

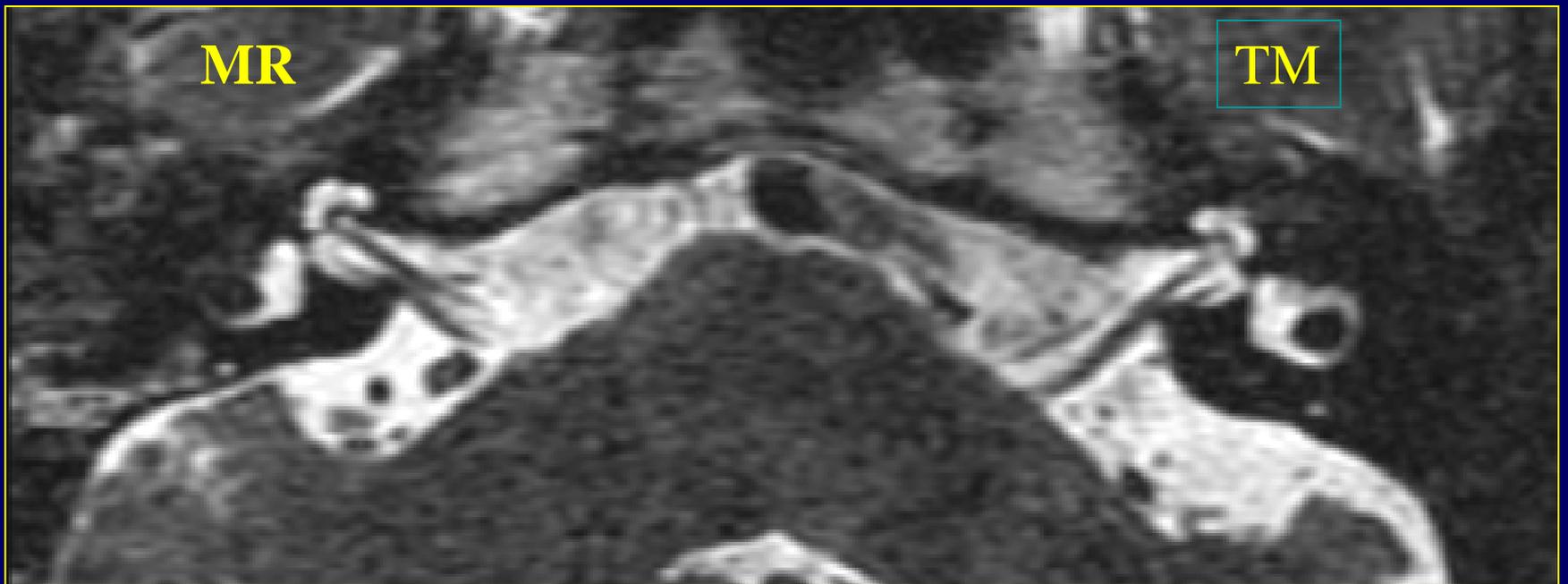
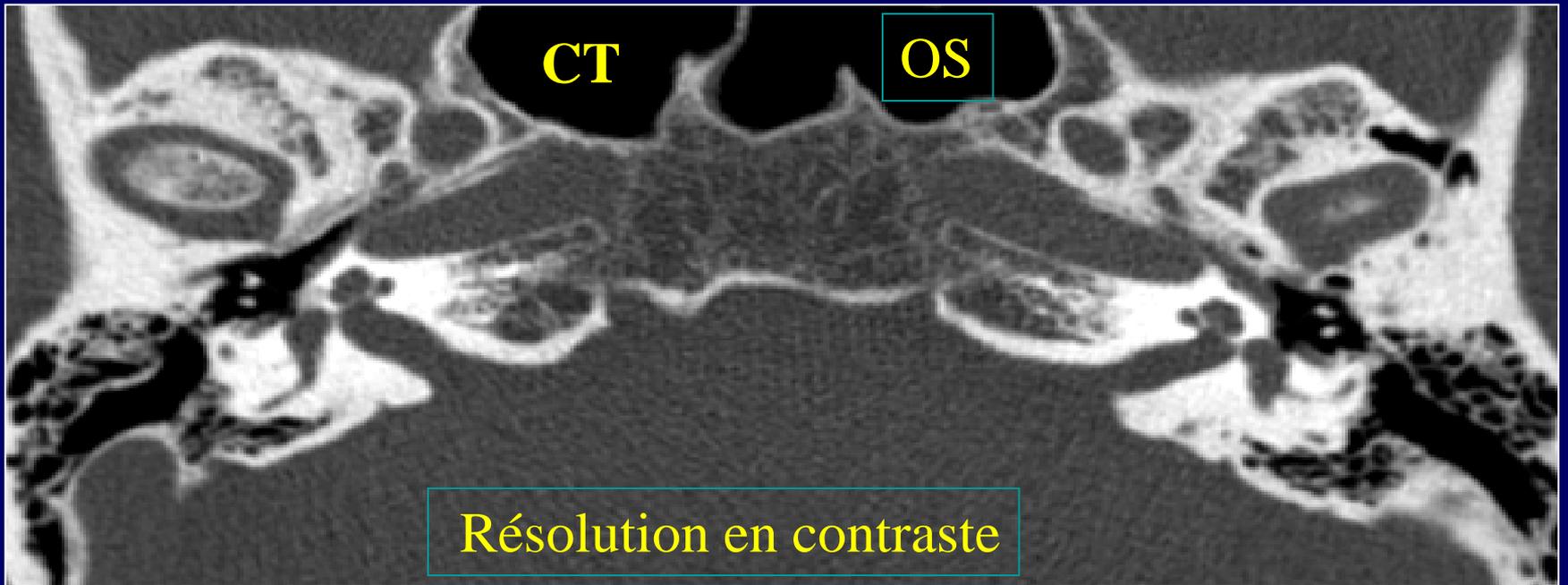
RDGN2120
Compléments de Neuroradiologie

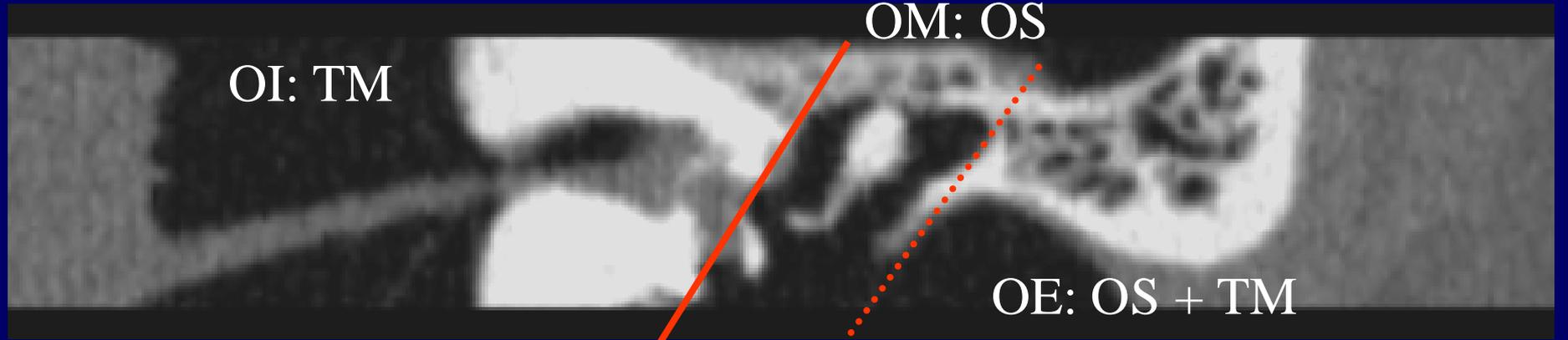
Année académique 2019-2010

Imagerie des rochers

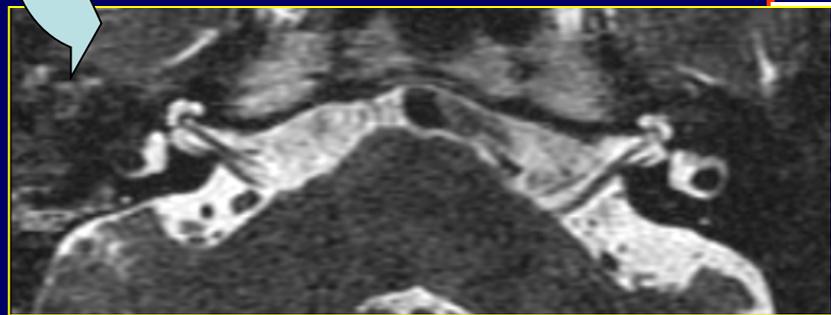


Pr Thierry Duprez
Professeur clinique (UCL)
Chef de Clinique (UCL-St-Luc)

