

Orthopedics Update «Hand»

CT/MR Diagnostik an der Hand

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## Imaging of the Hand & Wrist

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	Rx	US	MR	MR	MR	СТ	СТ			
			-C	Arthro	iv Gad		Arthro			
TFC			**	***	**		**			
Ligaments		**	**	***	**		**			
Cartilage	$O_{\ell}$		**	***	**		***			
Bone Fracture	***		**			***				
Bone AVN	**	11 1			***	7.				
Tendon		***	***	. (	$JO_{i,j}$					
Ganglion		***	***	1/3/						
Inflammatory	**	***	0.	<b>N</b> '	***					
Tumors		*	\		***					

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Nerves

### **TFC**

### Imaging modality of choice:

- 1. MR Arthrography (With injection of DRUG)
- 2. MR / MR with iv Gadolinium
- 3. CT Arthrography







## TFC: MR Arthrography Coronal Plane



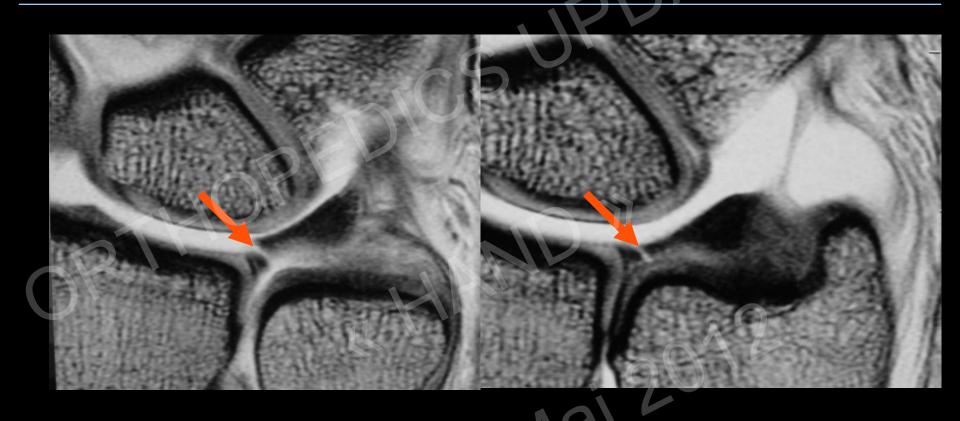
TFC: Ulnar attachment: Hyper - isointens signal, 2 parts:

- horizontal: styloid process
- vertical: ulnar fovea
- separated by the "ligamentum subcruentum" (vascularized)





