

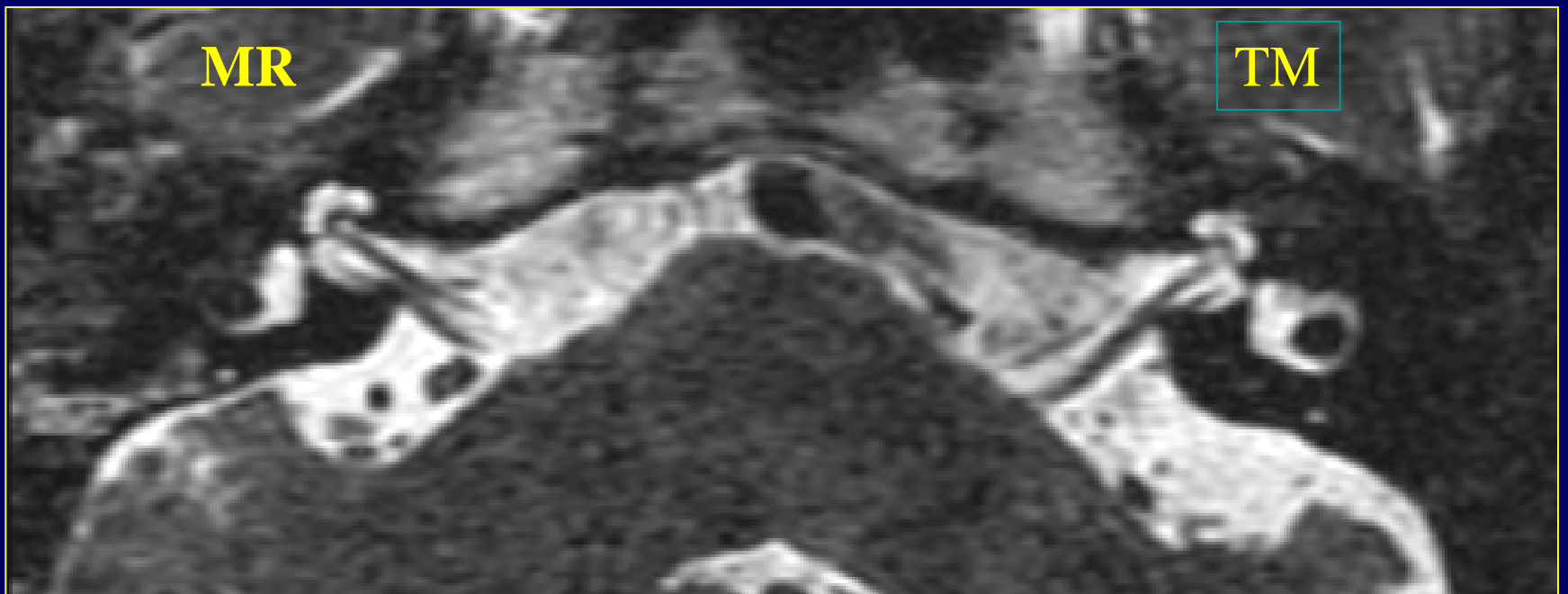
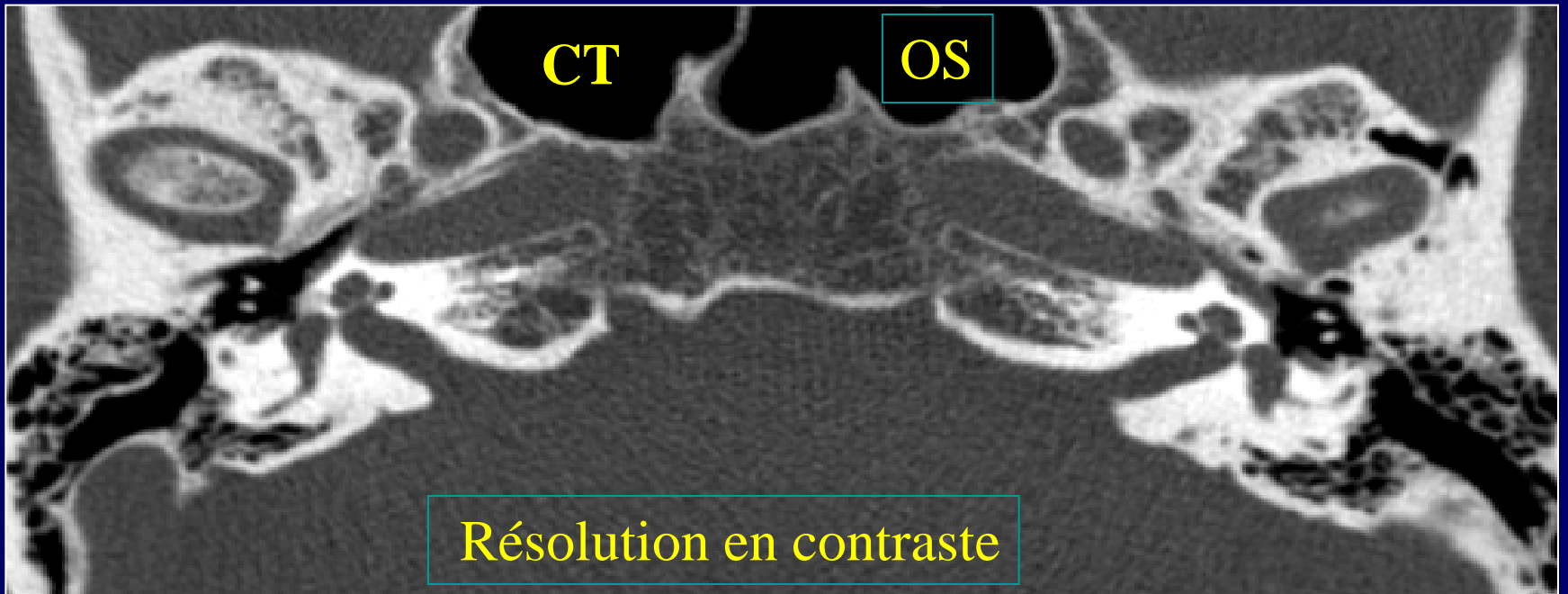
RDGN2120  
Compléments de Neuroradiologie

