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韦超,董江宁,李乃玉,韦树华,高飞.3.0T MR肝脏三维容积内插快速采集多期增强联合DWI在宫颈癌治疗前评估和分期中的价值[J].中国医学影像技术,2013,29(12):2015~2019

3.0T MR肝脏三维容积内插快速采集多期增强联合DWI在宫颈癌治疗前评估和分期中的价值

Value of 3.0T MR LAVA-Flex multi-phase enhancement techniques combined with DWI in preoperative evaluation and staging of cervical cancer

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中文摘要:

目的 探讨3.0T MR肝脏三维容积内插快速采集(LAVA-Flex)增强技术联合DWI在宫颈癌治疗前评估和分期中的价值。方法 收集病理诊断为宫颈癌且治疗前接受MR检查的46例患者,其中29例接受手术治疗。综合应用LAVA-Flex增强技术、DWI、常规SE序列对宫颈癌进行影像学分期,评估宫颈肿块浸润范围和盆腔淋巴结转移,与临床分期或手术病理进行对照研究。结果①与术后病理比较,29例宫颈癌MR分期准确率(27/29,93.10%)明显高于传统临床分期(18/29,62.07%,P<0.05)。②LAVA-Flex增强扫描评估肿瘤侵犯的准确率为97.73%(86/88),T2WI联合DWI的准确率为96.59%(85/88),两者联合应用准确率为98.86%(87/88)。③LAVA-Flex增强扫描结合DWI诊断淋巴结转移的准确率为99.47%(17/19),敏感度100%(10/10),特异度81.82%(9/11)。结论 LAVA-Flex增强技术联合DWI能准确、迅速地对宫颈癌进行分期,并能对宫颈癌治疗相关指标进行综合评估。

英文摘要:

Objective To explore the value of LAVA-Flex and DWI sequence in preoperative assessment and staging of cervical cancer. **Methods** Totally 46 patients with cervical cancer proved by pathology and underwent MR before treatment were collected, among them 29 patients underwent surgical operation. Radiological staging was performed with LAVA-Flex, DWI and spin echo sequences to describe tumor infiltration and lymph node metastasis, and the results were compared with those of clinical staging or pathology. **Results** ①Compared with postoperative pathology, the accuracy of MR staging (27/29, 93.10%) was significantly higher than that of traditional clinical stage (18/29, 62.07%) in 29 cases of cervical cancer (P < 0.05). ②The accuracy of contrast material-enhanced LAVA-Flex imaging in detecting neoplasm invasiveness was 97.73% (86/88), of T2WI with DWI was 96.59% (85/88), while of combination of these two methods was 98.86% (87/88). ③The accuracy, sensitivity and specificity of contrast material-enhanced LAVA-Flex imaging with DWI in detecting lymph node metastasis was 89.47% (17/19), 100% (10/10) and 81.82% (9/11), respectively. **Conclusion** Contrast-enhanced LAVA-Flex combined with DWI is accurate and rapid in staging of cervical cancer, which can be used to evaluate treatment-related indicators of cervical cancer.

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