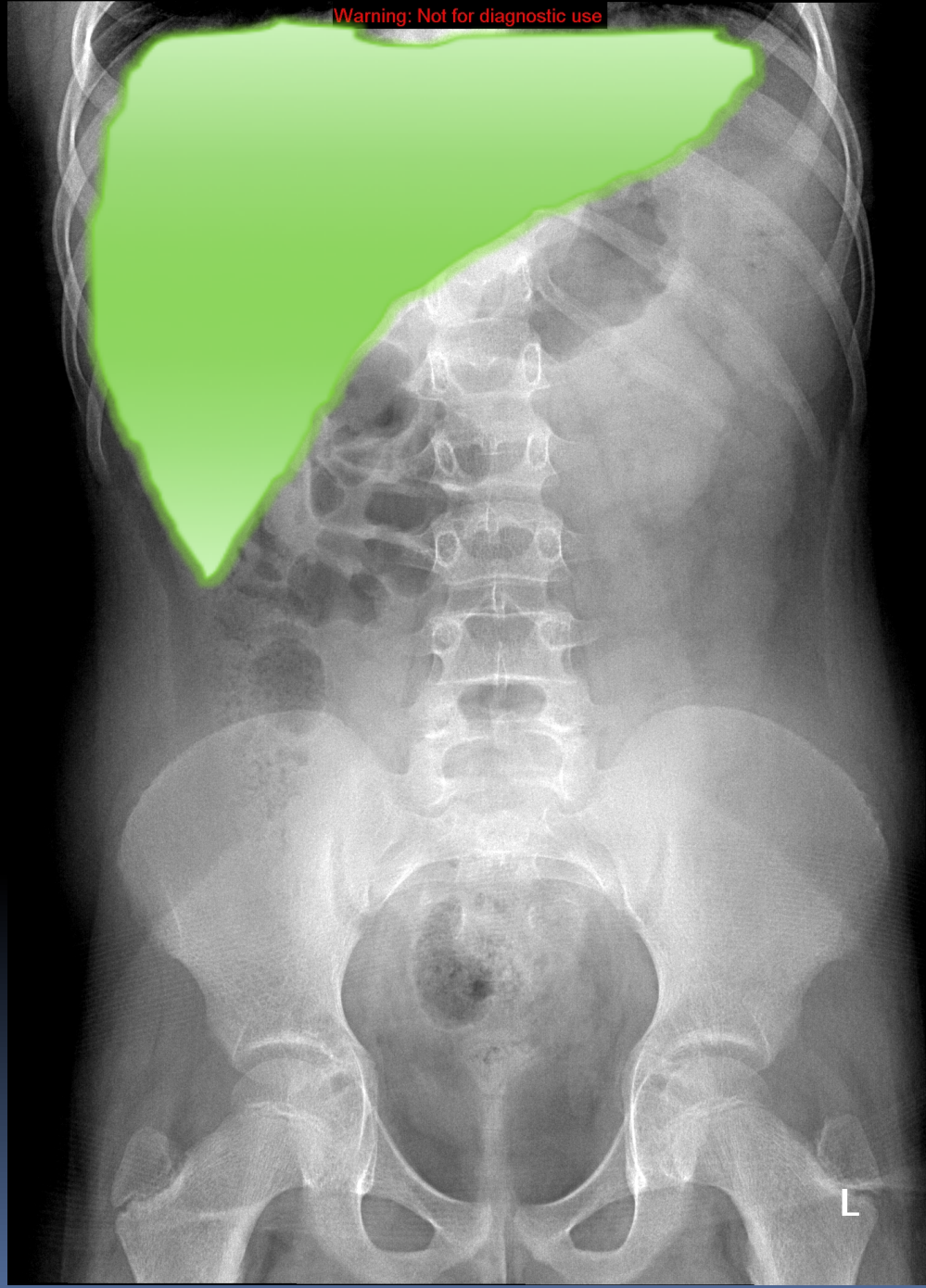
Soft  
tissues

*Liver*

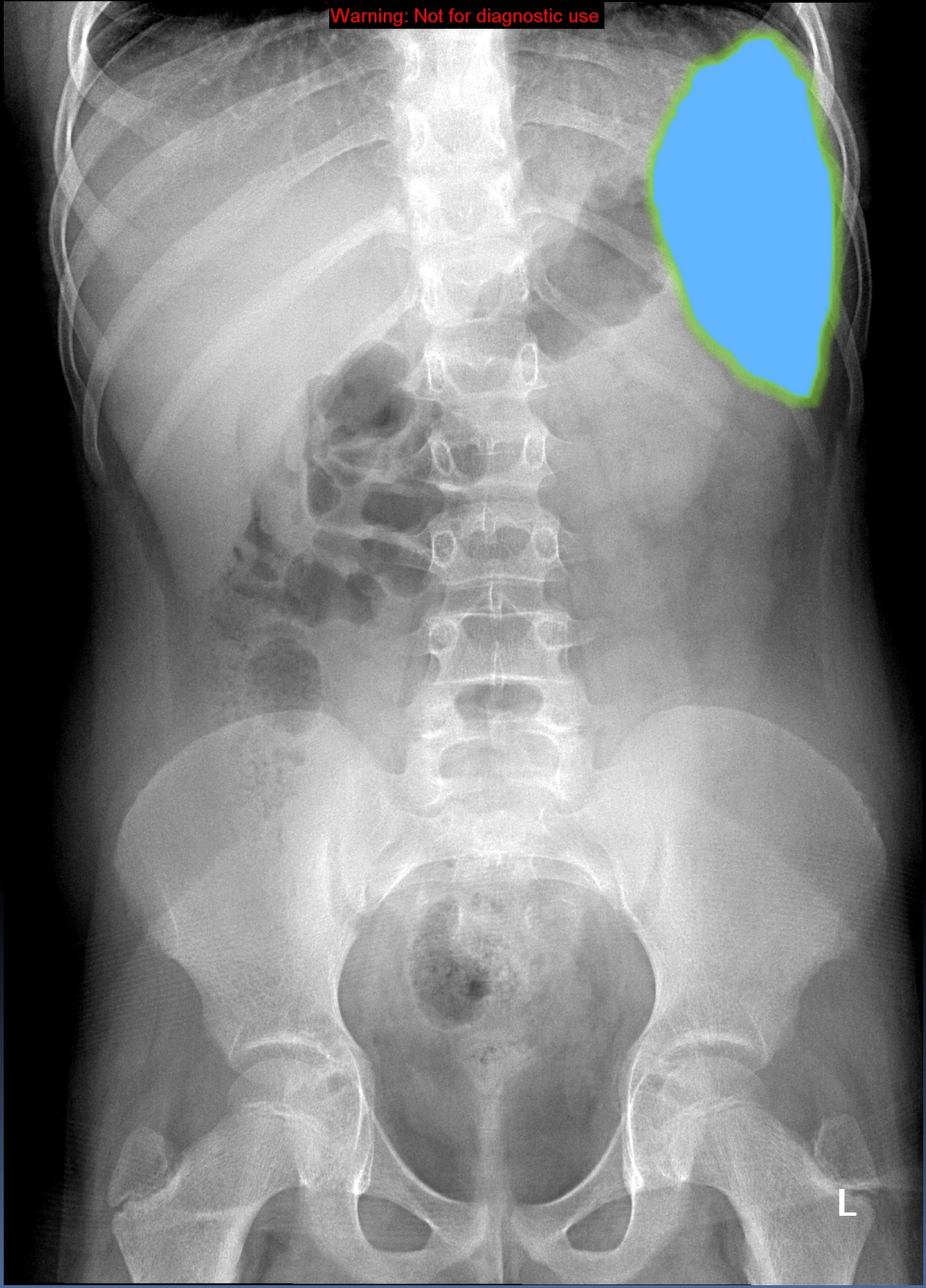
Spleen

Kidneys

Psoas muscles



Warning: Not for diagnostic use



Liver

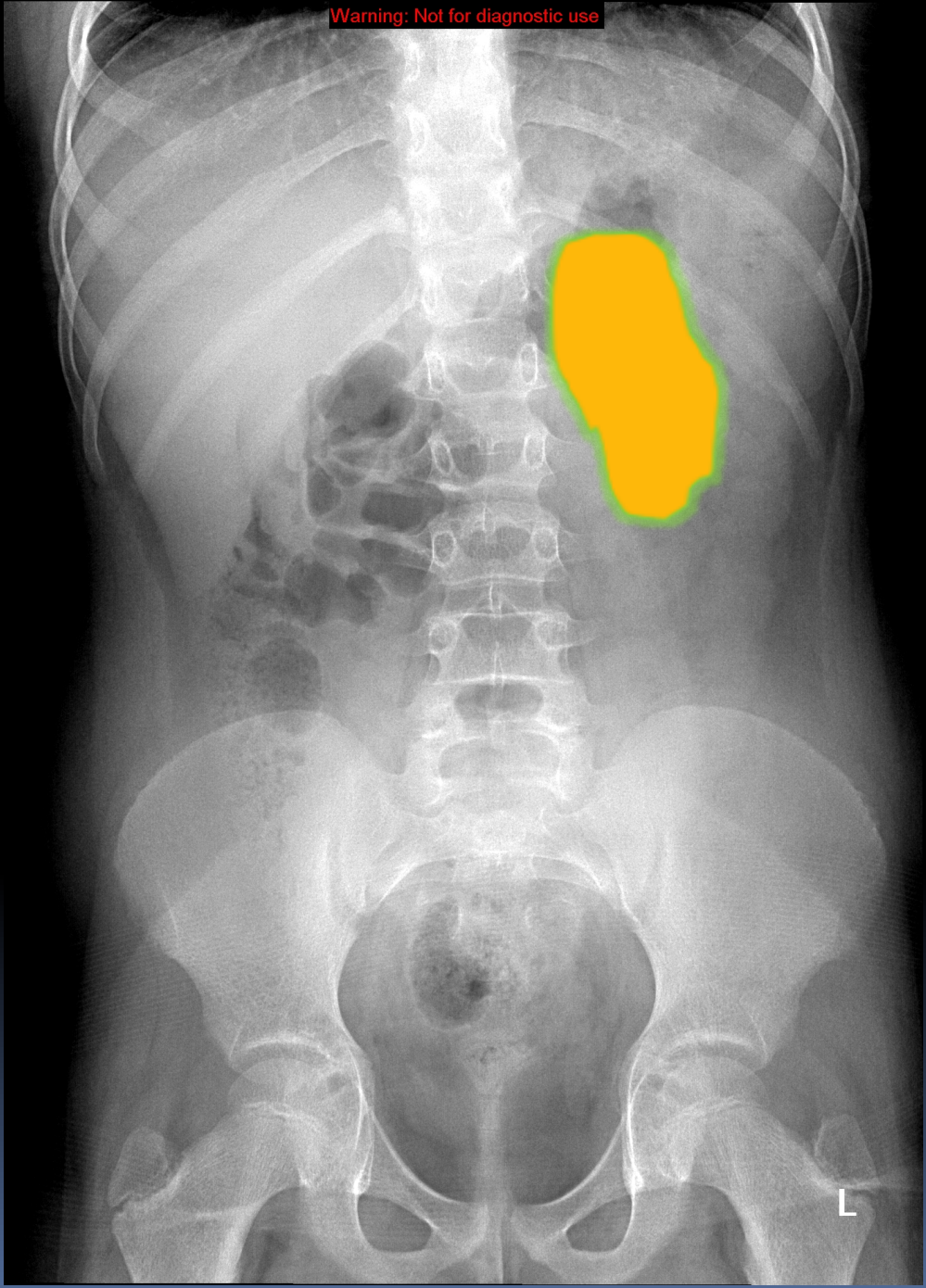
***Spleen***

Kidneys

