



In The Name of God

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parenchyma and water-density mediastinal mass. Magnetic resonance imaging (MRI) demonstrated multiple lytic bone lesions and bone marrow signal changes as well. Due to nonspecific and various manifestations of the disease, it could be simply disregarded and misdiagnosed. Definitive diagnosis is based upon clinical presentations, radiographic scans and pathological findings. In this case we aim to systematically discuss differentials and diagnostic evaluations, also new assessment methods help to diagnose GLA is described in detail.

**Keywords:**

lymphangiomatosis, pulmonary lymphangiectasia, cystic mediastinal mass, lytic bone lesion, chylothorax, lymphangioma

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### COMPARISON OF HYSTEOSALPINGOGRAPHY & HYSTEOSONOGRAPHY IN THE INVESTIGATION OF FEMALE INFERTILITY

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Abstract Evaluation of the endometrial cavity and tubal patency is indicated for many clinical conditions in gynecology, particularly for infertility work up. Several imaging methods are used to help experts to investigate uterine cavity and tubes. Hysterosalpingography (HSG) and hysterosonography (SHG) are the most common and major imaging methods for this situation. Hysterosalpingography is the radiographic evaluation of the uterine cavity, and fallopian tube after injection of a radio-opaque medium through the cervical canal. It plays a significant role to assess infertile couple and provides detailed information about the uterine cavity, tubal patency, lesions, congenital anomalies and different types of intrauterine defects [1-3]. The

technique of HSG is quite simple, less invasive, more convenient, and provide reliable information at less cost. Laparoscopy and hysteroscopy also evaluate tubal involvement but these new techniques are more expensive, require general anesthesia, and are not without risk. Despite of advanced diagnostic imaging techniques such as MRI, HSG is still the best method for tubal evaluation. Sonohysterography is a noninvasive imaging technique for assessment of uterine anomalies that involves the infusion of sterile saline solution into the uterine cavity during transvaginal sonography (TVS). Separation endometrial layers of endometrium on SHG produces optimal visualization of the uterine cavity. Uterine abnormalities that can be detected at SHG were grouped into congenital uterine anomalies (arcuate, septate, subseptate, unicornuate, bicornuate and didelphys uteri) and acquired endometrial abnormalities (polyps, hyperplasia, leiomyomas, and intrauterine adhesions). SHG is known as a reliable, simple, cost-effective and non-invasive method which can reduce indications for diagnostic hysteroscopy

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### CORRELATION BETWEEN FACET JOINT ASYMMETRY AND LUMBAR DISC DEGENERATION DISEASE AND FACET JOINT DEGENERATION

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**Objective:**

Facet joints tropism (FJT) is defined as asymmetry between left and right facet joints and is postulated as a possible cause of disc herniation, because it has the potential to markedly alter the biomechanics of lumbar spinal movements and precipitate early degenerative changes either in the joint or adjacent intervertebral discs. There are numerous arguments for and against this hypothesis. A correlation between facet asymmetry and the side of disc herniation is also debated. In the present study we use two methods of measurement FJT in former studies and a new method at the same time.