



SNS COLLEGE OF ALLIED HEALTH SCIENCES
SNS Kalvi Nagar, Coimbatore-35
Affiliated to The Dr.M.G.R Medical University, Chennai



RADIOGRAPHY AND IMAGING TECHNOLOGY - II YEAR

COURSE NAME : CONTRAST & SPECIAL RADIOGRAPHY PROCEDURES

TOPIC : SIALOGRAPHY



Sialography



It is a radiographic examination of the salivary glands by introducing a radio-opaque contrast media into the ductile system of the salivary glands to evaluate the abnormalities of the salivary glands.





Anatomy

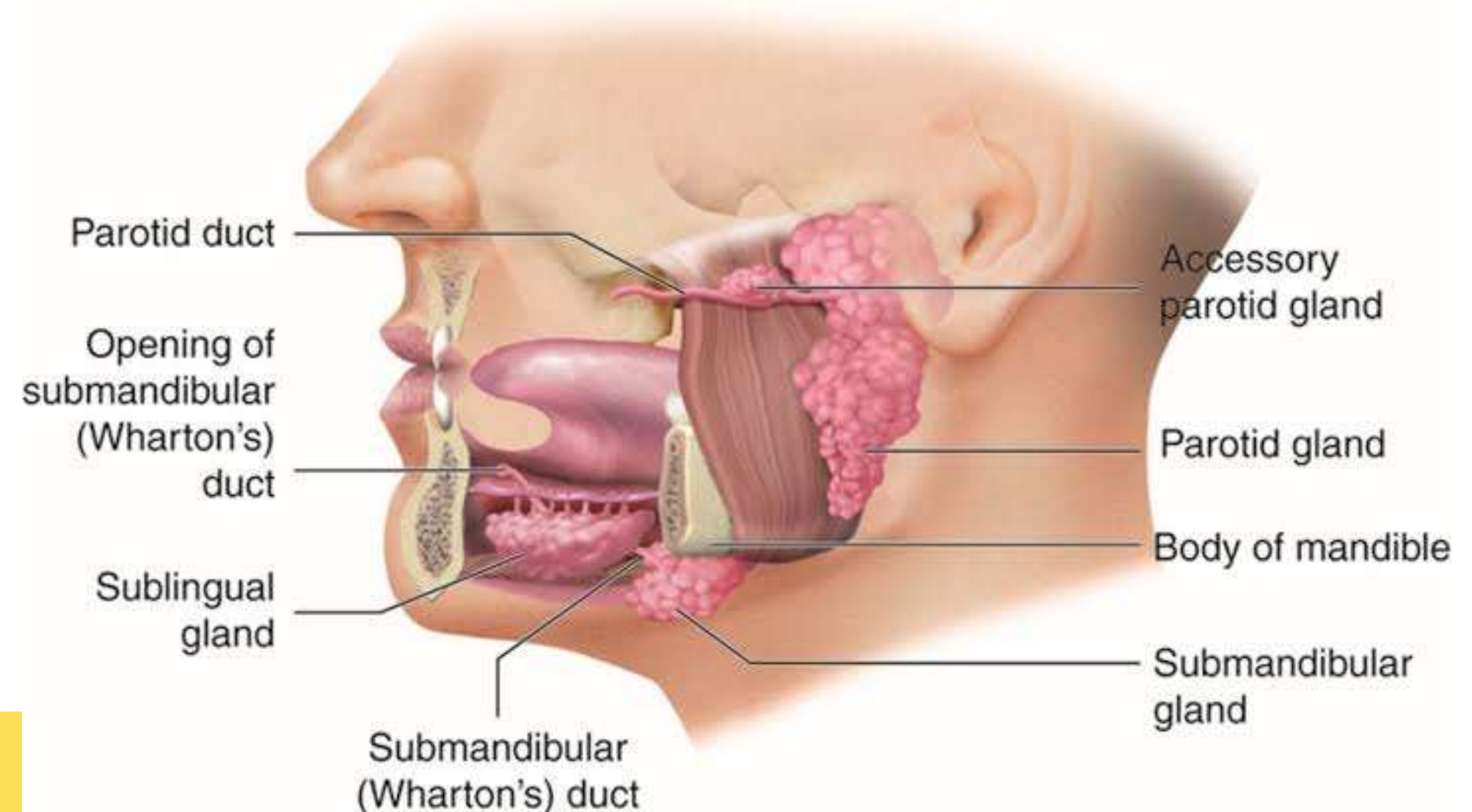


The salivary glands are exocrine glands that produce saliva into the mouth.

The saliva contains the enzyme amylase, which helps in the digestion of food.

