

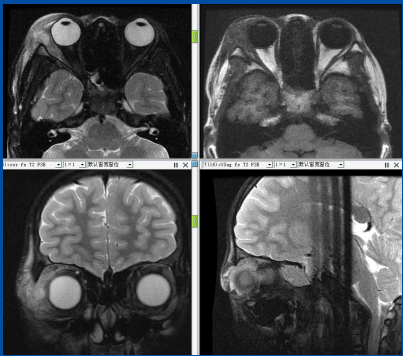
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## 眼眶病变

- 隔前病变 蜂窝织炎、肉芽肿、基底细胞癌
- 肌锥内病变 海绵状血管瘤、炎性假瘤
- 肌锥外病变
  - 源于泪腺：混合瘤、恶性上皮肿瘤
  - 源于邻近组织、器官
  - 源于眶骨
  - 其他肌锥外病变
- 眼外肌病变 Graves眼病、眼眶肌炎、淋巴瘤
- 视神经病变
- 眼球病变

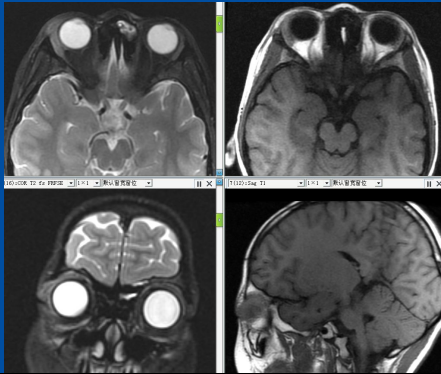
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男，9岁，右眼肿痛1天，伴发热、头痛、眼红、眼眶痛



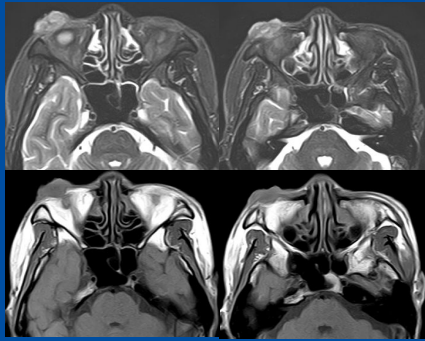
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诊断蜂窝织炎  
抗炎治疗4天

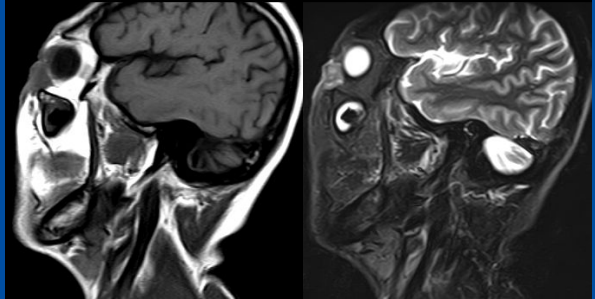


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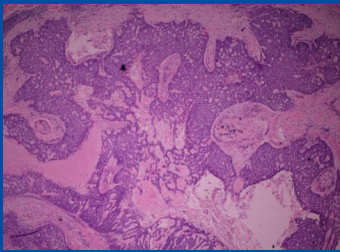
男，65岁，右下眼睑肿物破溃后20年



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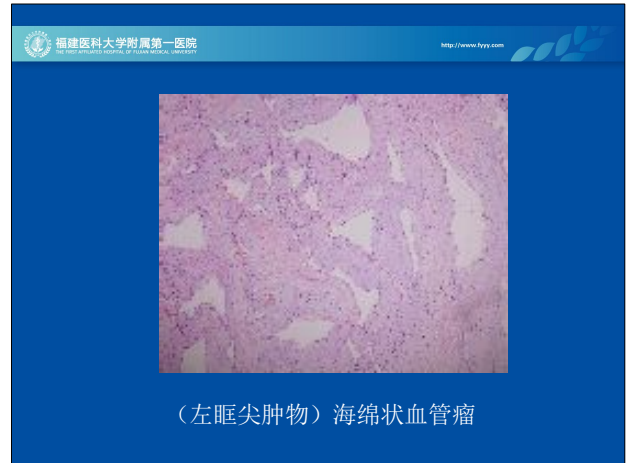
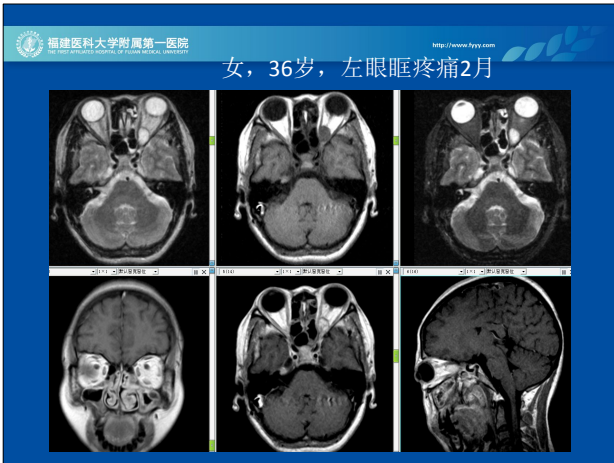
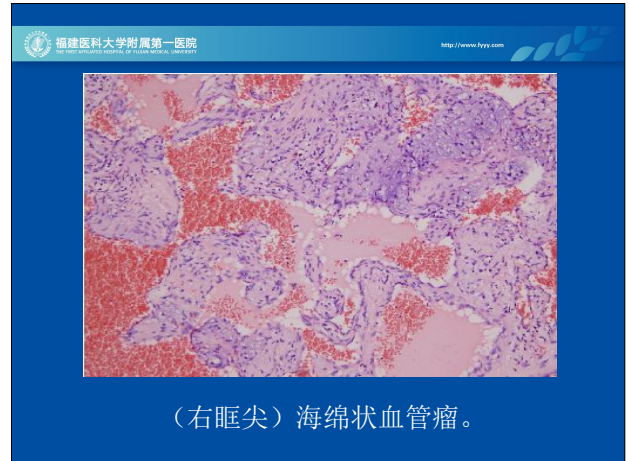
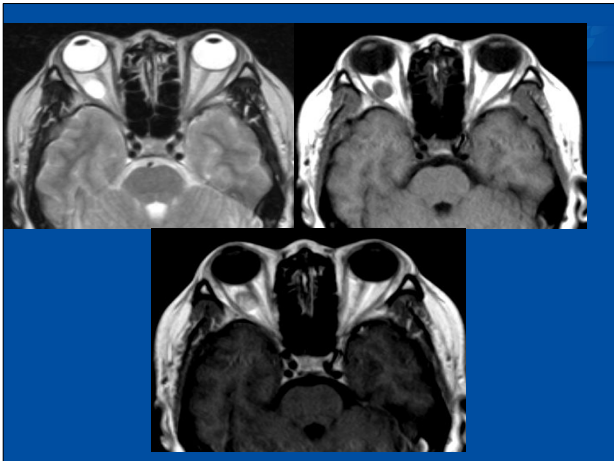


冻后及冻余石蜡报告:(右下睑)基底细胞癌伴坏死

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肌锥内病变

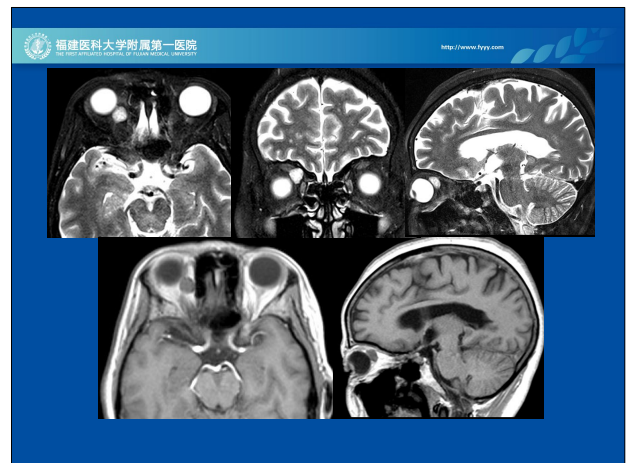
- 海绵状血管瘤
- 炎性假瘤
- 淋巴管瘤
- 转移瘤

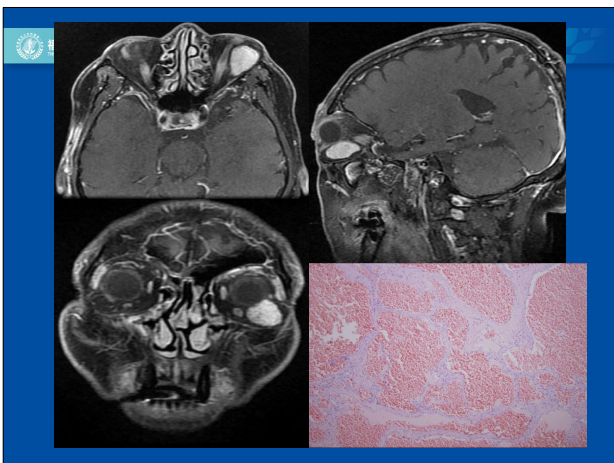
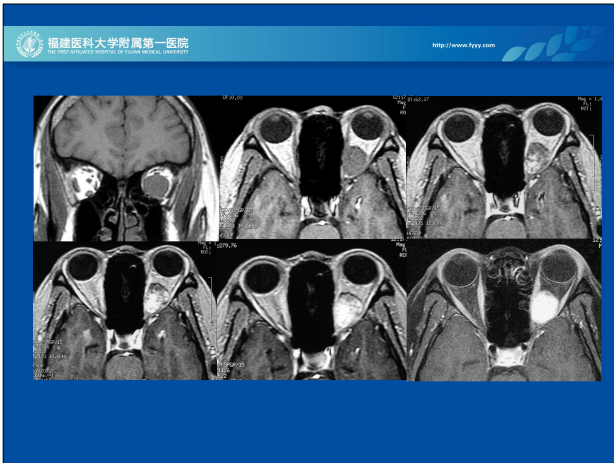
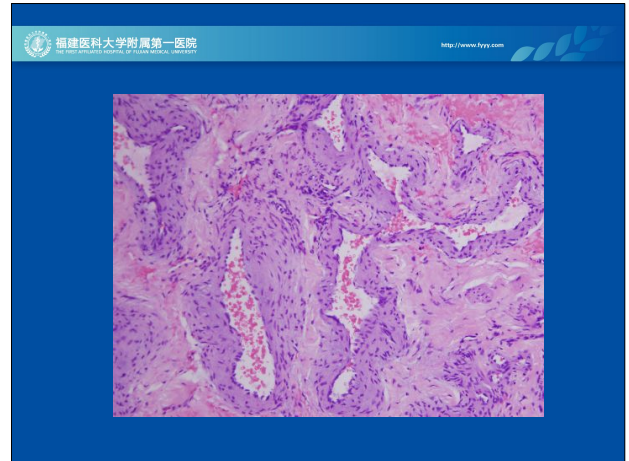
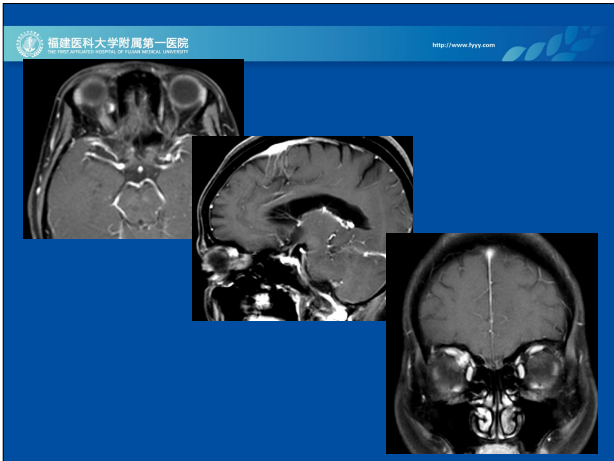


