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| Nota di contenuto | Diagnostic approach of alimentary tract perforation -- Plain film signs of pneumoperitoneum -- Ultrasonographic assessment of gastrointestinal perforation -- Esophageal perforation: assessment with Multidetector row Computed Tomography -- Role of Multidetector row Computed Tomography in the diagnosis of gastro-duodenal perforation -- Small bowel perforation: imaging findings -- Acute perforated appendicitis: spectrum of MDCT findings -- Acute perforated diverticulitis: spectrum of MDCT findings -- Colorectal perforation: assessment with MDCT -- MDCT imaging of blunt traumatic bowel and colonic perforation -- MDCT imaging of gastrointestinal tract perforation due to foreign body ingestion -- Pneumoretroperitoneum: imaging findings -- Imaging of gastrointestinal tract perforation in the pediatric patient -- Imaging of gastrointestinal tract perforation in the elderly patient -- Imaging of |

gastrointestinal tract perforation in the oncologic patient -- Role of Multidetector row Computed Tomography in the diagnosis of acute peritonitis due to gastrointestinal perforation -- Abdominal compartment syndrome and gastrointestinal tract perforation.

Sommario/riassunto

This book provides an overview on the critical role of diagnostic imaging in the assessment of patients with suspected alimentary tract perforation, an emergent condition that requires prompt surgery. With the aid of numerous high-quality images, it is described how different imaging modalities, including plain film X-ray, ultrasonography, and multidetector row computed tomography (MDCT), permit correct diagnosis of the presence and cause of the perforation and of associated pathologies. Particular attention is paid to MDCT, with full description of its role in a range of scenarios at various levels of the alimentary tract. Imaging of GI tract perforation in different patient groups, such as pediatric patients, the elderly, and oncologic patients, is also addressed. This volume will greatly assist residents in radiology, radiologists, and physicians who are daily involved in the management of patients with clinically suspected alimentary tract perforation.