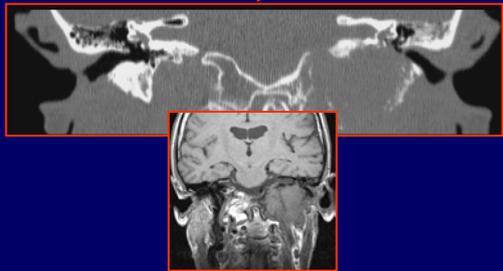




hypoacousie
neurosensorielle



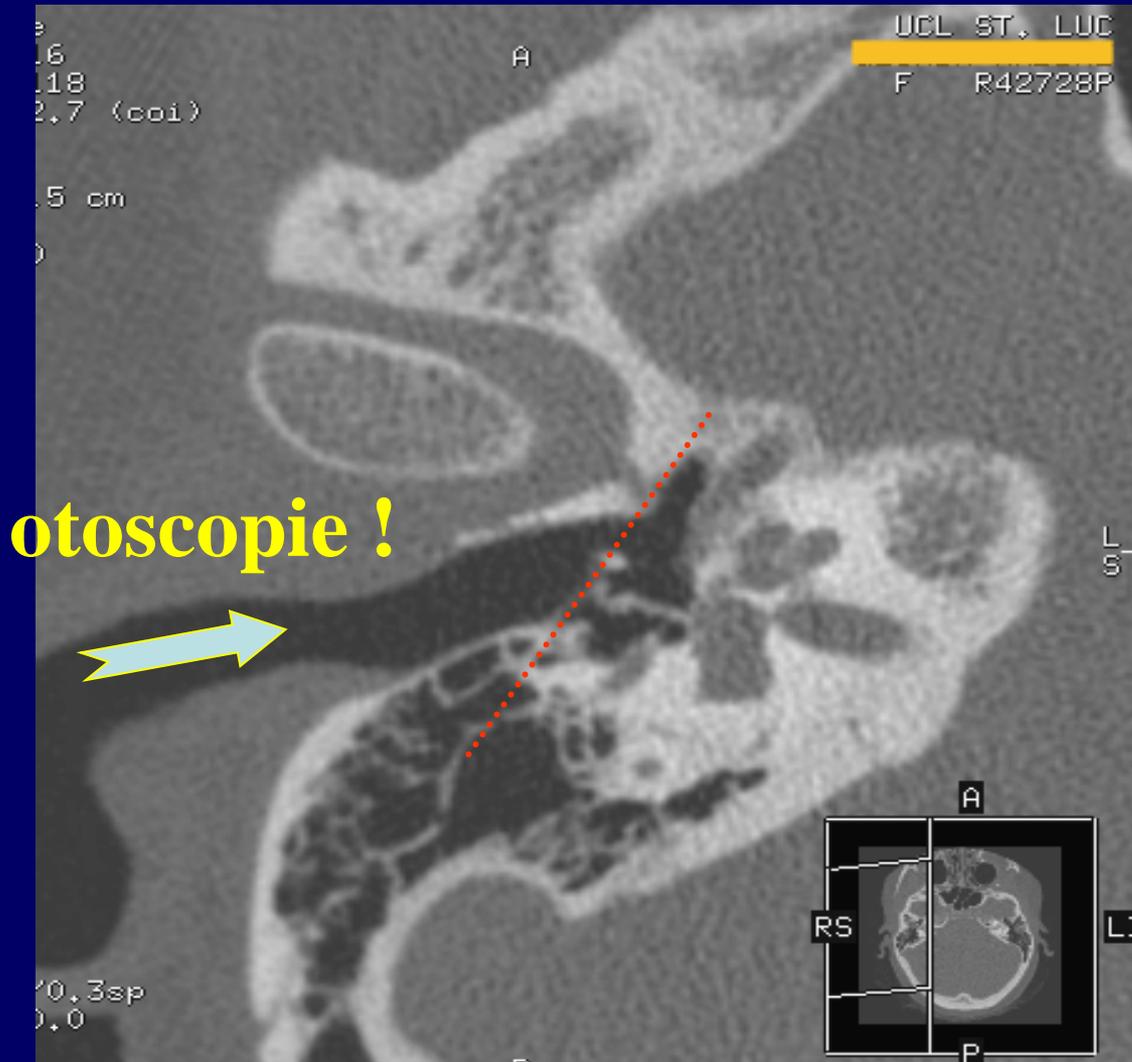
carcinome
épidermoïde



hypoacousie
transmissionnelle



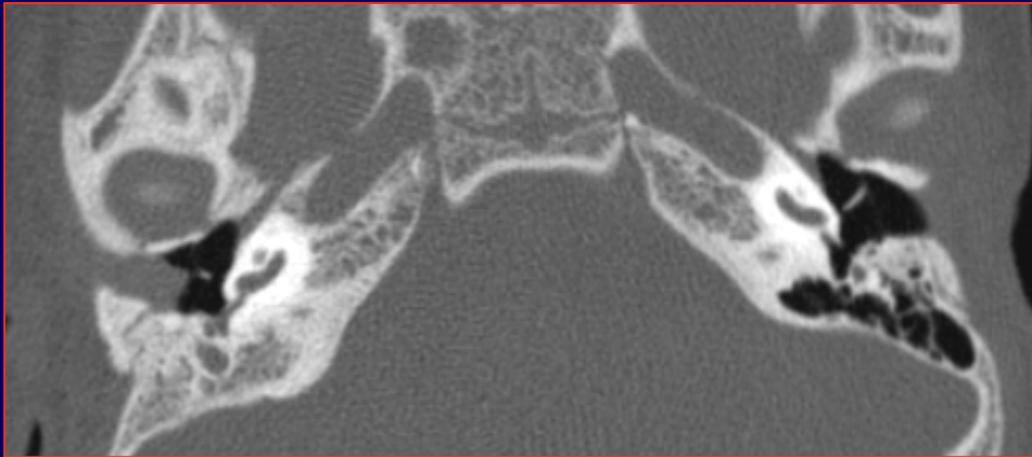
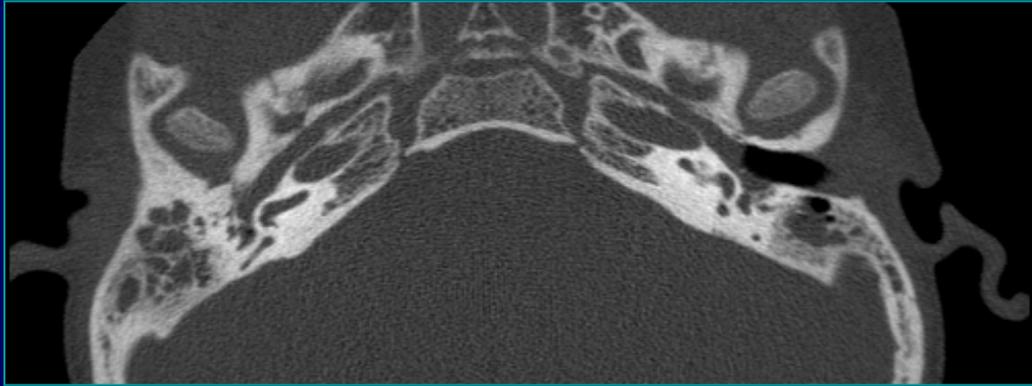
Oreille externe



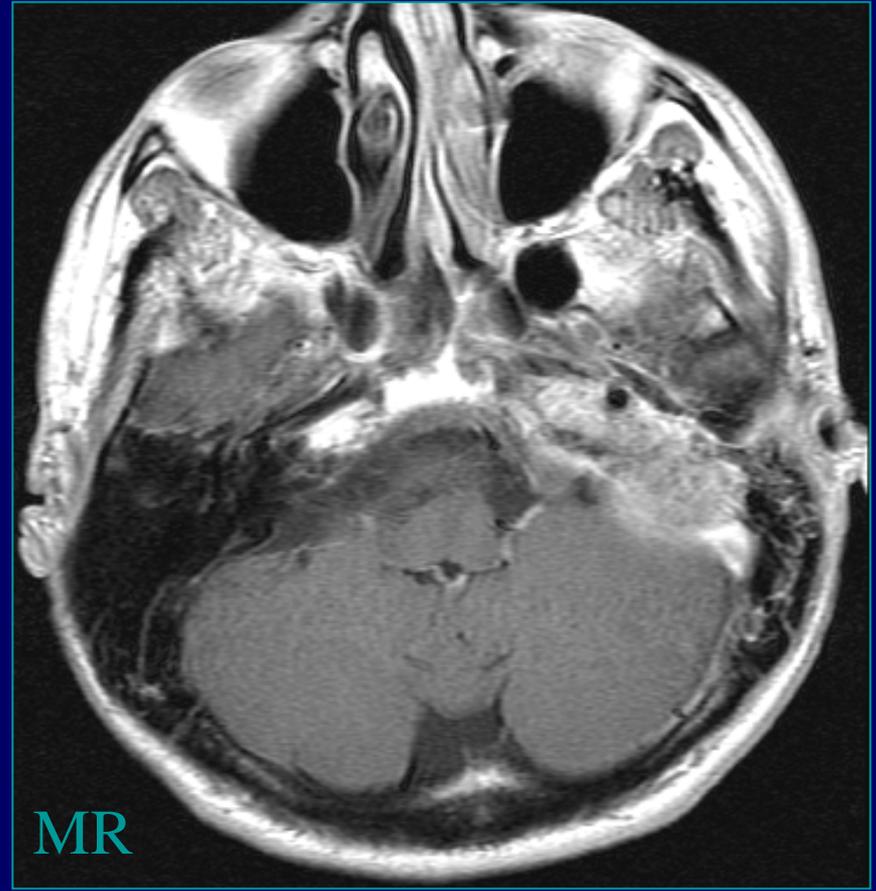
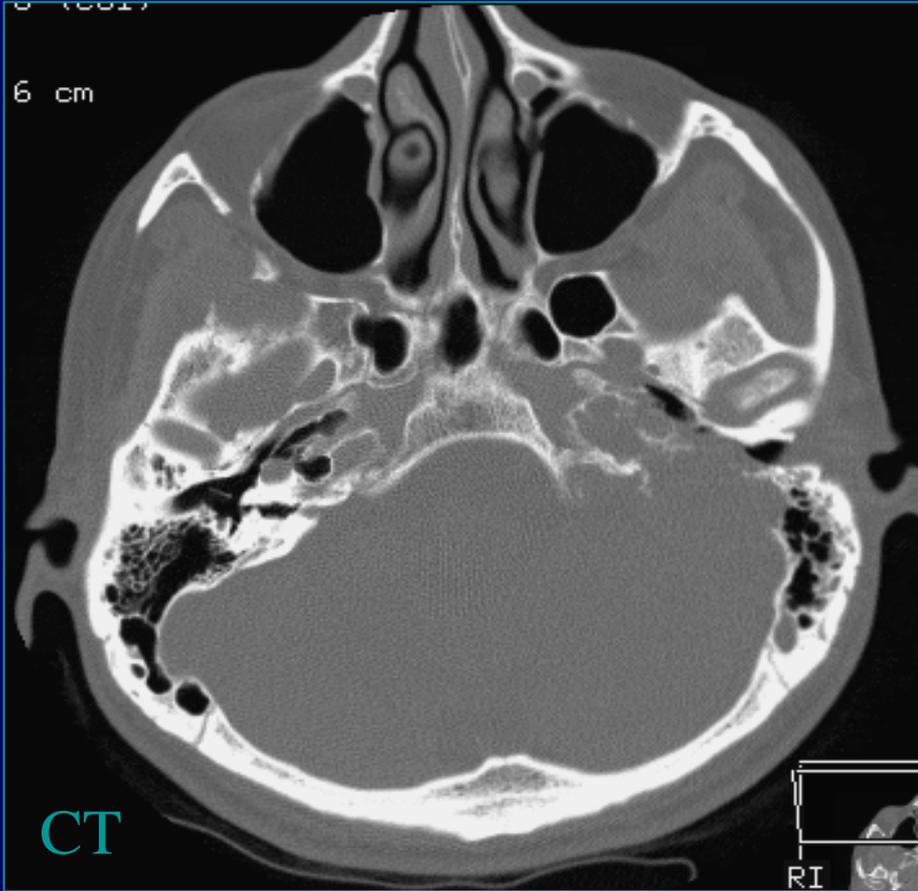
Os
Cartilage
Peau

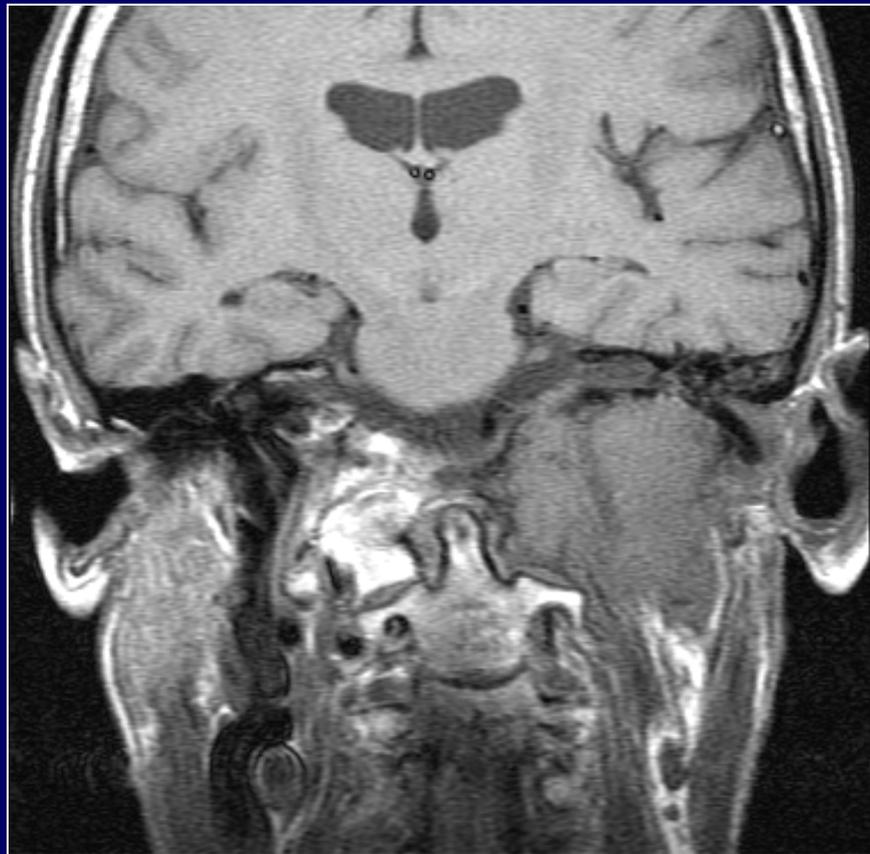
(poils, gl. cérumineuses)

Oreille externe: malformations

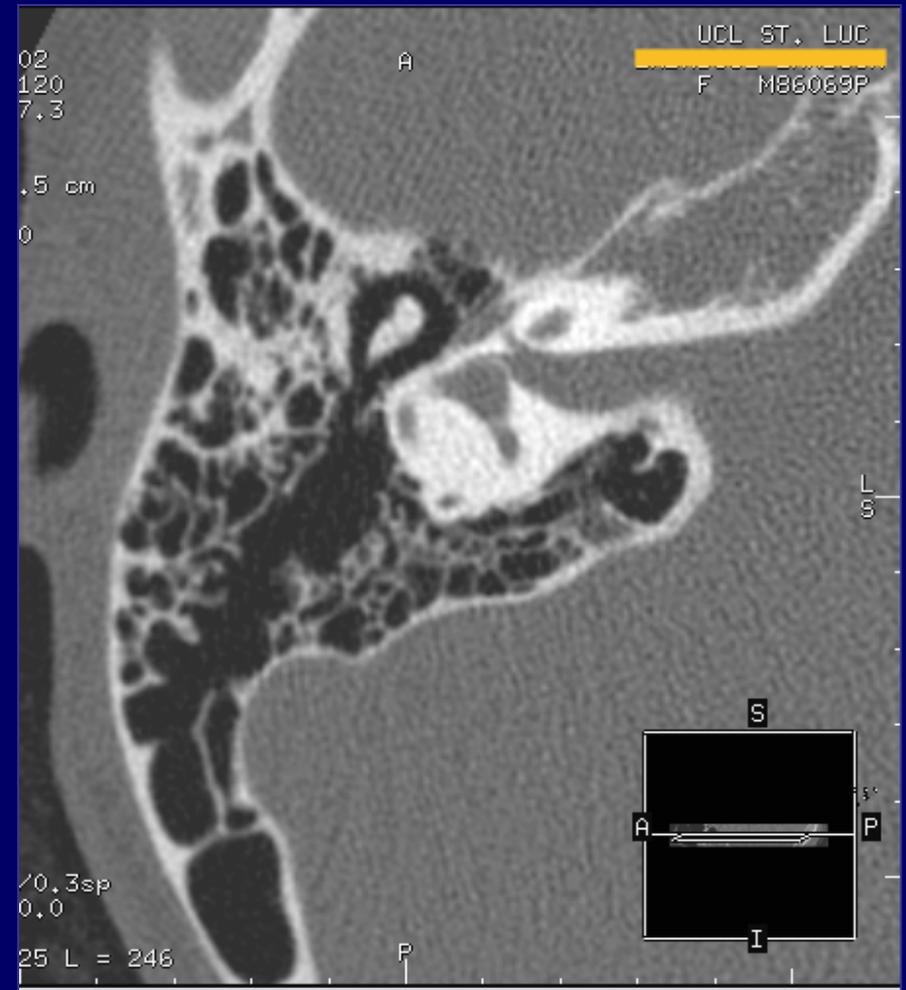


Pathologie maligne: carcinome épidermoïde
adénocarcinome cérumineux
carcinome adénoïde kystique

