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# Radiological evaluation of enlarged prostate

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In this study of Radiological Evaluation OF Enlarged Prostate, Forty cases were studied by different modalities (excretory urography, ultrasonography, and computed tomography). Sixteen patients were catheterized at time of examination, whereas twenty one patients were complaining of features of prostatism. Incidental discovery of an enlarged prostate was noted in three patients. By radiographic examination, small basal prostatic indentation was found in 32.5% of cases, moderate indentation in 37.5% of cases, and huge indentation in 25% of cases. Also we noted that 20% of cases had hydronephrosis, 10% of cases had the fish hook sign, 17% of cases had hydroureters. Bladder changes due to obstruction were noted in 27.5% of cases. Elevated bladder base was seen in 65% of cases. The bladder outline was found to be smooth in 65% of cases, and serrated in 35% of cases. Ultrasonography was found to be inferior to other modalities of diagnosis. We hope that better results would be obtained by the use of transrectal and transurethral transducers when available. 78 • Computed tomography is the most recent, accurate, and precise modality in diagnosis of cases of enlarged prostate, whether due to benign enlargement or due to cancer prostate. However its cost and availability are important limiting factors. We consider that excretion urography is a necessity for a complete urological assessment of cases of enlarged prostate, and for reassurance of the responsible surgeon. Also we consider that the computed tomography (C.T.), whenever available is the best modality in evaluating the prostatic contour, density, seminal vesical angle, extraprostatic soft tissue masses and pelvic fat planes. The C.T. produces a cross sectional anatomical representation of the bladder base and the prostate which is not possible in excretory urograms.