Three major salivary glands:

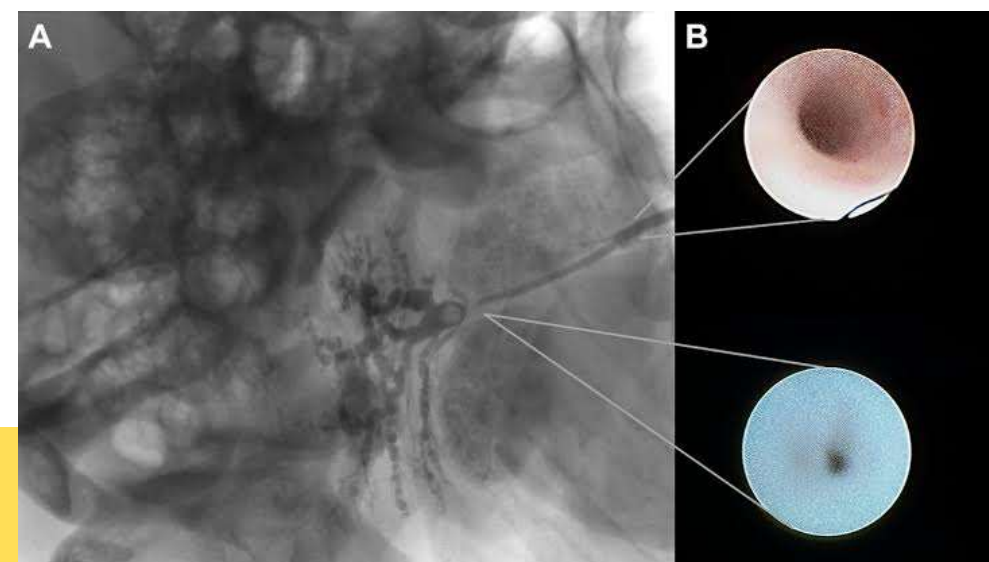
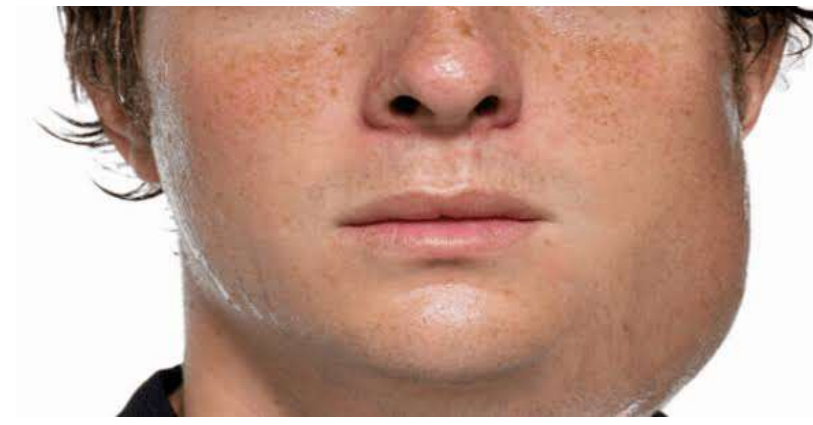
- Parotid (pre-auricular region)
- Sublingual (under the tongue)
- Submandibular (below the mouth floor)





Indication

- Facial swelling.
- Evaluation of mass lesion in salivary gland.
- Determination of stone in salivary gland (sialolithiasis)
- Pain and inflammation. In the salivary gland.
- To evaluate the functional disorder of the salivary gland.
- Suspected strictures in glands.
- Obstruction in the salivary ducts.

