Nose and paranasal sinuses

PNS identified as paired cavities in the frontal ,maxillary, ethmoidal and sphenoid bones.

They communicate with nasal cavity and are lined by mucous membrane.

RADIOGRAPHIC ANATOMY OF PNS IS PARTICULARLY COMPLEX BECAUSE OF TWO FACTORS

- 1-The sinuses are projected over one another to great extent and anatomical detail is thus obscured.
- 2-There is a great range of normal variants of the sinuses among different individuals in various age group, as well as in the same age groups.

CT SCAN coronal section is the imaging modality of choice for PNS

ROUTINE PROJECTION FOR PNS

1-Posterioanterior (Caldwell s)

This view shows the frontal and ethmoidal sinuses ,but the maxillary sinuses obscured by petrus ridges.

2- Posterioanterior view (water s view)

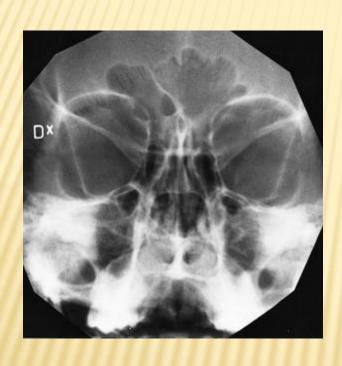
This view allow maxillary sinuses to be clearly seen.

3- Lateral view

Sphenoidal sinuses seen by this view.

ON plain radiography the normal sinuses are transradiant because they contain air ,plain films have role in showing mucosal thickening ,fluid levels, bone distraction and fractures

CALDWELL VIEW WATERS VIEW

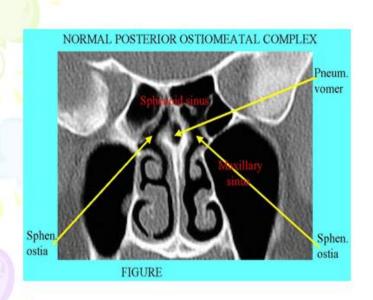


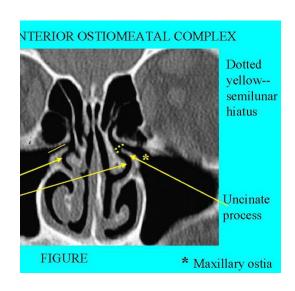


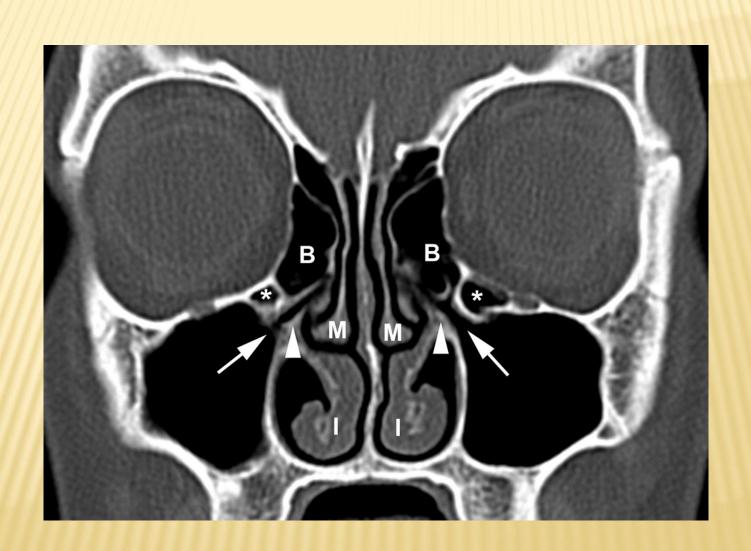
LATERAL VIEW



CT SCAN, CORONAL SECTION







OPAQUE SINUS

- The sinus become opaque when all air is replaced and appears as dense or denser than the adjacent orbit on plain film
- 1-Infection (thickened mucosa or fluid inside, or both.)
- 2-Mucocele, obstructed sinus
- The sinus expanded ,secretion accumulate..frontal sinus mucocele may erode the orbital roof causing exophthalmos
 - Mass in side sinus as polyp .carcinoma of sinus