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### 海绵状血管瘤MR征像

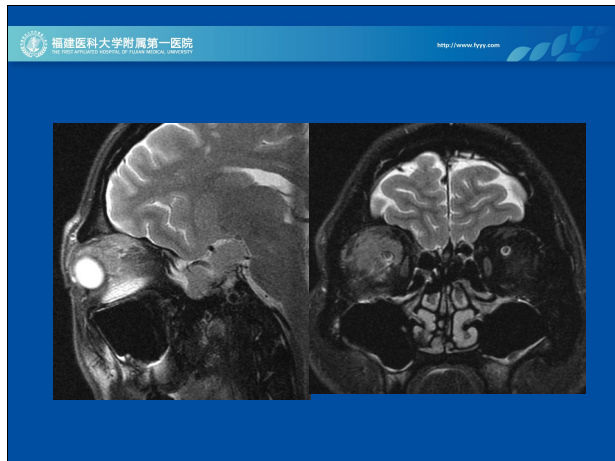
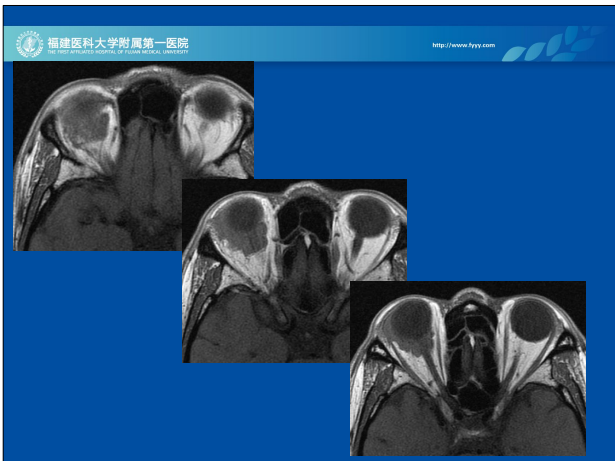
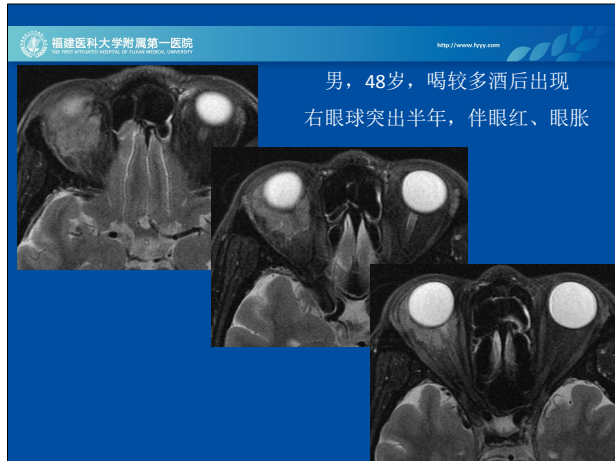
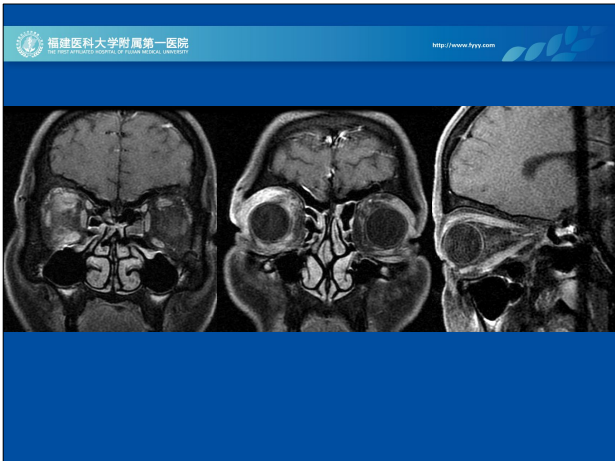
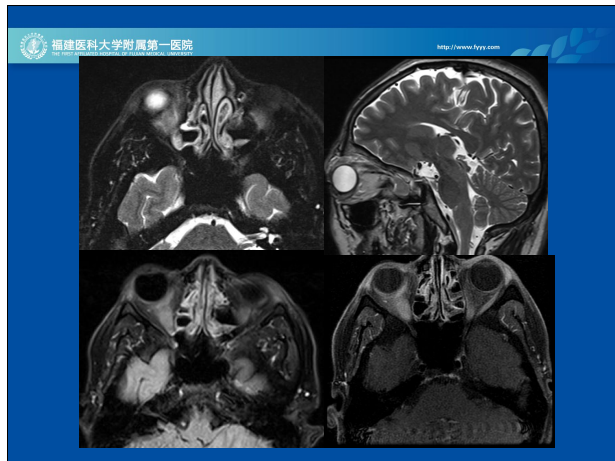
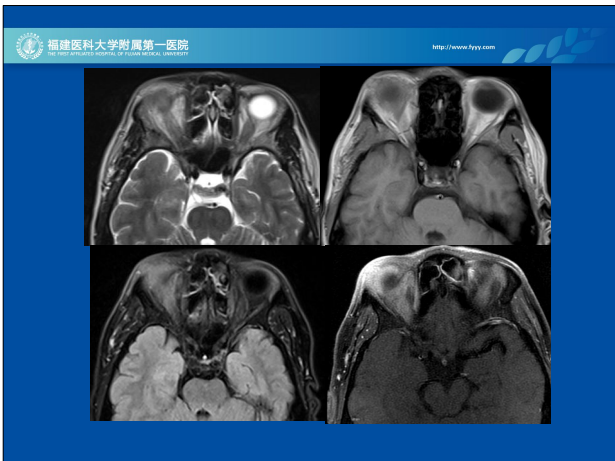
- 多单侧发病, 大多数位于肌锥内, 边界清晰、光整;
- T1WI等或低信号、T2WI明显高信号, 信号均匀, 动态增强后呈“渐进性强化”, 最后明显均匀强化;
- 不累及眶尖脂肪
- 眼肌及视神经受压推移

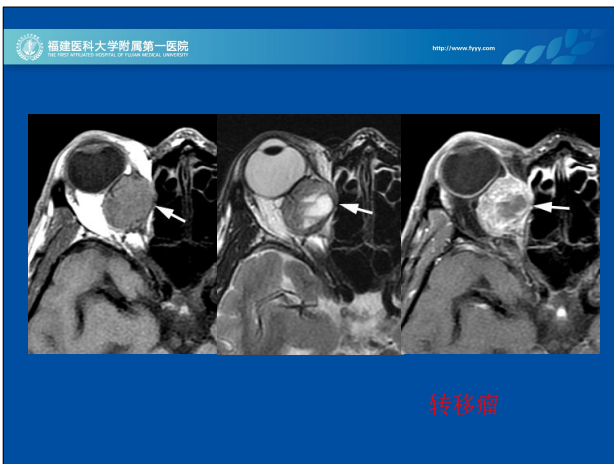
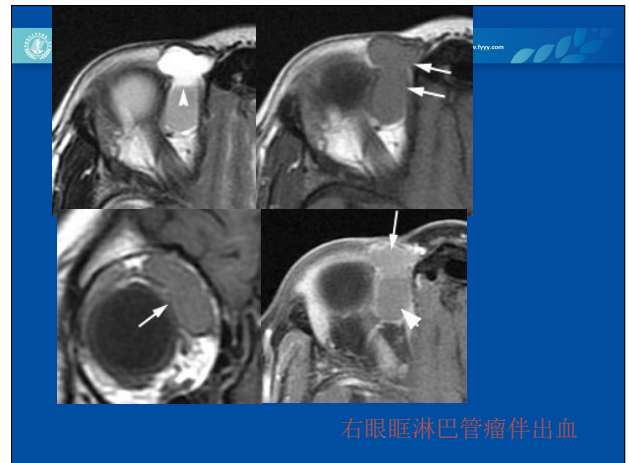
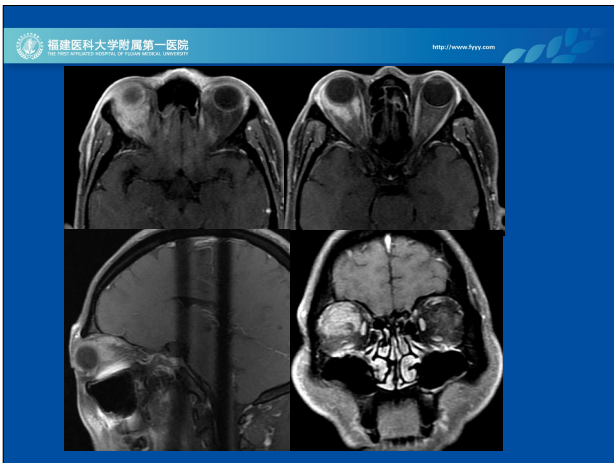