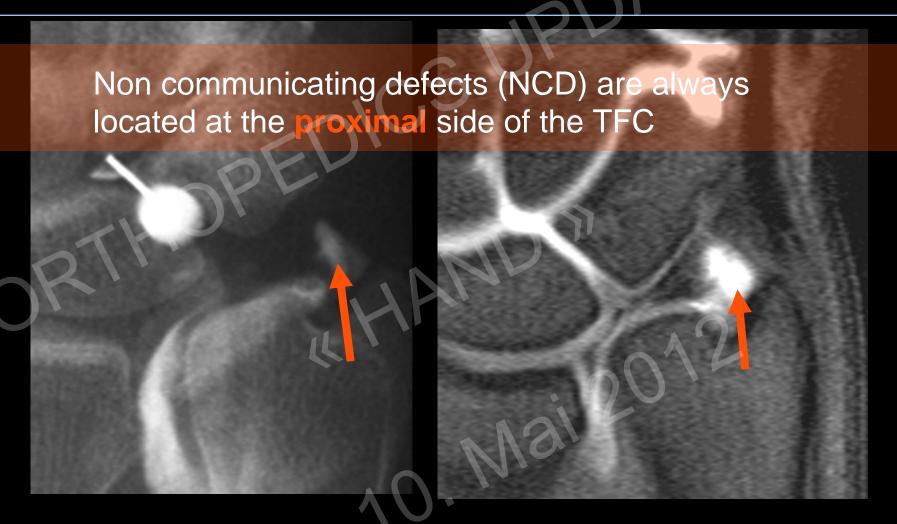
# TFC-Tear



Central perforation



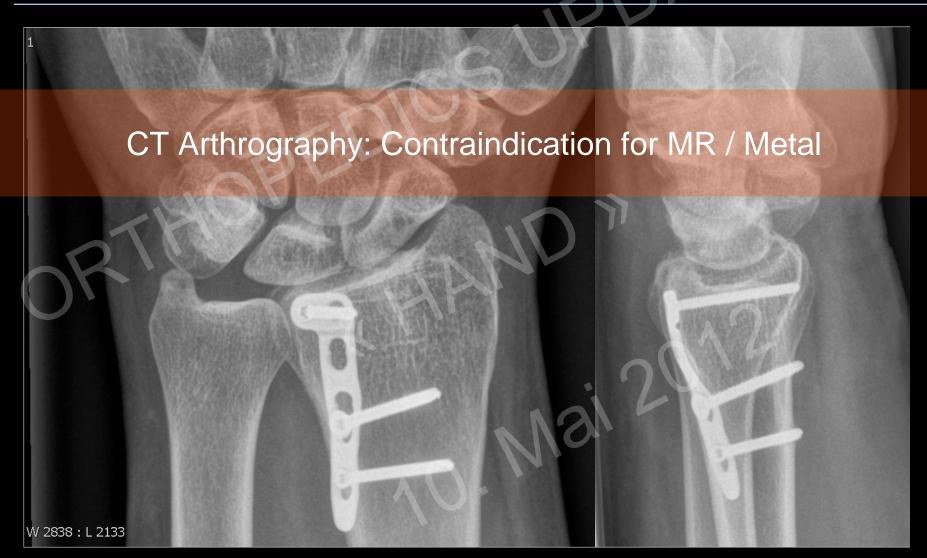
## Communicating vs Non communicating



=> Direct arthrography of the DRUG helps to diagnose NCDs



# TFC: CT Arthrography





# TFC: CT Arthrography

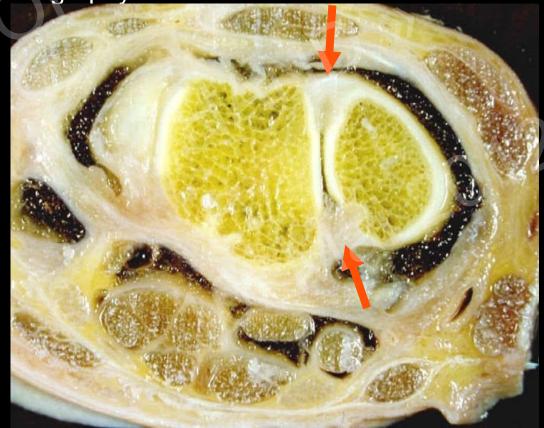




## Interosseous Ligaments

### Imaging modality of choice:

- 1. MR Arthrography
- 2. US, MR / MR with iv Gadolinium
- 3. CT Arthrography







## Interosseous Ligaments

3 Components (U-Form):

Proximal part (membranaceous/thin)

biomechanically not relevant communications frequent frequency increases with age may be asymptomatic

Dorsal part (thick) biomechanically important

Palmar part (thick) biomechanically important





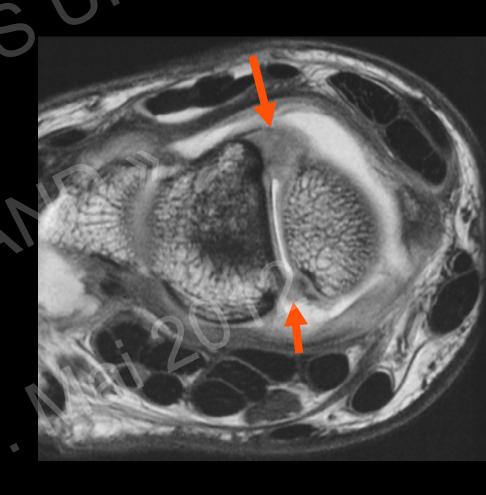
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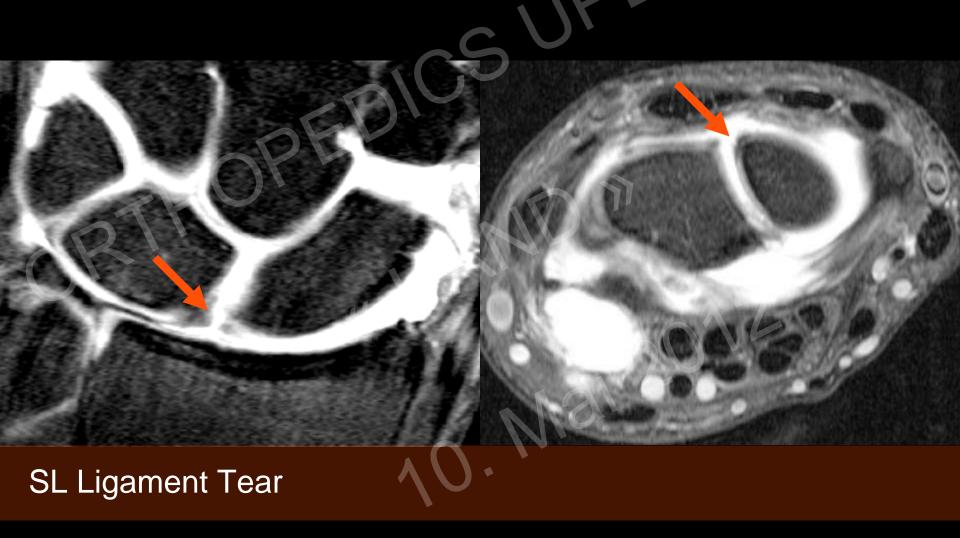
Dorsal part (thick) biomechanically important