Psoas muscles





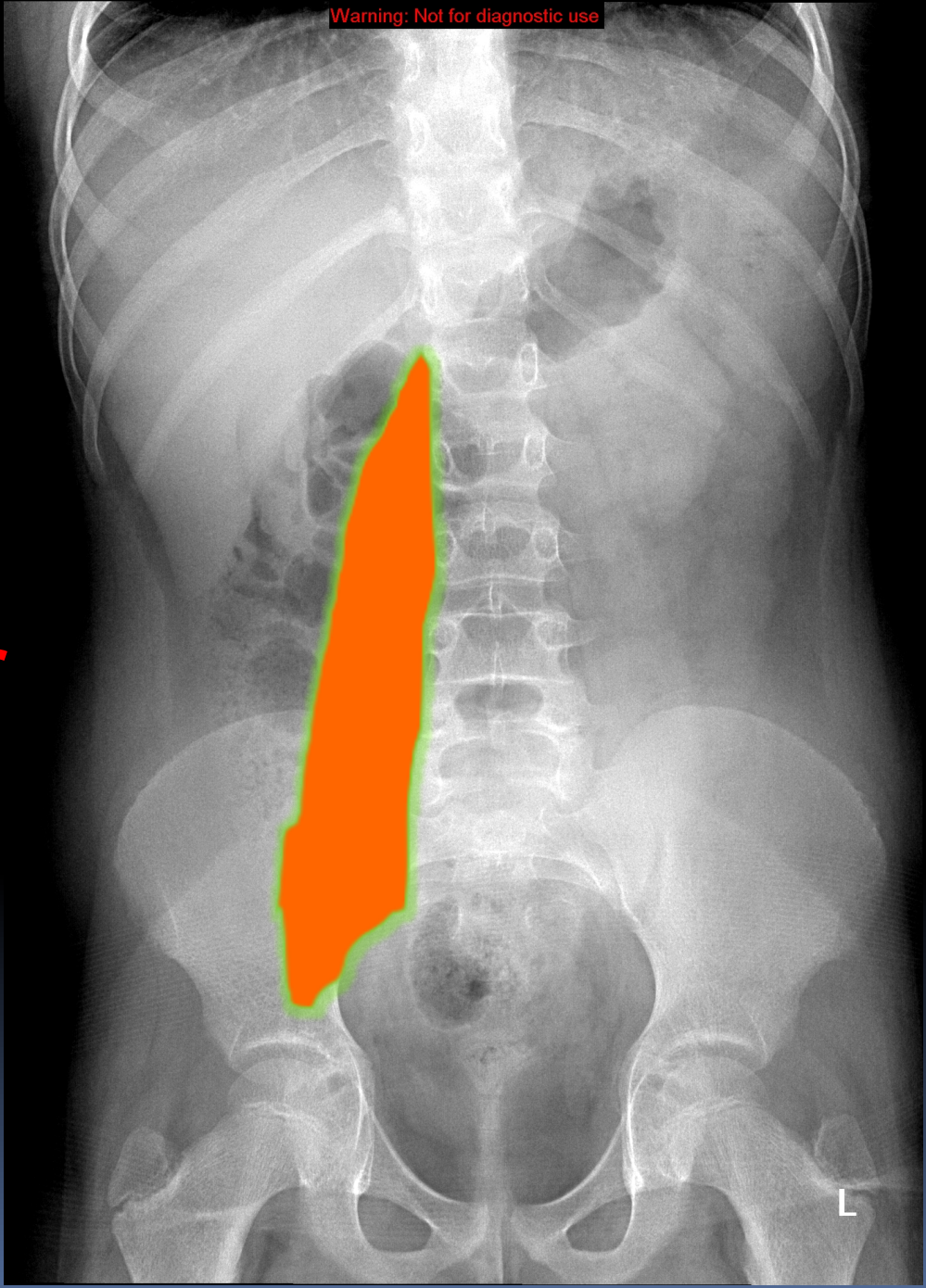


Liver  
Spleen  
***Kidney***  
Psoas muscles

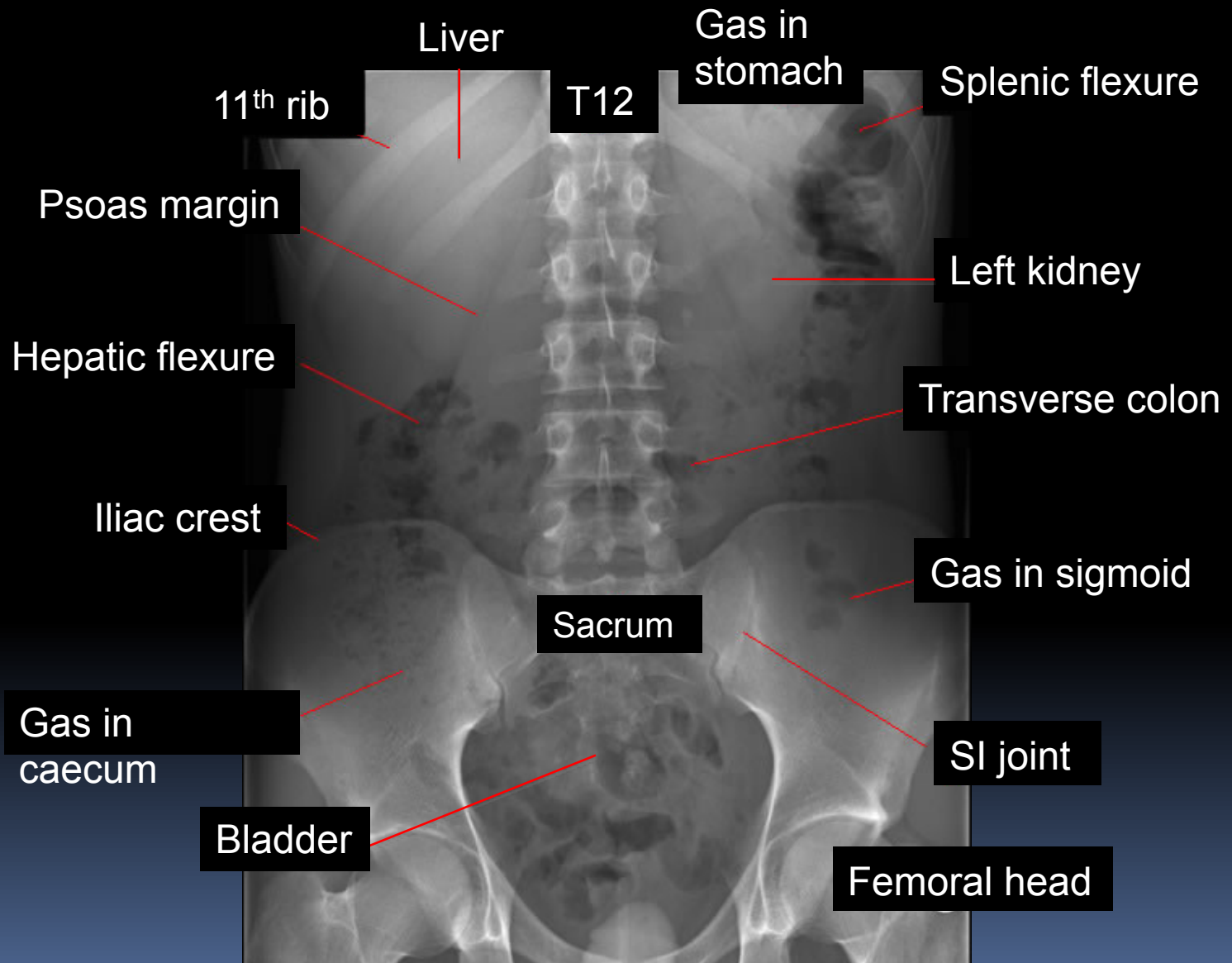


Liver  
Spleen  
Kidneys

***Psoas muscles***



# Normal AXR

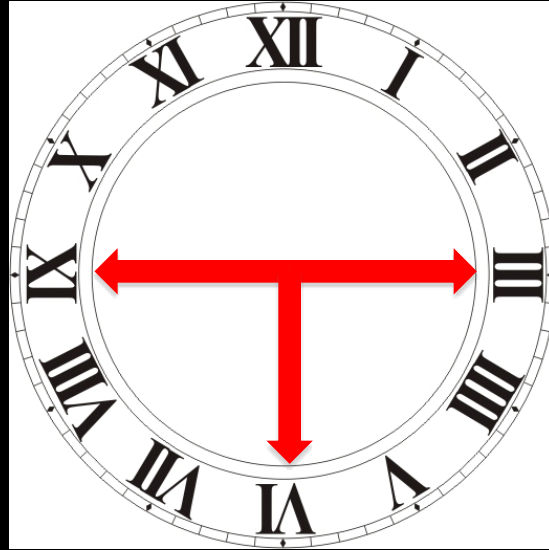


# What is normal?

- **Stomach**
  - Almost always air in stomach
- **Small bowel**
  - Usually small amount of air in 2 or 3 loops
- **Large bowel**
  - Almost always air in rectum and sigmoid
  - Varying amount of gas in rest of large bowel