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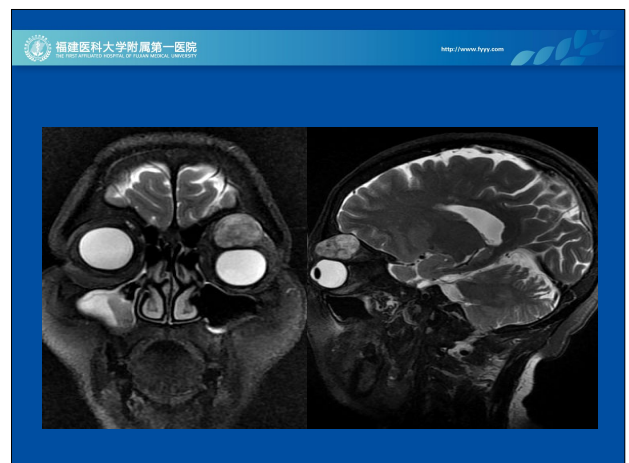
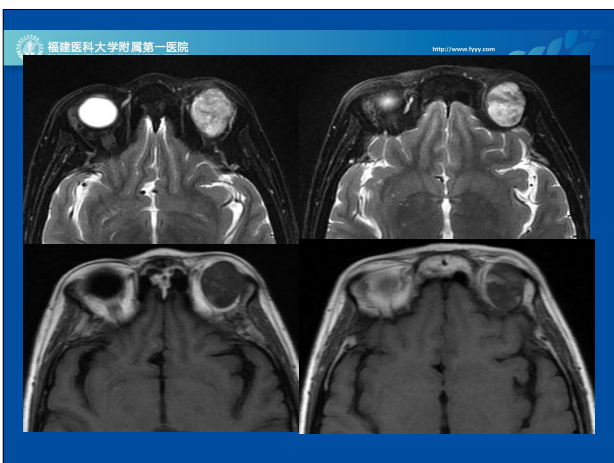
- 多种分型，以肌炎型、泪腺炎型及弥漫型多见
- 单侧肌锥内不规则软组织块影，界模糊不清，眼肌及视神经经常受累，眼肌增粗为常见表现（**肌腹与肌腱同时增粗**，以内直肌和上直肌最易受累）
- 信号不均，T1-WI和T2-WI上一般均呈**低信号**，部分为T1低信号T2高信号；
- 增强后中度至明显强化；
- 眶尖脂肪信号消失。

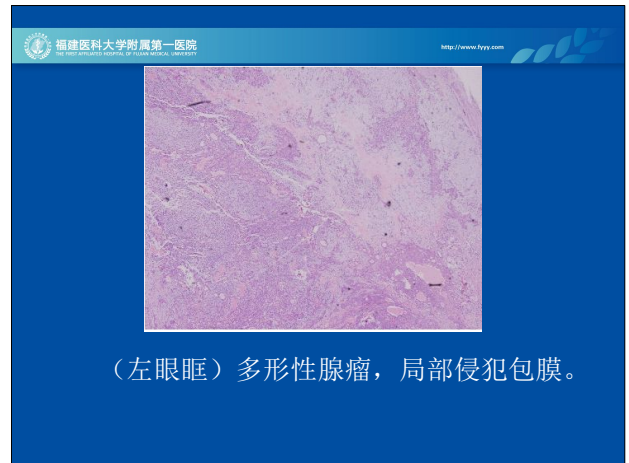
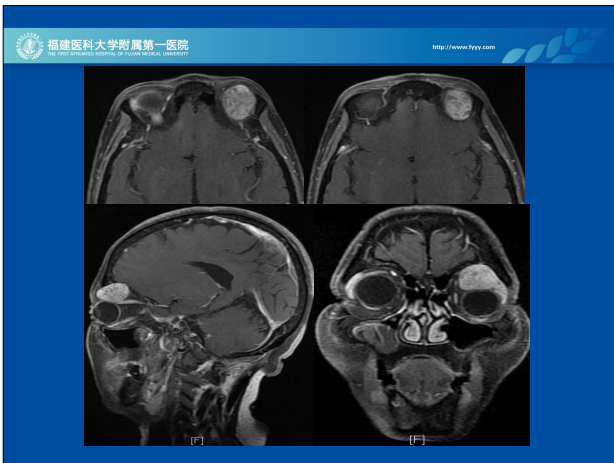




肌锥外病变

- 泪腺混合瘤
- 泪腺恶性上皮肿瘤
- 淋巴瘤
- 血管畸形
- 颈动脉海绵窦瘘、硬脑膜动静脉瘘
- 神经鞘瘤
- 邻近组织器官来源的肿瘤
- 皮样囊肿、表皮样囊肿





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### 泪腺混合瘤MR表现

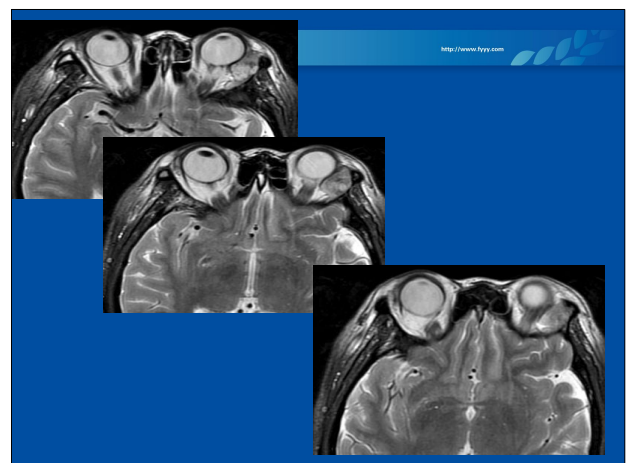
- 泪腺窝圆形、椭圆形肿块, 边界清晰
- T1WI低信号、T2WI高信号, 信号不均, 囊变、坏死及黏液变性
- 增强后不均匀强化
- 邻近骨质受压、无破坏

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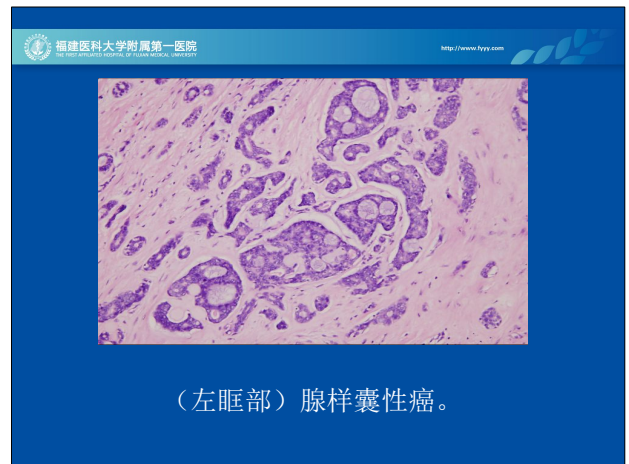
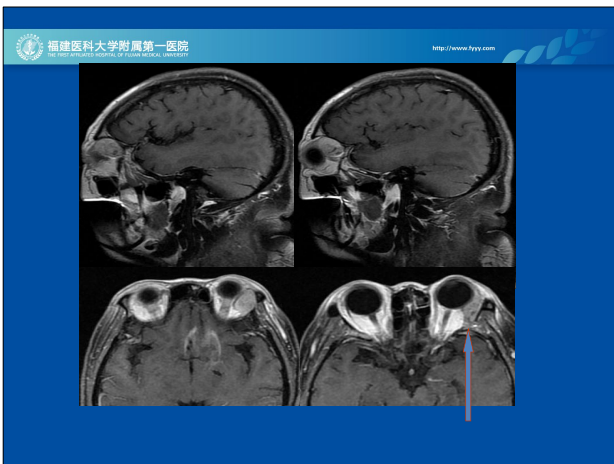
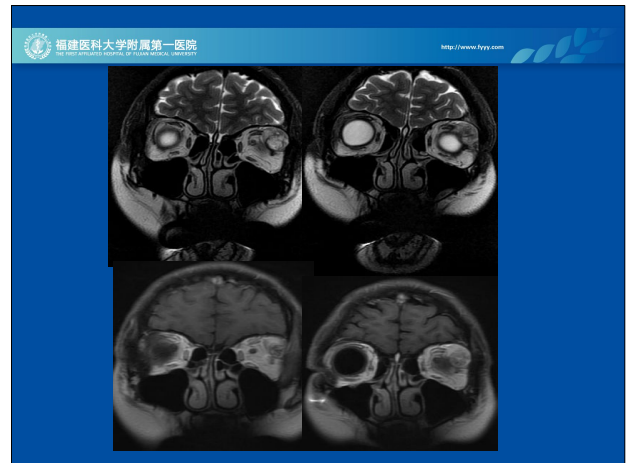
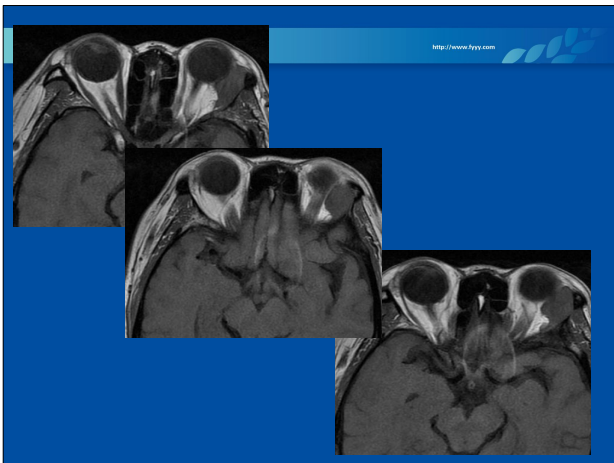
男, 30岁, 发现左眼眶肿物7个月

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(左眼眶) 符合混合瘤

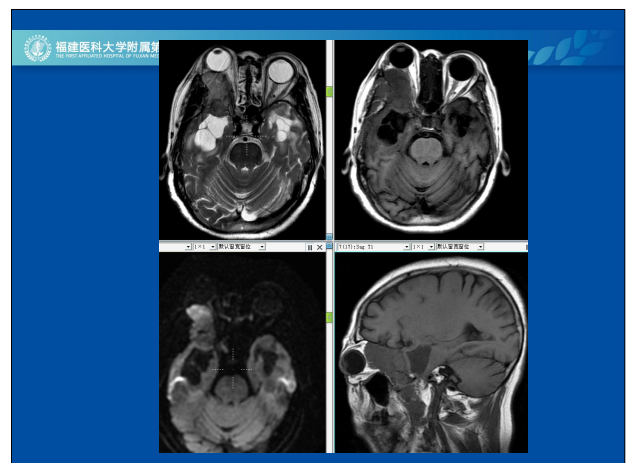


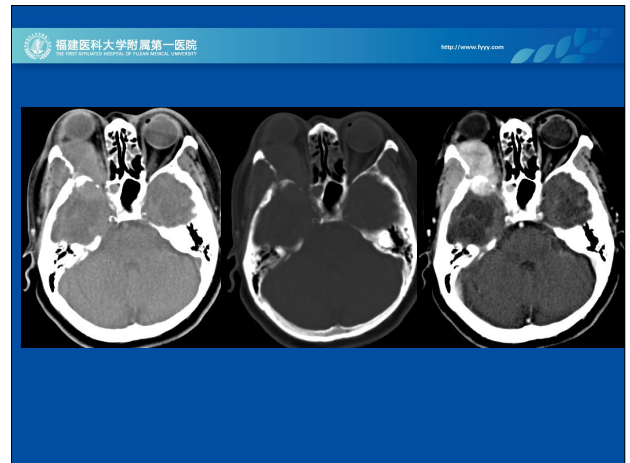
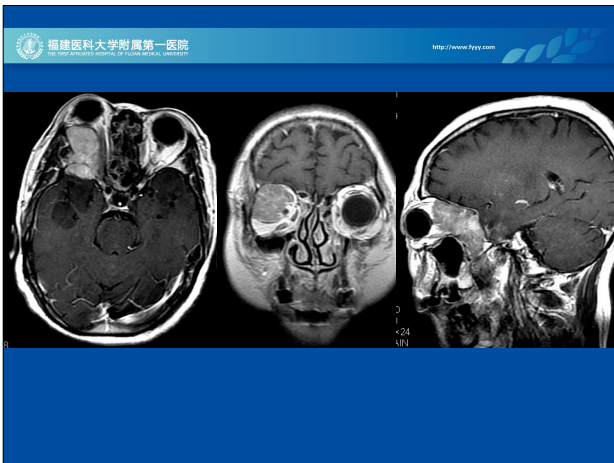