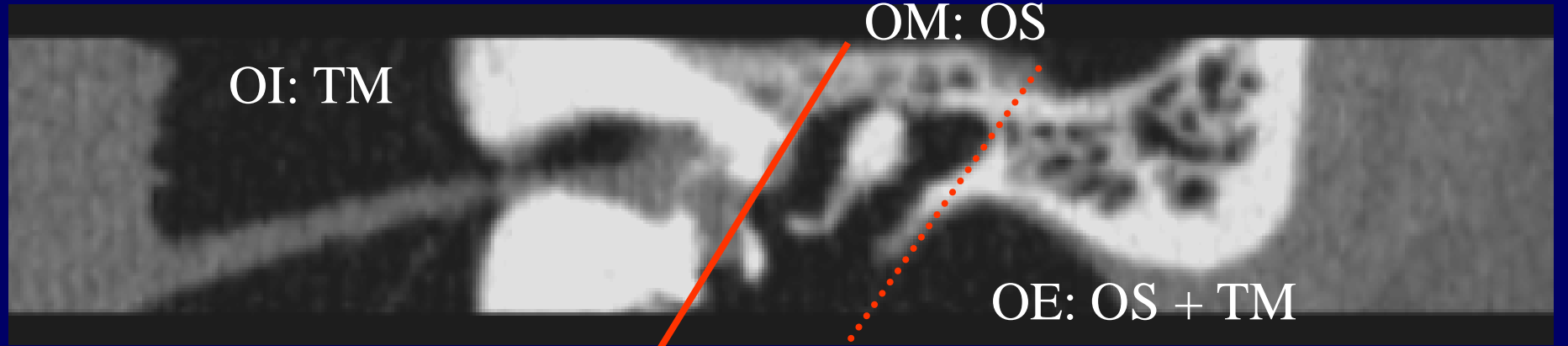
Année académique 2019-2010

# Imagerie des rochers

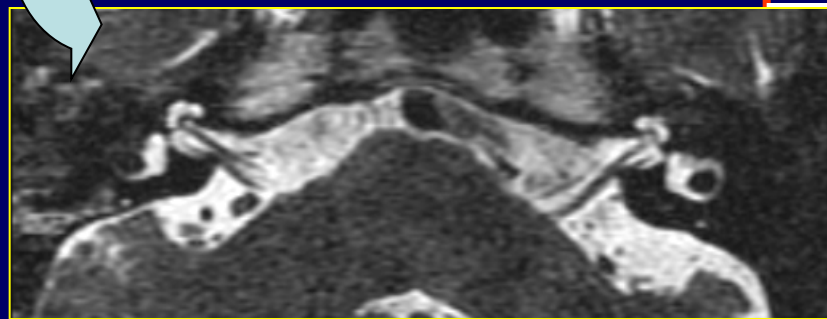


**Pr Thierry Duprez**  
*Professeur clinique (UCL)*  
*Chef de Clinique (UCL-St-Luc)*





hypoacousie  
neurosensorielle



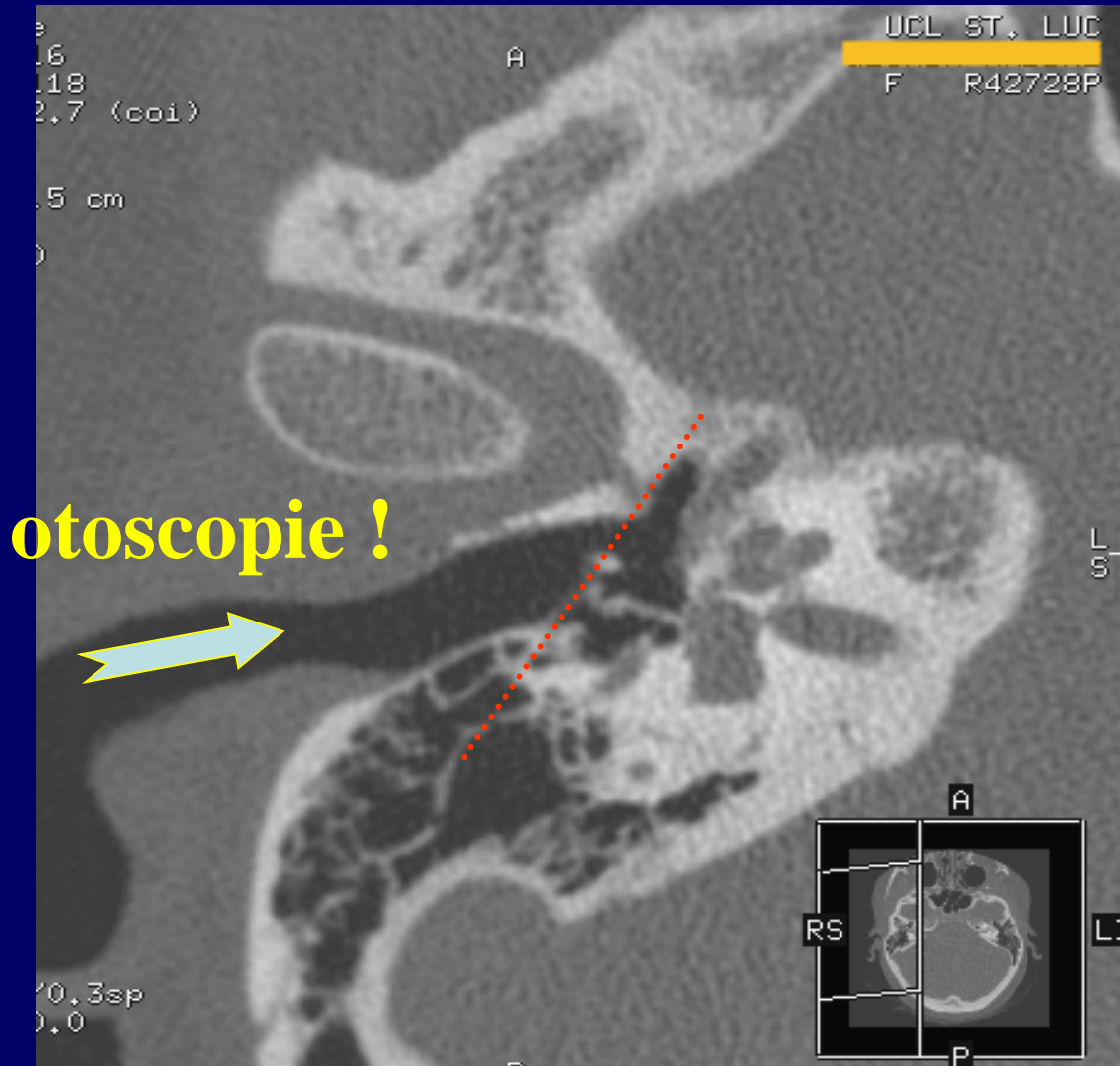
carcinome  
épidermoïde



hypoacousie  
transmissionnelle



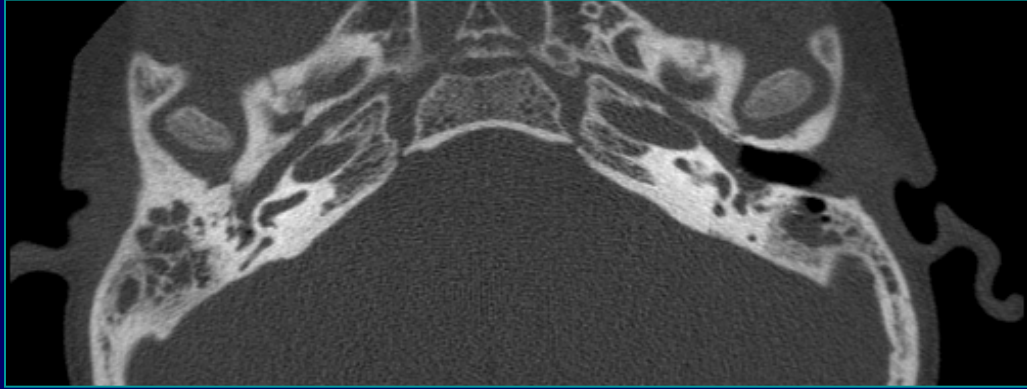
# Oreille externe



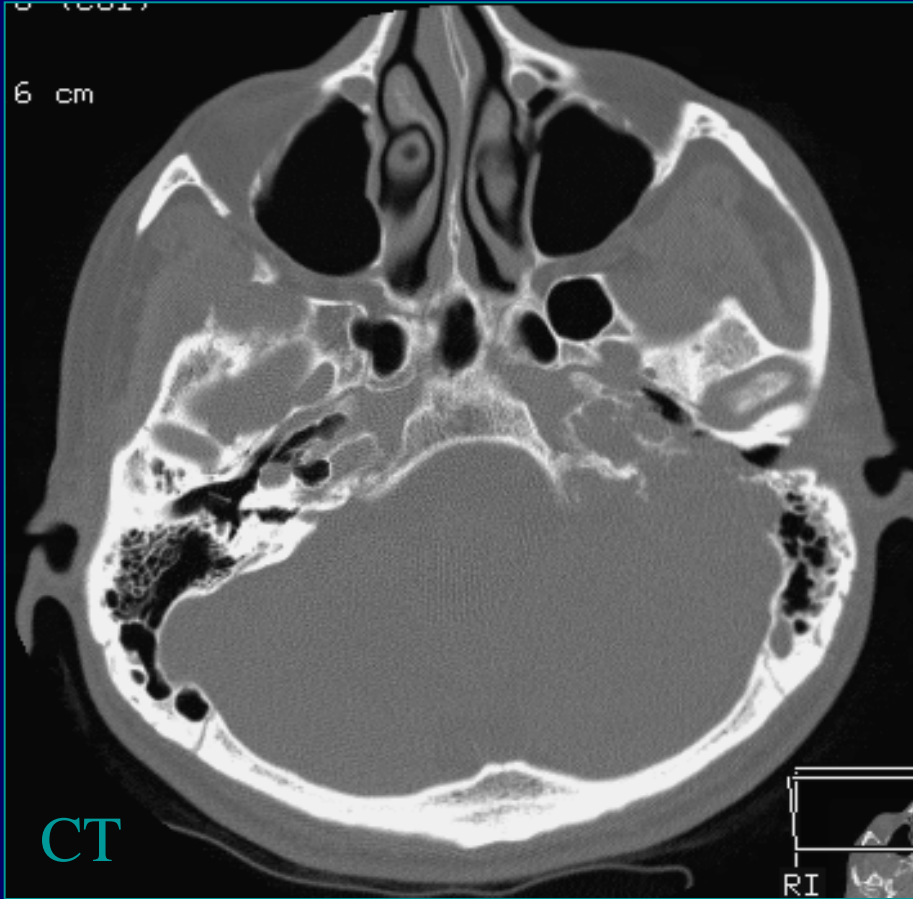
Os  
Cartilage  
Peau

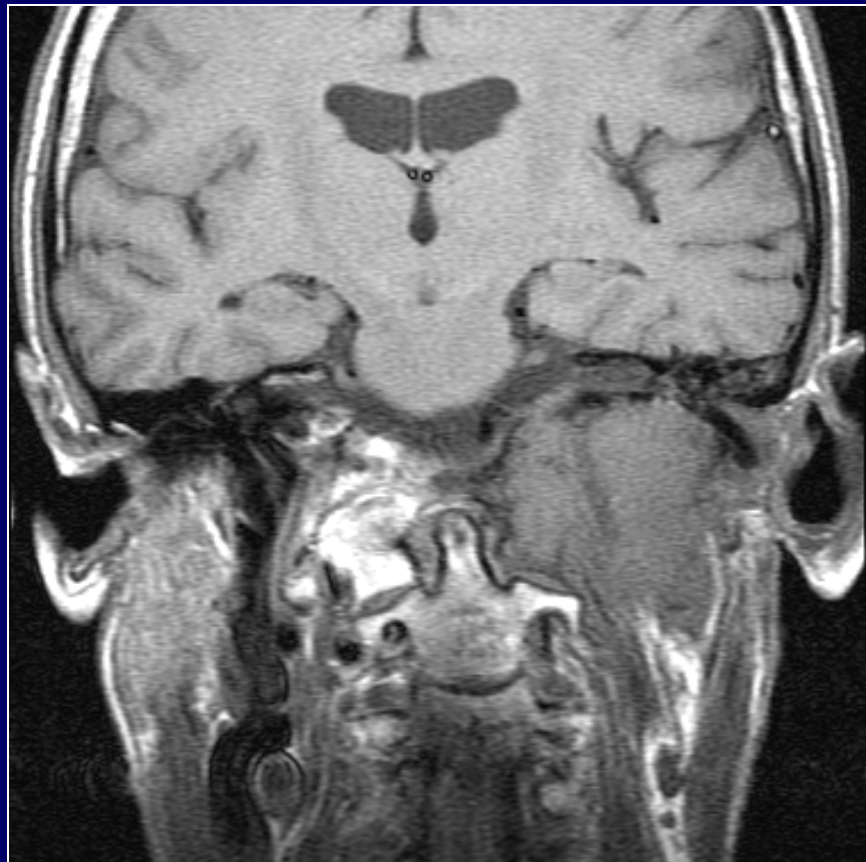
(poils, gl. cérumineuses)

## Oreille externe: malformations

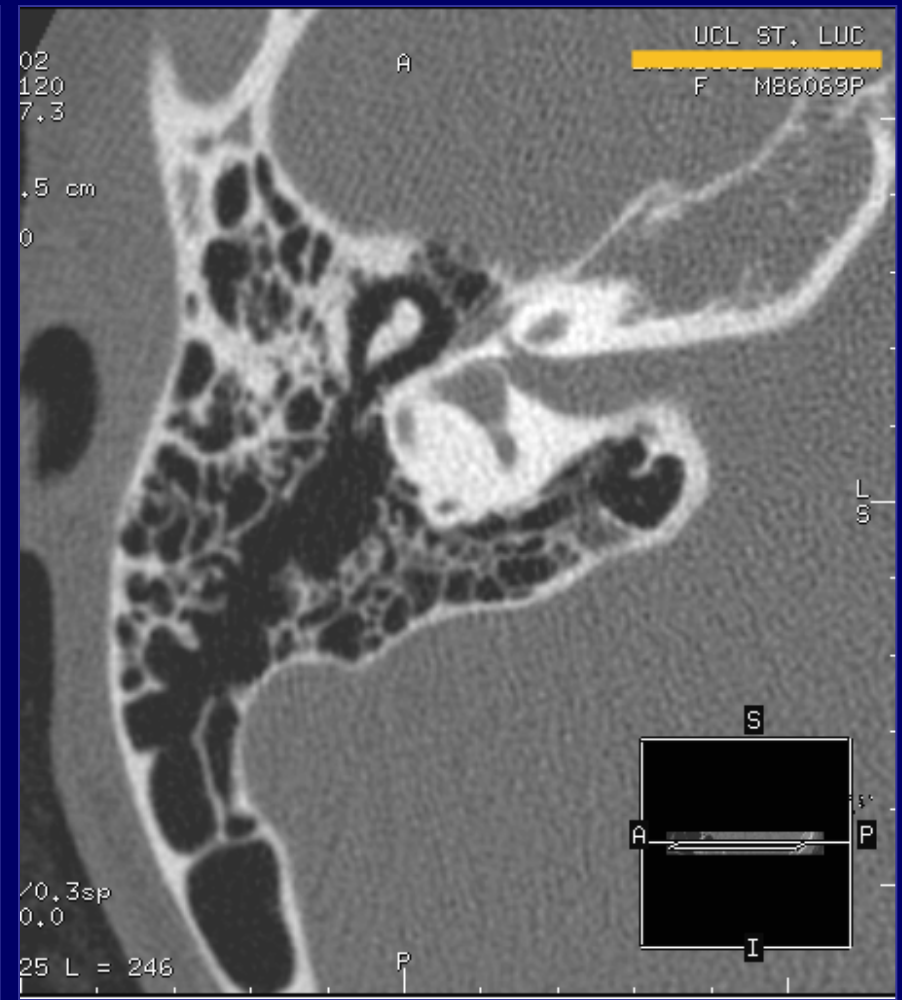


Pathologie maligne: carcinome épidermoïde  
adénocarcinome cérumineux  
carcinome adénoïde kystique





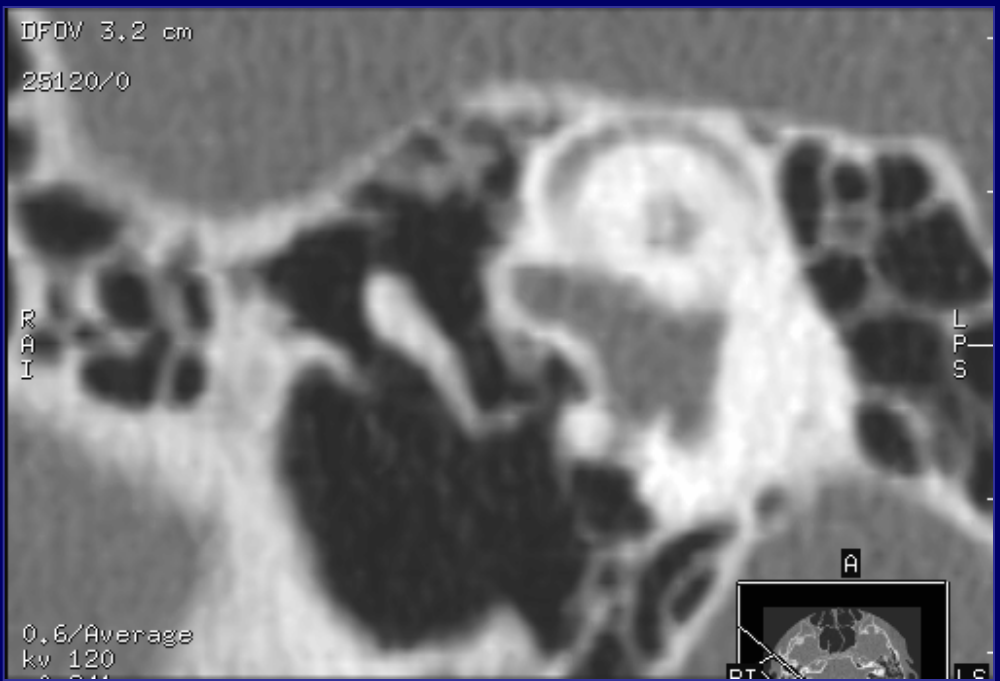
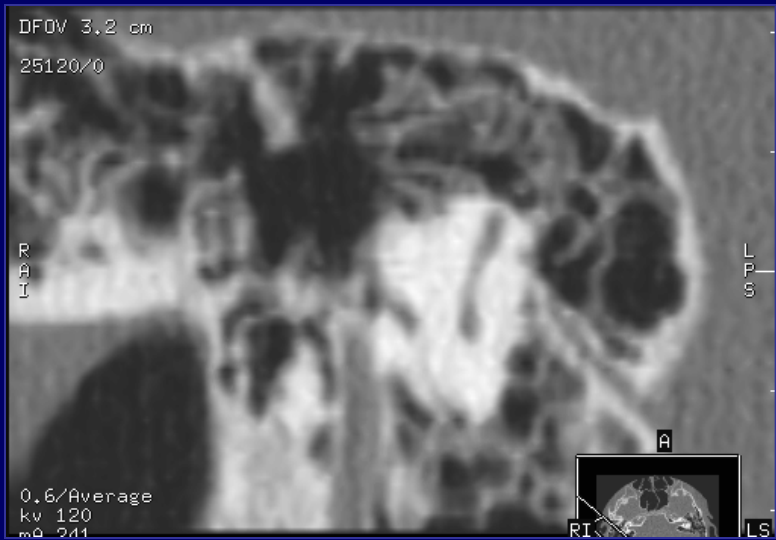
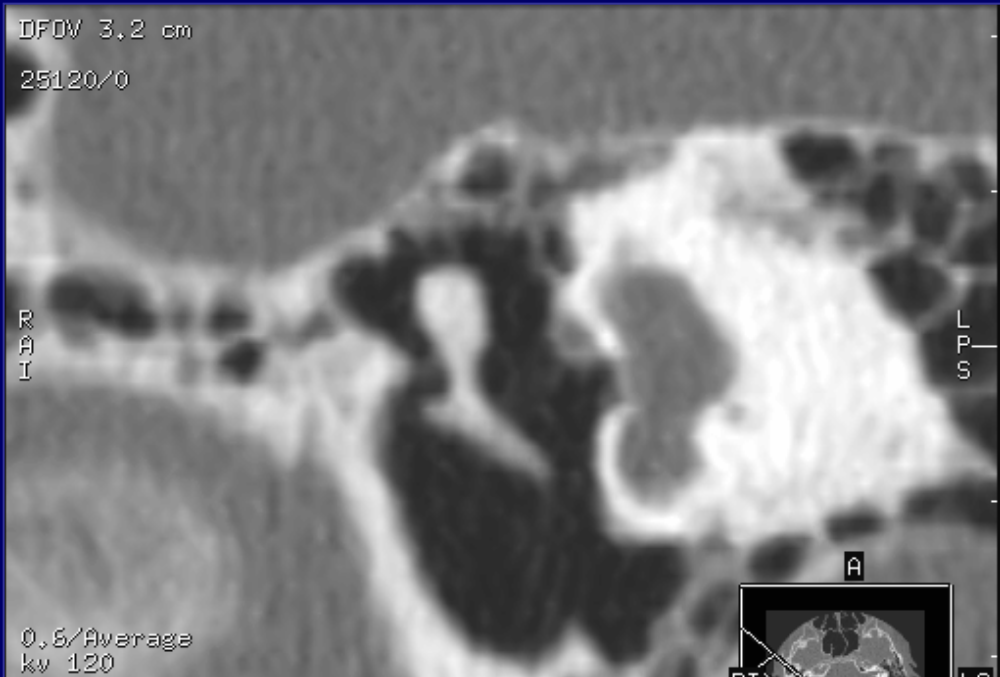
# Oreille moyenne



