



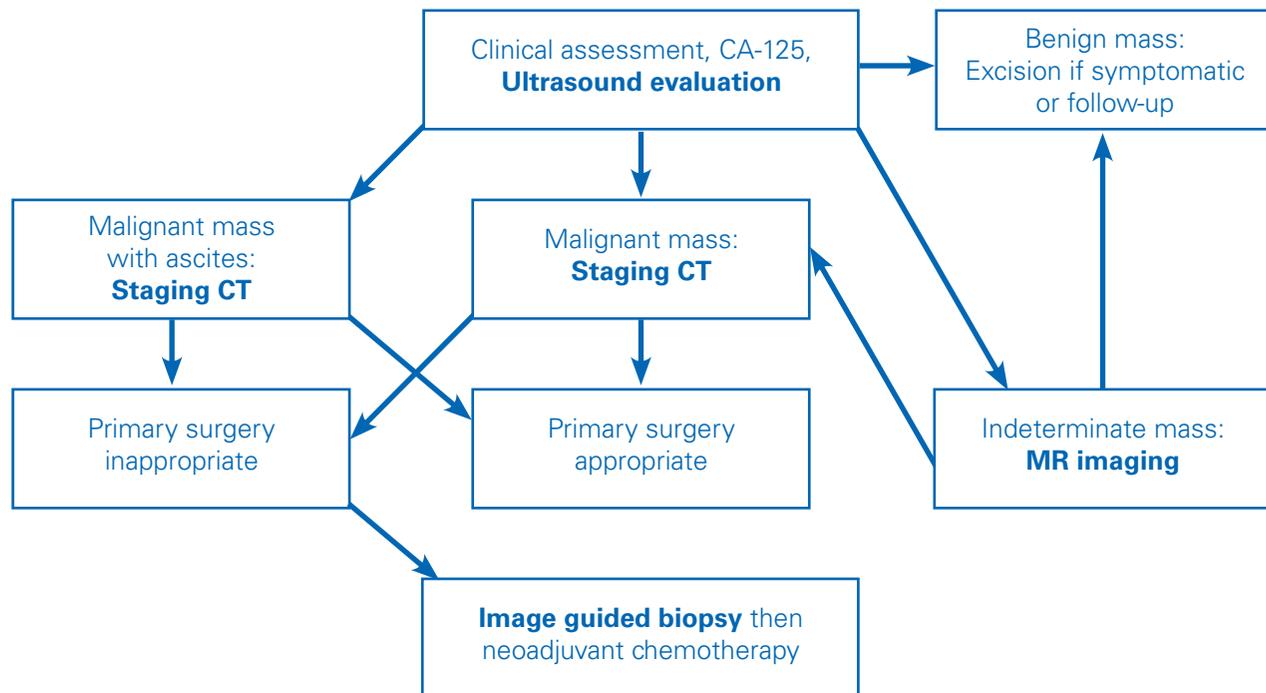
## Imaging of the Ovary: guidelines of the ESUR Female Imaging Sub-Committee

In 2010 the Female Imaging Sub-Committee of ESUR published two guidelines for the management of suspected and established ovarian cancer. The first covers MR imaging [1] describing how it can characterise the vast majority of sonographically indeterminate or 'suspicious' masses. The second guideline [2] describes the use of imaging in staging of newly diagnosed ovarian cancer and the role of imaging for the treated patient. Imaging has a pivotal role in management at diagnosis (Fig. 1).

MR imaging can define management of indeterminate masses. The majority are benign and can be managed conservatively or by simple excision by a general gynaecologist. However, a minority require management in a specialist Cancer Centre. This distinction is made by MR tissue characterisation of fat, blood products and fibrous tissue in benign masses from vascularised enhancing nodules and solid components in malignant masses.

The guideline on staging [2] describes the use of CT in defining those women for whom tumour extent is likely to be beyond the scope of primary cytoreductive surgery and the emerging role of image guided biopsy at diagnosis for women to be managed by the new treatment paradigm of primary (neoadjuvant) chemotherapy followed by interval debulking surgery (IDS).

**Figure 1: Imaging pathway for suspected ovarian cancer**



### References

1. Spencer JA, Forstner R, Cunha TM, Kinkel K; on behalf of the ESUR Female Imaging Sub-Committee. ESUR guidelines for MR imaging of the sonographically indeterminate adnexal mass: an algorithmic approach. *Eur Radiol* 2010; 20: 25-35.
2. Forstner R, Sala E, Kinkel K, Spencer JA on behalf of the ESUR Female Imaging Sub-Committee (8 collaborators). guidelines: ovarian cancer staging and follow-up. *Eur Radiol* 2010; 20: 2773-80.