### 腺样囊性癌

- 泪腺区稍长T1长T2信号，信号不均
- 增强后中度~明显不均匀强化
- 邻近眶骨溶骨性骨质破坏



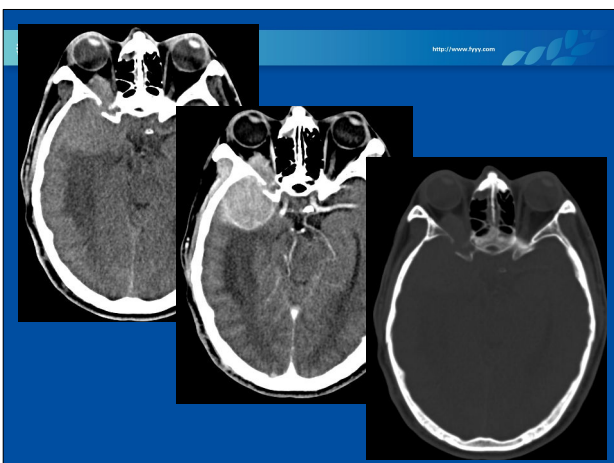
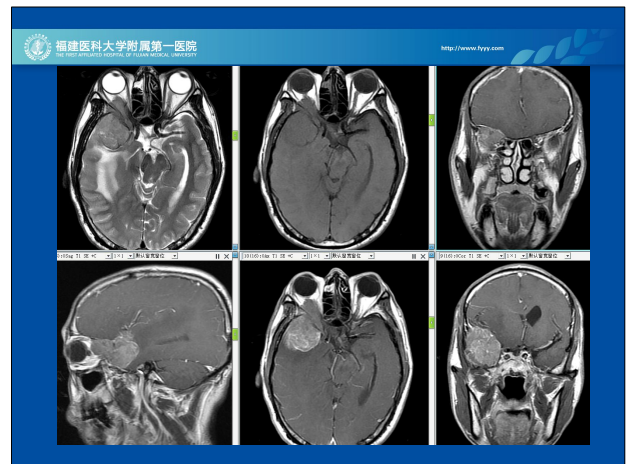


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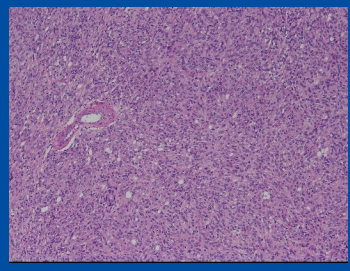
女，65岁，鼻咽癌放化疗后10年

2011年CT正常

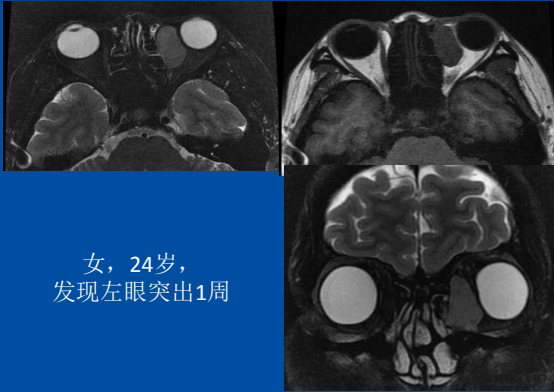
转移瘤？



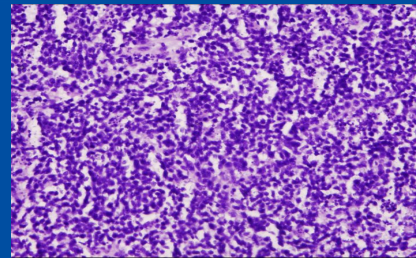
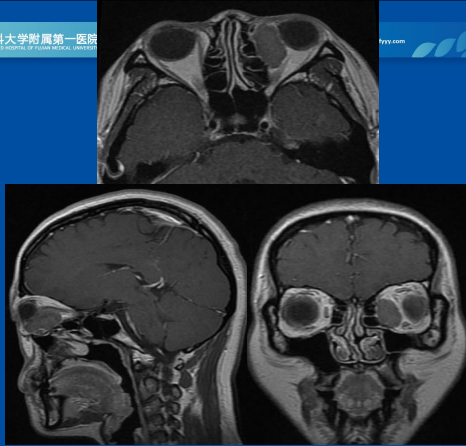
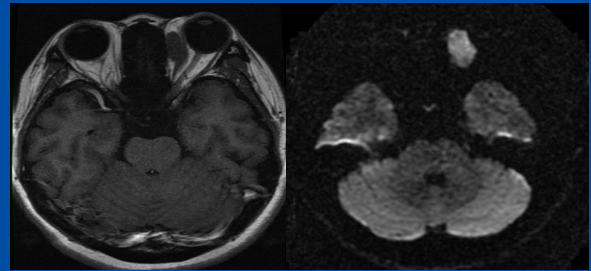
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(蝶骨嵴肿物) 脑膜皮细胞型脑膜瘤，细胞成片，可见核仁，伴灶区坏死，考虑不典型脑膜瘤（WHO II级）

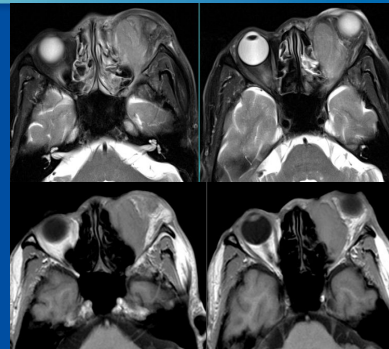
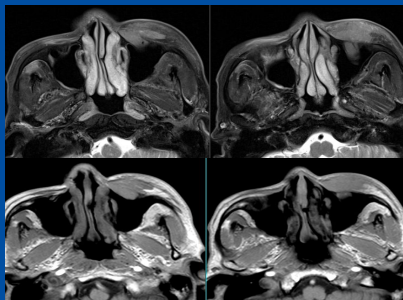


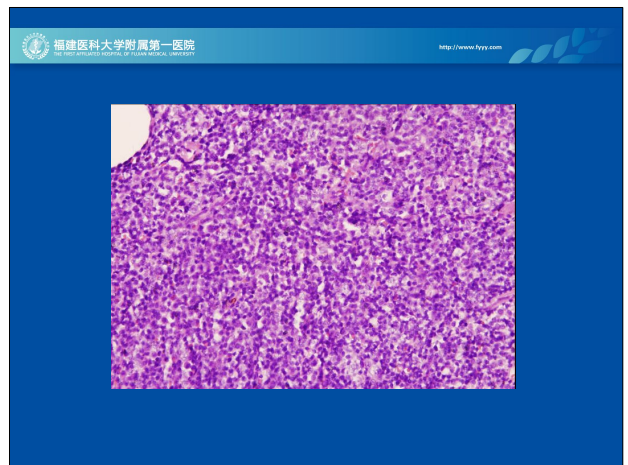
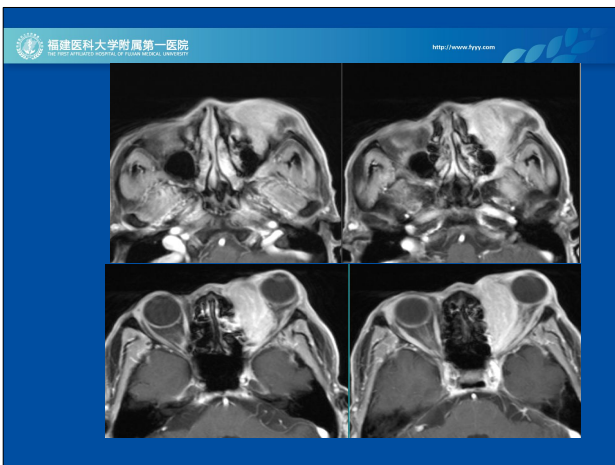
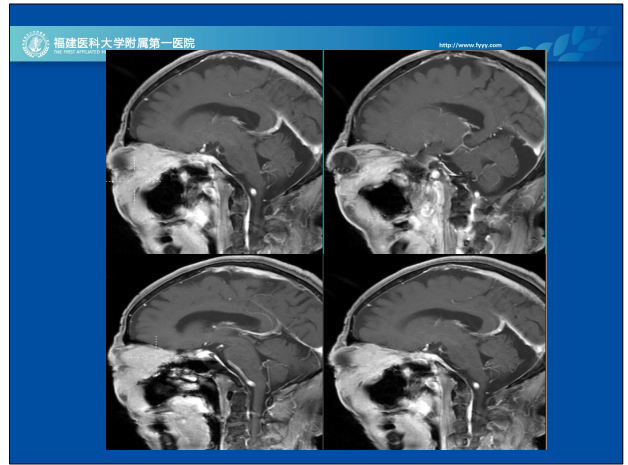
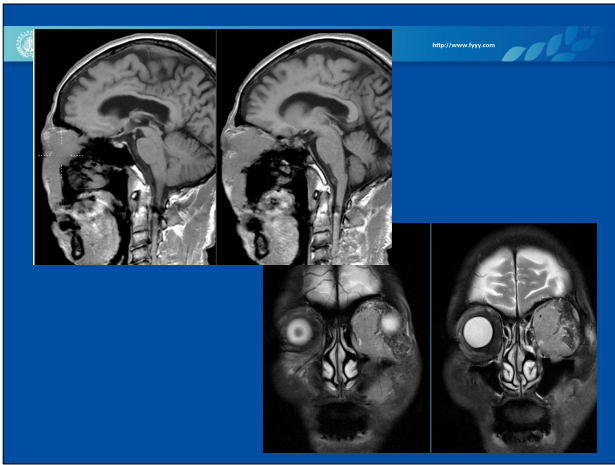
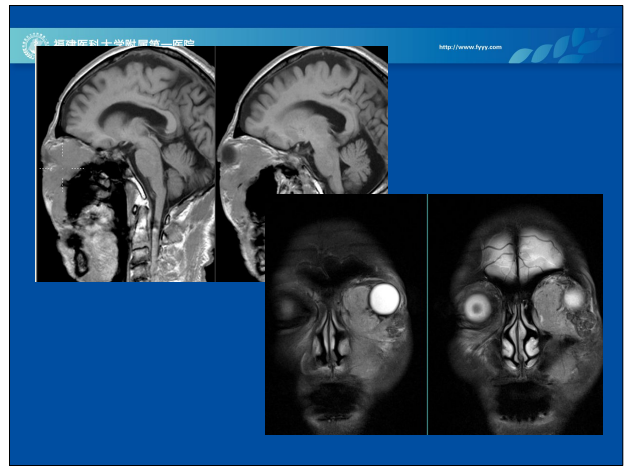
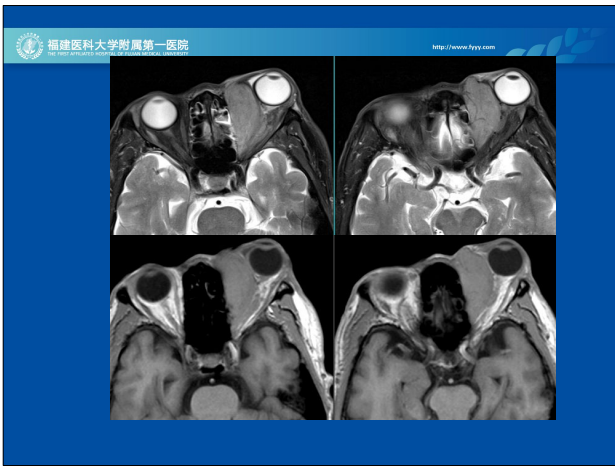
女，24岁，  
发现左眼突出1周



