# Radiological diagnisis of bladder tumours

## Moustafa Elsaid Sabek.

- 51 -The di~ac~ant of the bladdsr is an indication ofextra vosical spr~ad whi~ naturally never occurs withbeDign tUIll.ours.The filling defect of benign tumour is oftenmultiple. It is motteled or £inely interrupted due to thedelicate papillary nature of these tUIll.ourwshich can allowthe accomodation of the urine in hctwaen villi with thecontrast medium. Huge sizes may be detected with a strikingnormality of the adjacent ureter as the tumours lacks anyinvasion ability.However the radiological findings in differentiationbetween the tumours should always remain as suggestions anddogmatism is better avoided. Luckily the urologist has inhis hands other more definite methods such as cystoscopicand bimanual findings and biopsy.It is clear that intravenous py¢lography is of highervalue than ascending cystography. The dense filling of thebladder in the latter method can mask the presence oftumours and contribute to false negatives specially inearly or fIllla1l-ai~edtomours. The discomfort of the techniqueand the possible ascending in£ectian are poinZa t~ be-
52 -considered aGainst ascending cystography. The lack ofinformation about renal function and ureteric involvementare also drB~ backs. Yet, ascending cystography may beresorted to when the concentration power of the kidney fallsshort of giving a visible picture, when iodine sensitiVityis reported and when cystoscopy is unavailable or as isoften the case refused by the patient.There is one advantage of the ascending cystographyand this is the demonstration of reflux which is not ofgreat value if cystectomy is in question but of some valuewhen radiotherapy and partial cystectony are considered.Intrsvenous pyelog~ophy on the other hand gives a lotof information about the trumour-s , False negatives are 15 %while those of b~anual examination are 18 % and those ofcystoscopy are 9 %. It infor~ms not only about the presenceof tumour but also gives an idea about the stage, theureteric involvement and the concentr&tion power andanatomical state of kidney.