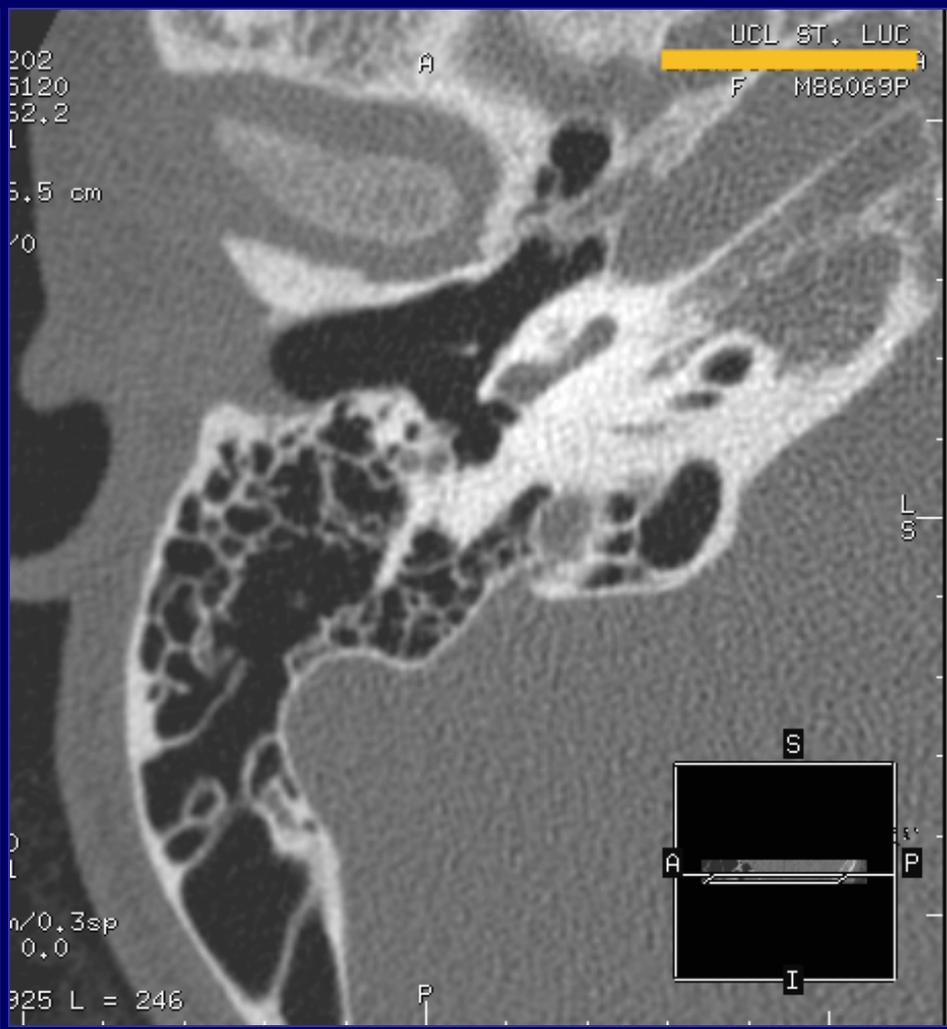


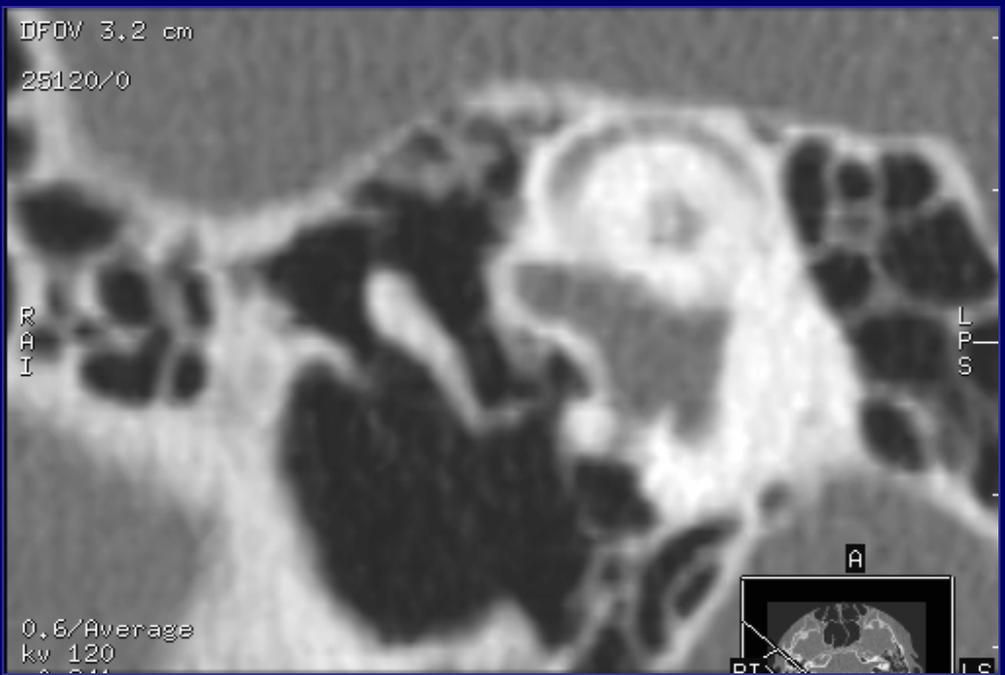
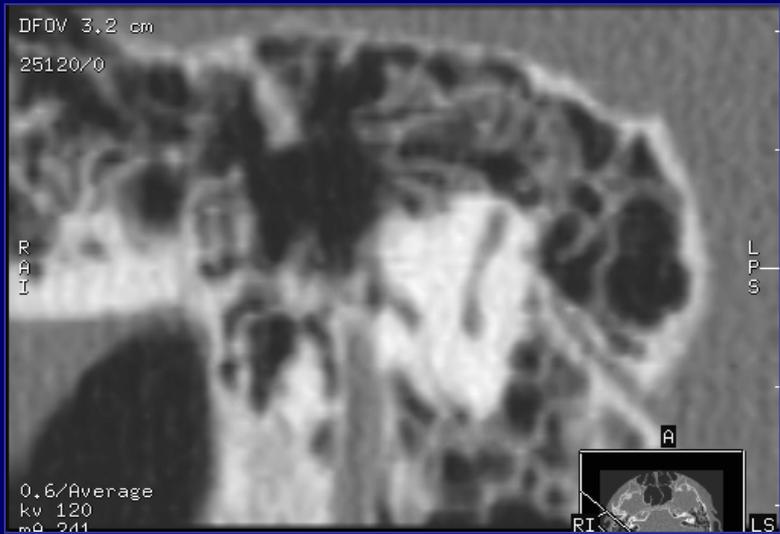
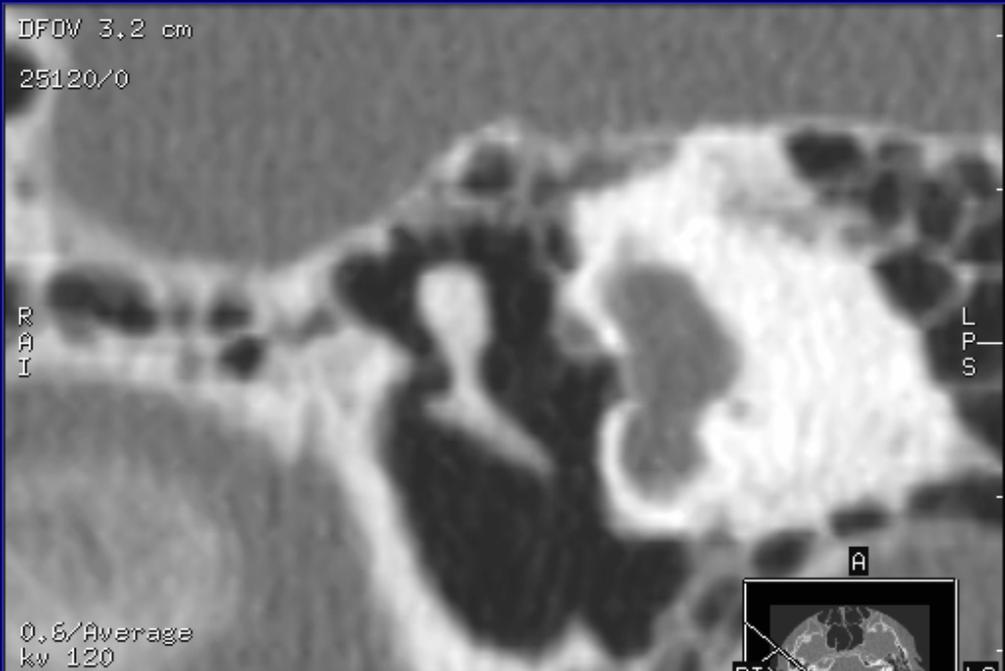


Oreille moyenne

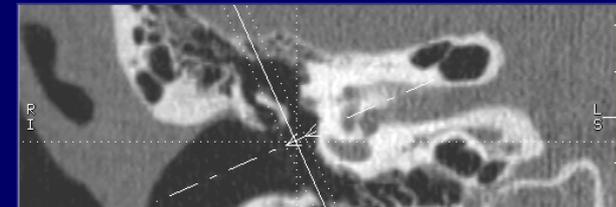
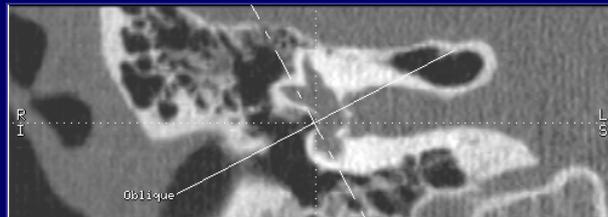
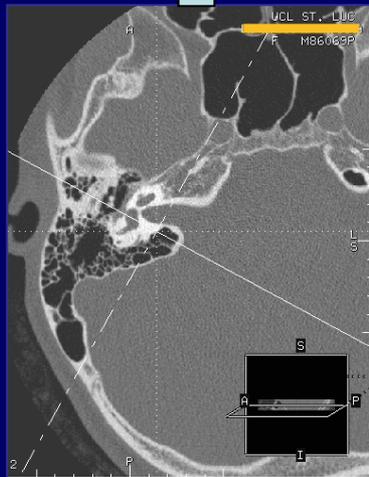
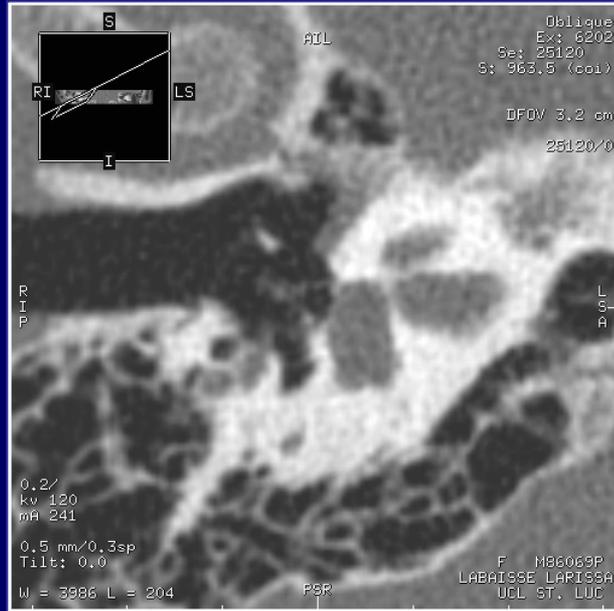
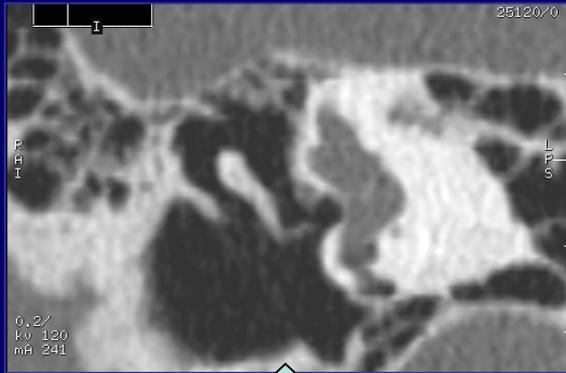