冻后及冻余石蜡报告：  
(左眼眶)小细胞恶性肿瘤，结合免疫组化符合非霍奇金淋巴瘤（弥漫大细胞性B细胞淋巴瘤）。

男，75岁，左眼突出伴视物模糊7年，加剧1月



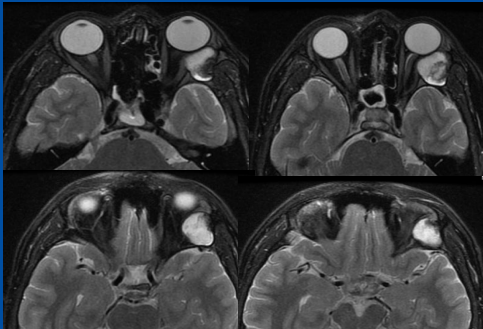


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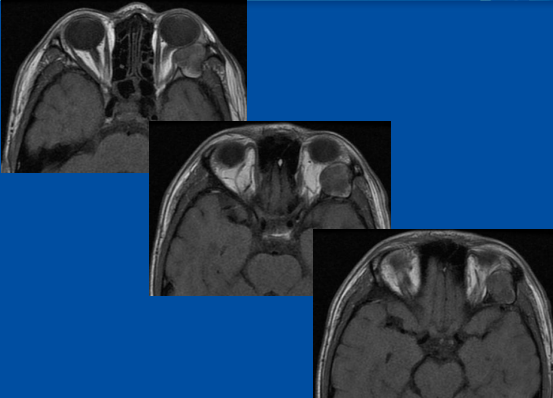
(左眼眶) 在结缔组织间查见大量的异形淋巴细胞浸润，免疫组化染色多为CD20染色阳性的B淋巴细胞，考虑粘膜相关性B细胞淋巴瘤。

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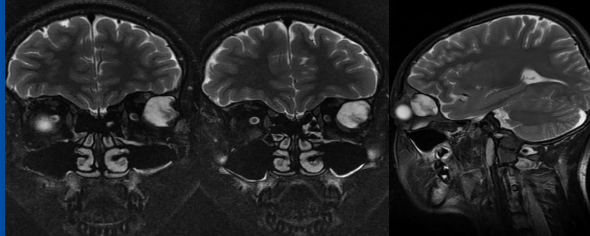
男，16岁



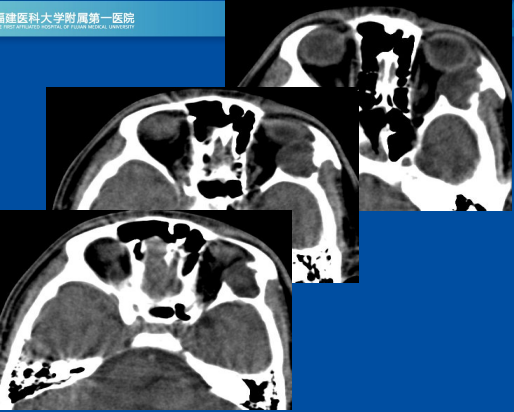
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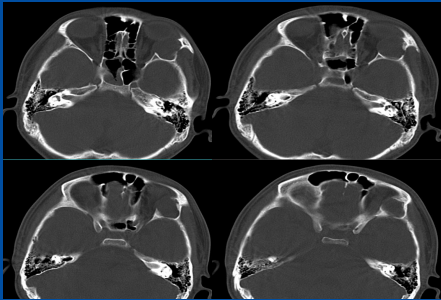
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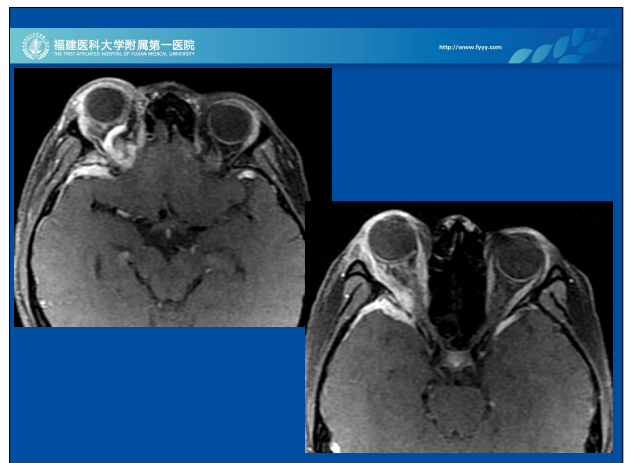
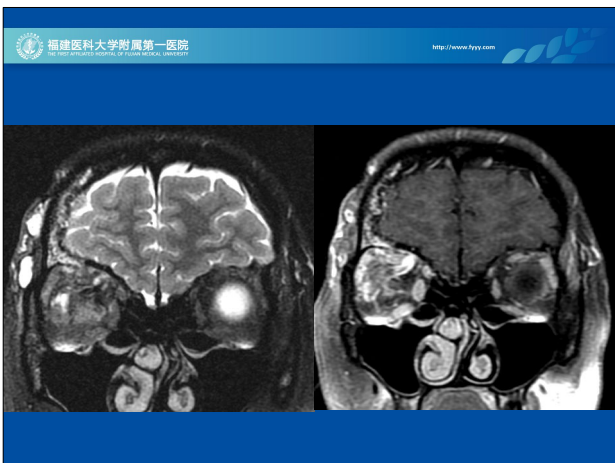
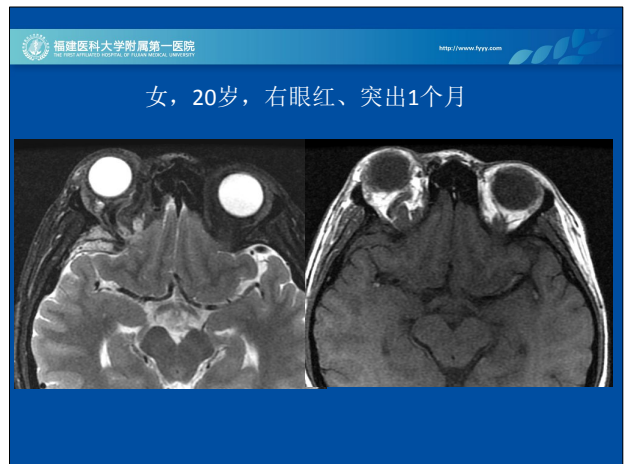
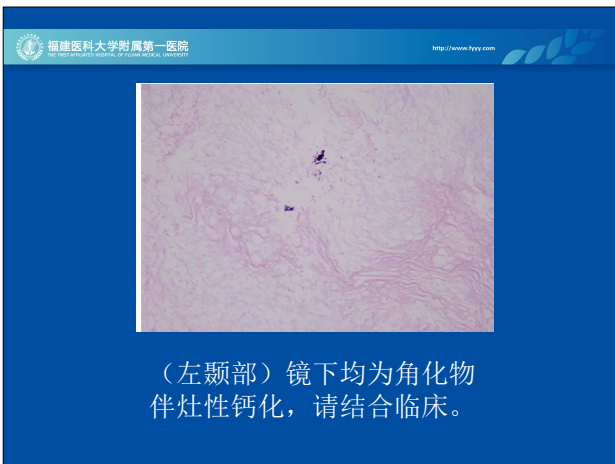
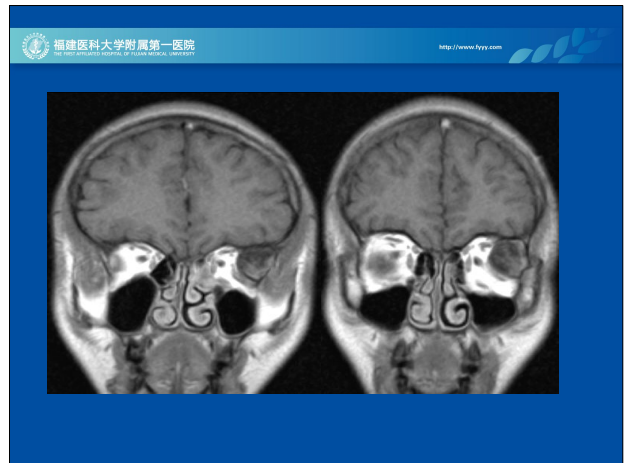
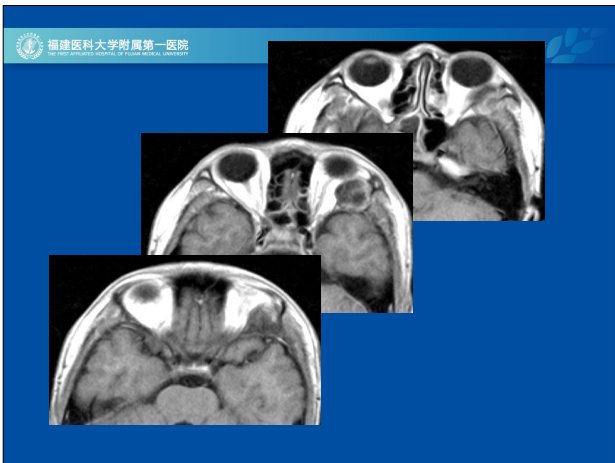


