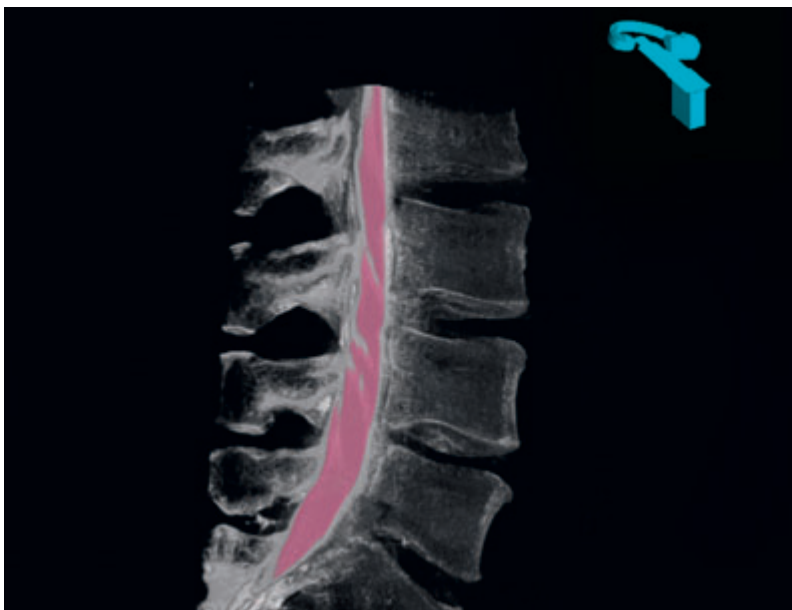


## Myelography

### *syngo* DynaCT – Cross-sectional imaging. Setting the trend in intervention.

Courtesy of Dr. Jan-Hendrik Buhk,  
University of Göttingen, Göttingen, Germany



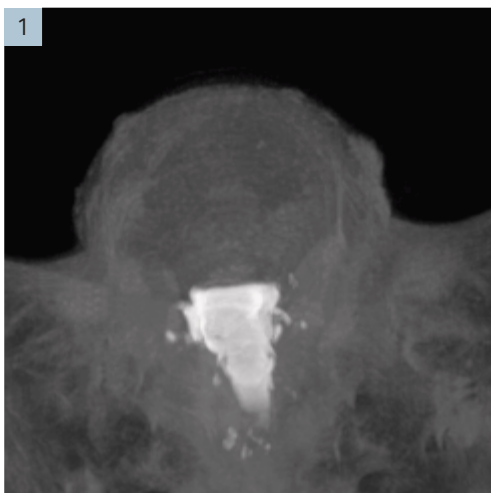
*Contrast-enhanced syngo DynaCT  
of the spinal canal*

#### **Patient history:**

Patient underwent two lumbar disc surgeries, segment L4/5 and segment L5/S1, persisting lumboischialgia. Main symptom: increase of pain.

#### **Diagnosis:**

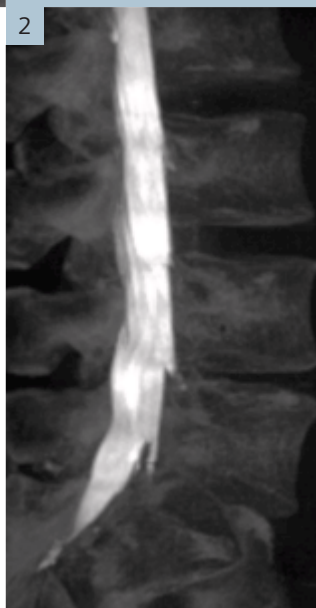
Dural neurocanal of the complete lumbar spine is normally wide, this is consistent with the age of patient. In comparison with the other side, the left spinal root L5 seems thicker than the right, the remaining ones are regular. There are no signs of spondylosis and no suspicious findings in the post spondylotomy defects. In tomography, there is a little bit more density in the left spinal root bag L5, e.g., scar tissue. Essentially, these findings in post-surgery myelography are quite regular, but show discreet signs of adhesion of the left spinal root L5 post surgery.



[1] Axial view

## Comments:

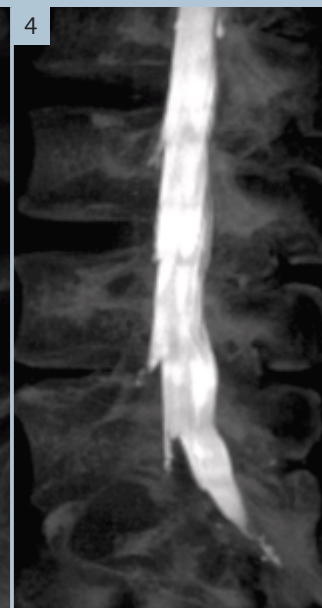
The main advantage of *syngo DynaCT* is that it can avoid patient transfer to CT after the myelo procedure. The whole procedure can now take place in the angio suite, enabling better patient access throughout the intervention as well as post-processing of imaging for both fluoroscopy and cross-sectional imaging at the same workstation. Additionally, the new workflow brings significant patient benefits such as reduced examination time, no repositioning, and no waiting time. Myelo *syngo DynaCT* is therefore more effective and more efficient at the same time. Moreover, the spatial resolution available with *syngo DynaCT* enables the precise identification of very small structures. In this clinical case, the post-spondylotomy defects and the excellent contrast of the spinal roots should be noted.



[2] Sagittal right view.  
Contrast-enhanced  
*syngo DynaCT* of  
the spinal canal.



[3] Anterior view



[4] Sagittal left view