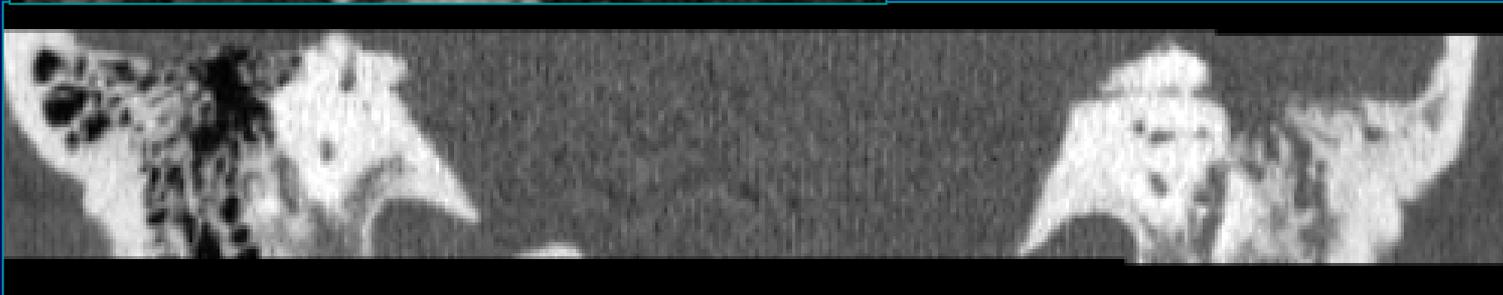
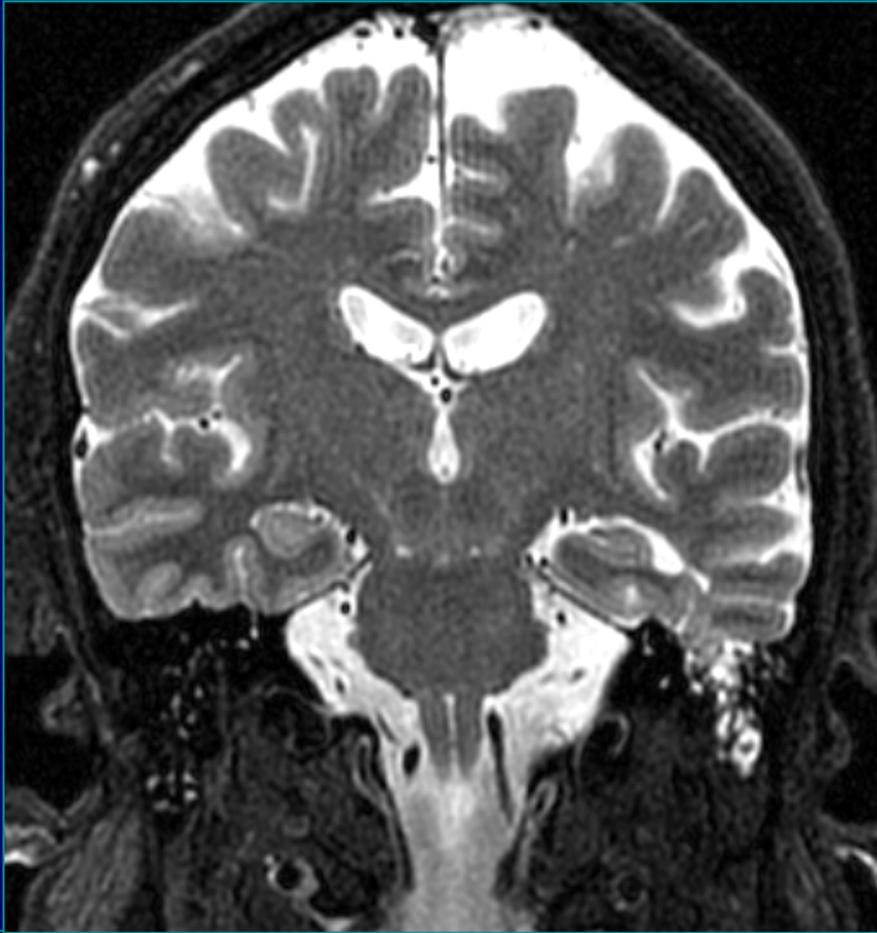


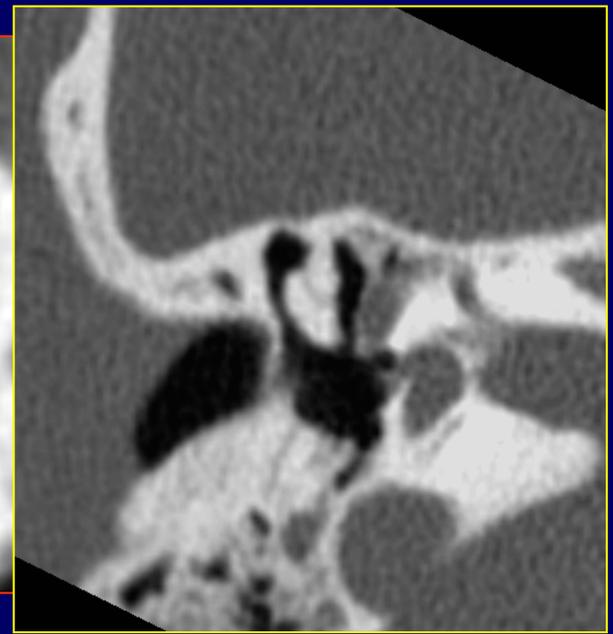
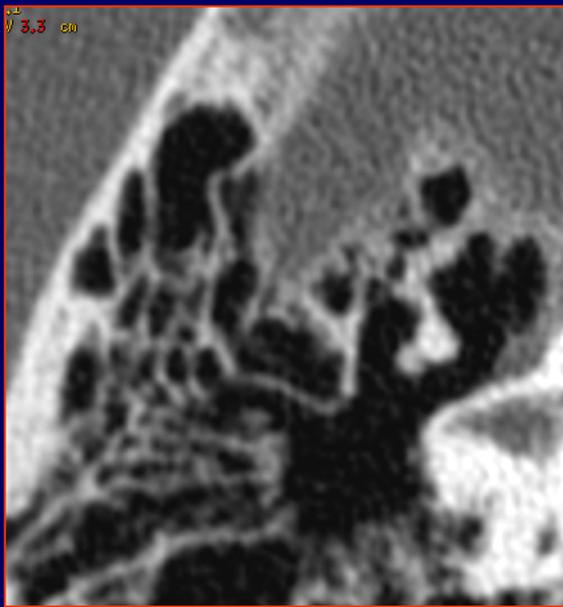


3 incidences de base

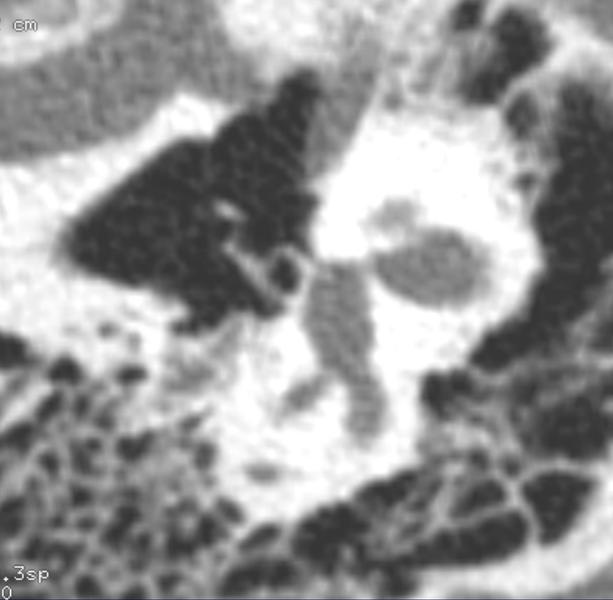
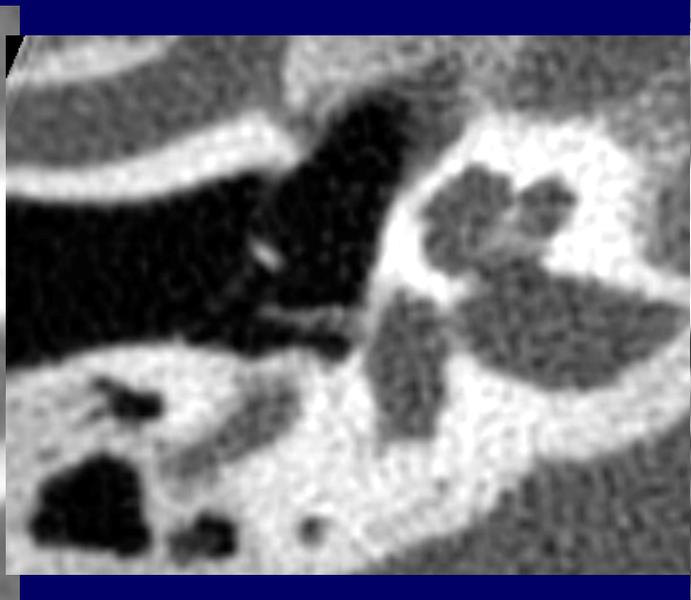
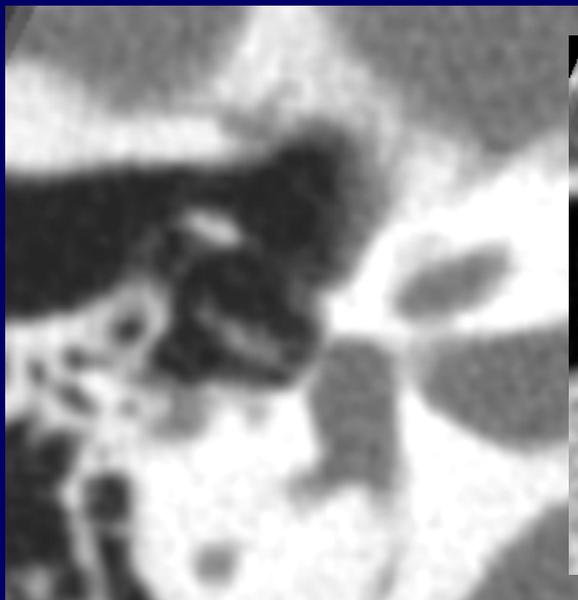


Oreille moyenne: malformations

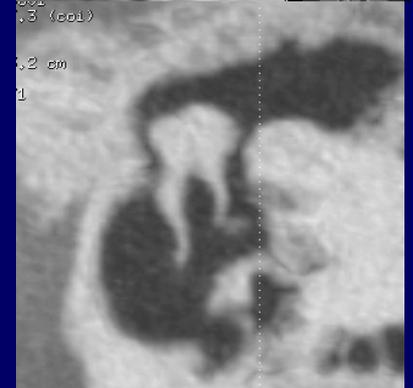
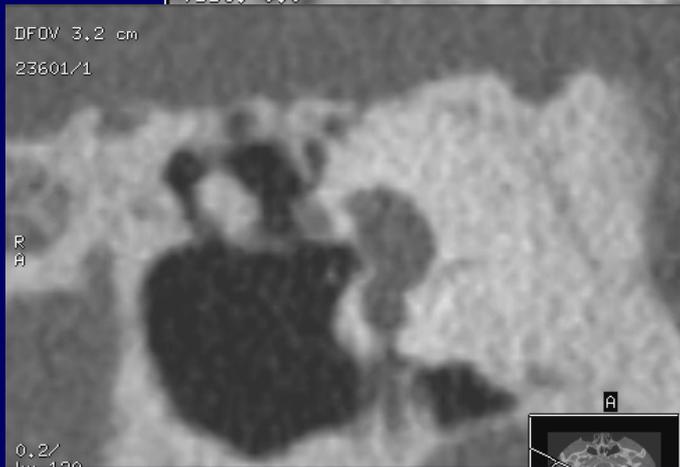
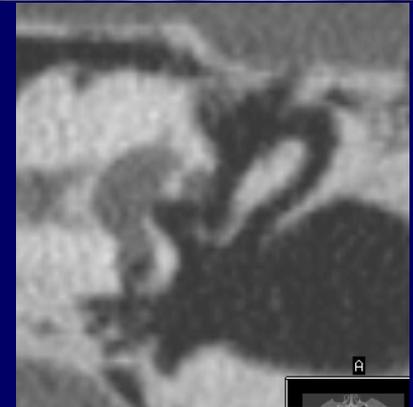
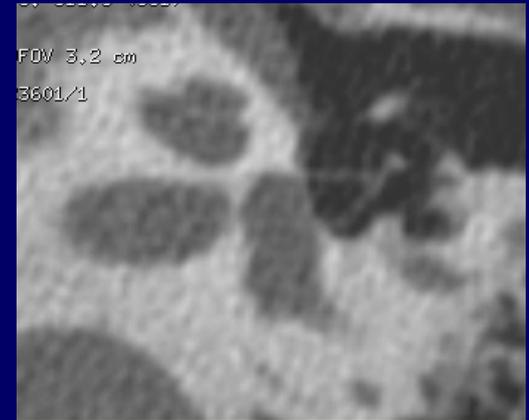