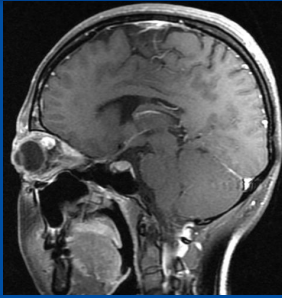
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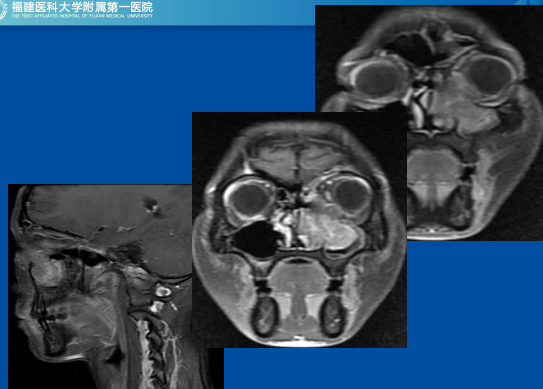
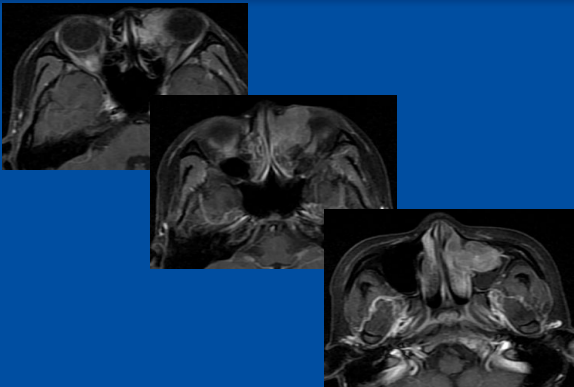
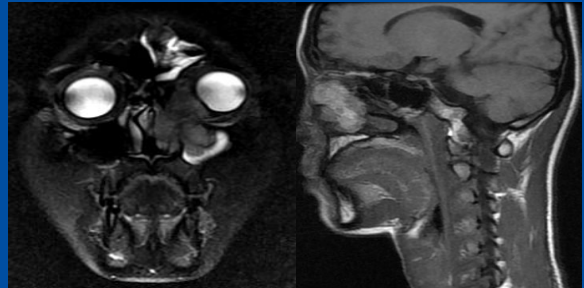
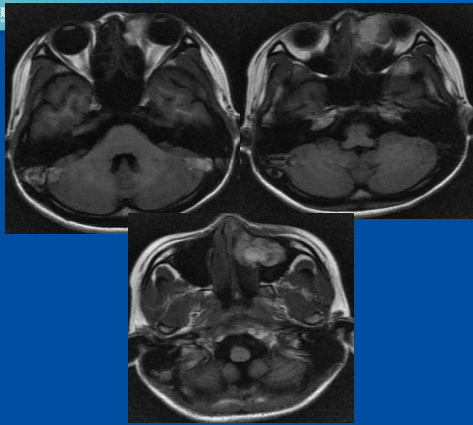
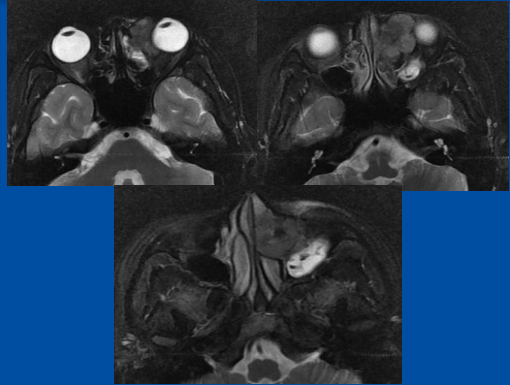
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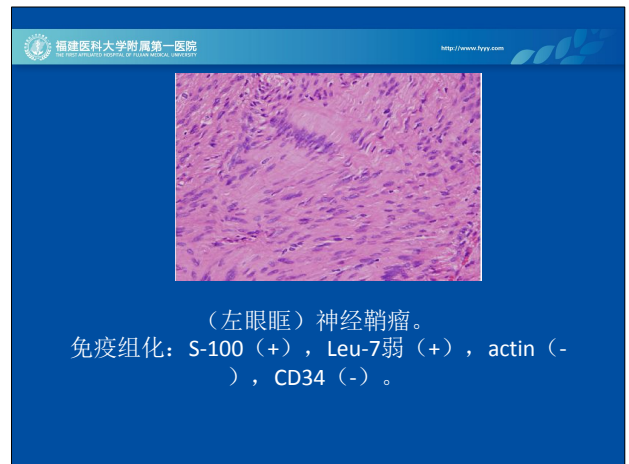
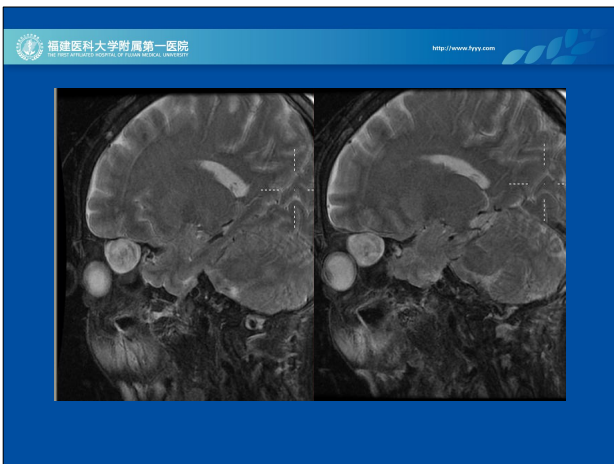
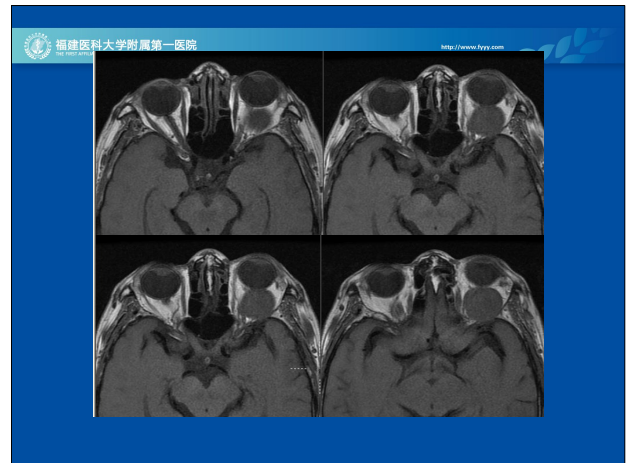
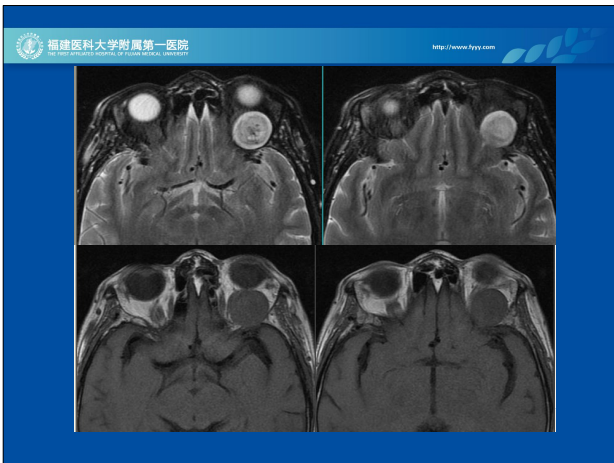






### 右中颅窝底硬脑膜动静脉瘘

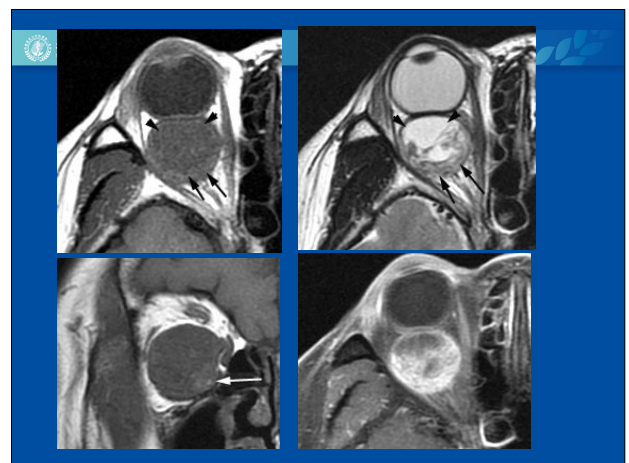




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### 神经鞘瘤

- 起源于三叉神经眼支和上颌支
- 可位于肌锥内、肌锥外，上直肌上方锥外间隙较多
- 边界清晰、光整，不均匀长T1长T2信号，囊变多见
- 增强 不均匀强化





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女, 66岁, 左眼视物模糊伴左眼突出2年

This slide displays four axial MRI scans of the head at the level of the orbits. The scans show a large, well-defined, enhancing mass in the left orbit, consistent with a tumor. The mass is causing displacement of the surrounding orbital structures. The right orbit appears normal.

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This slide displays four axial MRI scans of the head at the level of the orbits, showing a large, well-defined, enhancing mass in the left orbit. The mass is causing displacement of the surrounding orbital structures. The right orbit appears normal.

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This slide displays two sagittal MRI scans of the head. The scans show a large, well-defined, enhancing mass in the left orbit, consistent with a tumor. The mass is causing displacement of the surrounding orbital structures. The right orbit appears normal.

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This slide displays six axial CT scans of the head at the level of the orbits. The scans show a large, well-defined, enhancing mass in the left orbit, consistent with a tumor. The mass is causing displacement of the surrounding orbital structures. The right orbit appears normal.

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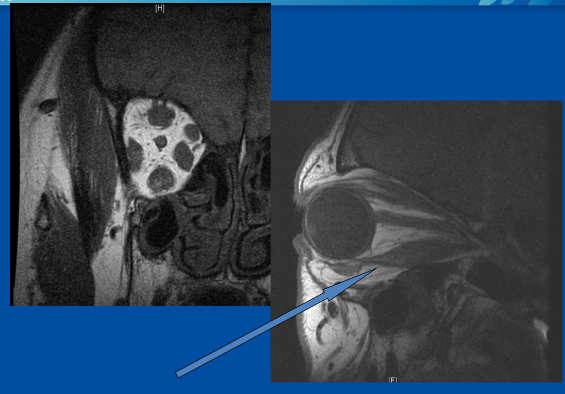
This slide displays six axial CT scans of the head at the level of the orbits. The scans show a large, well-defined, enhancing mass in the left orbit, consistent with a tumor. The mass is causing displacement of the surrounding orbital structures. The right orbit appears normal.

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This slide displays four sagittal CT scans of the head. The scans show a large, well-defined, enhancing mass in the left orbit, consistent with a tumor. The mass is causing displacement of the surrounding orbital structures. The right orbit appears normal.