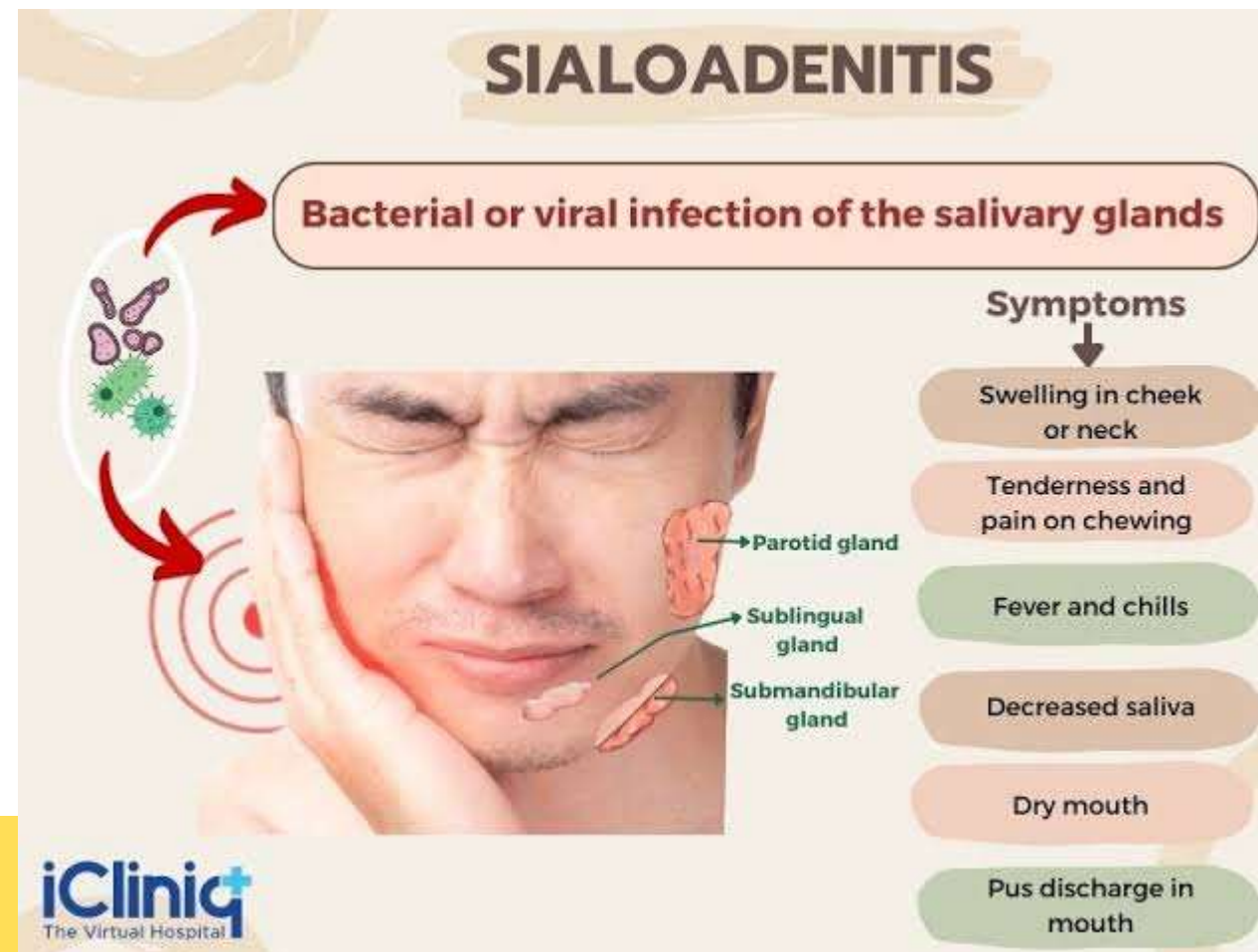




Contraindications



- Hypersensitivity to iodine
- Suspected pregnancy
- Acute inflammation in salivary gland
- Severe infection (sialadenitis)
- Ductile opening Calculus.





Equipment

- Fluoroscopy unit with spot film device
- Topical anesthesia
- Lacrimal duct dilator
- Cannula & sleeve
- 2cc syringe
- Lemon juice (to stimulate saliva)
- Sterile towels & antiseptic solution





Contrast Media



Iodinated water-soluble contrast (e.g., Iohexol, Iopamidol)

Mode of injection: Manual injection through a cannula into the salivary duct

Dosage: 0.5 – 2 ml per duct (depends on patient tolerance and gland size)

Flow rate: Slow and steady under fluoroscopic guidance

Pressure: Low pressure to prevent ductal rupture

Iohexol
Radiopaque, Omnipaque





Patient Preparation

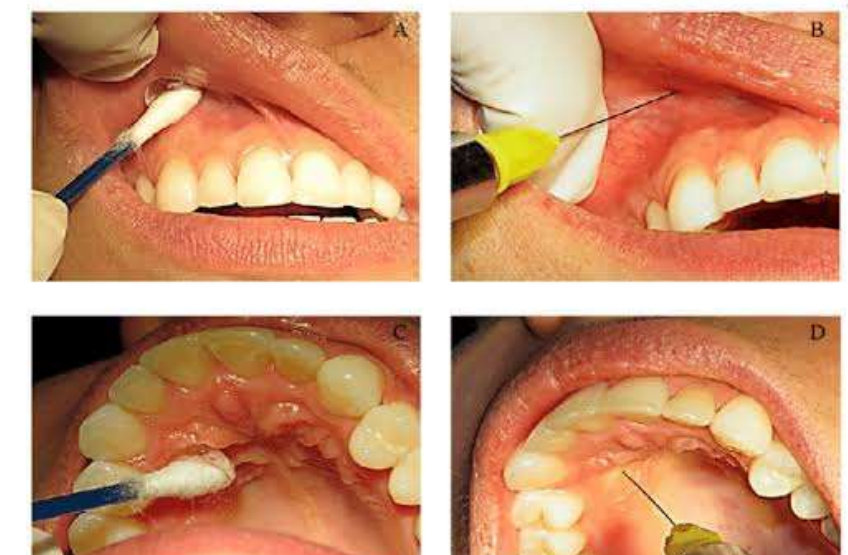
- No special preparation require
- Remove all metallic objects
- Women must inform about pregnancy risks
- Explain procedure & obtain consent
- Patient changes into hospital gown