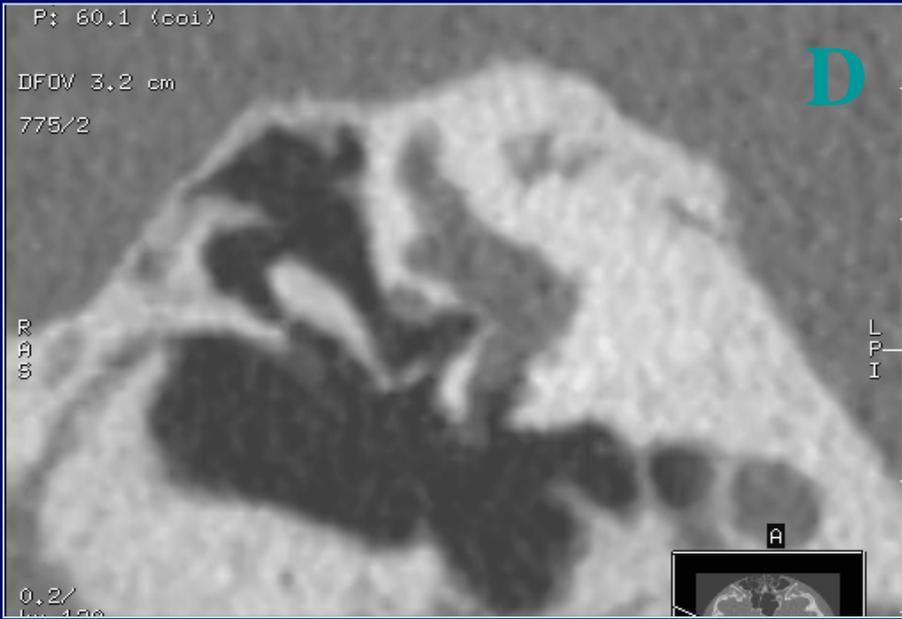
Oreille moyenne: malformations

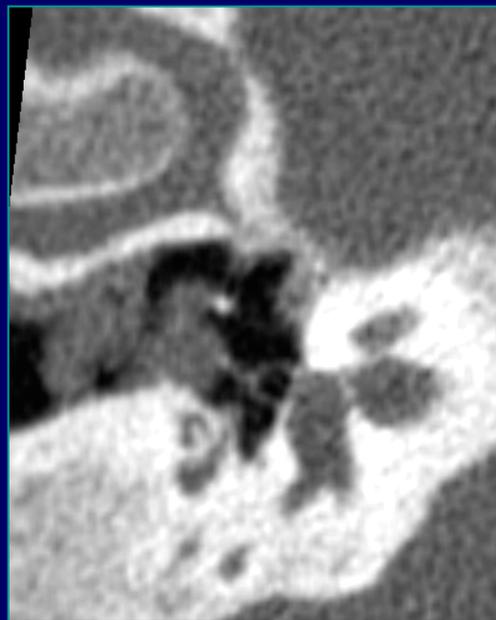


rétraction tympanique + lyse ossiculaire



cholestéatome attical

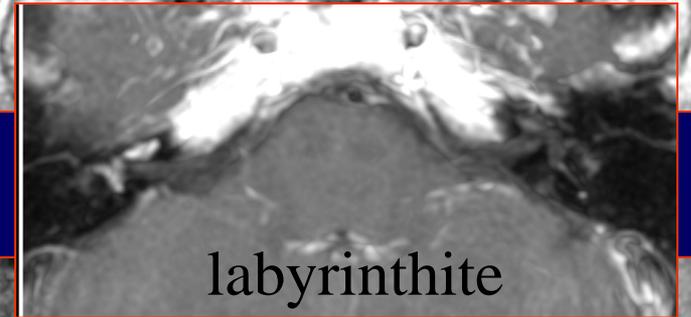
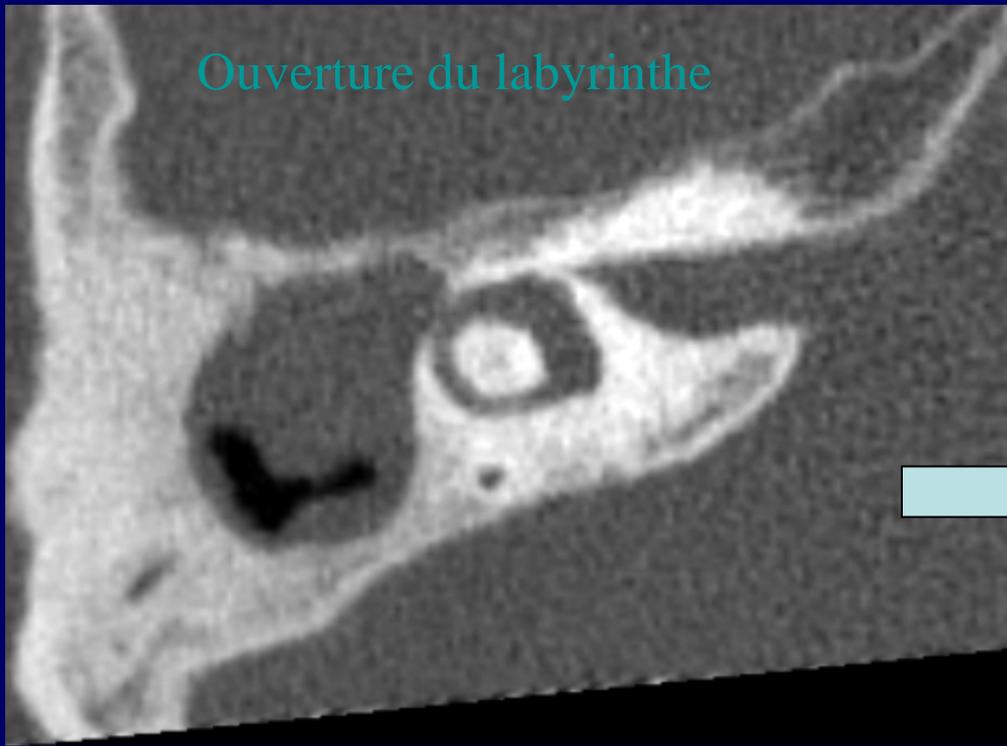




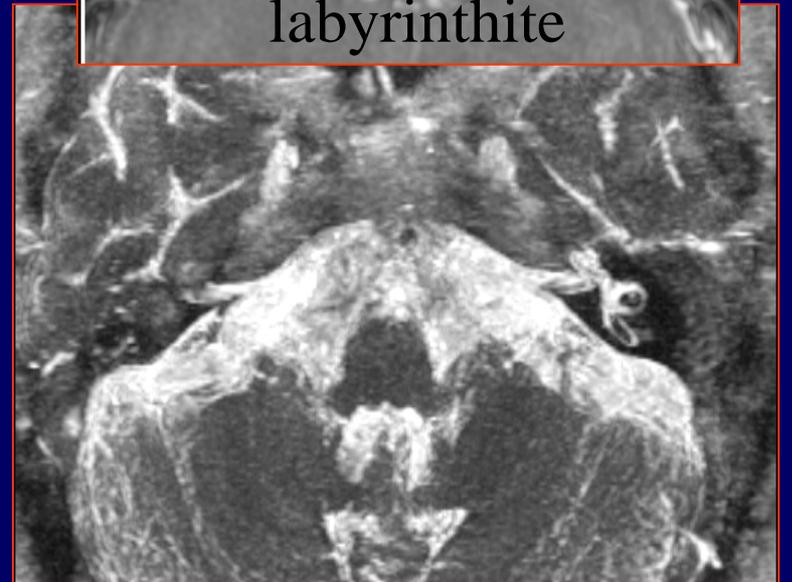
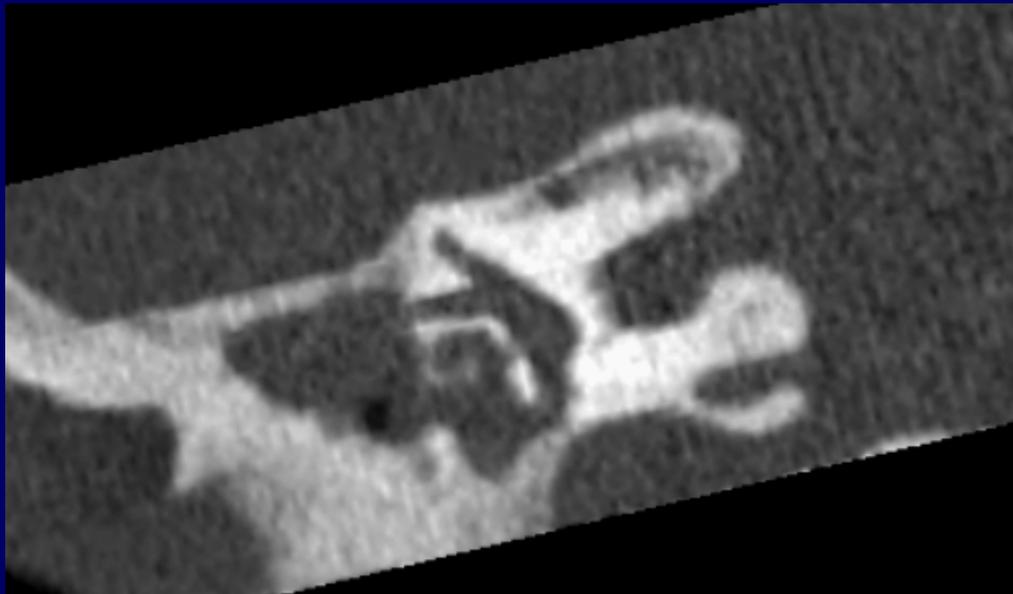
Critères radiologiques:

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

Ouverture du labyrinthe

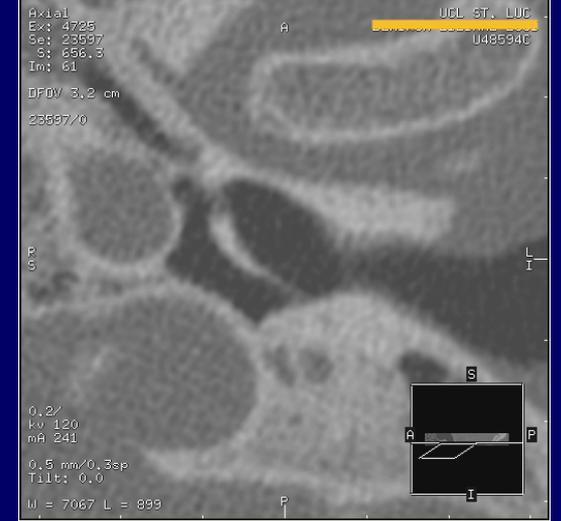
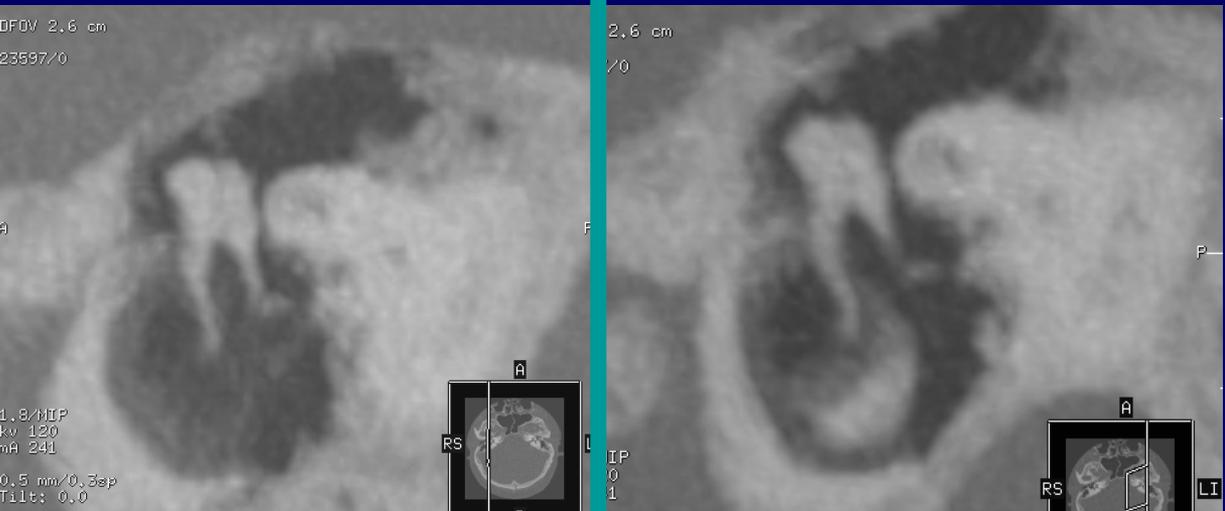
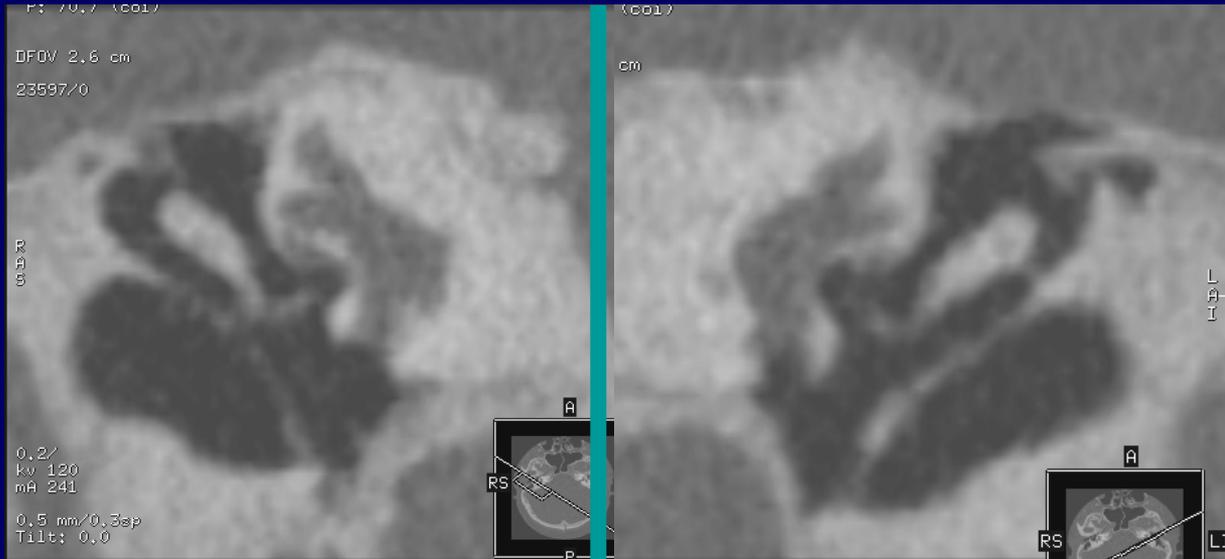