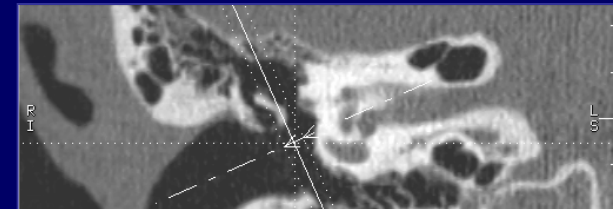
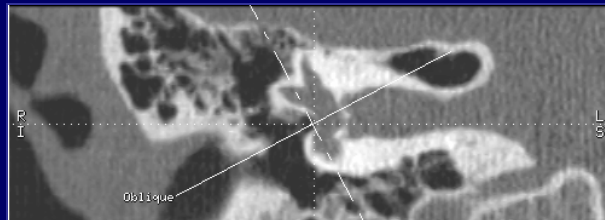
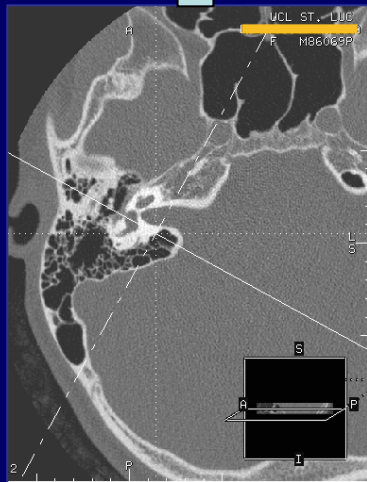
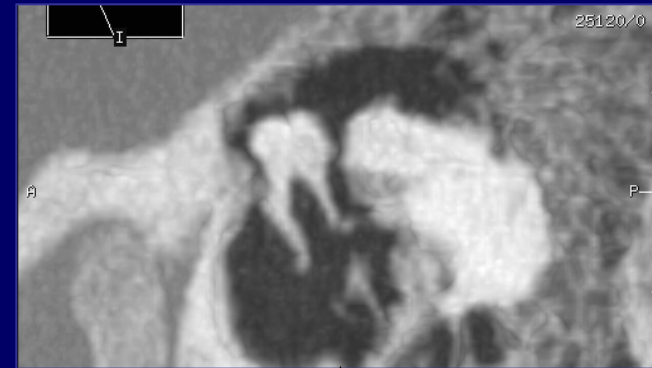
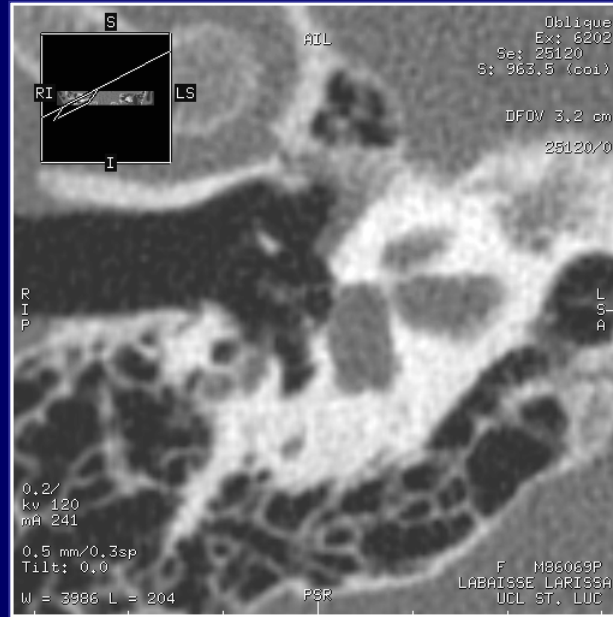
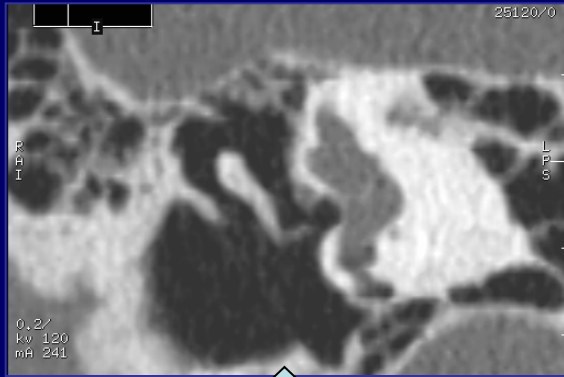




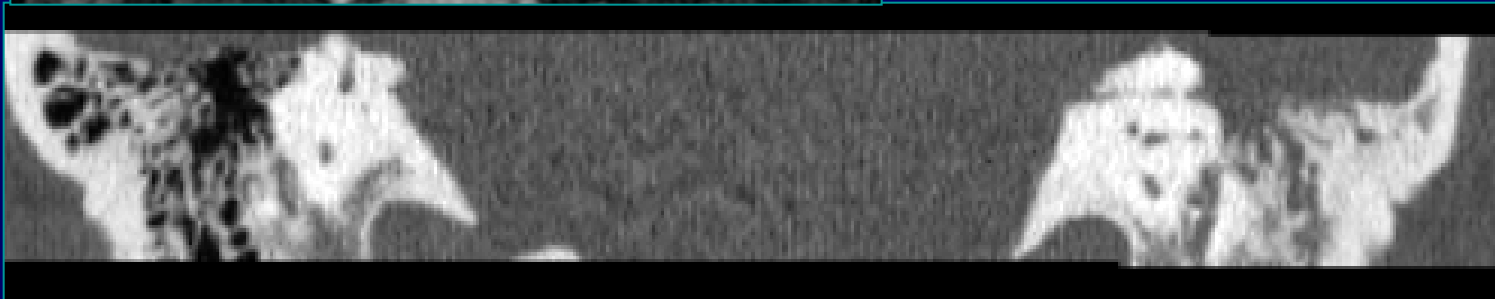
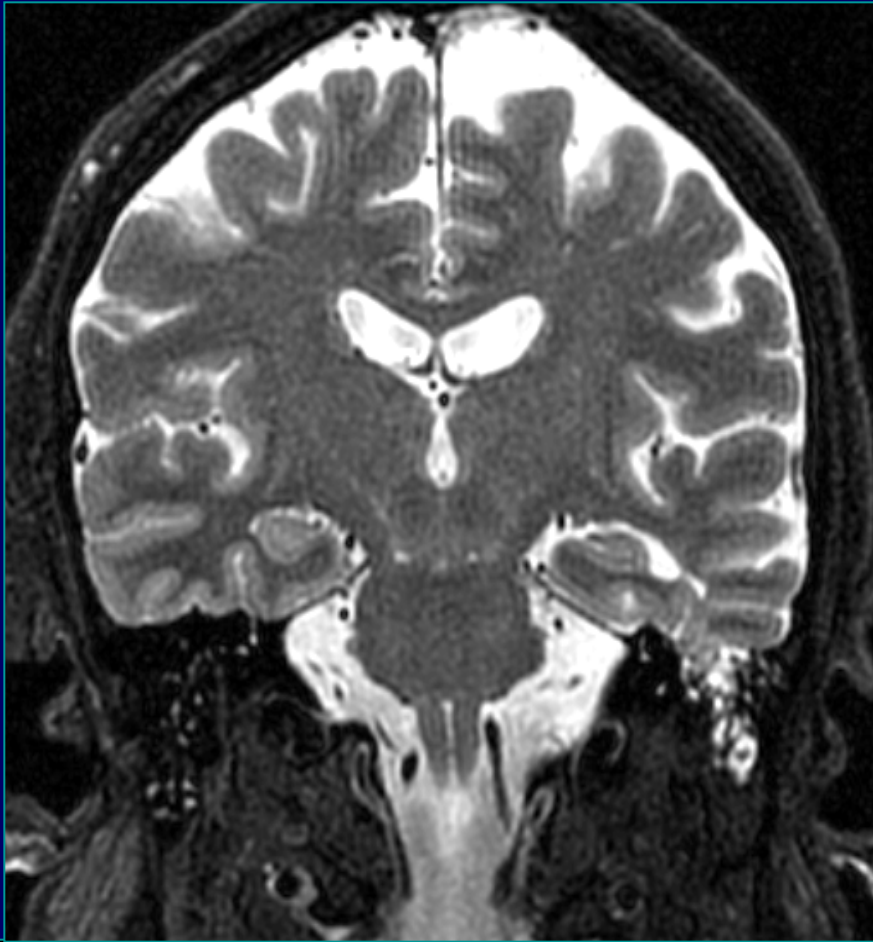


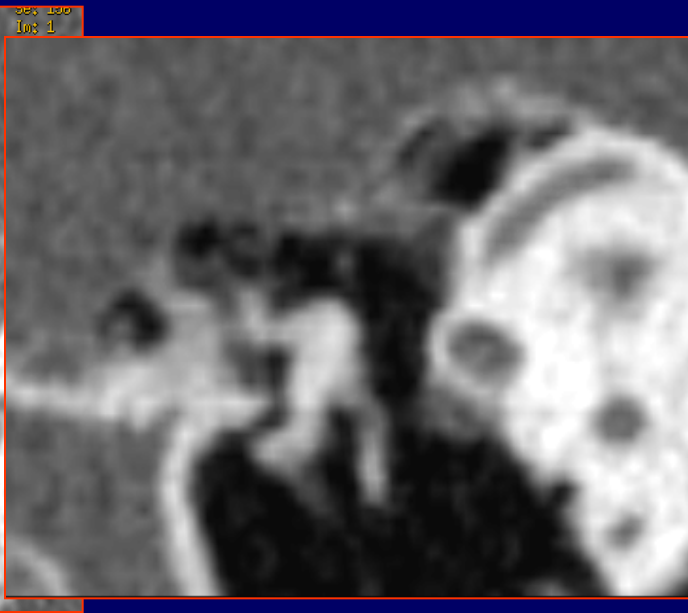
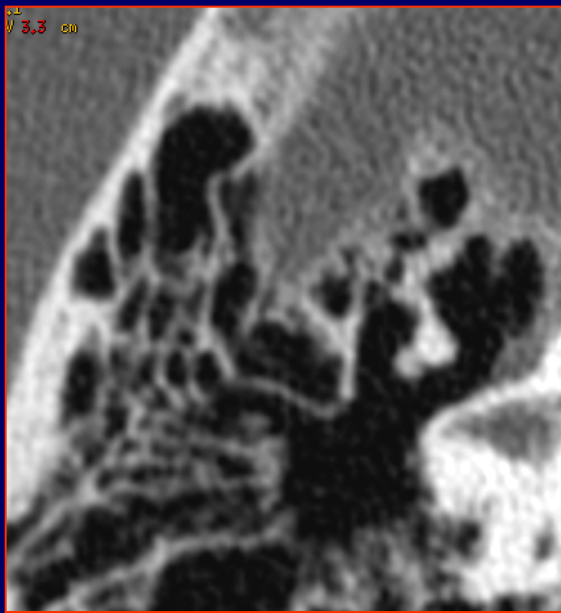