# 3,6,9 RULE



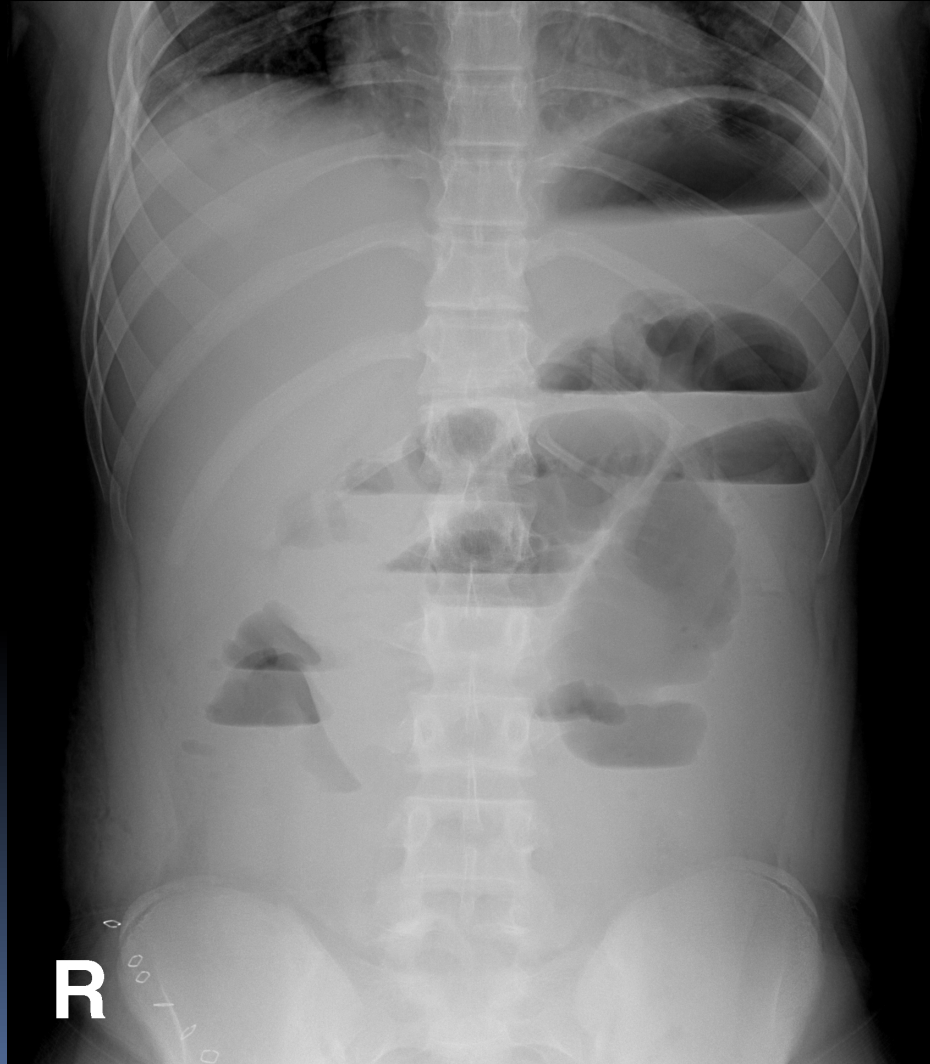
## Maximum Normal Diameter of bowel

Small bowel 3cm

Large bowel 6cm

Caecum 9cm

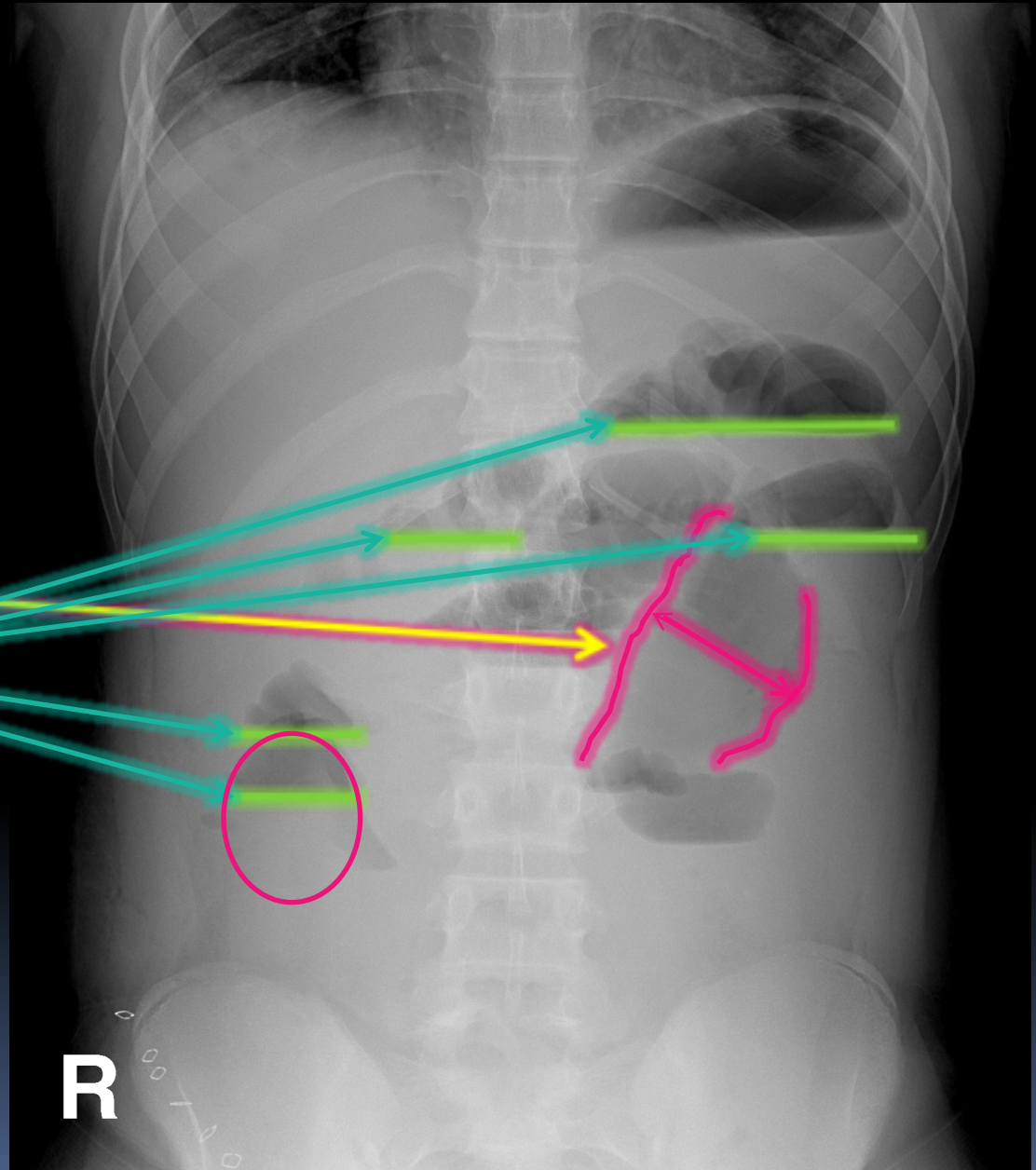
Is this X ray normal or abnormal ? and Why?



is **ABNORMAL**

**BOWEL OBSTRUCTION**

- Dilated bowel loops
- Air fluid levels

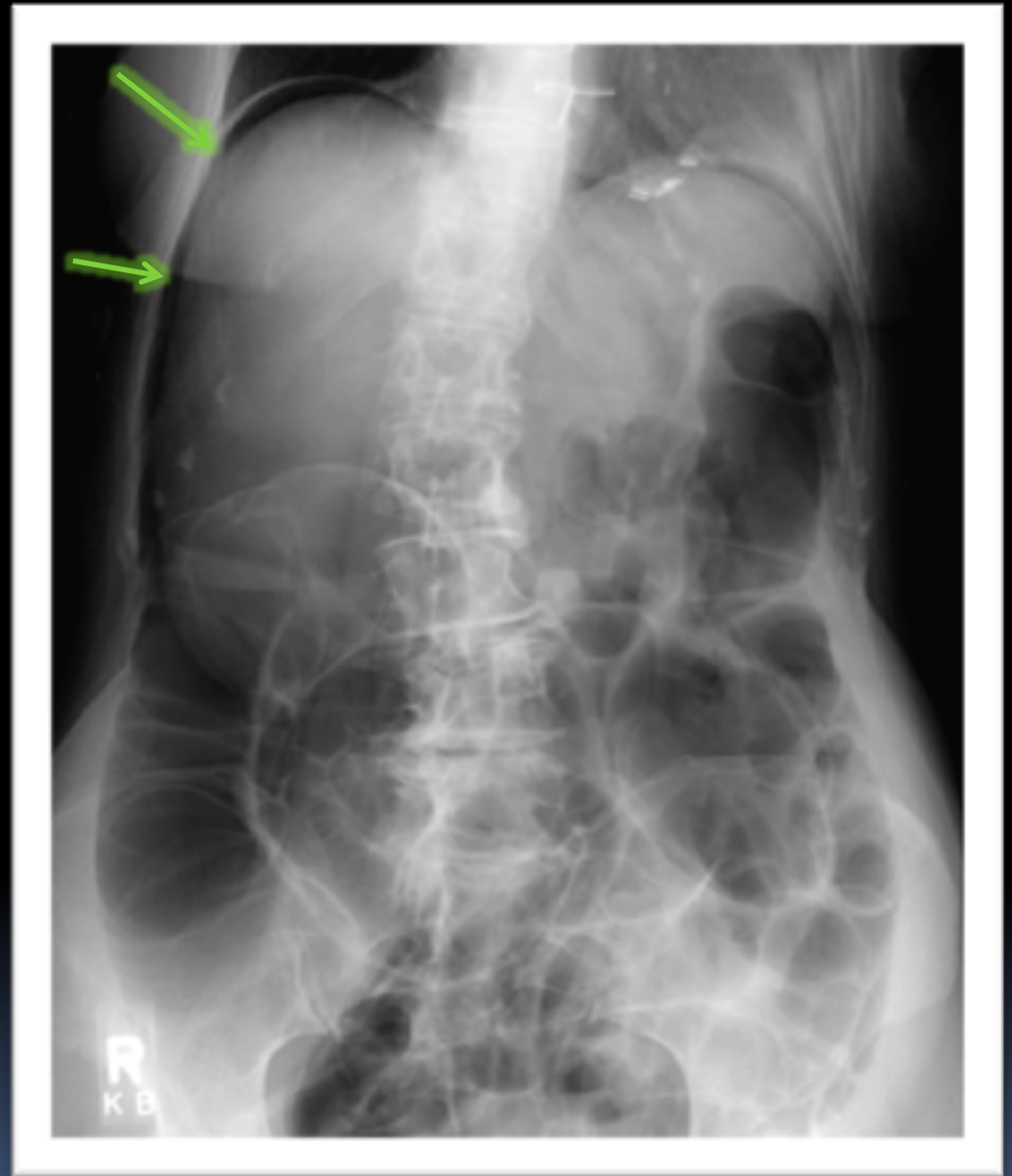


**Is the air inside or outside the bowel loops?**





**It is outside  
(pneumoperitonium)**



# Fluoroscopy



**X-RAY**

+



**ORAL  
CONTRAST**



**Barium swallow ----->**

**Esophagus**

**Barium meal ----->**

**Stomach**

**Barium follow through ----->**

**Small bowel**

**Barium enema ----->**

**Large bowel**



## ❖ ADVANTAGES:

- Available
- Relatively cheap
- **Excellent** in evaluation the bowel **lumen and mucosa**

