

DIAGNOSIS

A Quarterly Journal Published by the American Society of Radiology



www.asr.org

Volume 8
Supplement 1
2011

myocardial bridging (MB) and to assess the correlation between atherosclerosis and MB.

Materials and Methods: Retrospective evaluation of 2790 coronary angiograms were obtained by 64-slice multidetector CT. The prevalence, length, depth, precise of MB location and concomitant atherosclerosis proximal to tunneled segment were evaluated. The group of subjects with MB was compared with the control group (subjects without MB).

Results: Of the 2790 subjects, 548 (19.64%) were found to have MB. MB was present equally in men and women. The tunneled segment was intact in all subjects. A negative significant correlation was found between the presence of MB and severity of atherosclerosis in the proximal segment of the coronary artery ($p < 0.001$; $df = 2 \times 2 = 42.75$). The mid LAD was the most common coronary artery involved. The severity of atherosclerosis in the part proximal to the tunneled segment correlated with the thickness of bridge ($p = 0.035$), but no significant correlation was found with the length of the bridged segment ($p = 0.431$).

Conclusion: The myocardial bridge not only does not predispose to the development of atherosclerosis in the coronary artery segment proximal to the bridge, but may also be a protective factor.

● 1050

Evaluation of the Size and Variation of Cistern Magna by MRI

Soheila Refahi¹

Masoud Poorissa²

Golamhossein Haddadi³

1. Ardebil University of Medical Sciences

2. Tabriz University of Medical Sciences

3. Fasa University of Medical Sciences

Cisterna magna is the largest subarachnoid cistern located between the cerebellum and medulla oblongata. Cisterna magna is enlarged in Dandy Walker syndrome and is small in Arnold Chiari syndrome and syringomyelia. Enlargement of the cistern magna may be a normal variation. We studied the size of cistern magna in 400 cases. All of them had symptoms of the mass in the posterior fossa. First we measured the surface of the cistern magna in the midsagittal plane. Then the size of cistern magna was measured in the axial plane. In addition, we evaluated the shape of cistern magna in the midsagittal plane. We evaluated herniation of the cerebellar tonsils

in the midsagittal plane. The surface of the cistern magna in the midsagittal plane ranged between 0 and 726.6 mm². The mean of this surface was 167.8±141.6. Surface of the cistern magna in males is significantly greater than females ($p = 0.000$). In 9.3% of cases, the surface of the cistern magna was about 0 and 86.5% of them were females. The incidence of Arnold Chiari was 0.25% in our study. The size of cistern magna in the axial plane was between 3.1 and 34.1 mm (mean, 15.6±7.04 mm). The size of cistern magna in males was significantly greater than females in the axial plane ($p = 0.000$). Cistern magna was effaced in 9.3% of our cases, of which 86.5% were females. The maximum size of cistern magna in males is greater than females. These results may be related to the difference between the anatomic size of the posterior fossa in males and females. We studied symptoms of cerebral atrophy in 5% of our cases who had the largest cistern magna. None of them had obvious symptoms of cerebral atrophy. In 323 cases, cistern magna was triangular in the midsagittal plane and in 37 cases, it was obliterated.

● 1051

Evidence-Based Radiology: A New Approach to the Practice of Radiology

Kombiz Steadie Seifi

Jalal Jalal Shokouhi

Abdolrasul Sedaghat

Mansoor Fatehi

Ahmad Tavakoli

Over the past three decades, the medical community has increasingly supported the principle that clinical practice should be based on critical evaluation of the results obtained from medical scientific research. Evidence-based medicine (or health care) involves the more formal integration of the best research evidence with clinical expertise and explicit acknowledgement of patient values in clinical decision making, as compared with conventional practice. Today this evaluation is facilitated by the internet which provides instantaneous online access to the most recent publications even before they appear in print form. More and more information is solely accessible through the internet and through quality- and relevance-filtered secondary publication (meta-analyses, systematic reviews and guidelines).

This principle – a clinical practice based on the results (the evidence) given by research – has engendered a