# 3 incidences de base

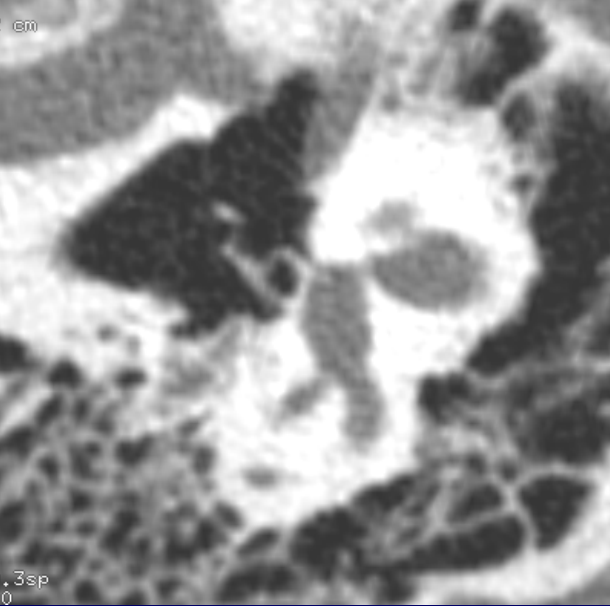
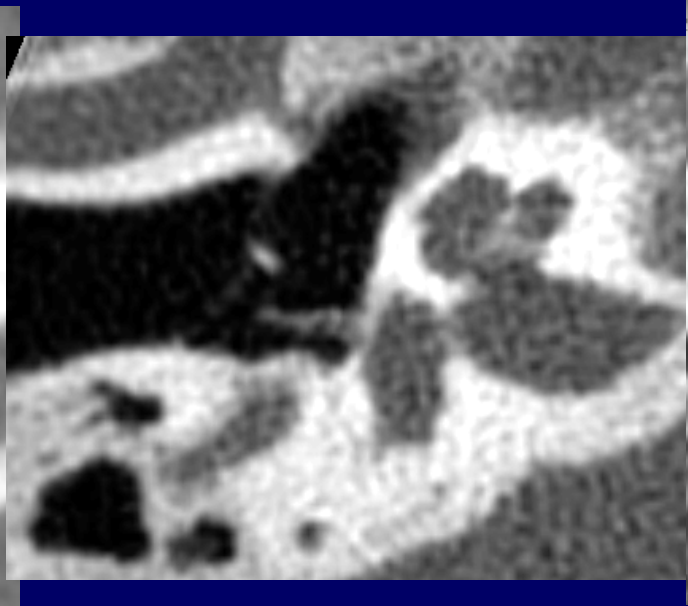
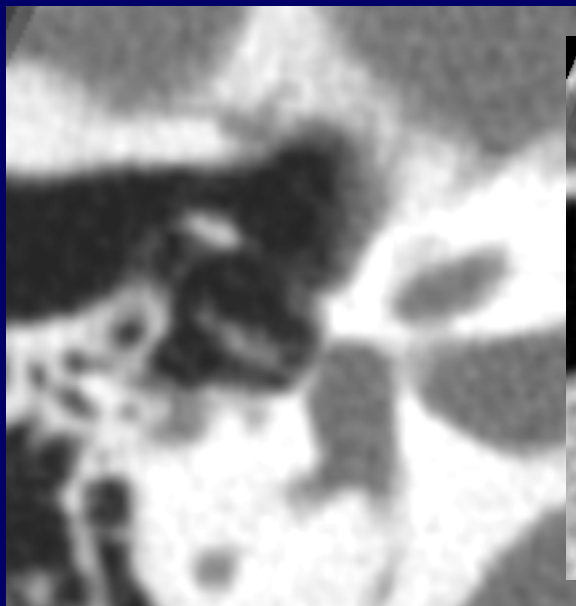


## Oreille moyenne: malformations

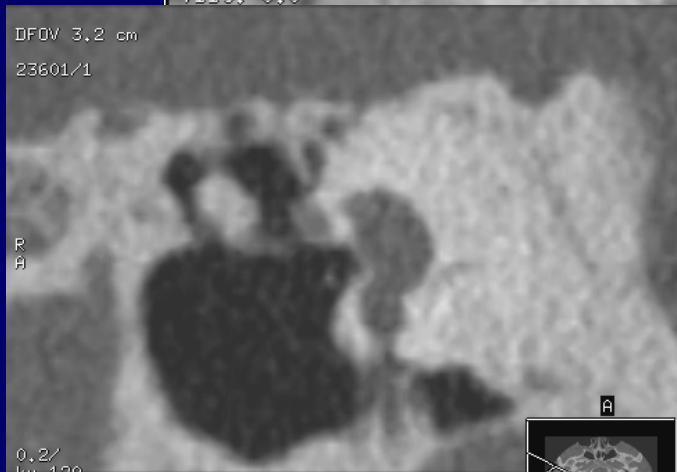
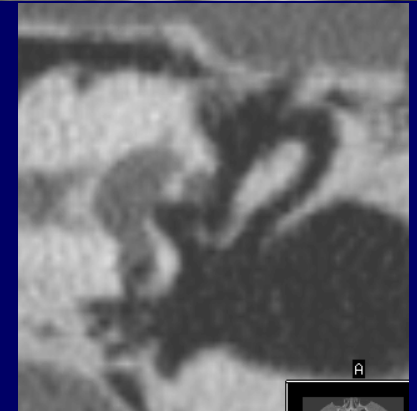
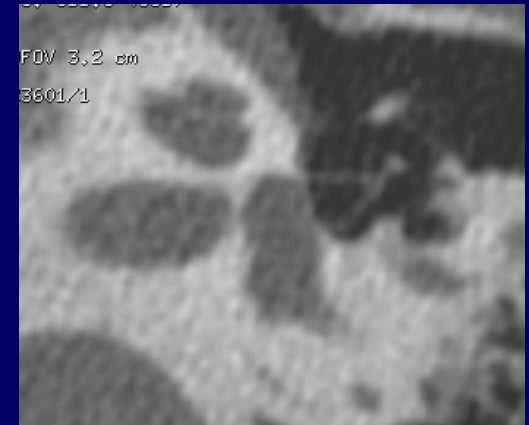




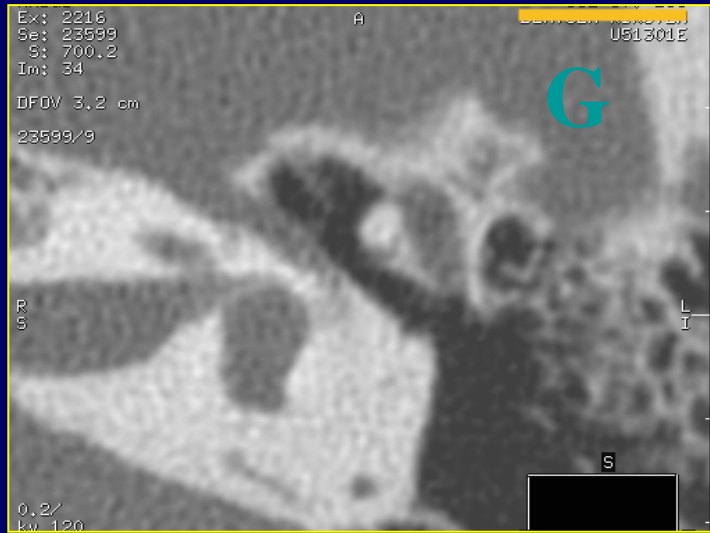
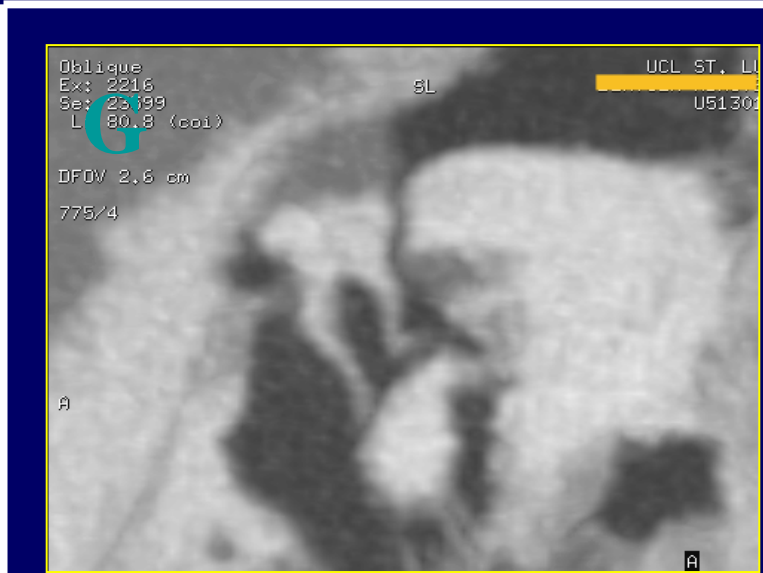
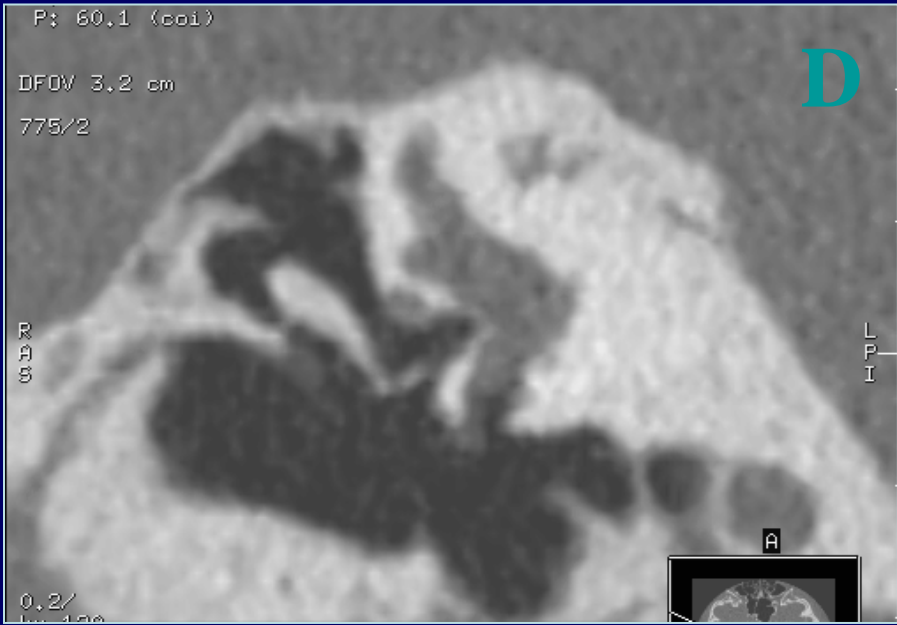
## Oreille moyenne: malformations



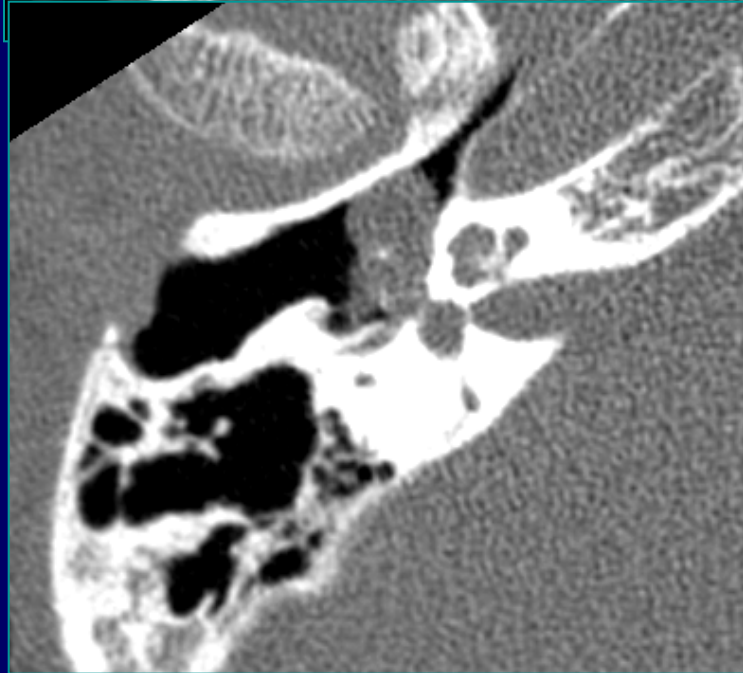
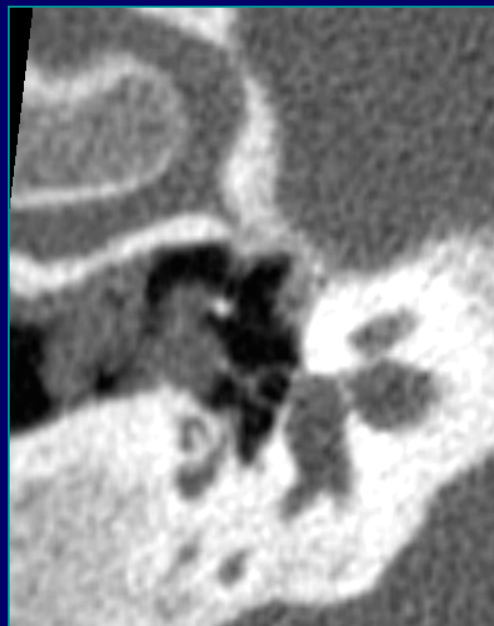
# rétraction tympanique + lyse ossiculaire