Palmar part (thick) biomechanically important





# SL Ligament





## LT-Ligament



Intraosseous ganglion from palmar part of LT Ligament



### Fracture

### Imaging modality of choice:

- 1. Rx
- 2. CT
- 3. MR







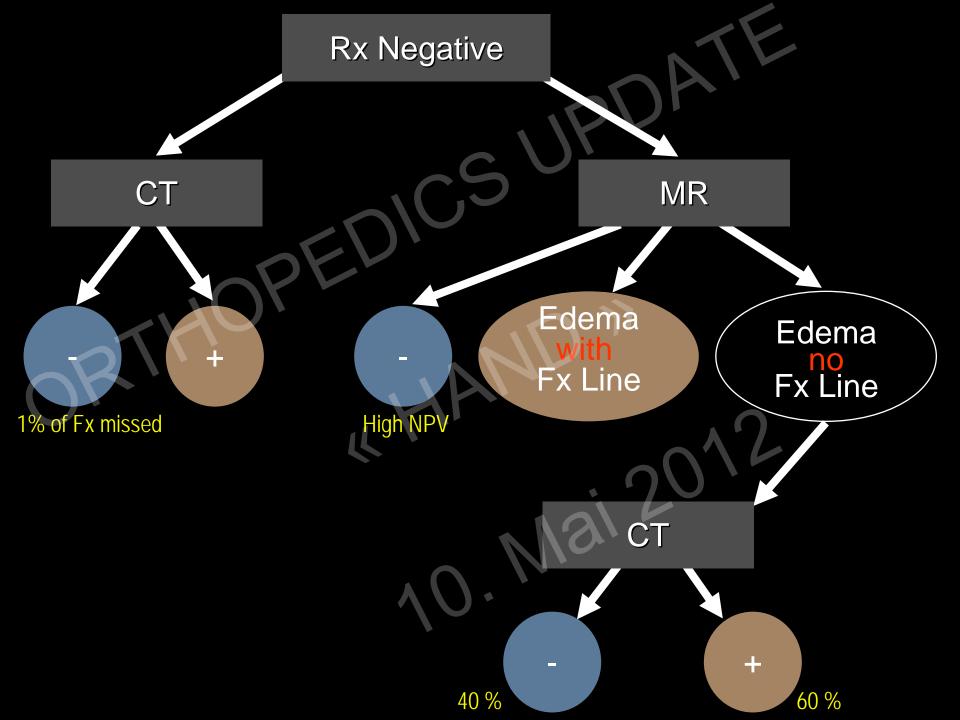
Clinically suspected fracture

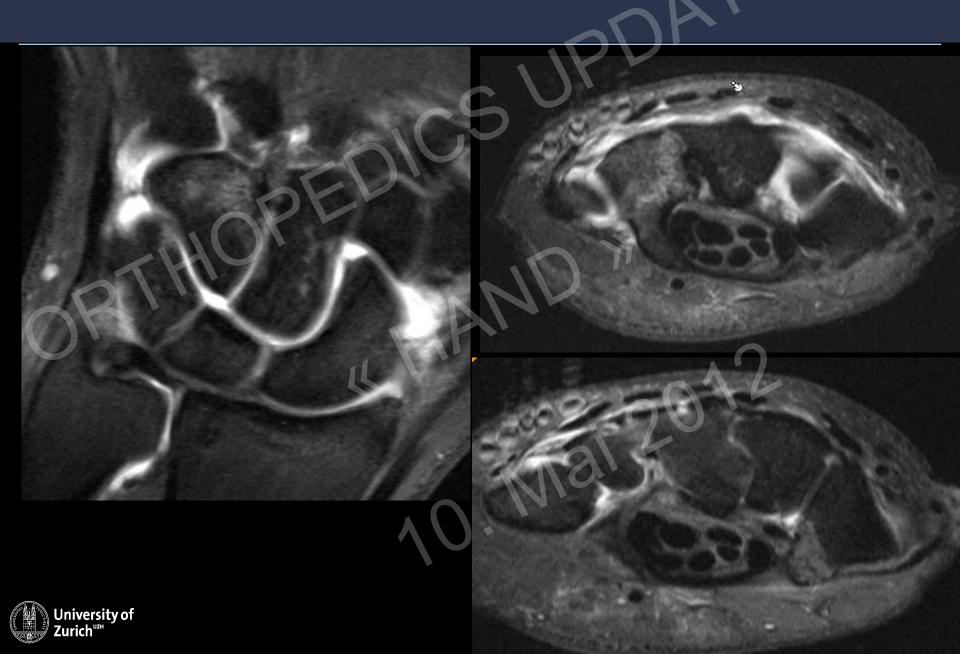
Negative radiograph, what is your next step?