labyrinthite



tympanosclérose ... tympanique

G

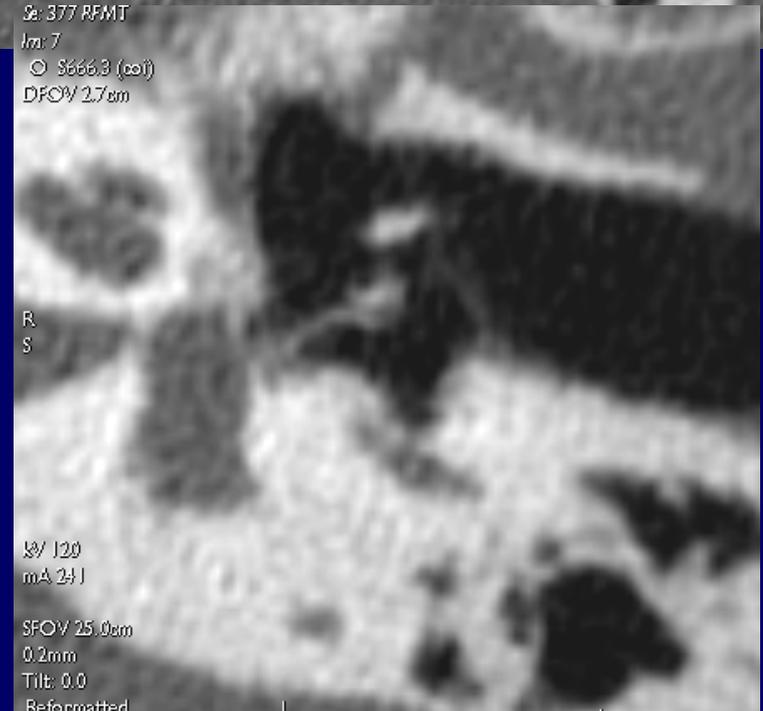


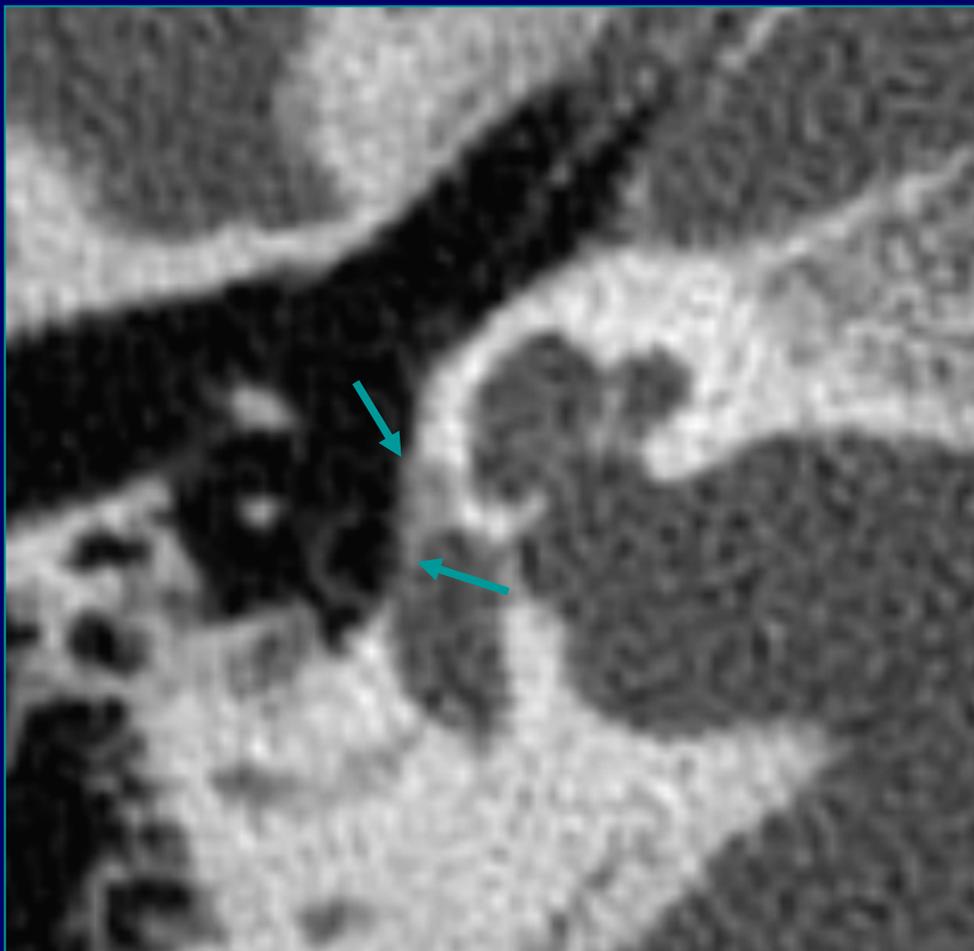
Otospongiose



FAF

OS « de tous les jours »



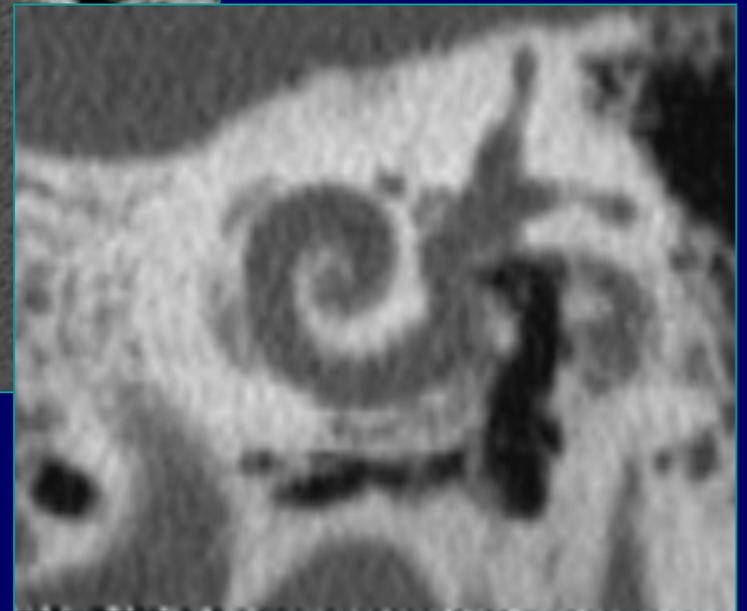


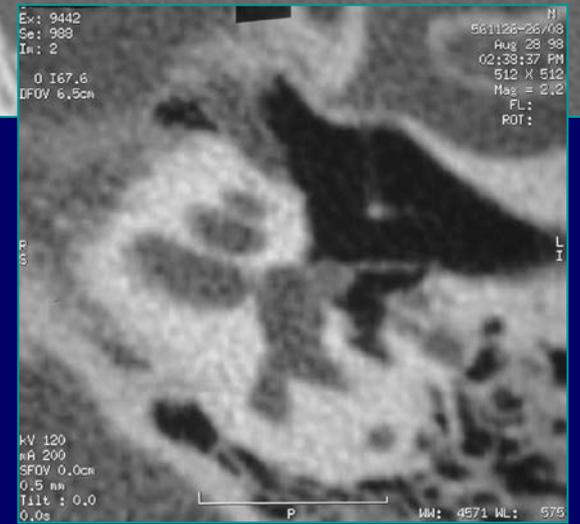
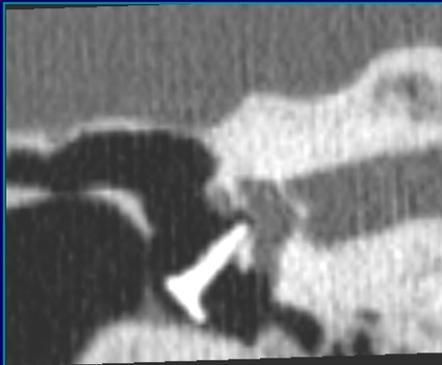
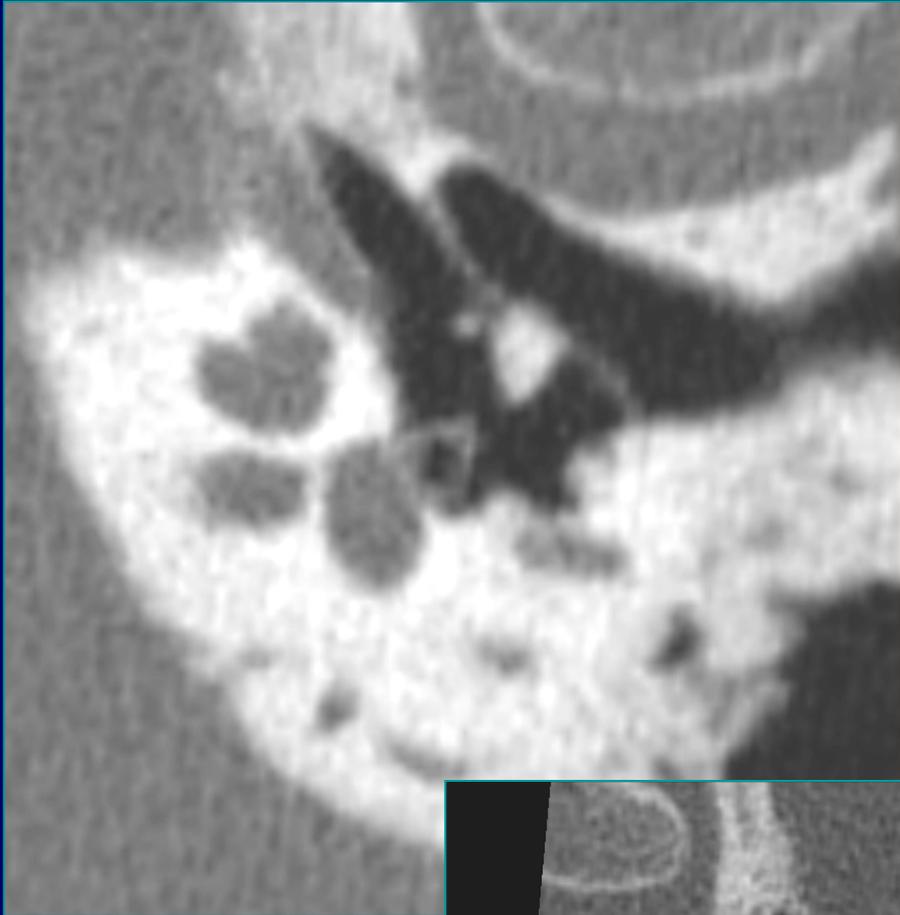
FAF
+
platine

‘cochléarisation’

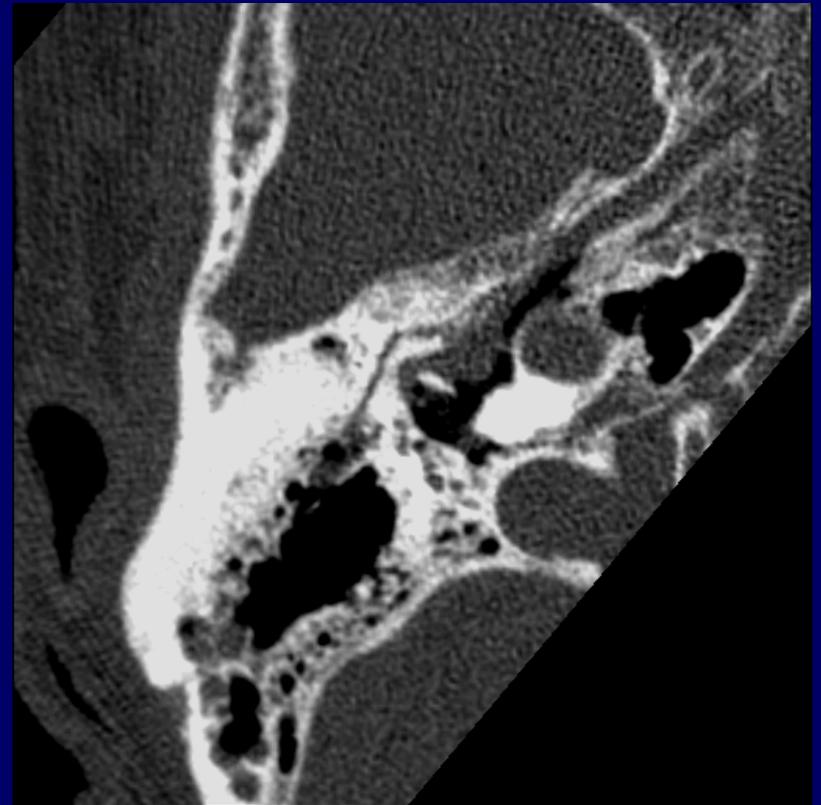
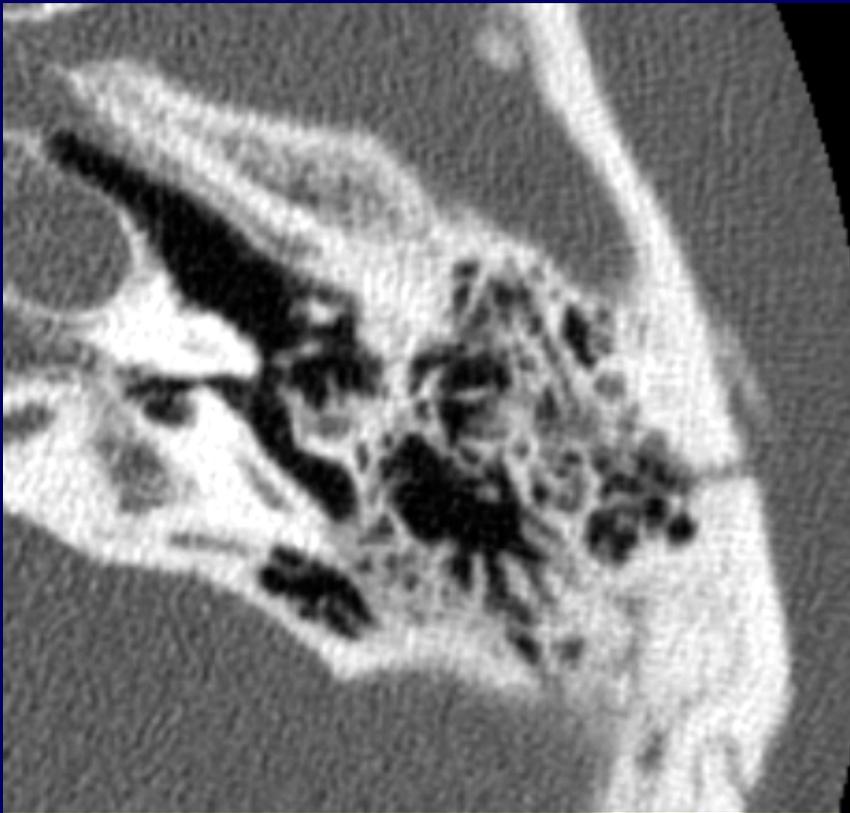


très sévère
'la troisième spire'

