ASST OF THE SPEDALI CIVILI DI BRESCIA
Department of Diagnostic Imaging
O.U. Neuroradiology
Chair
Director: Prof. Roberto Gasparotti

Mr. **PIZZARELLA ANTONIO**

[redacted]

Date of examination: 11/05/2022 17:27

Provenance : **9999-FREELANCE**

Prescribing physician :

Diagnostic question :

LUMBOSACRAL SPINE RM - LUMBOSACRAL PLEXUS
Technique: Examination performed on 3T MRI equipment (Skyra, Siemens) with sagittal T2 FSE sections, including the spine from L4 to the pelvic floor, 3D SPACE STIR-T2 sequences (3D MRI neurography) aimed at studying the lumbosacral plexus, axial T2 STIR and T1 sections before and after Gadolinium, high resolution, aimed studying the pelvic floor.
Examination compared with previous MRIs of 2.7.2020, 11.11.2020, 9.4.2021, performed elsewhere.
No disc changes in the explored tract.
Regular in course and calibre are the roots of the cauda equina.
The MRI study of the pelvic region and lumbosacral plexus showed no expansive lesions of neoplastic nature along the course of the plexus nerves.
The MRI neurography study showed no abnormalities in size and signal intensity of the lumbar and sacral roots.
In particular no abnormalities of the right sacral plexus.
Regular course, size and signal intensity of the intrapelvic femoral nerves. No abnormalities of the size, signal intensity and transverse fascicular pattern of the sciatic nerves at the level of the great ischiatic foramen and the gluteal region.
Non asymmetry of the size of the internal obturator muscles. Modest asymmetry of the piriformis muscles (right> left) less than 4 mm.
No signal changes in the pelvic floor muscles and in particular the anal sphincter and elevator muscles of the anus.
Ischial spines of normal morphology and size.
At the right ischial spine we observe the presence of isointense tissue in T1, inhomogeneously hyperintense in the T2-STIR sequences, with blurred contours, characterised by inhomogeneous impregnation after the administration gadolinium, compatible with fibro - scar tissue, in the aftermath of previous laparoscopic surgery, performed on 12.12.2020.
Tissue of a fibrocystic nature surrounds the pudendal nerve-vessel bundle between the interligamentous space and the entrance to Alcock's canal.
This tissue, which was absent in the pre-operative MRI examinations, was also recognisable in the MRI examination performed on 9.4.2021.
In the context of the fibrocatrial tissue, it is not possible to recognise the pudendal nerve separately from the pudendal vein and artery.
Conclusions: The findings described point to the possible presence of fibro- scar tissue at the level of the right ischial spine, the result of previous laparoscopic surgery. The relationship between the post-surgical findings and the symptoms currently reported by the patient, which were also present before surgery, is unclear.

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Neuroradiologist
Prof. R. Gasparotti

T.S.R.M.
A. Melchiotti

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