## ❖ DISADVANTAGES:

- Radiation
- Poor in evaluating extra luminal pathologies

## ❖ INDICATIONS

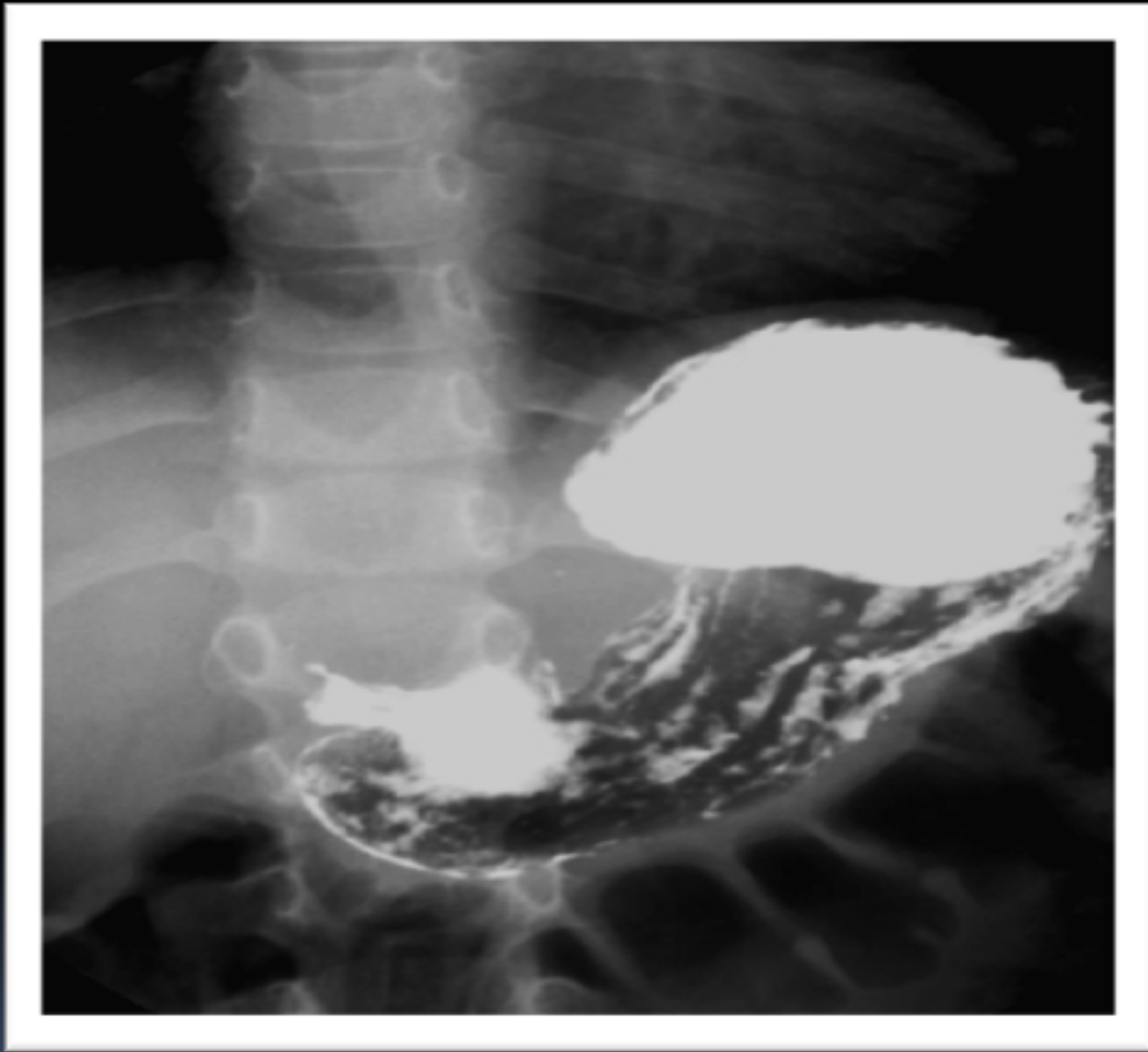
- Assessing the mucosal outline
- Abdominal pain
- Gastro esophageal reflux
- Masses
- Inflammatory bowel diseases
- Post surgical, leak

## ❖ CONTRAINDICATIONS:

- Pregnancy
- Bowel obstruction
- Bowel perforation (with barium type of contrast)