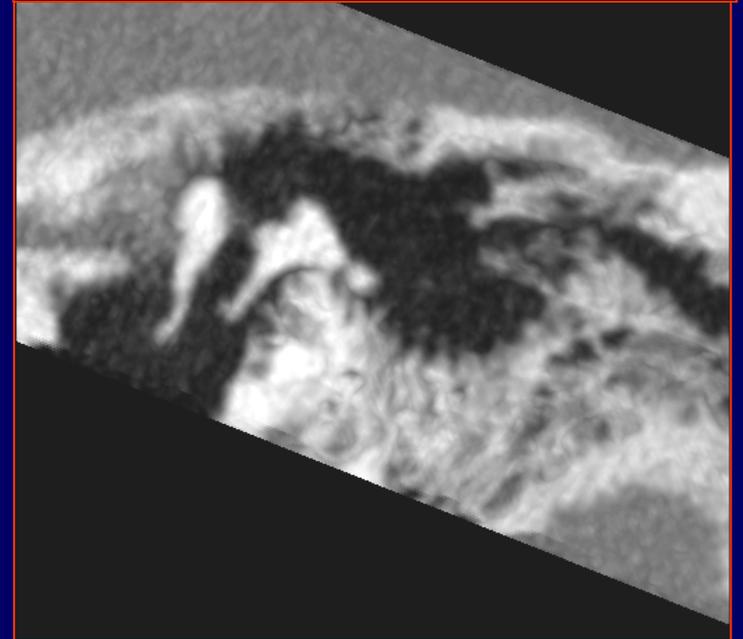




fractures du rocher



ossiculaire luxation ossiculaire

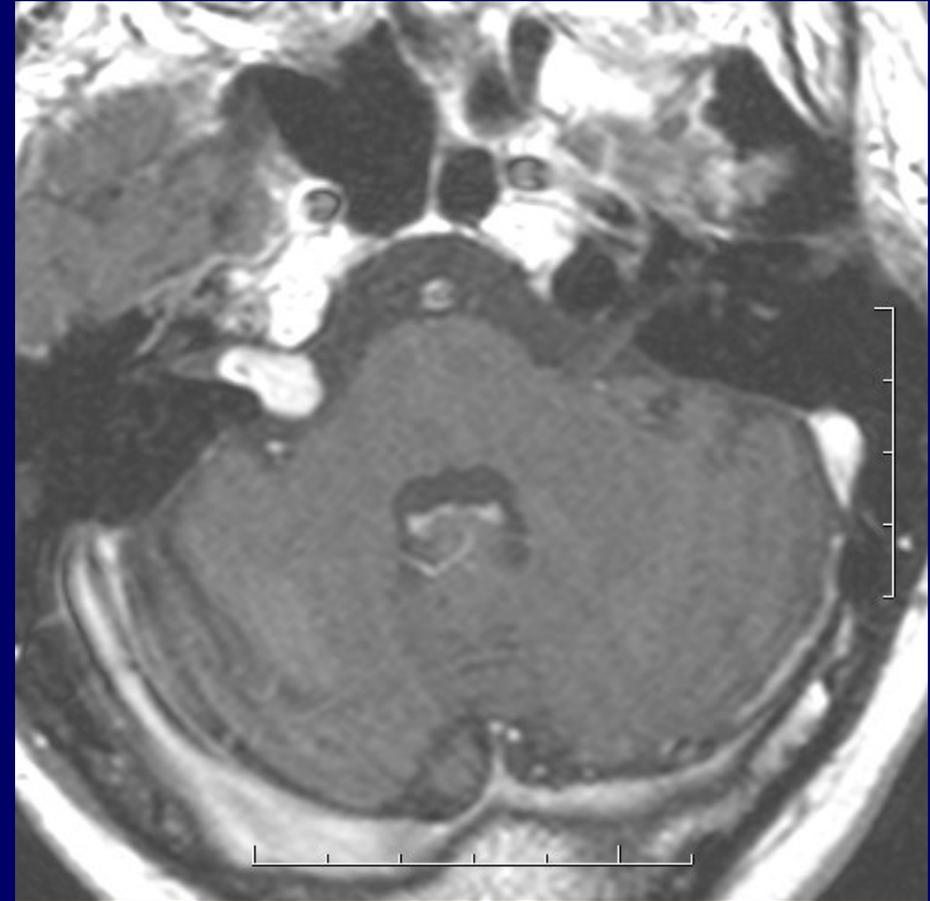


Oreille interne

Pondération T1

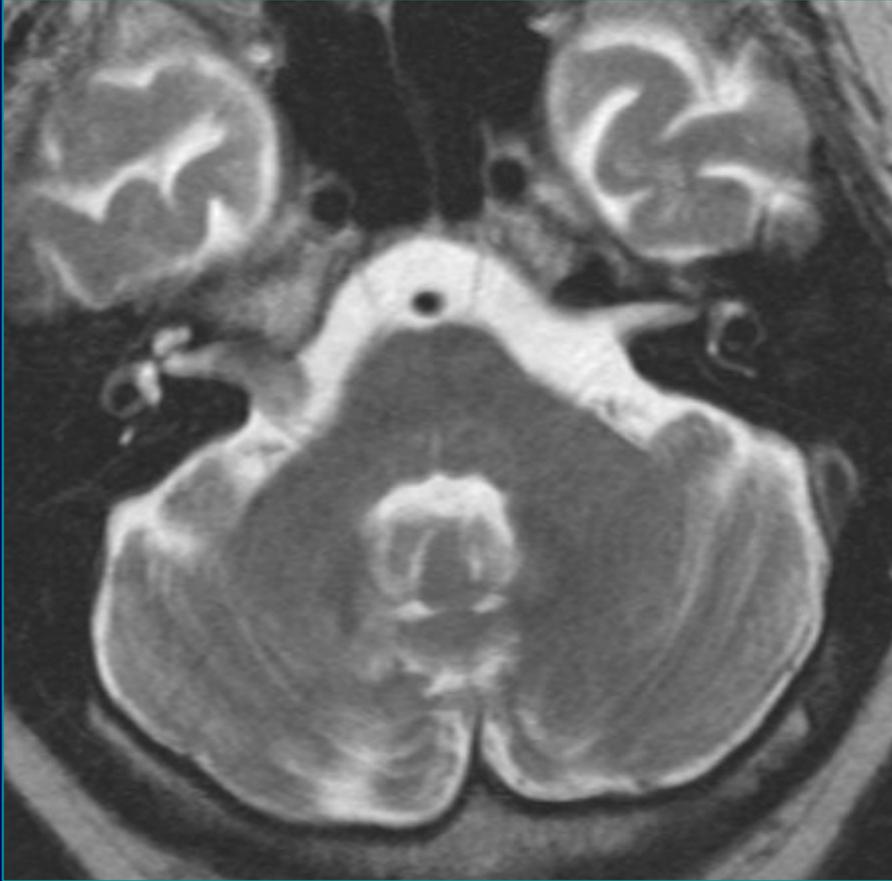


Contraste spontané

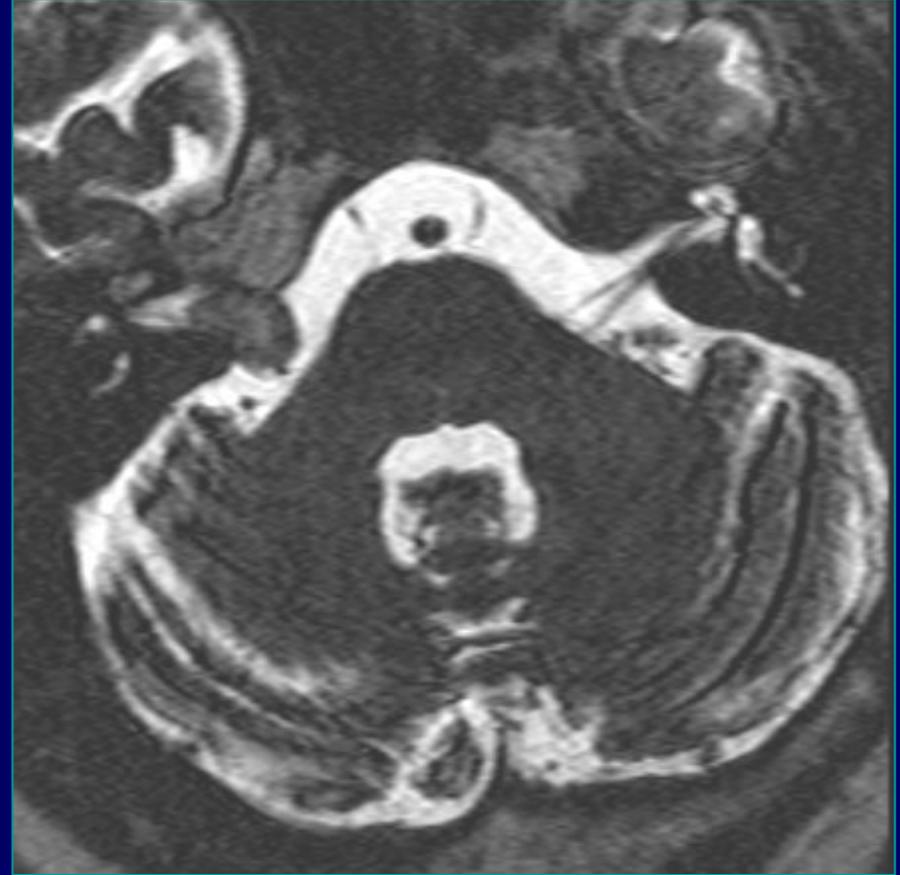


Après perfusion IV de PdC

Pondération T2



Coupe standard: 5 mm

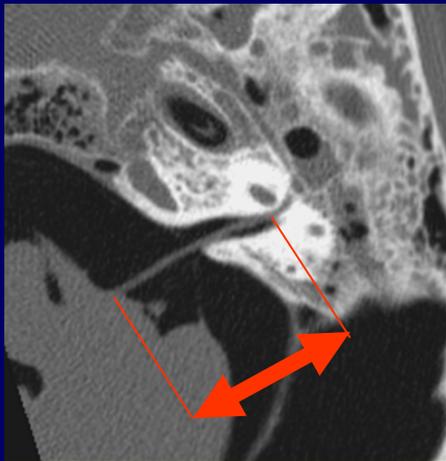


Coupe 3D-FSE: 0.8 mm/-0.4

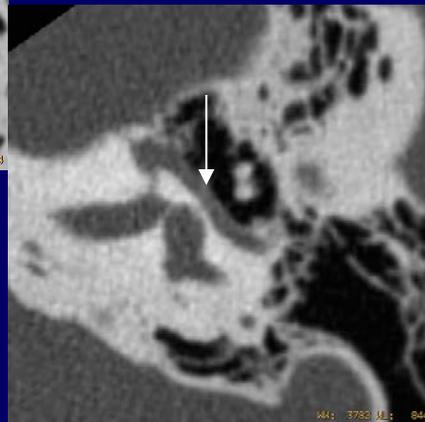
3D FSE-T2 = routine



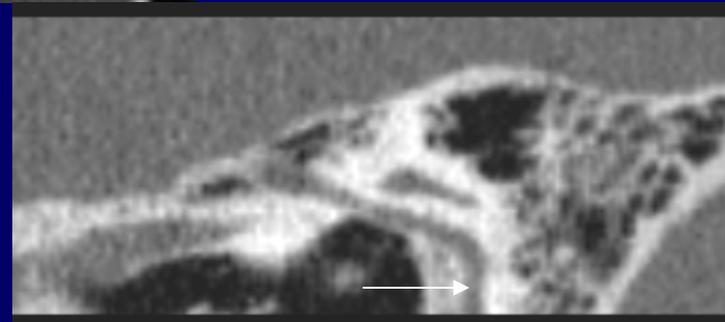
Droite: conflit vasculo-nerveux avec le VIII