A: Follow up

B: MR

C: CT





# Trauma: Fracture? Fracture of hook of hamate Dx: Fracture of trapezial ridge

### Cartilage

### Imaging modality of choice:

- 1. CT Arthrography MR Arthrography
- 2. MR





# Osseous Anatomy: Typ II Lunate



Hamato-lunate facet / Type II lunate





## The Piso Triquetral Joint



OA very common

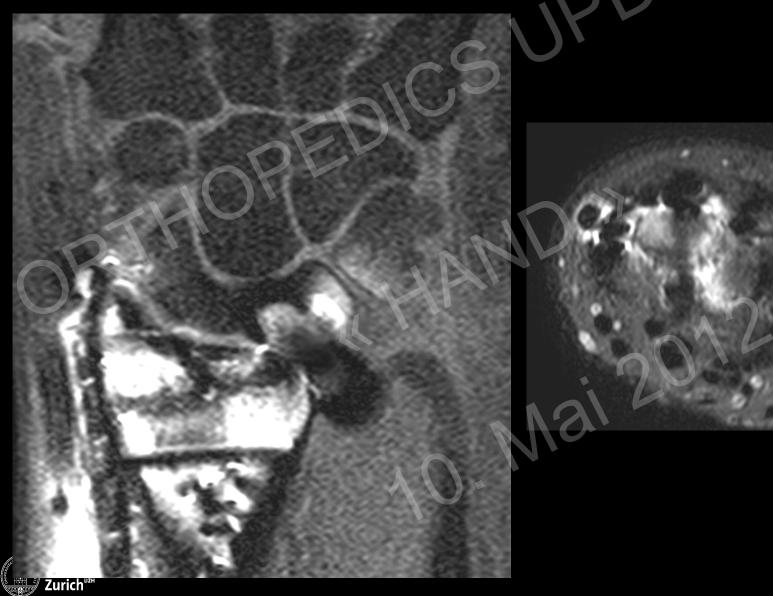


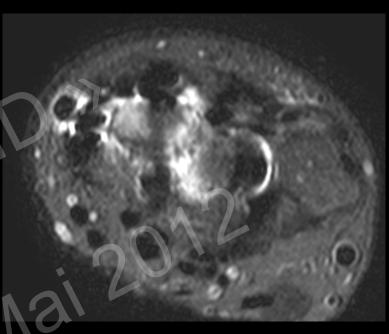


# TFC? Ligaments? Cartilage?



# TFC? Ligaments? Cartilage?





## TFC? Ligaments? Cartilage?



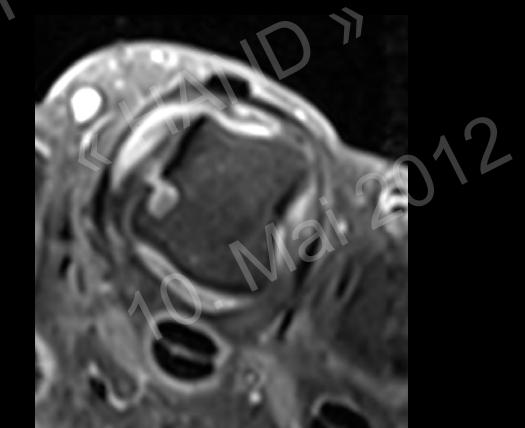
Cartilage damage lunate fossa, TFC tear, SL Ligament intact