# cholestéatome attical



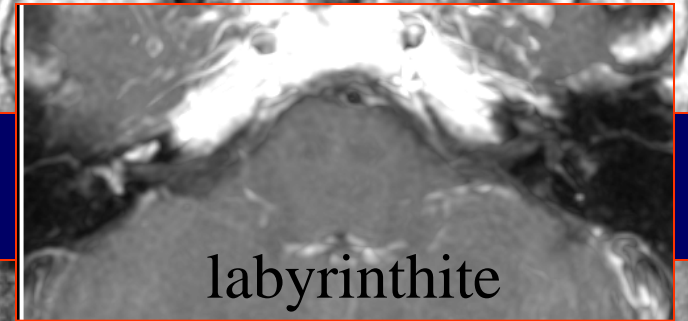
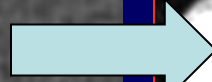




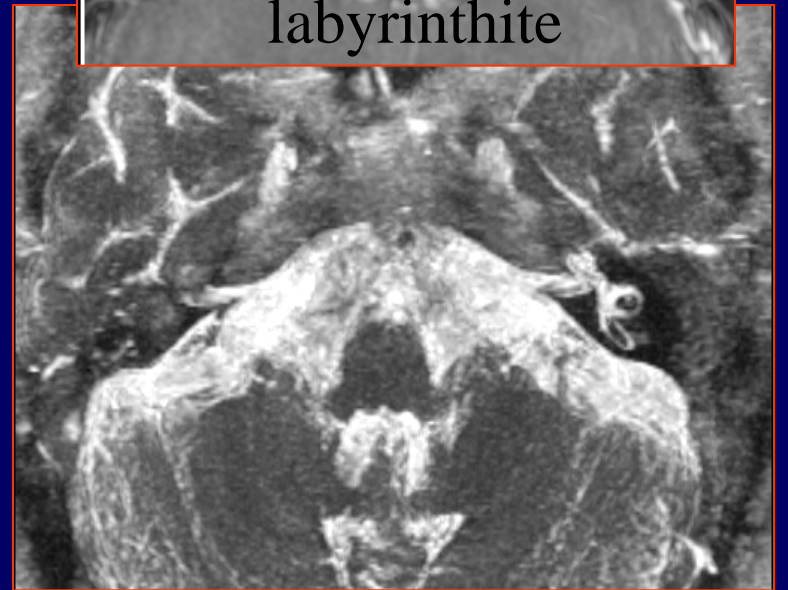
### Critères radiologiques:

- **Nodularité**
- **Contours poly-cycliques**
- **Ostéolyse de contiguïté** (*'timbre-poste'*)
- *Accroissement des lésions dans le temps*

Ouverture du labyrinthe

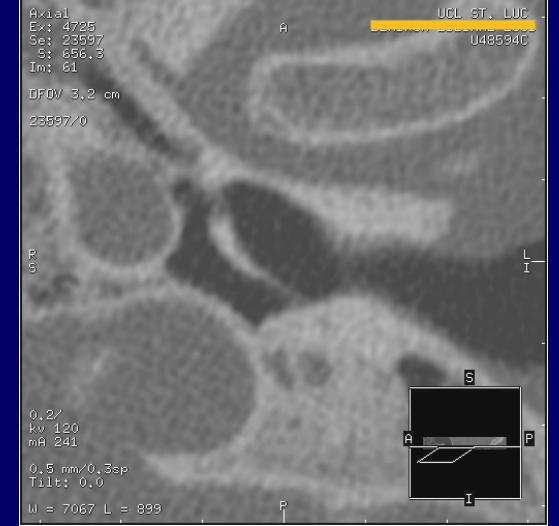
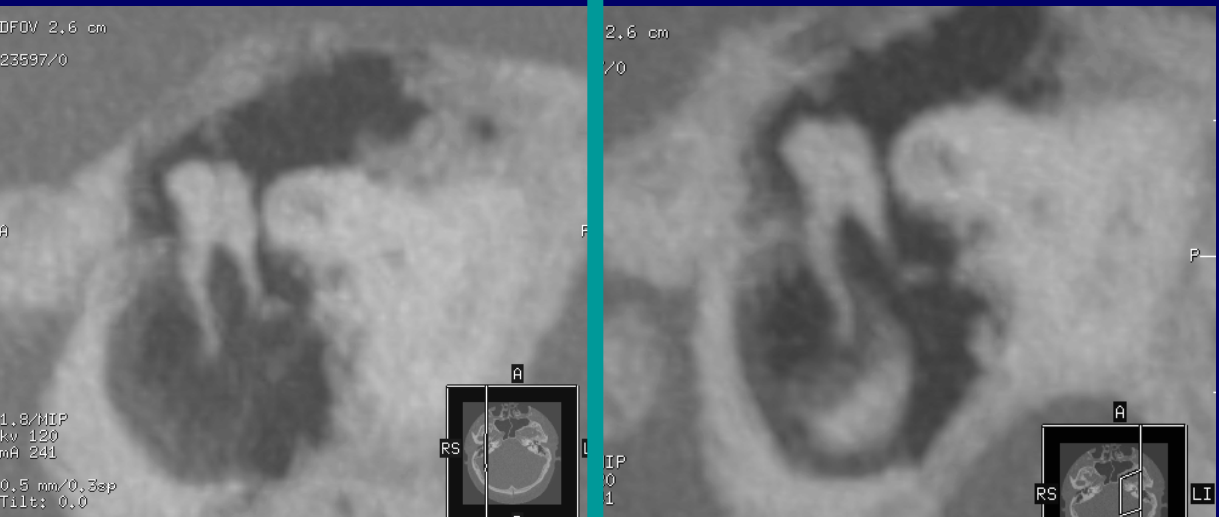
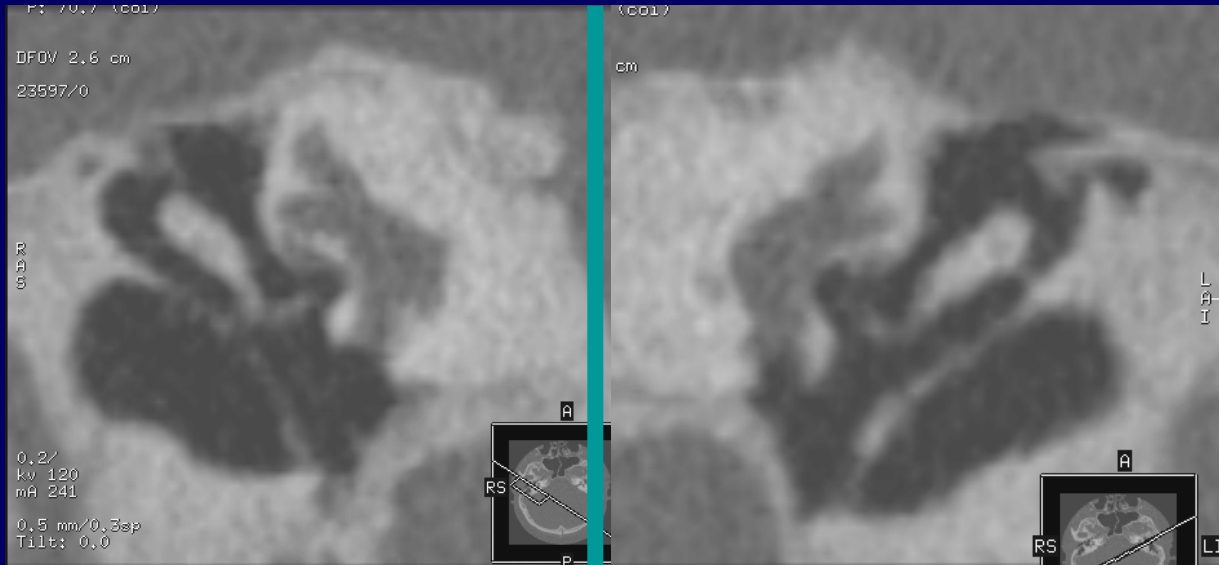


labyrinthite



# tympanosclérose ... tympanique

G

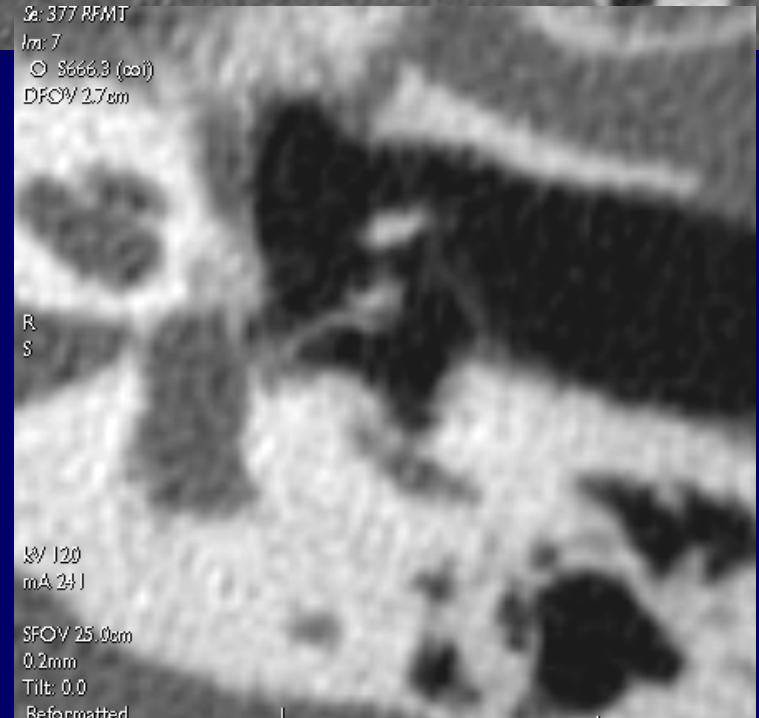
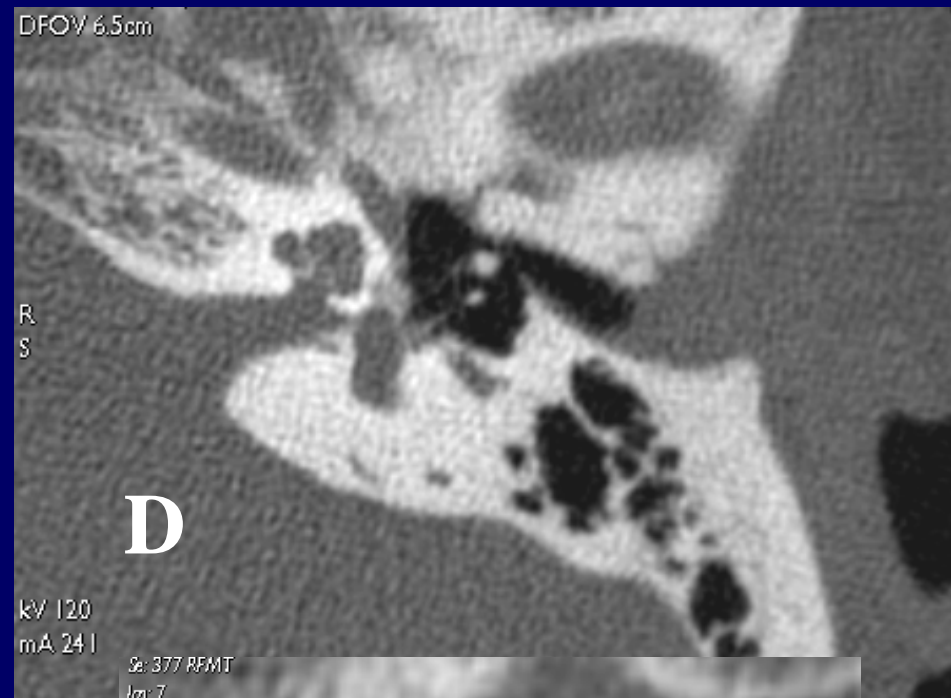


