Introduction and Aim of the Work

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Few years ago, the manual pelvic examination was the only non-invasive study available for exploring the genital organs of the lower pelvis in gynecologic patients. Today, however, imaging procedures such as sonography, CT, and MRI are playing an increasing role in the confirmation and supplementation of palpable findings ***(Timor-Tritsch, 1991)***.

Ultrasound of the female pelvis is routinely used to depict the normal pelvic anatomy and demonstrate both pathological and physiological changes of pelvic structures ***(Fleischer et al., 1992)***.

As in obstetric sonography, there are three major types of sonographic instrumentation for gynecologic sonography. These include transabdominal sonography, transvaginal sonography, and the addition of Doppler sonography to either of these two modalities ***(Fleischer, 1992)***.

Transabdominal sonography conventionally has been one of the best methods for evaluating the female pelvis. However, the necessity of traversing the abdominal wall and subcutaneous tissues causes degradation of image quality ***(Leibman et al., 1988)***. Using transabdominal sonography, the adnexae are infrequently obscured by the acoustic shadow from bowel gases ***(Lyon et al., 1992)***. Transabdominal sonography requires that the patient bladder be adequately filled, which is a time-consuming and often uncomfortable procedure ***(Lyons et al., 1992)***.

Transvaginal sonography is an exciting new modality that is rapidly gaining acceptance among radiologists and obstetricians ***(Coleman et al., 1988)***. It is an important technique that allows superb definition of pelvic contents without sound wave deflection by bowel gas or attenuation by thick abdominal wall. It is preferred by most patients to bladder distention and prevents scanning delays in patients with empty bladder ***(Parsons and Ryva, 1989)***.

Aim of the Work:

Our study is planning for assessment of efficiency of the transvaginal sonography compared to that of the transabdominal sonography in the diagnosis of gynecological lesions.