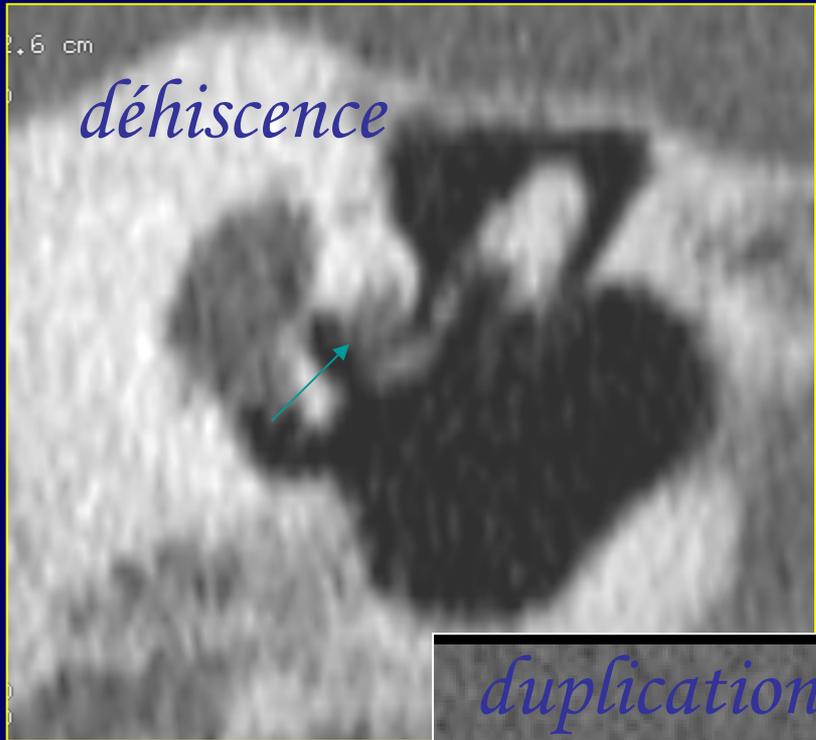


W: 3782 M: 844

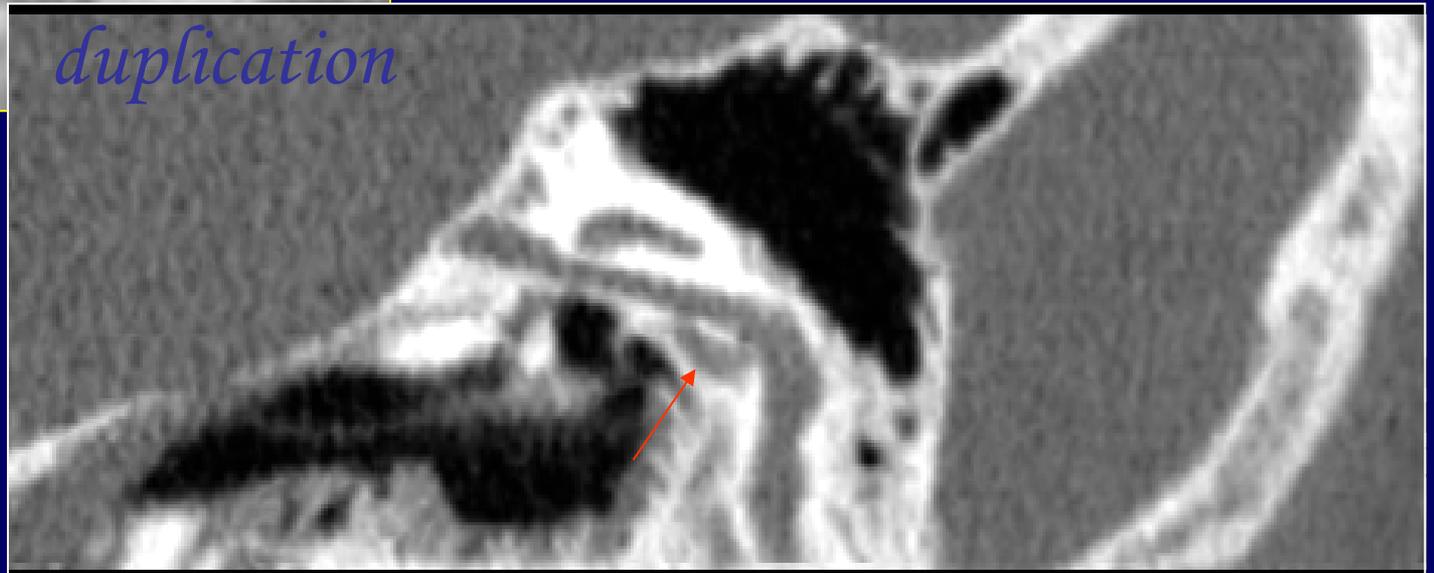


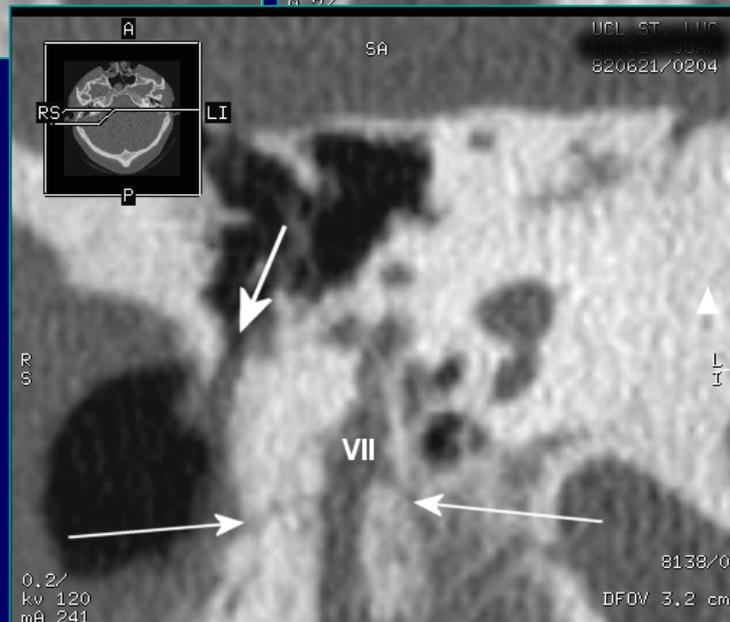
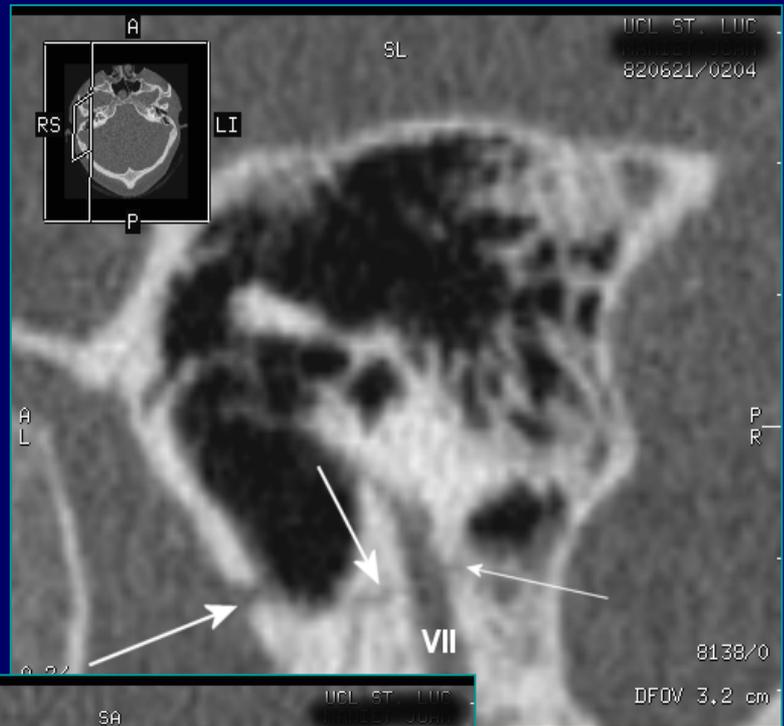
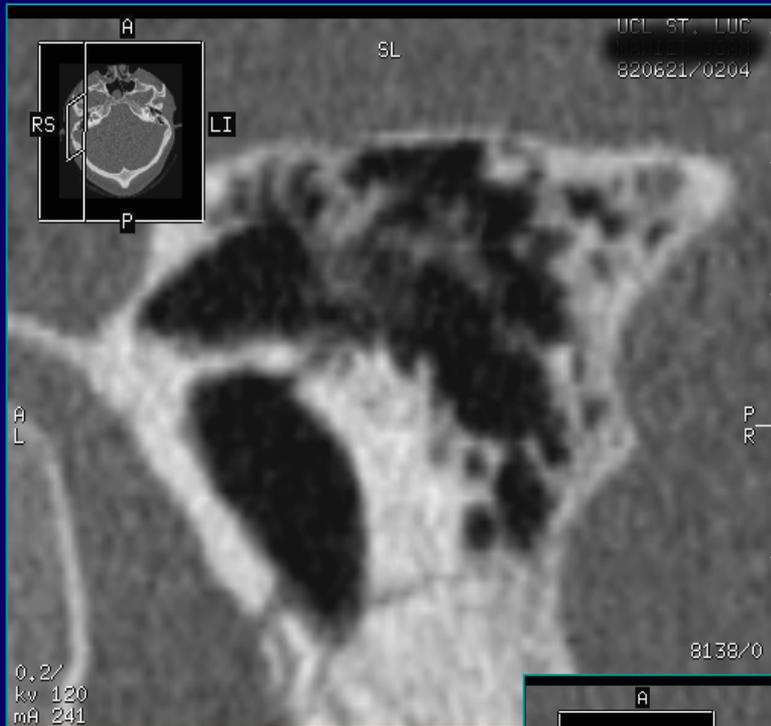
W: 3782 M: 844



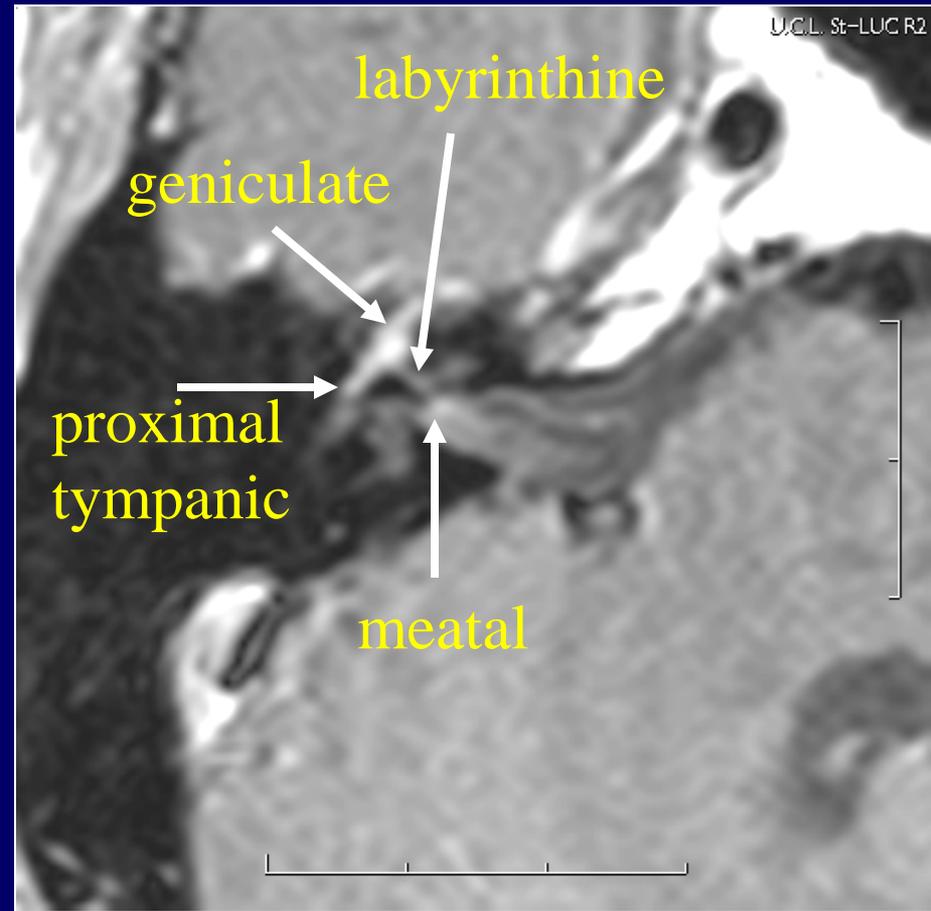
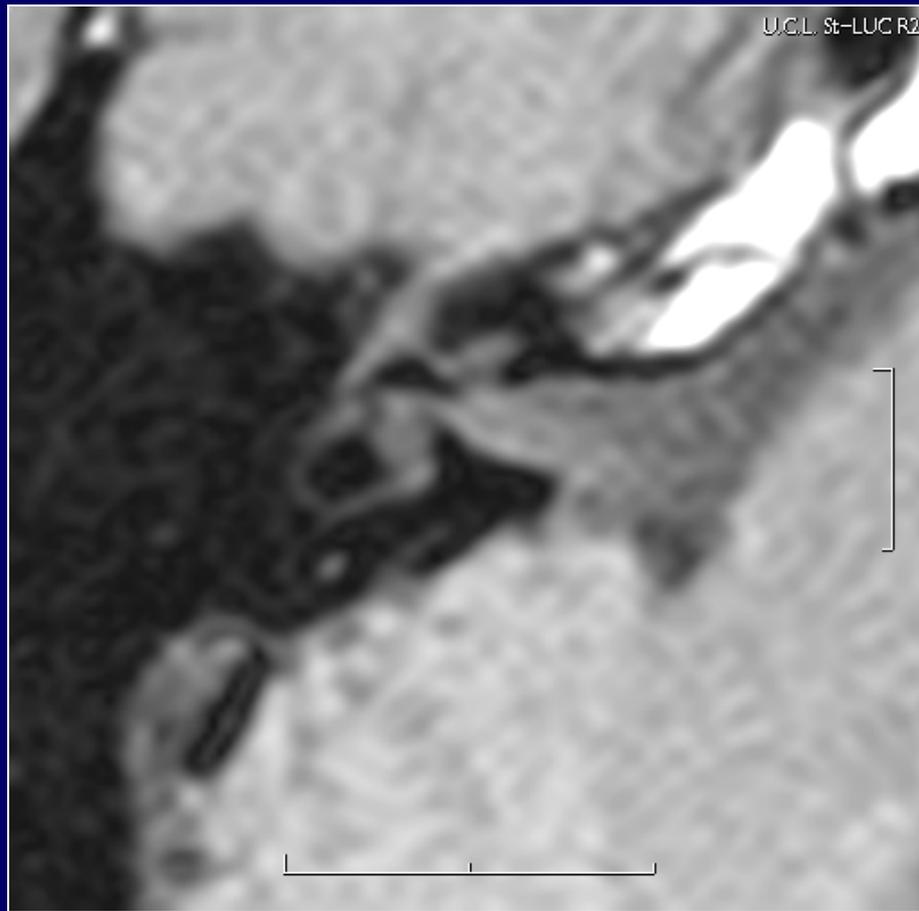


Canal du facial malformations





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