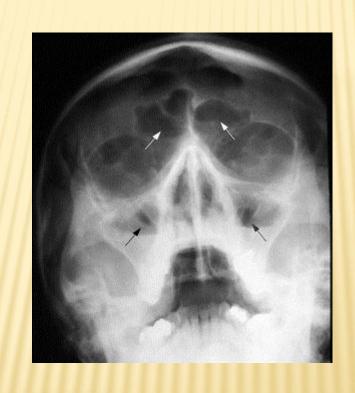
- × 3-antochoanal polyp,
- Typically arising from maxillary mucosa and prolapsed through ostium to nasal cavity and some time to nasopharynx
- × 4-Trauma ..hemorrhage ,opacification
- × 5-carcinoma

Plain film and CT scan with opaque sinus



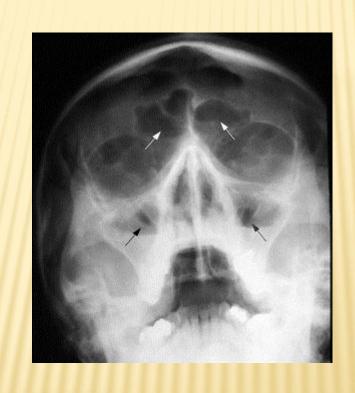


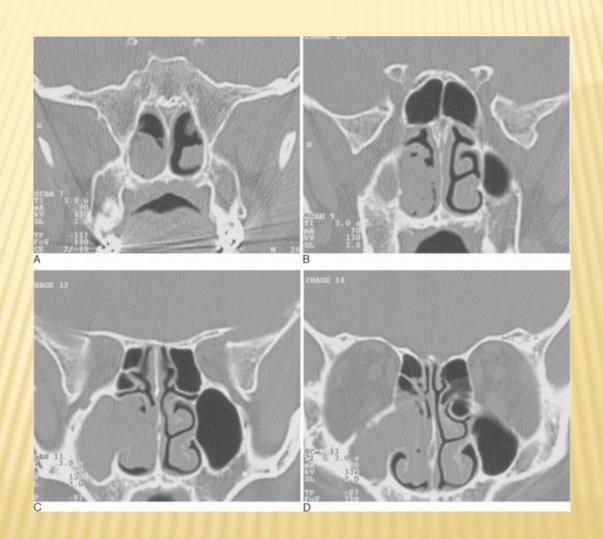
FLUID LEVEL IN BOTH MAXILLARY SINUS





FLUID LEVEL IN BOTH MAXILLARY SINUS



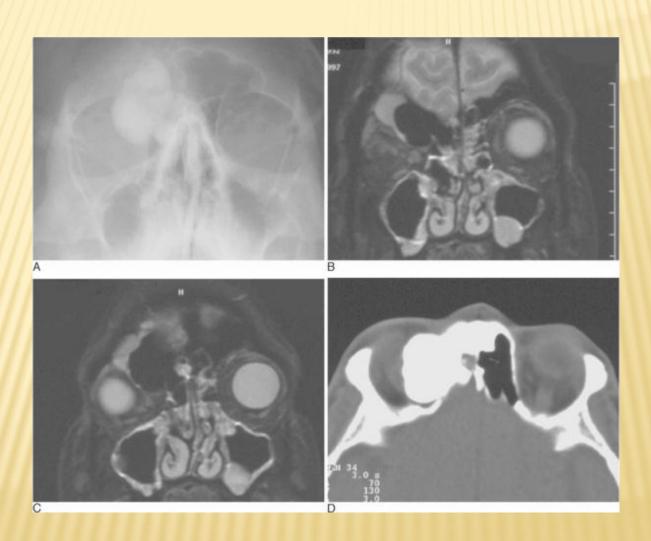


Tumours

In all opaque sinus particularly the antra ,attention should be made on both plain films and CT scan to bony margin because if these destroyed the diagnosis of carcinoma almost certain fibro-osseous lesions
inverting papilloma
juvenile angiofibroma
granulomatous conditions
malignant tumours.

<u>Osteoma</u>

Benign ,slowly growing tumour .By plain and CT scan appears as well defined ,very dense lesion .



Fractures of the nasal bones are common sequelae of fights.

Plain radiographs are sufficient to document the injury, although they are frequently not required in simple fractures

Blow-out' fractures

Trauma to the orbit raise the intra-orbital pressure and lead to fracture of the orbital floor. The orbital fat, inferior oblique and inferior rectus muscles will prolapse into the maxillary sinus and become trapped