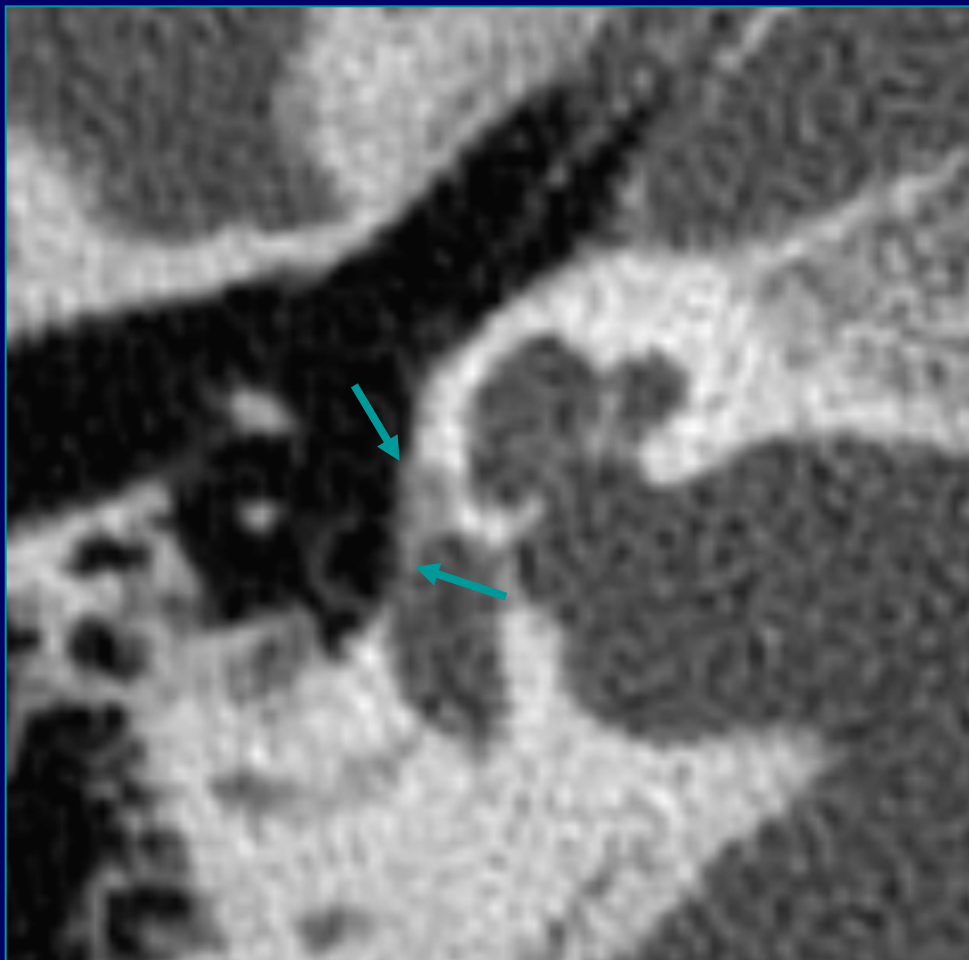
# Otospongiose



## FAF

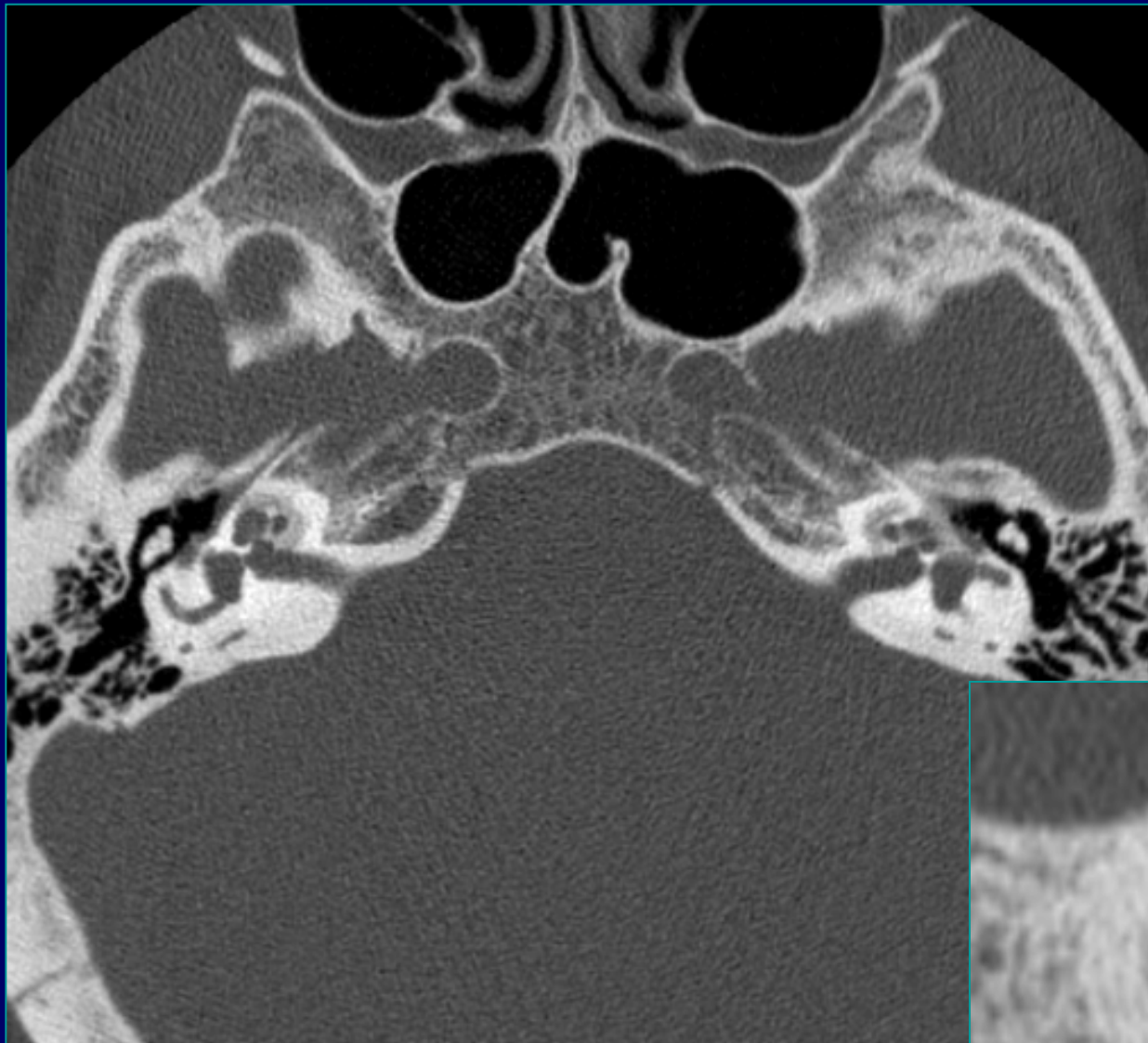
*OS « de tous les jours »*



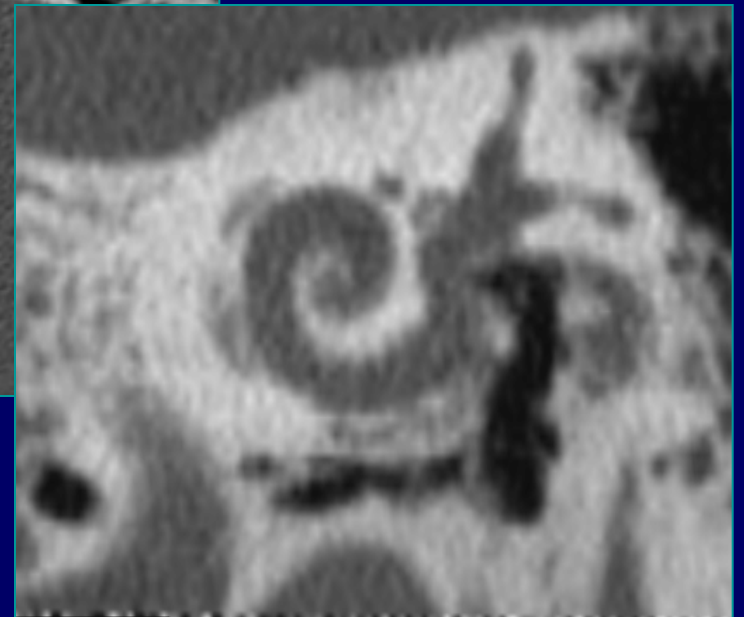


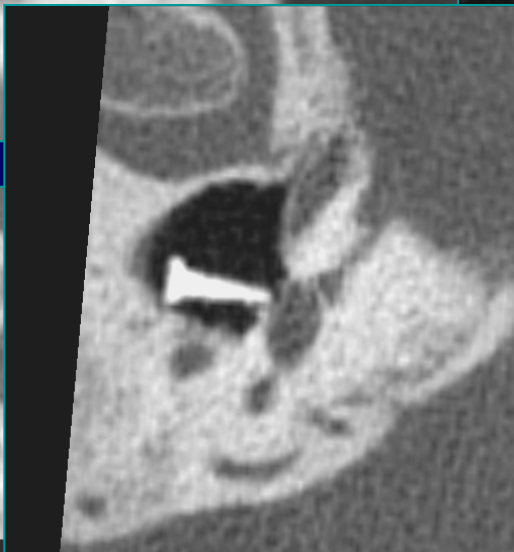
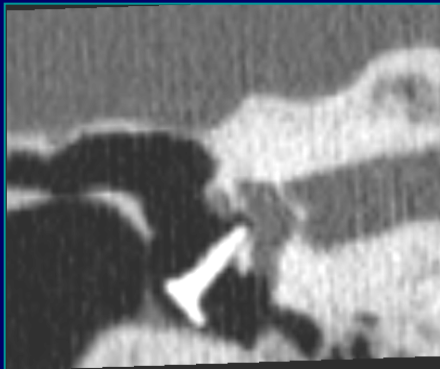
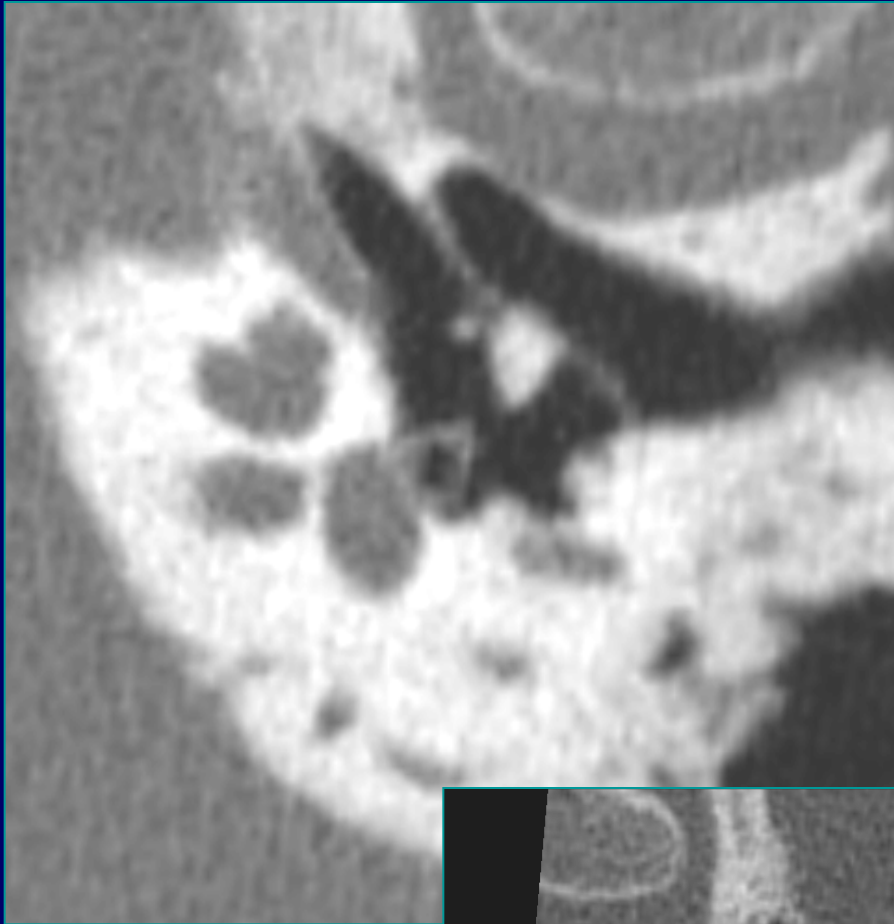
FAF  
+  
platine

‘cochléarisation’



très sévère  
'la troisième spire'





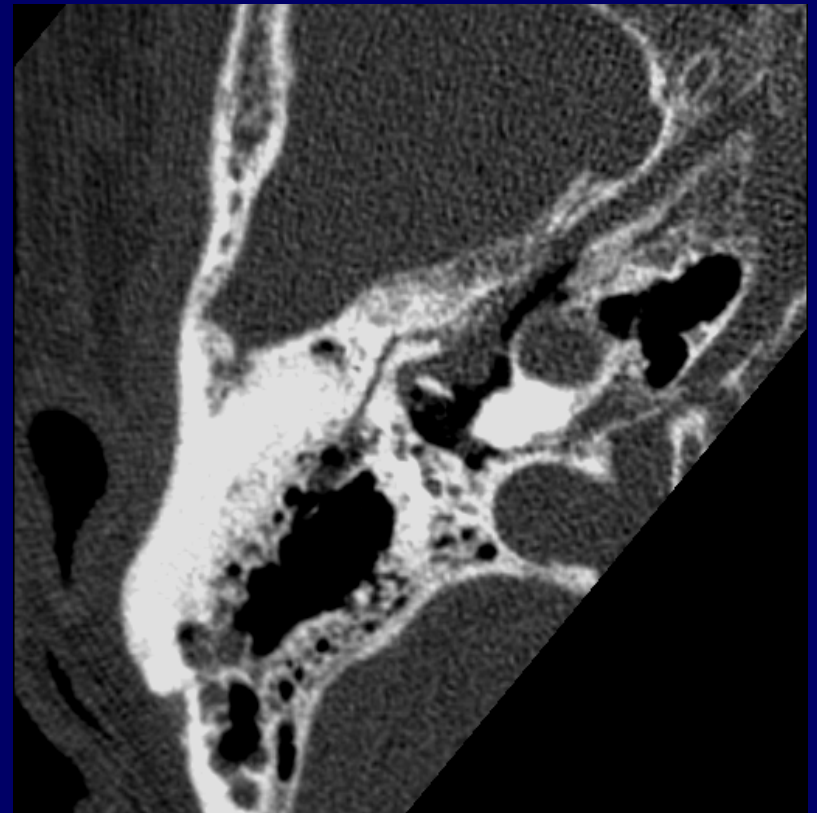
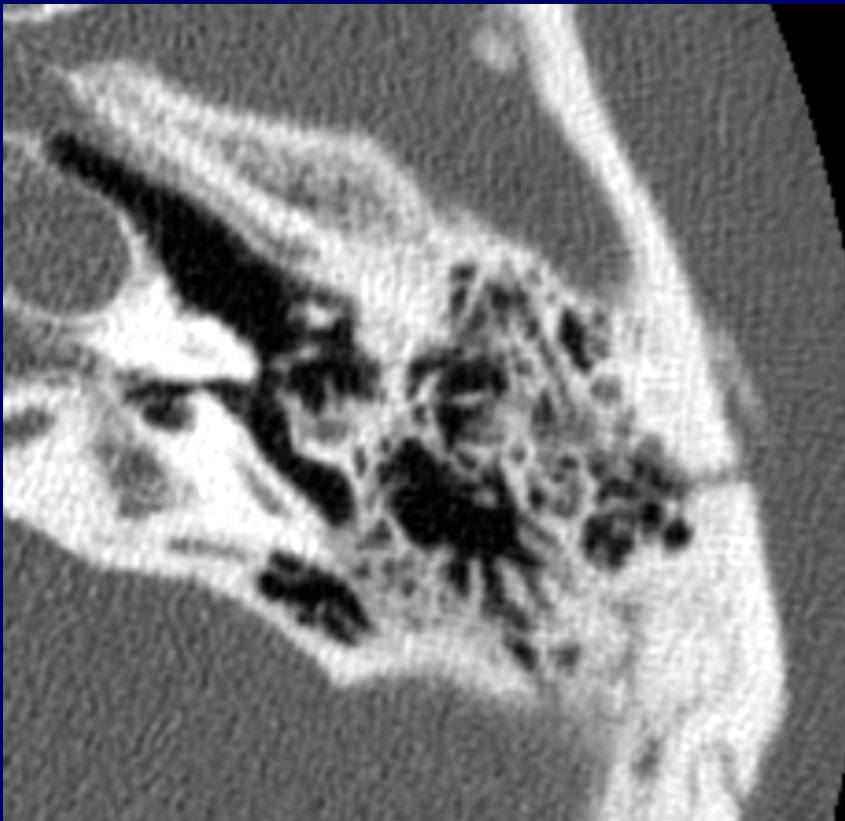
Ex: 9442  
Se: 998  
In: 2  
0 167,6  
DFOV 6,5cm