**BARIUM SW ALLOW**



**BARIUM MEAL**

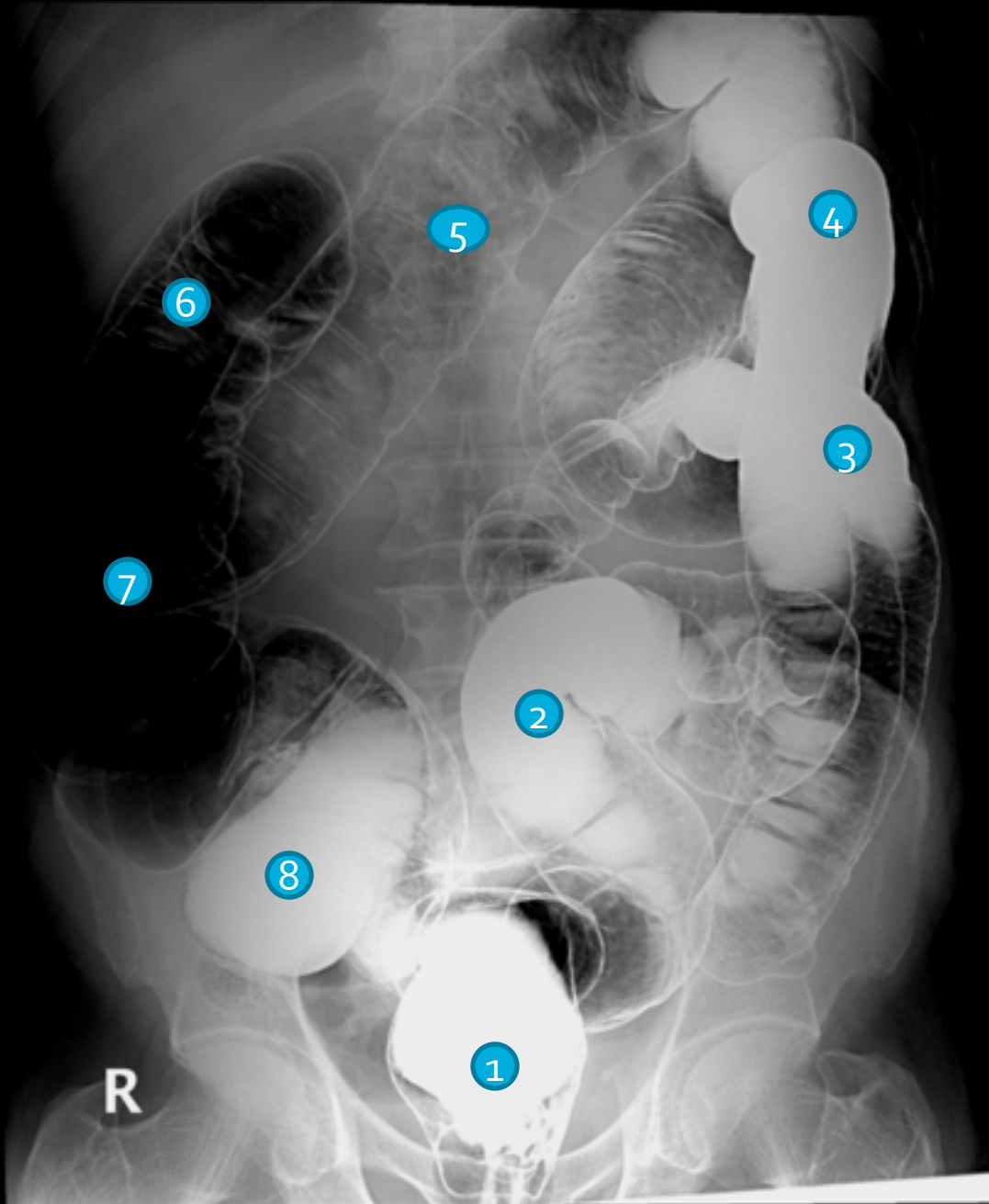


# BARIUM FOLLOW THROUGH



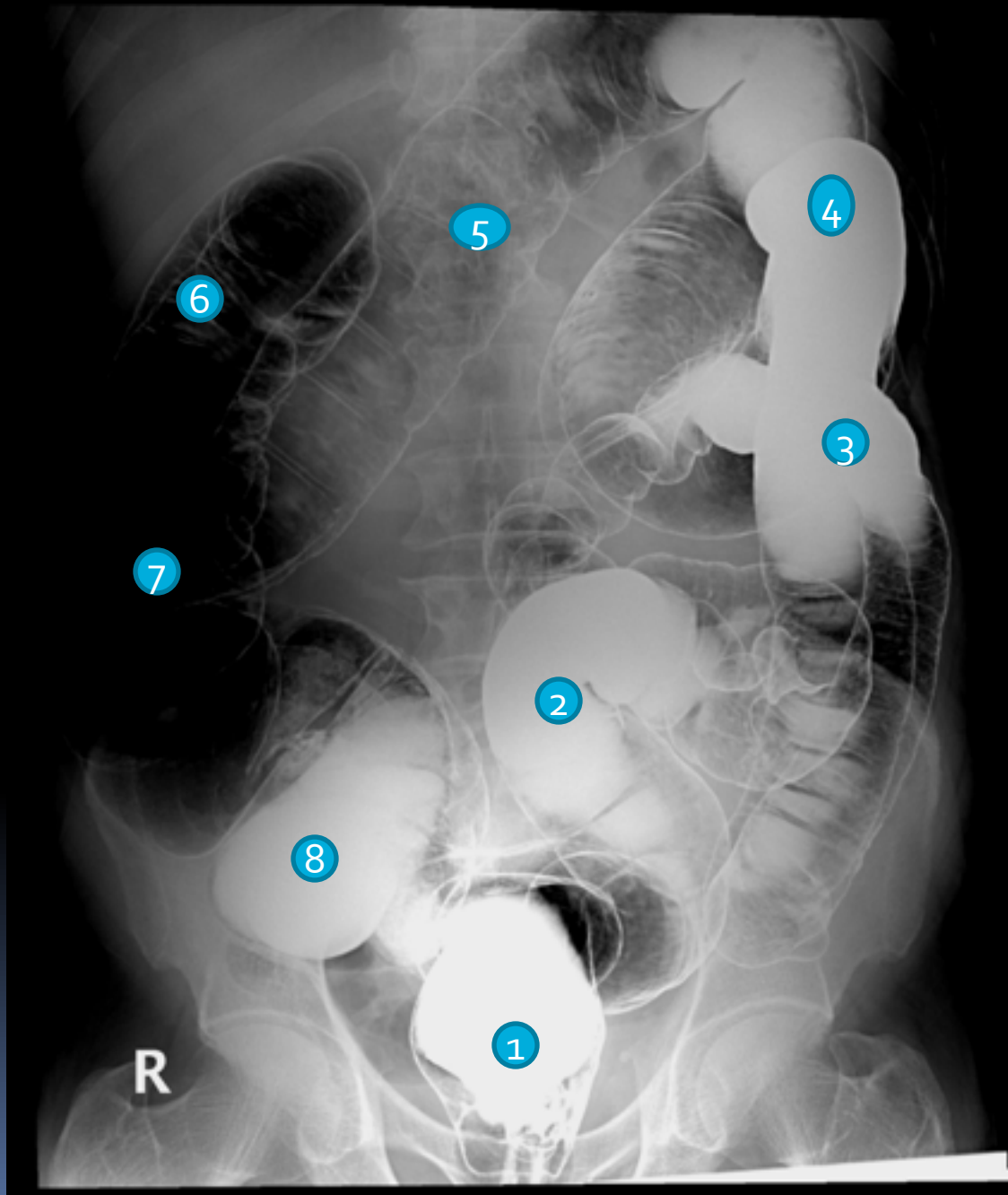


**BARIUM ENEMA**



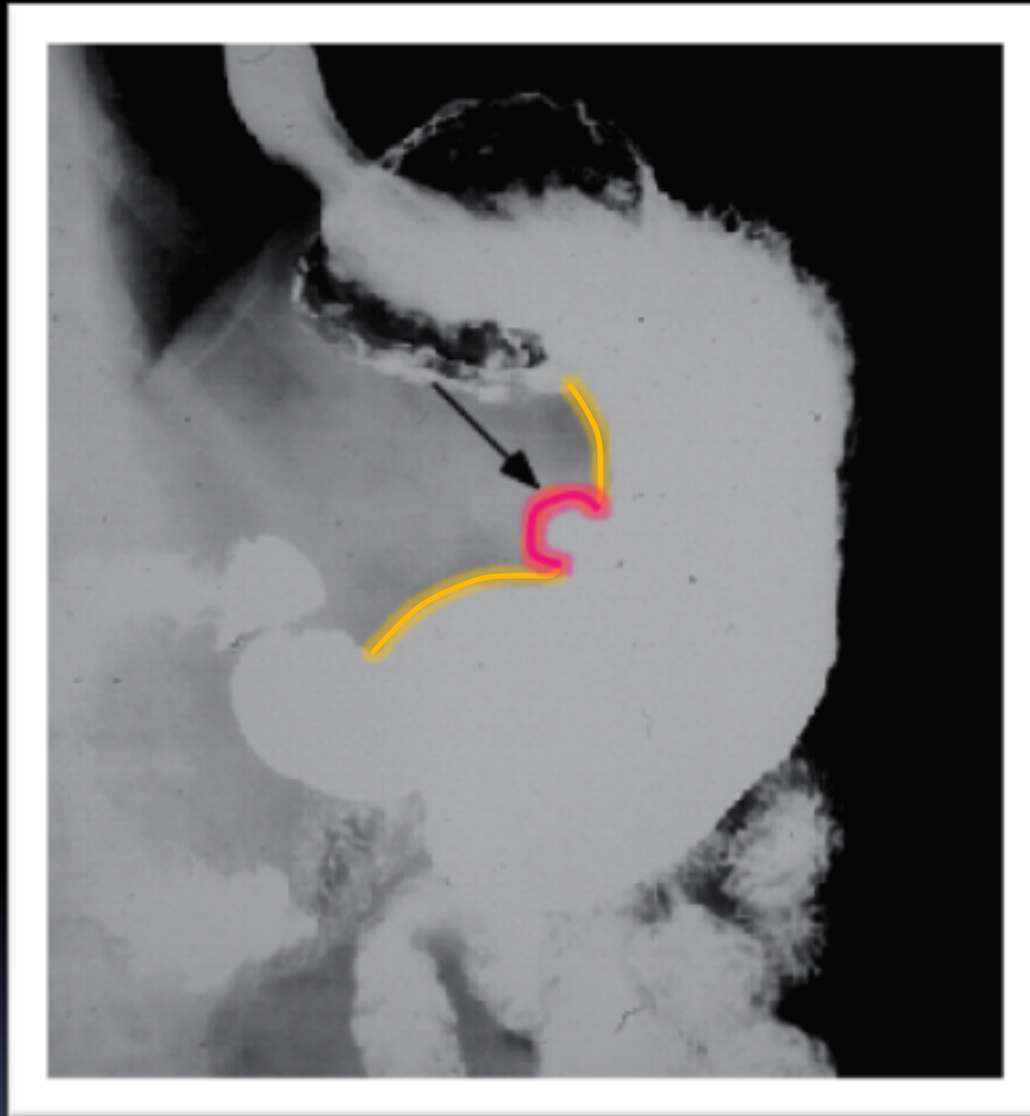
What type of this study?