## Inflammatory Disease

#### Imaging modality of choice:

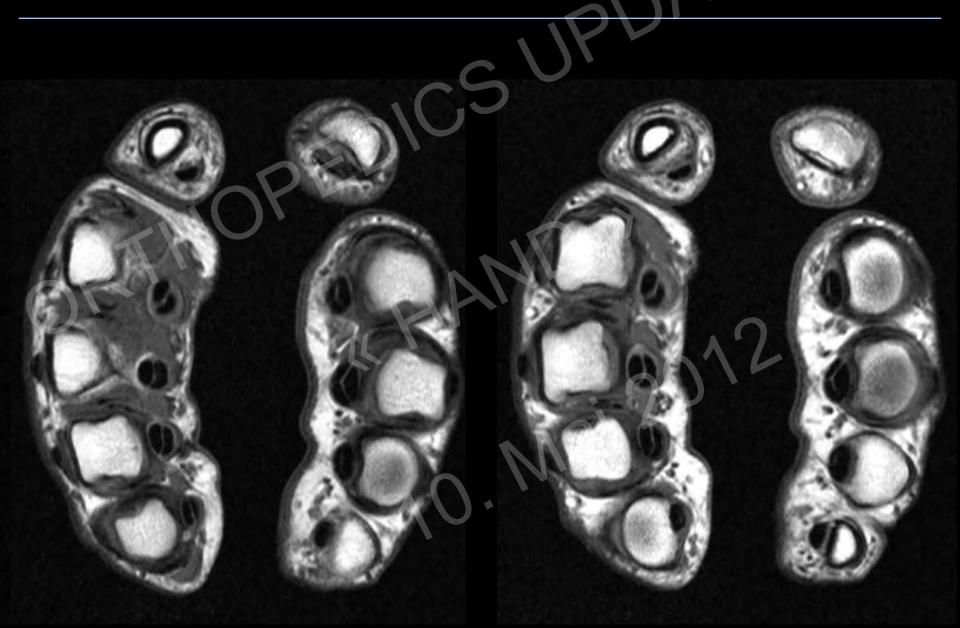
- 1. Rx
- 2. US
- 3. MR with iv Gadolinium



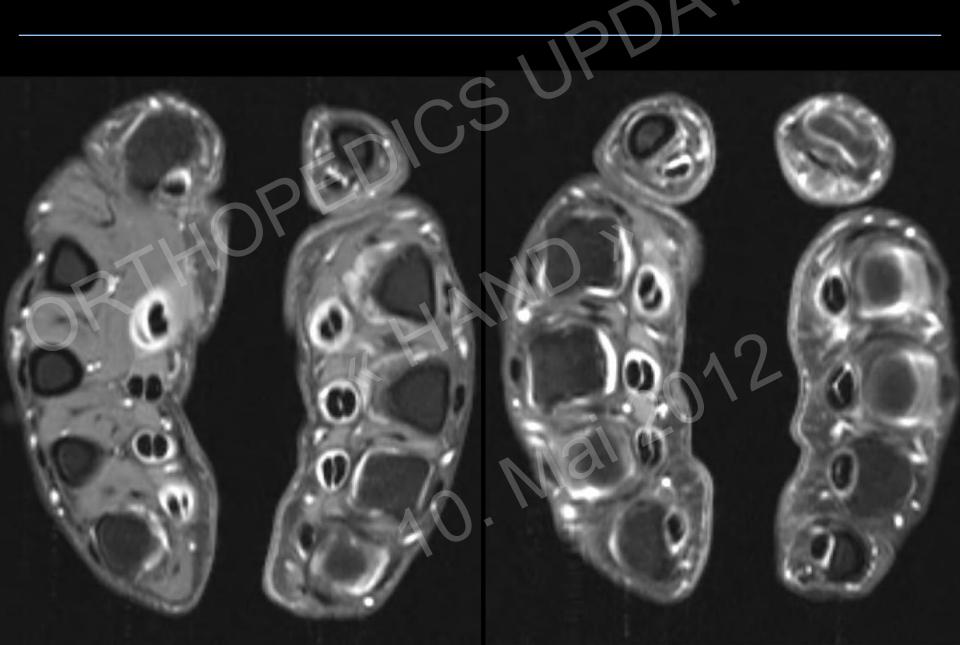


RA: Synovitis? Erosion

# T1w: Morphology



# Contrast: Synovitis



# Synovitis Maps



## **Erosions: Early Detection**



Strict criteria for the definition of bone erosions:

lesion observed in two imaging planes involving a cortical break in at least one



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Tumors		*	\		***		
Nerves		***			**		