NI  
561126-26/08  
Aug 28 38  
02:39:37 PM  
512 X 512  
Mag = 2,12  
FL:  
ROT:

KV 120  
mA 200  
SFOV 0,0cm  
0,5 mm  
Tilt : 0,0  
0,0s

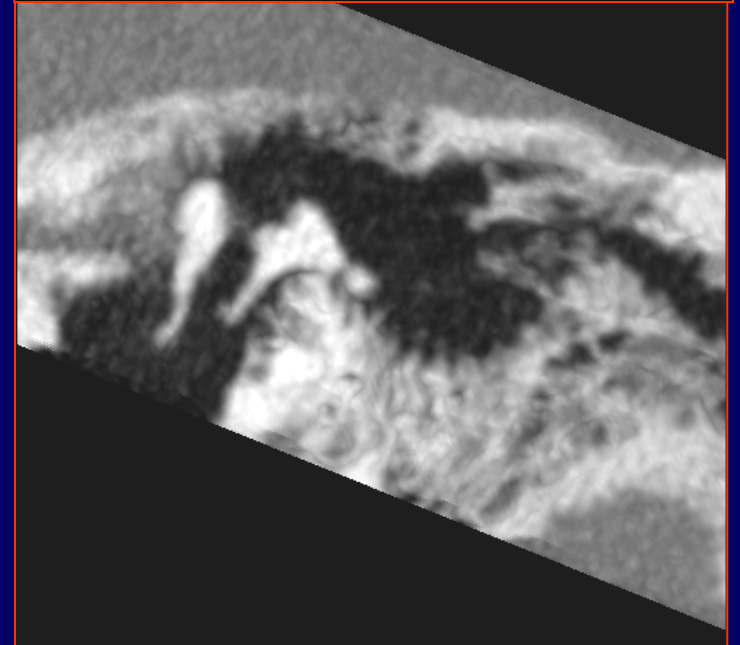
MM: 4571 ML: 575

# fractures du rocher





# ossiculaire      luxation ossiculaire

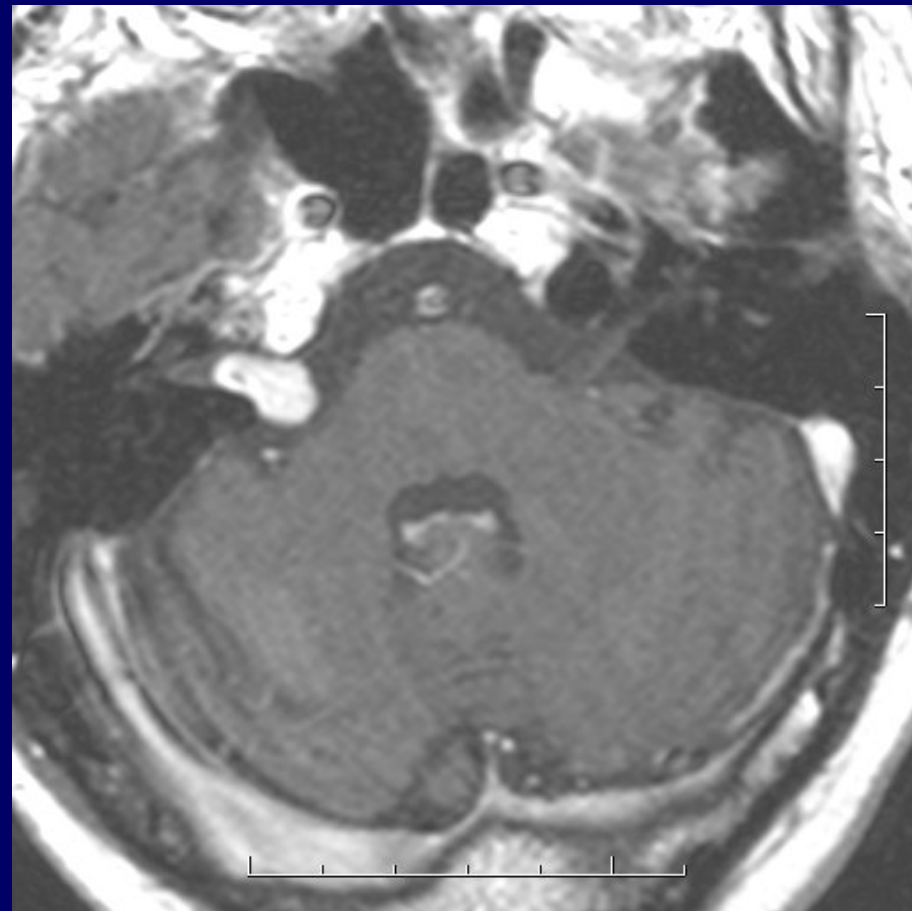


# Oreille interne

# Pondération T1

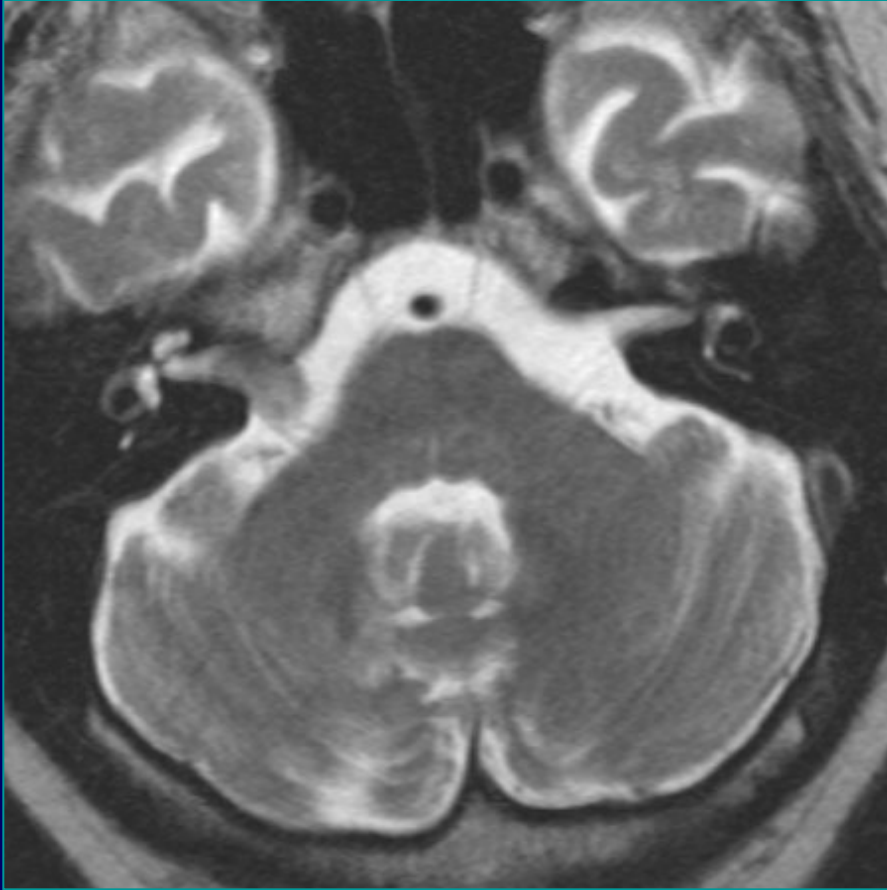


Contraste spontané



Après perfusion IV de PdC

## Pondération T2



Coupe standard: 5 mm

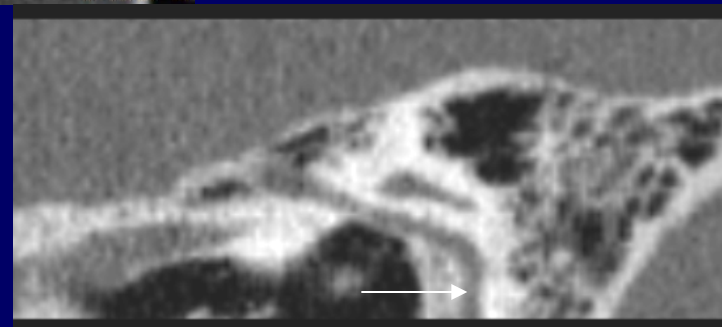
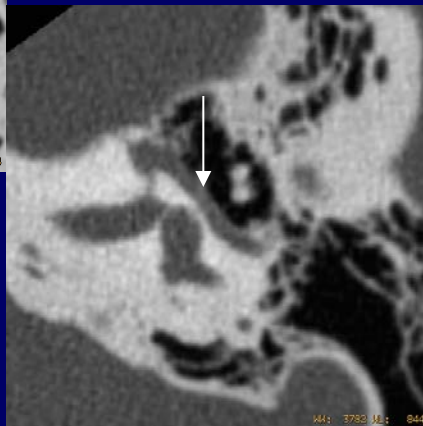
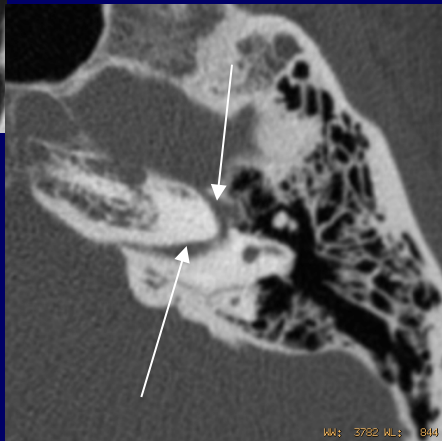
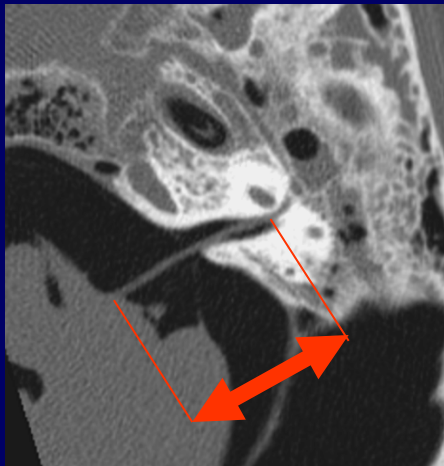