1. Rectum
2. Sigmoid colon
3. Descending colon
4. Splenic flexure
5. Transverse colon
6. Hepatic flexure
7. Ascending colon
8. cecum



**What is abnormal here?**





**Peptic ulcer disease**

**What is abnormal in this barium enema?**



# Colon mass/malignancy (Apple core appearance)



# CT scan







## ❖ ADVANTAGES:

- Available
- Short scan time
- Much more soft tissue and bone details
- **Excellent** in diagnosing **extra-luminal lesions**
- **Excellent** in diagnosing the **cause** of bowel obstruction

## ❖ DISADVANTAGES:

- Radiation
- Some times need intra venous contrast (renal disease)
- Relatively expensive

## ❖ INDICATIONS

- Abdominal pain
- To look for bowel obstruction cause
- To diagnose intra-abdominal masses
- Trauma

## ❖ CONTRAINDICATIONS:

- Pregnancy
- No IV contrast in renal failure
- Unstable patients (severe trauma/ICU)





**Where is this mass ? Inside or outside the bowel loops?**



It is **OUTSIDE**  
the bowel and  
causing mass  
effect.



# MRI





## ❖ ADVANTAGES:

- Relatively safe in pregnancy (no radiation)
- Give much more soft tissue details
- Excellent in diagnosing abdominal solid organ lesion: liver, spleen, kidneys

## ❖ DISADVANTAGES:

- Expensive
- Long scanning time
- Sensitive to motion





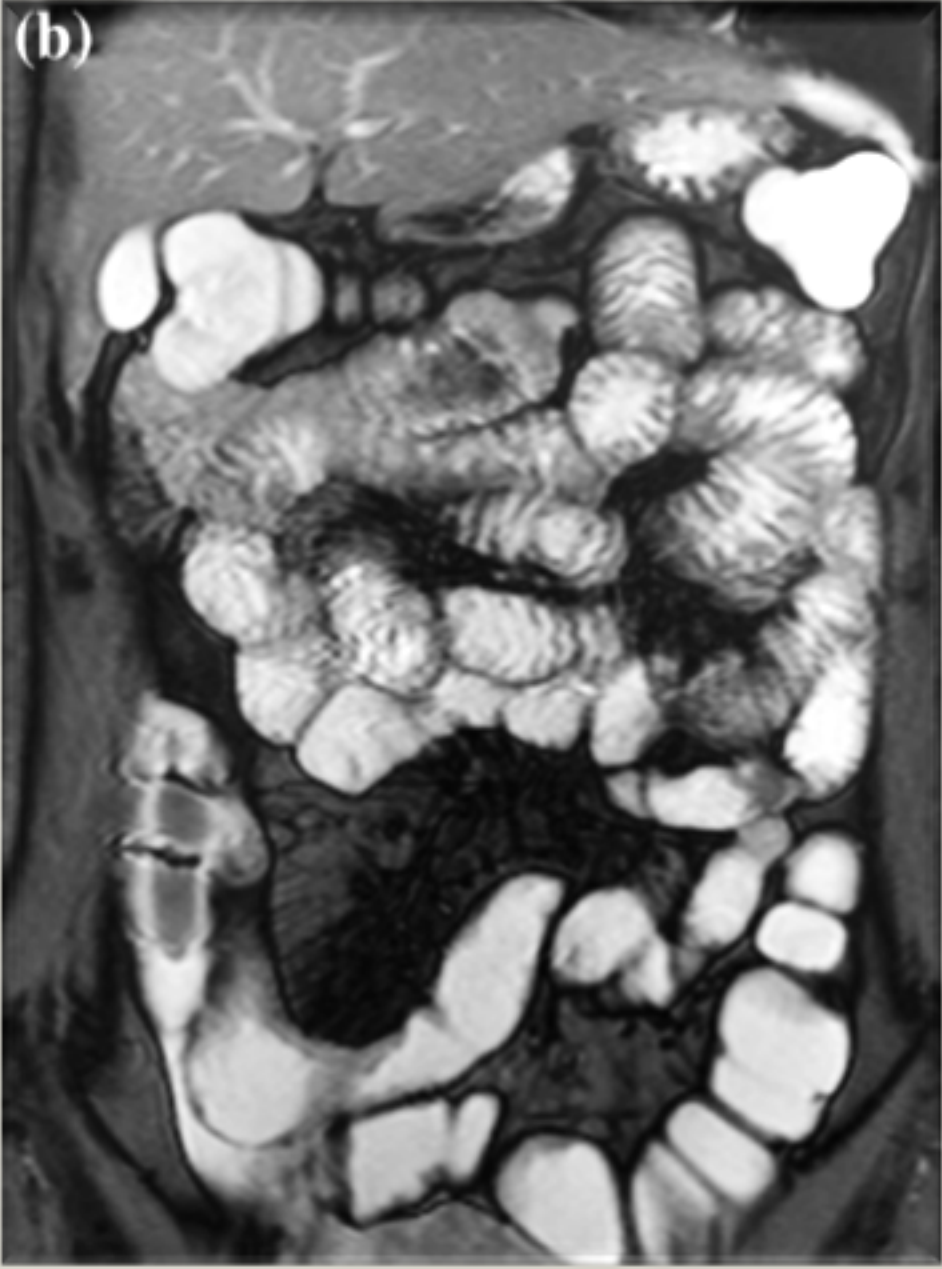
## ❖ INDICATIONS

- Abdominal **solid** organ masses
- Inflammatory bowel disease

## ❖ CONTRAINDICATIONS:

- uncooperative patients
- Early pregnancy (relative contraindication)
- No IV contrast renal failure (relative contraindication)

(b)



