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# **The value of computed tomography in the diagnosis of abdominal masses**

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Computed tomography scanning is a relatively new diagnostic tool that has already proved very useful in the fields of neurology and neurosurgery. Computed body tomography on the other hand is still in need of well defined indications. CT has high degrees of accuracy in the diagnosis of hepatic mass lesions particularly cystic masses. In jaundice although both CT scan and ultrasound examination are of equal ability in differentiating obstructive from non-obstructive jaundice, yet CT scan has a higher accuracy rate than ultrasound in diagnosis of the cause and site of obstruction. In diagnosis of pancreatic mass lesions, CT although a non-invasive technique yet is regarded to be of more value than ERCP. Kidneys and adrenal glands are well visualised on CT scanning, and any mass lesion there can be detected. The nature of the lesion and its extent can be also determined with a high accuracy rate. Retroperitoneum is displayed on almost every CT scanning of the abdomen and any mass lesion in this space can be detected correctly. Pelvic examination with the CT scanning has proved valuable specially in diagnosing abscesses and metastatic lesions. Intra-abdominal abscesses had received much attention in relation to CT scanning. CT has proved correct and valid in diagnosis, localization and even in guiding percutaneous catheter drainage of the abscess, CT is recommended as a correct and reliable method of imaging intra-abdominal mass lesions and is better to be used as a complementary to the conventional examinations if they fail to diagnose the lesion or if more information is desired.