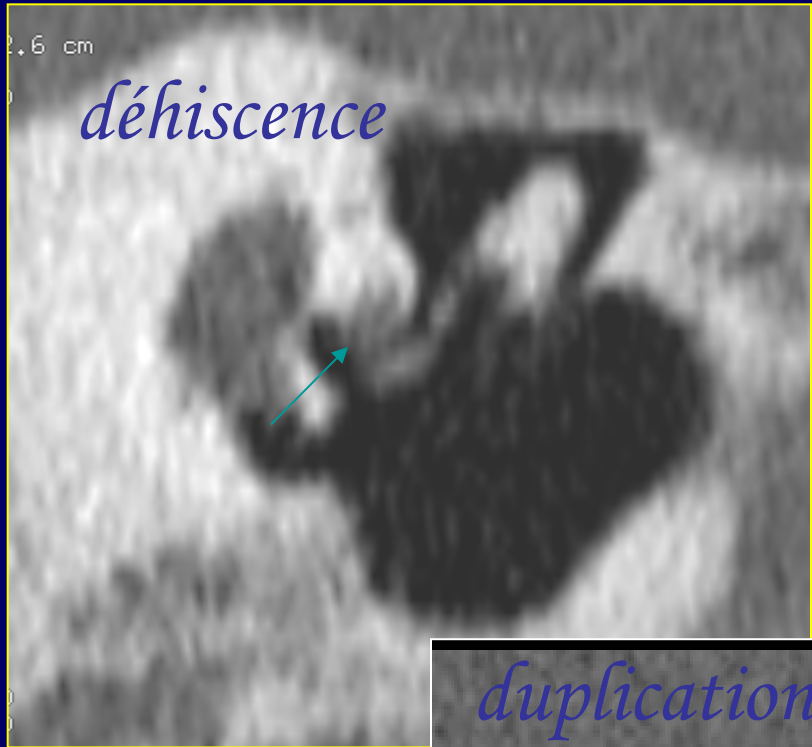
Coupe 3D-FSE: 0.8 mm/-0.4

# 3D FSE-T2 = routine

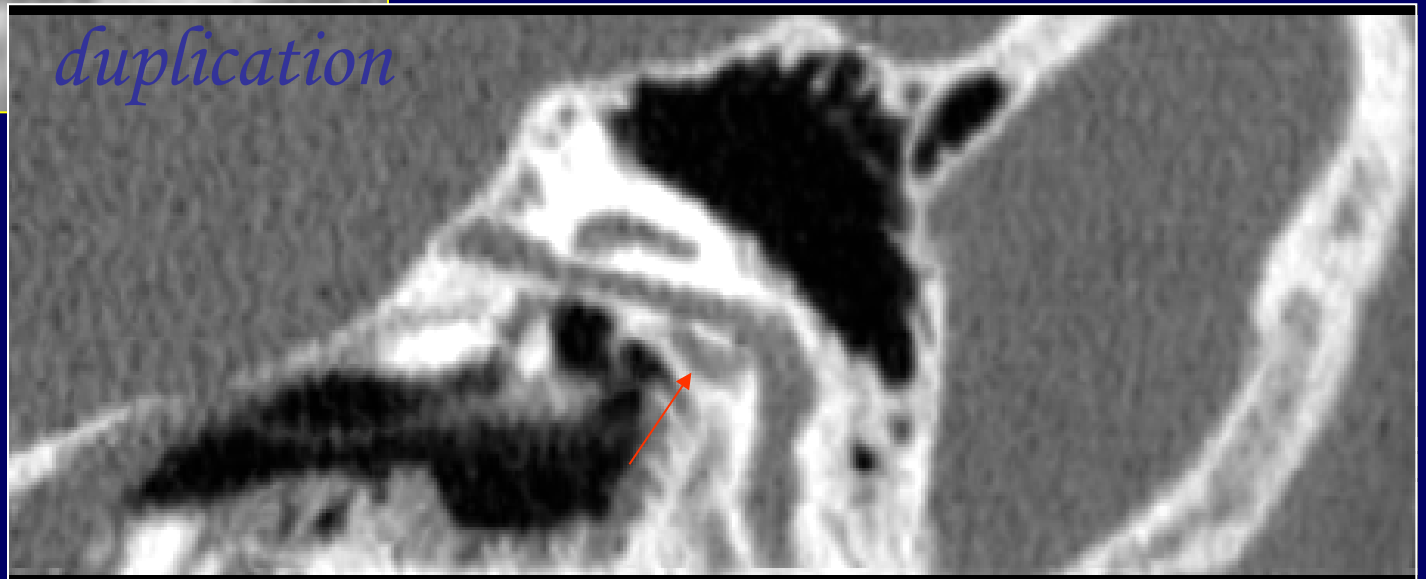


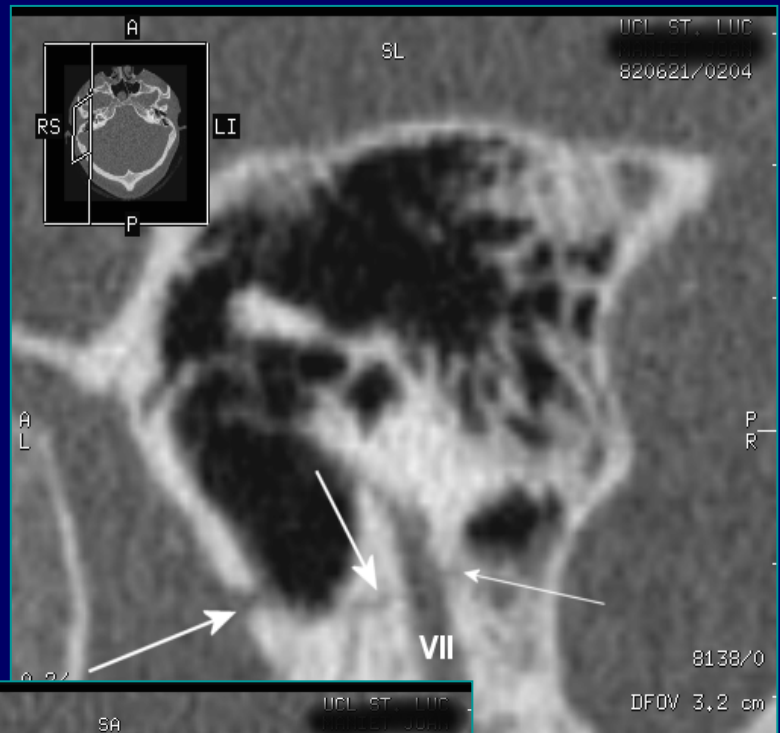
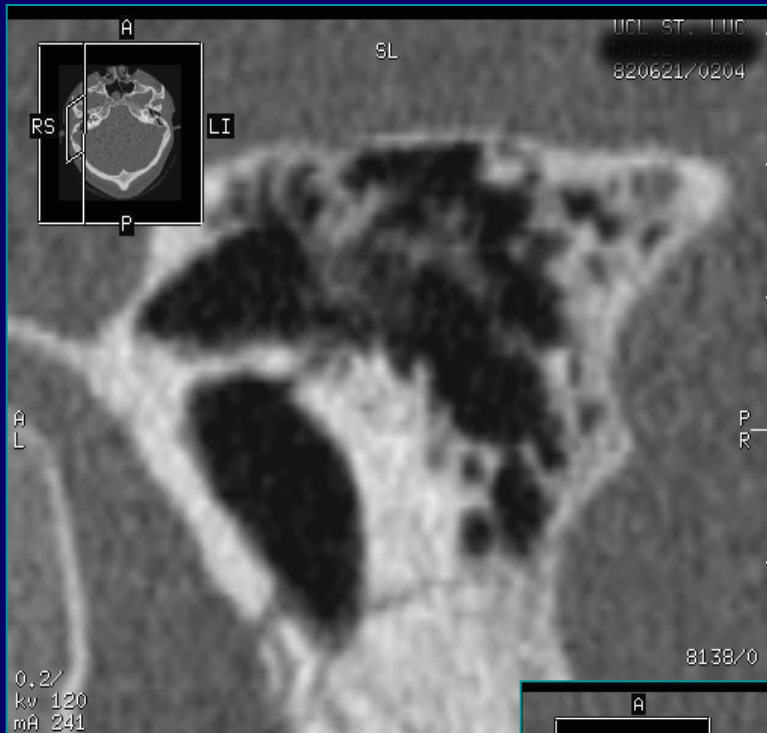
Droite: conflit vasculo-nerveux avec le VIII



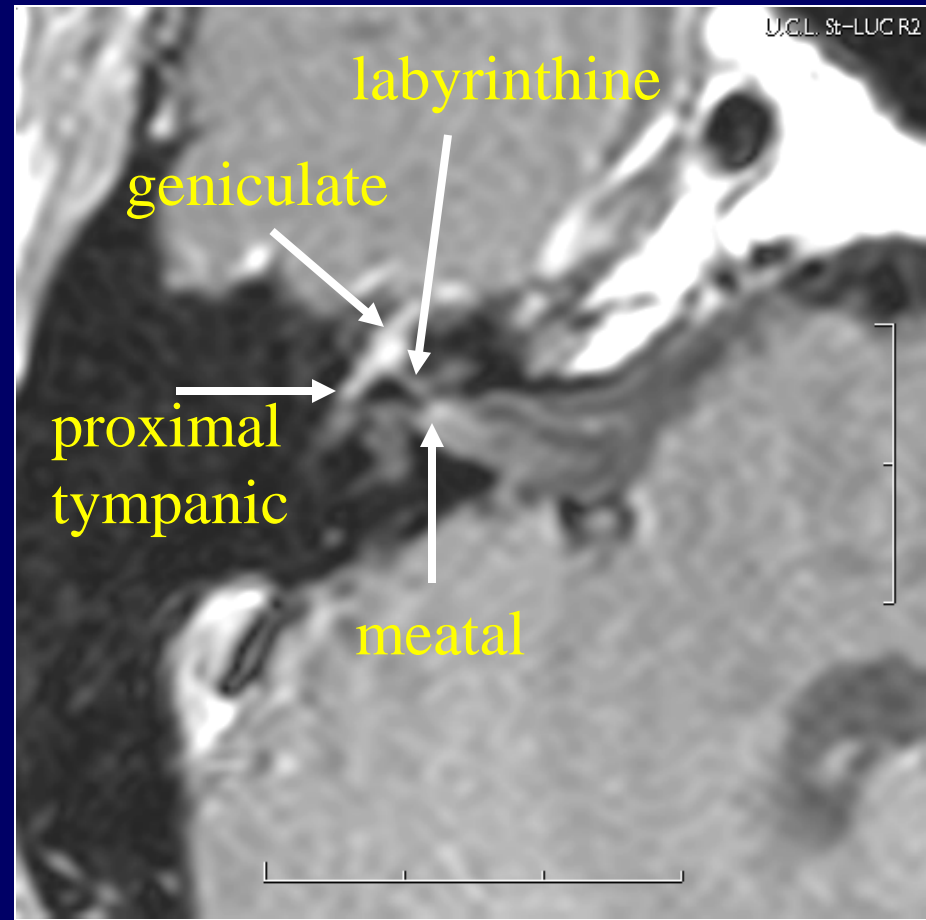
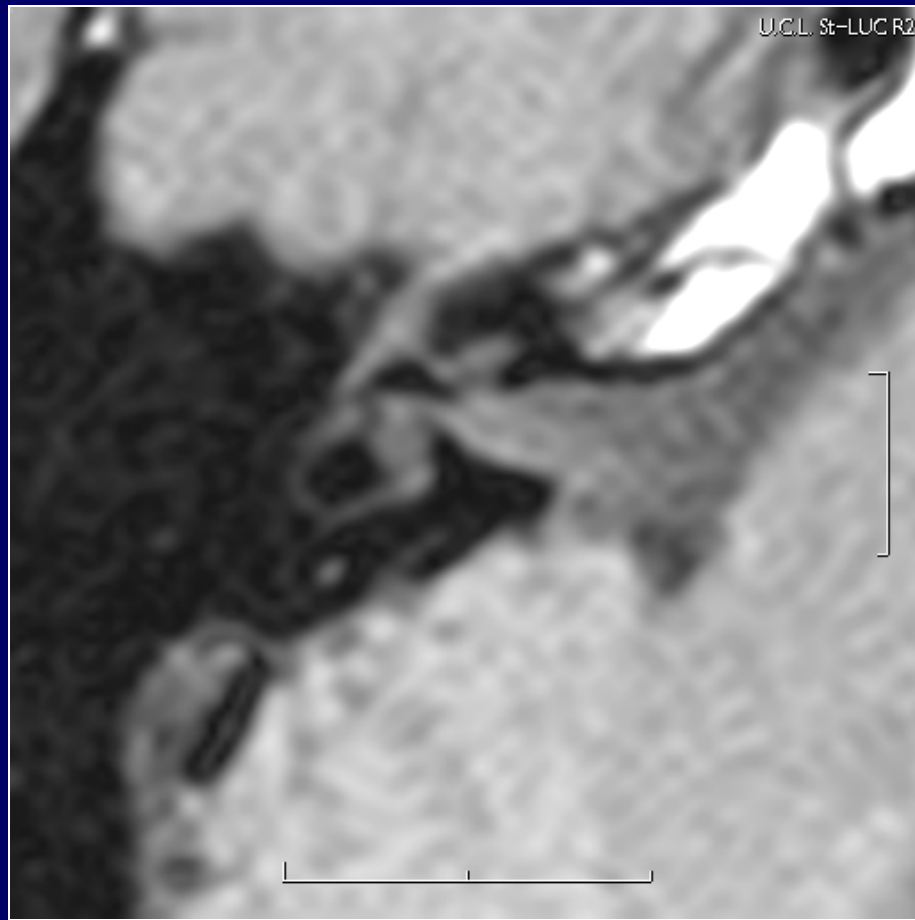


Canal du facial  
malformations





# Fractures



- *Le VII normal rehausse\**
- *L'intensité du rehaussement n'a pas de valeur pronostique\*\**

Inflammation  
→ IRM

\* Sartoretti-Schefer S et al *AJNR* 1994;15:479-485

\*\* Sartoretti-Schefer S et al *AJNR* 1996;17:1229-1236