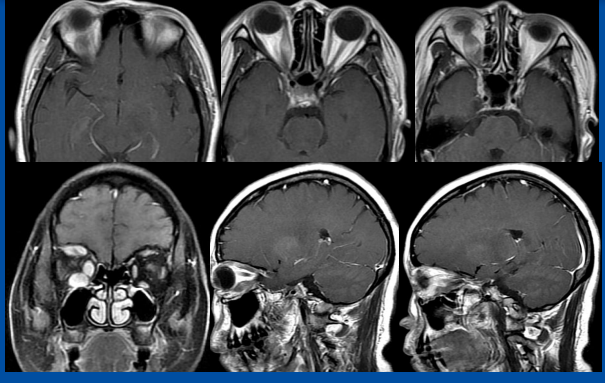
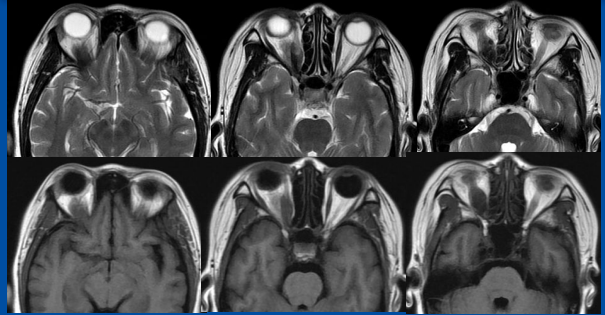
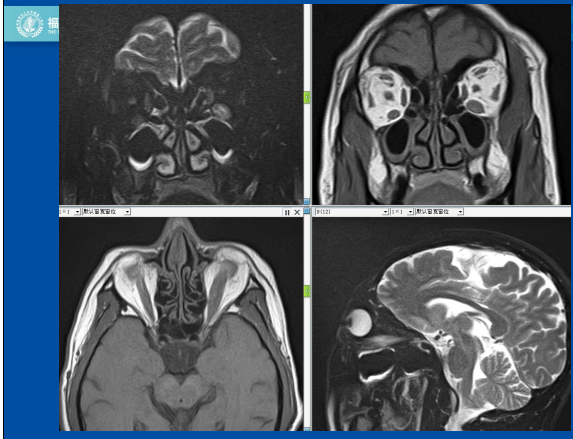
### 眼外肌病变

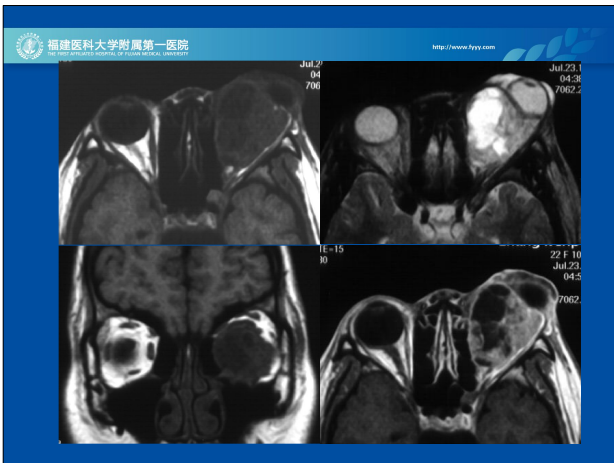
- 内分泌性眼病 (Grave's眼病)
- 眼眶肌炎: 肌炎型炎性假瘤
- 淋巴瘤
- 横纹肌肉瘤



### Graves眼病

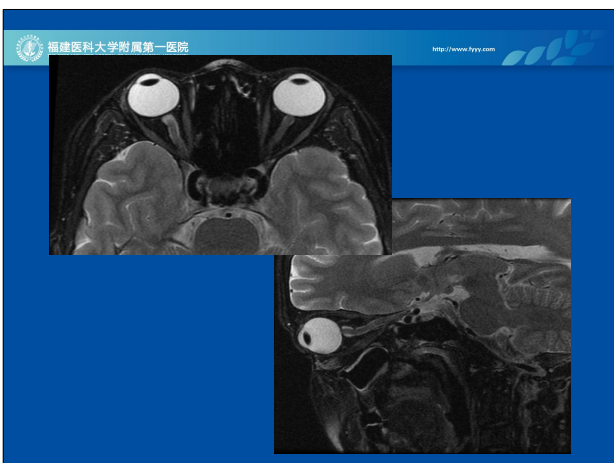
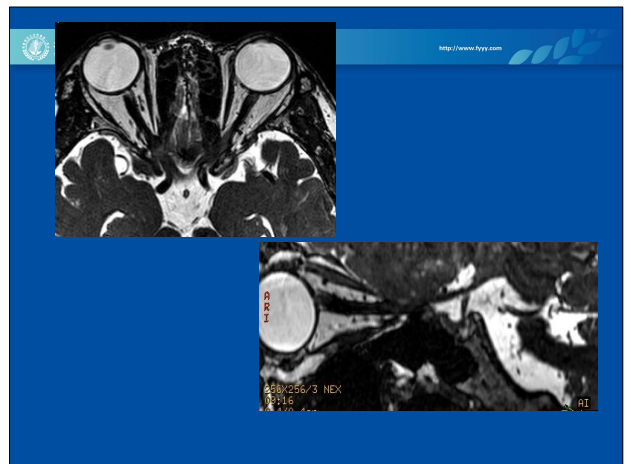
- 眼外肌梭形增粗, 眼球侧肌腱一般不增粗
- 急性期 (水肿) 长T1长T2信号
- 晚期 (纤维化) T1WI、T2WI低信号
- 增强扫描 轻~明显强化, 均匀或不均匀
- 下直肌首发, 后渐累及内、上、外直肌



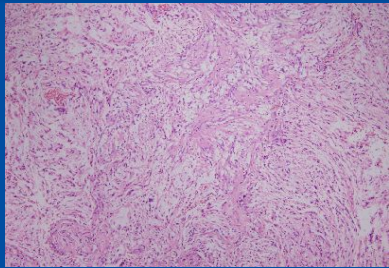
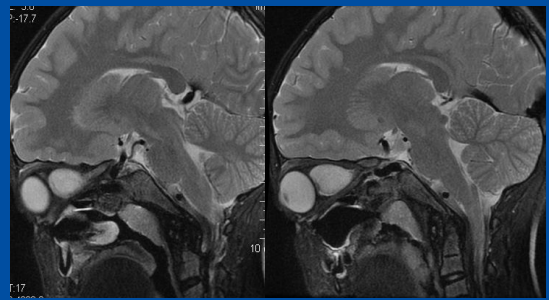
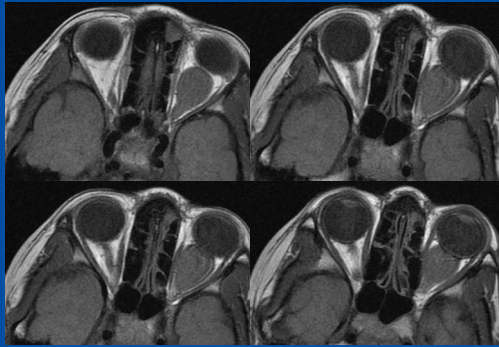


- 儿童、青少年迅速发展的眼球突出，要考虑到横纹肌肉瘤
- 眶内不规则软组织肿块，长T1长T2信号，与眼外肌境界不清
- 增强扫描明显强化

- ### 视神经病变
- 视神经胶质瘤
  - 视神经鞘脑膜瘤
  - 视神经炎



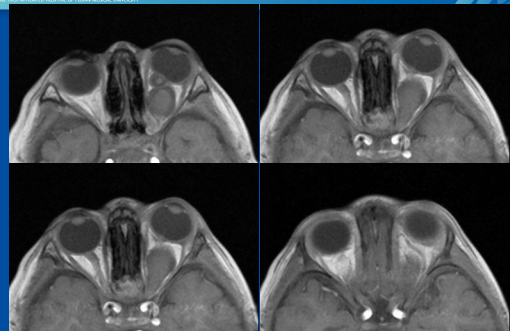
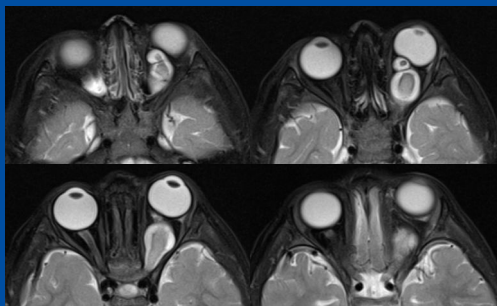
- 女，8岁，左眼突出20多天
-

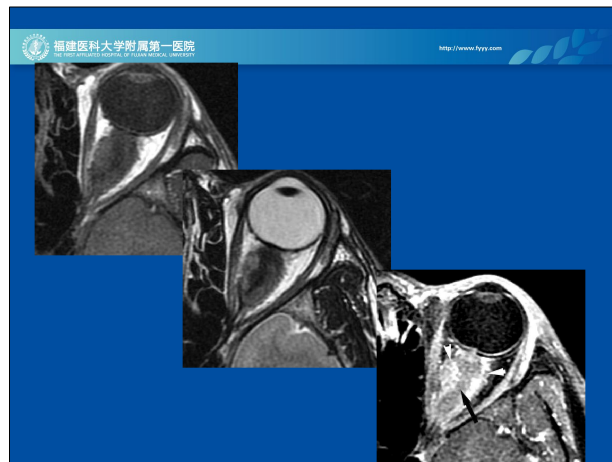
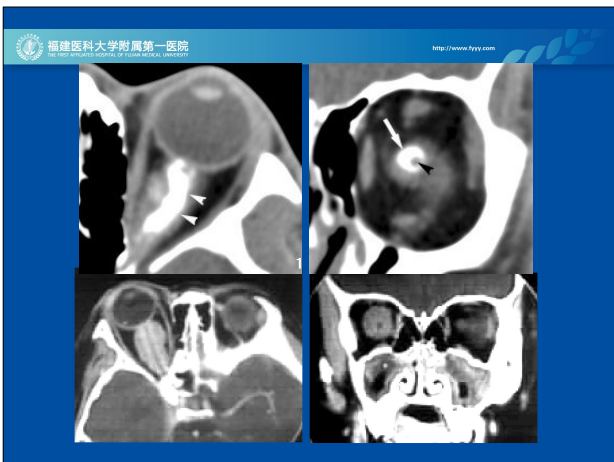
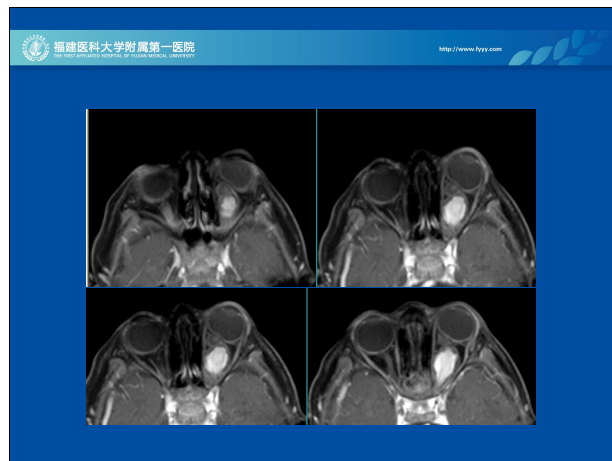
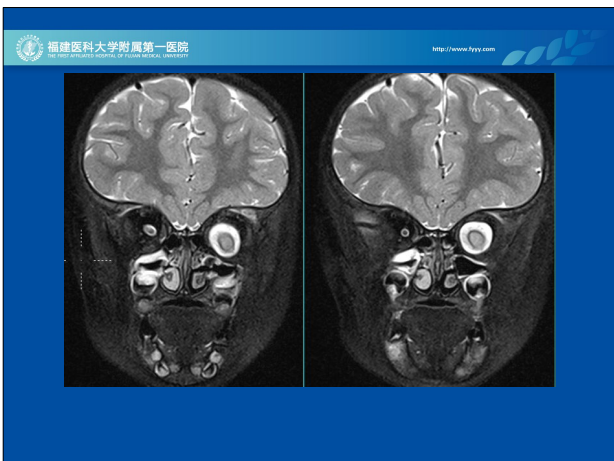