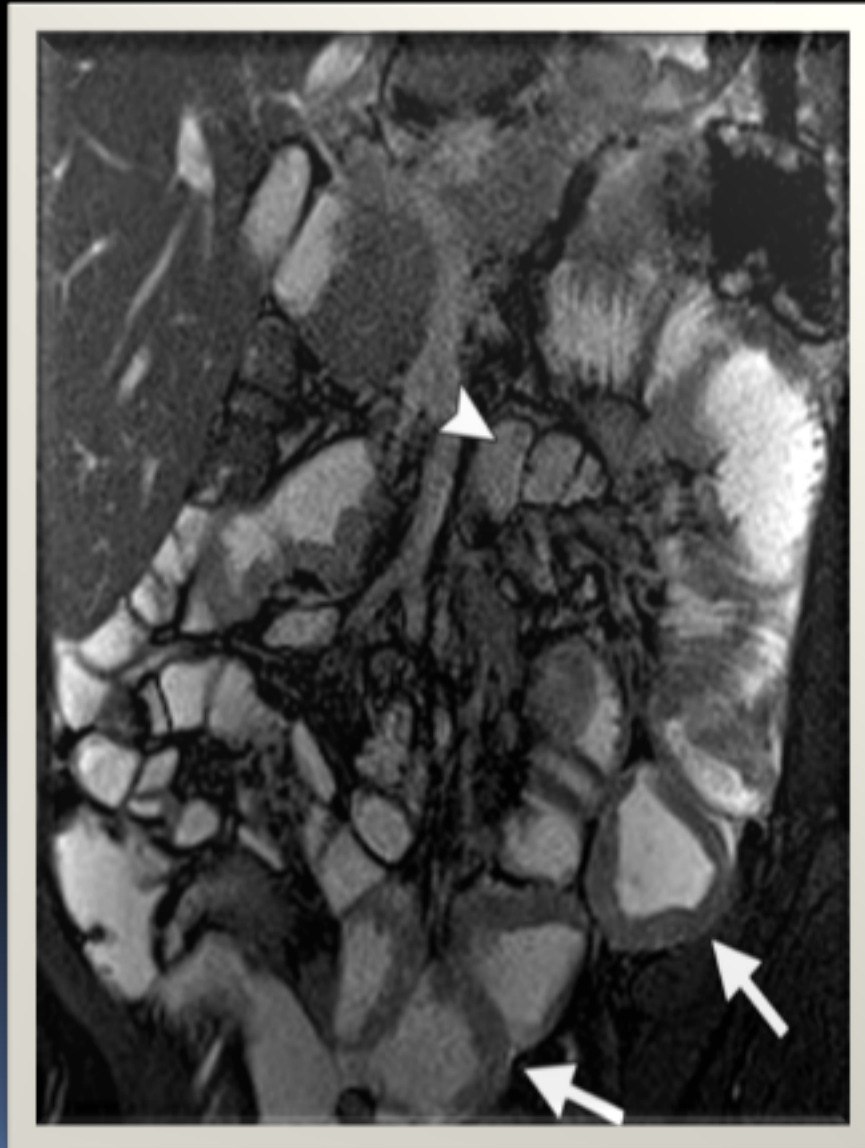


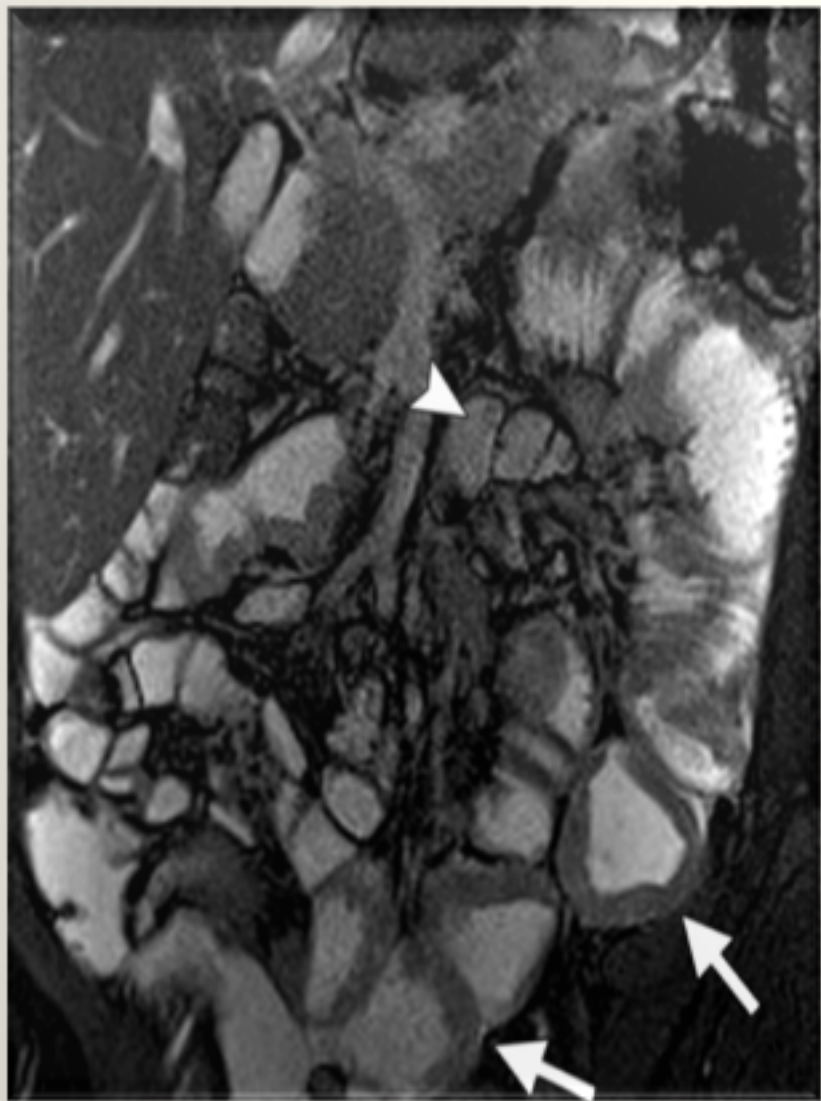
CT scan



MRI

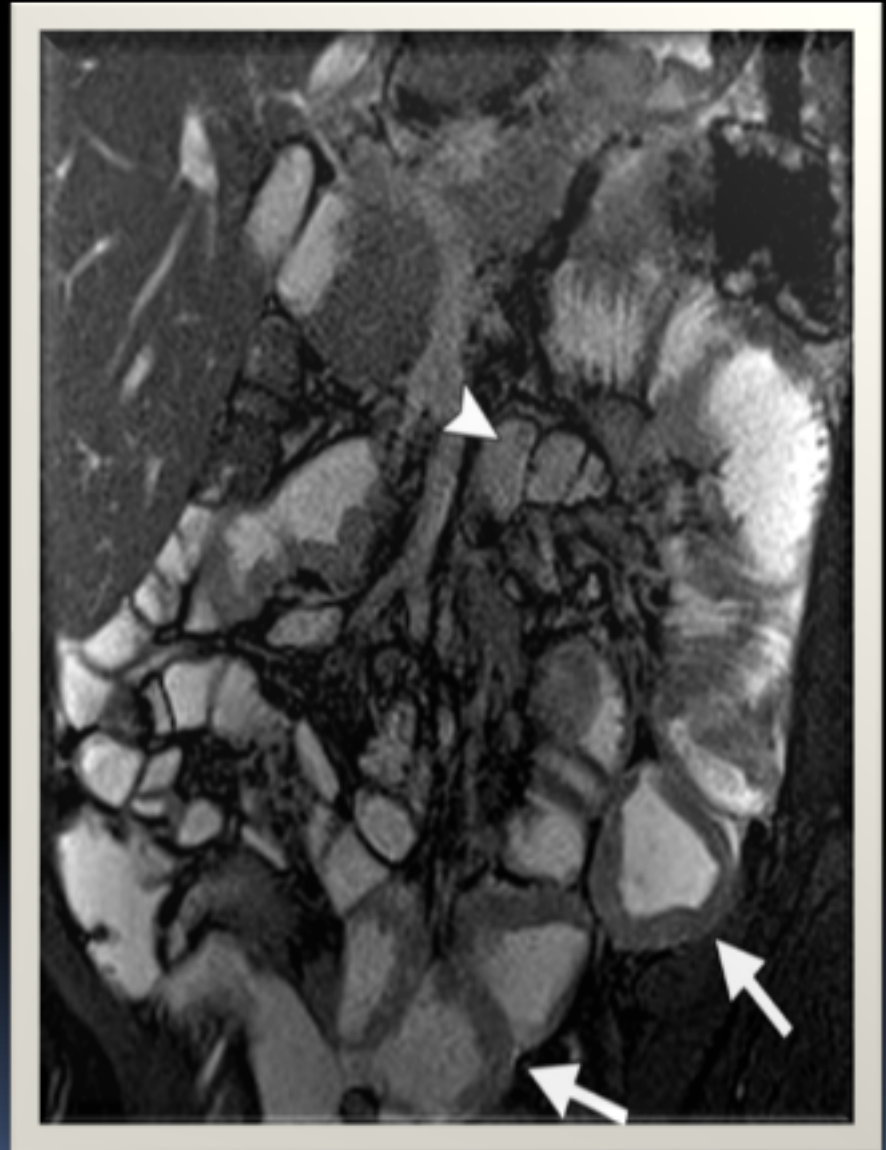
**Can you identify what is abnormal ?**





# Inflammatory bowel disease

- Bowel wall thickening





THANK YOU