Study: Magnetic resonance imaging of the spine (one section)/lumbosacral region.

MRI machine: Philips Intera 1.5T.

Age: 32.

Sex: Female.

Race: Caucasian.

Brief anamnesis of the disease (complaints): pain in the spine (lumbar, sacrococcygeal).

REPORT

On a series of T1- and T2-weighted MR tomograms in three planes with fat-suppressed /T2-stir/:

Physiologic lumbar lordosis is smoothed. Signs of minimal deviation of the spinal axis to the left.

The height and shape of the vertebral bodies are unchanged. Anterolateral pointed L1-L5 vertebrae; posterolateral pointed L3-L5 vertebrae; usurative defects in the bodies of Th11-L1, L3-L5 vertebrae are identified.

The height of the L5-S1 intervertebral disc is indistinctly reduced, MR signal from all discs (Pfirrmann grade 1 intervertebral disc degeneration).

In the L1 vertebral body, a focal lesion (probably hemangioma) with the size of 0.6x0.9 cm was detected.

Fatty remodeling of the S5-Co3 vertebral bodies.

The bony spinal canal is not narrowed in the sagittal plane at the level of the study.

The sacral canal is not narrowed, not deformed, without neoplasms.

Dorsal extrusions and disc protrusions were not detected.

Dorsal bulging of L3-S1 discs up to 0.2-0.3 cm is visualized; the spinal canal at the level of disc prolapse is not narrowed.

Vertebral joints are congruent.

Signs of arthrosis of the arch joints at the level of L4-S1 segments are visualized.

The dural sac is not deformed, the surrounding fatty tissue is not altered.

The spinal cord can be traced to the level of L1 vertebrae, has a normal configuration, width, and homogeneous structure. The signal from the structures of the sacral canal elements (on T1 and T2) is not changed.

In proset mode: nerve roots exit through the intervertebral foramen, unchanged.

Pre- and paravertebral soft tissues are not changed.

Bone-destructive changes of the sacrum are not revealed. The sacroiliac joints are clearly visualized, of normal outline, with normal development of the sacrum, wings of the iliac bones and lumbosacral articulation. Articular slits of normal width on both sides (normal 0.4-0.5 cm). The joint contours are clear and continuous.

No deformity of the coccygeal spine was detected.

CONCLUSION

Dystrophic changes in the lumbosacral spine (osteochondrosis); initial signs of spondyloarthrosis at the level of L4-S1 segments. Small hemangioma in the body of L1 vertebra. MR-data for pathologic organic changes of iliac-sacral joints, coccyx was not revealed.

RECOMMENDATIONS.

Neurologist consultation.

Year of study and report: 2023