(眼球后肿物) 考虑为毛细胞型星形细胞胶质细胞瘤

### 视神经胶质瘤

- 视神经梭形或管形增粗、迂曲，T1WI等低信号，T2WI高信号
- 可压迫蛛网膜下隙使肿瘤前端正常视神经蛛网膜下腔扩大
- 儿童型—毛细胞性星形细胞瘤，10岁以下  
成人型—间变型星形细胞瘤，女多于男
- 增强后不强化至明显强化，成人强化较明显





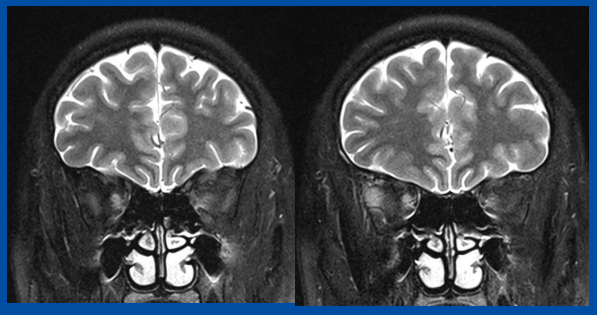
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### 视神经脑膜瘤

- 成人多见
- 视神经管形、梭形增粗
- T1WI、T2WI呈等信号或低信号
- 增强扫描 肿瘤明显强化，视神经不强化，表现为“轨道征”或“袖管征”

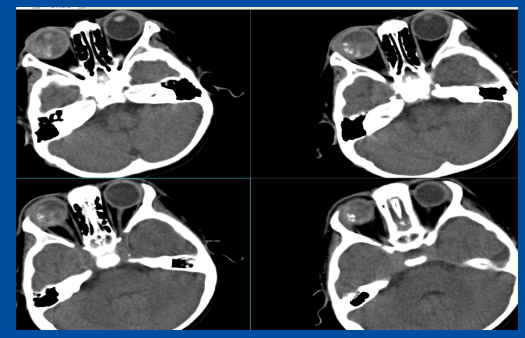
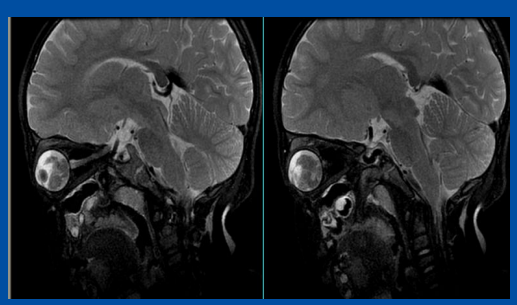
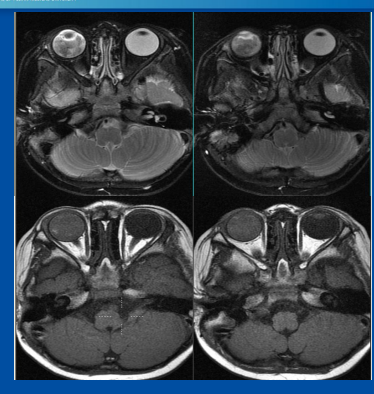
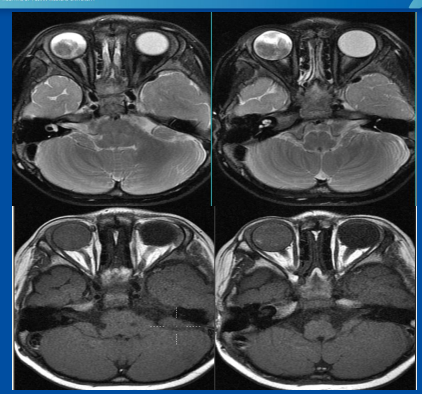
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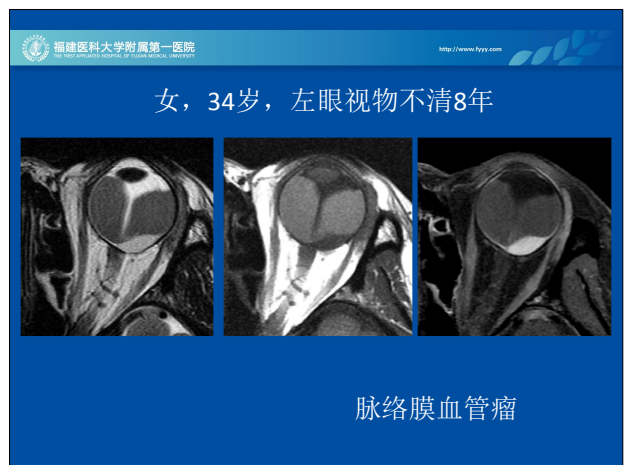
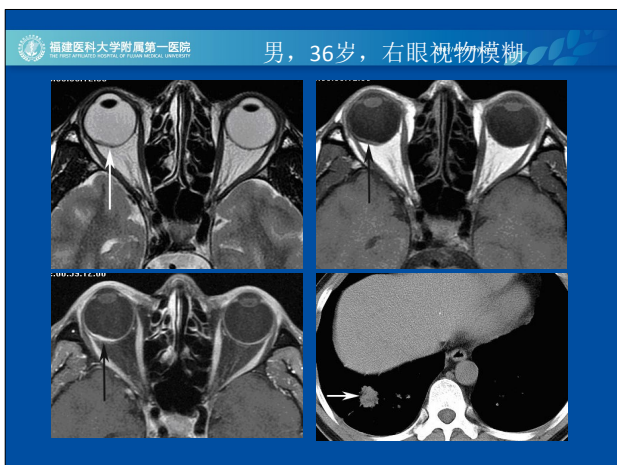
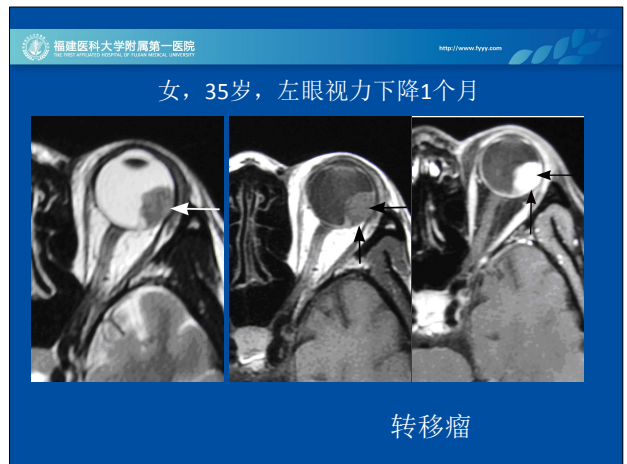
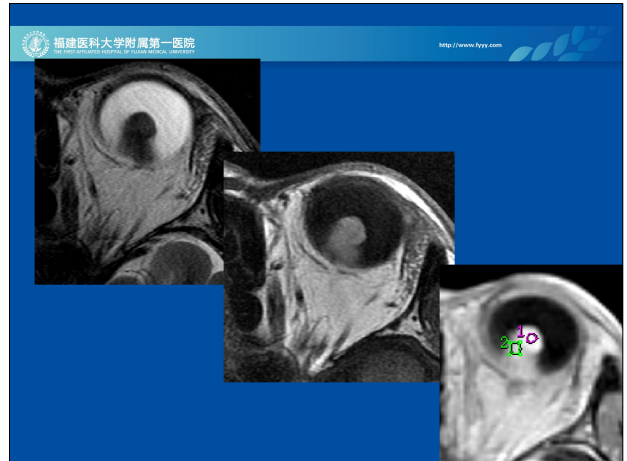
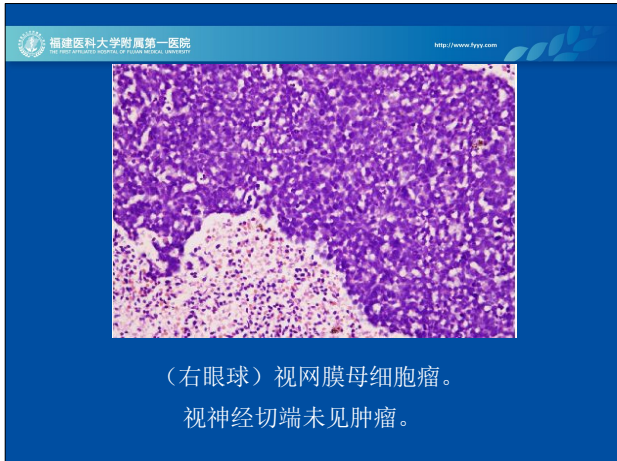
女，27岁，右眼视物模糊20余天



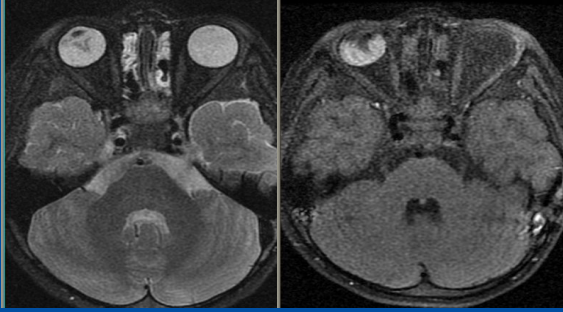
## 眼球病变

- 视网膜母细胞瘤
- 葡萄膜黑色素瘤
- 葡萄膜转移瘤
- 脉络膜血管瘤
- 视网膜脱离





## 视网膜剥离



## 小结

- 合适的检查方法
- 检查技术的合理选择 如脂肪抑制技术、动态增强扫描
- 病变的部位、形态及典型信号特征
- 重要临床表现 如炎性假瘤 Graves眼病



THANKS

THE FIRST AFFILIATED HOSPITAL OF FUJIAN MEDICAL UNIVERSITY