Procedure

- Supine positioning on fluoroscopic table (Empty bladder)
- IV line inserted if sedation is needed
- Scout film taken
- Mouth opened for ductal assessment
- Lemon juice given if needed
- Topical anesthetic applied
- Cannula inserted, contrast media injected (1 or 2ml)
- Spot films taken in multiple projections (AP, Lateral, Oblique)
- Post-procedure contrast evacuation assessed







Complications



- Ductal rupture
- Infection at injection site
- Contrast-induced inflammation

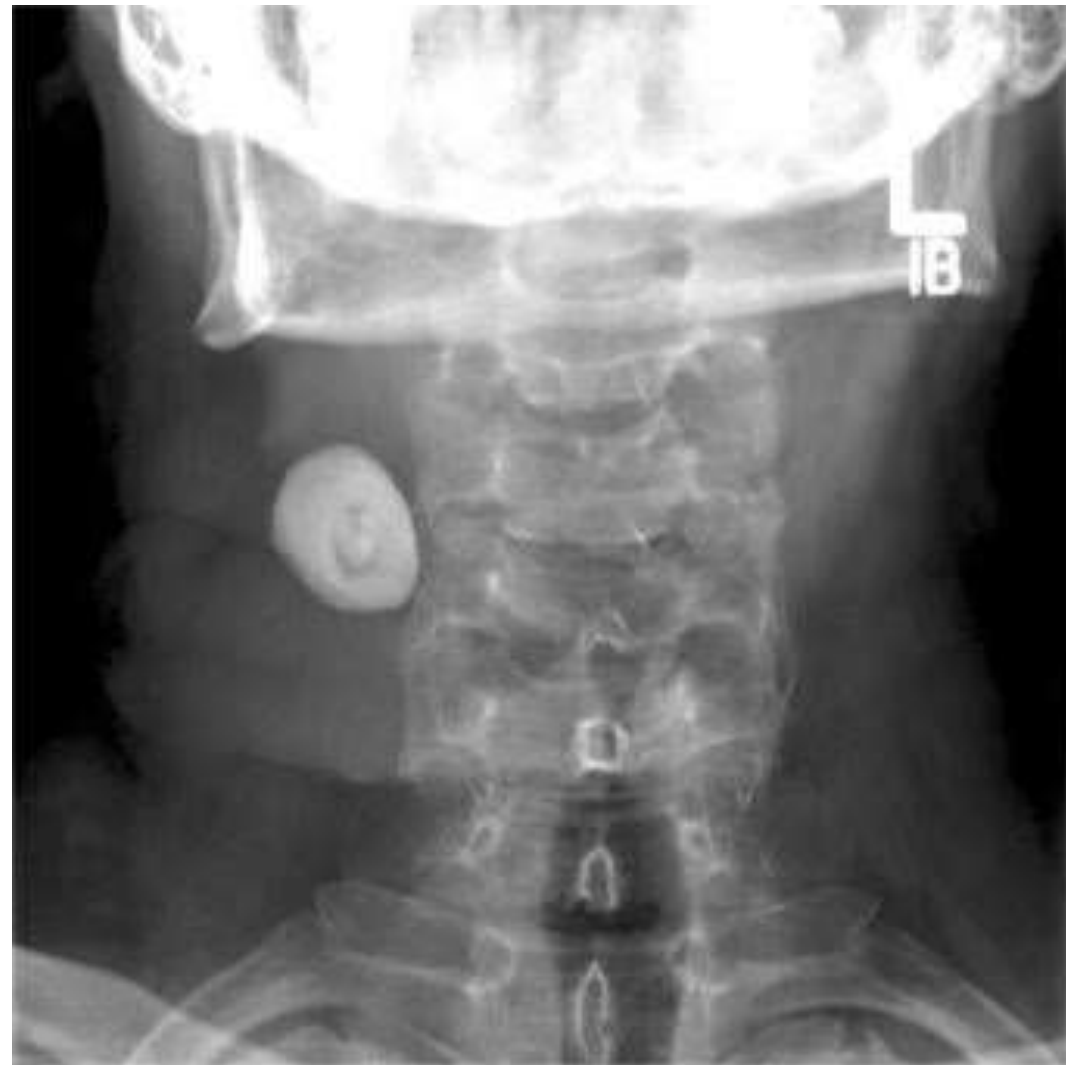


Aftercare



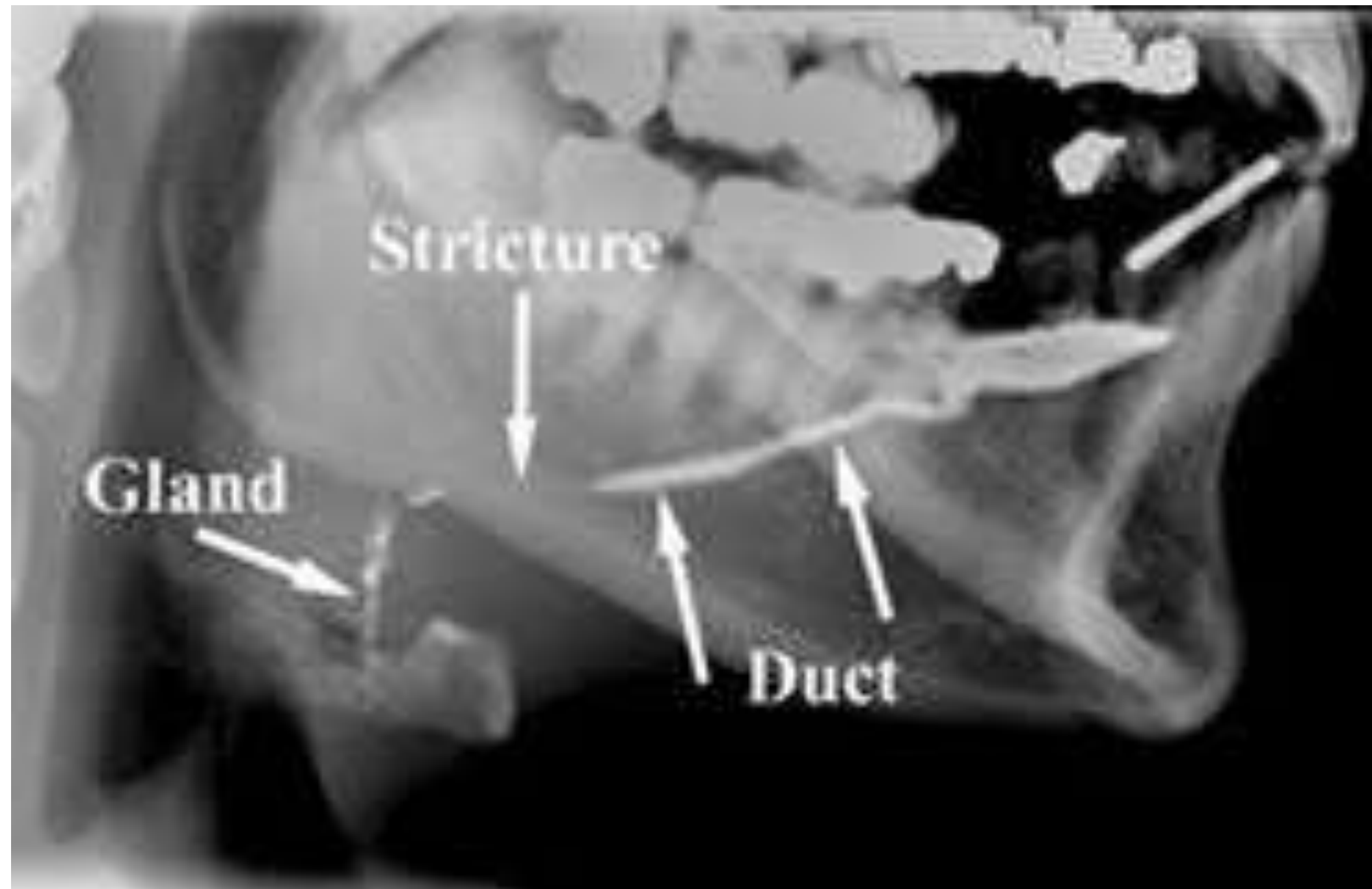
- Patient advised to rinse mouth post-exam
- Monitor for adverse reactions

Pathologies

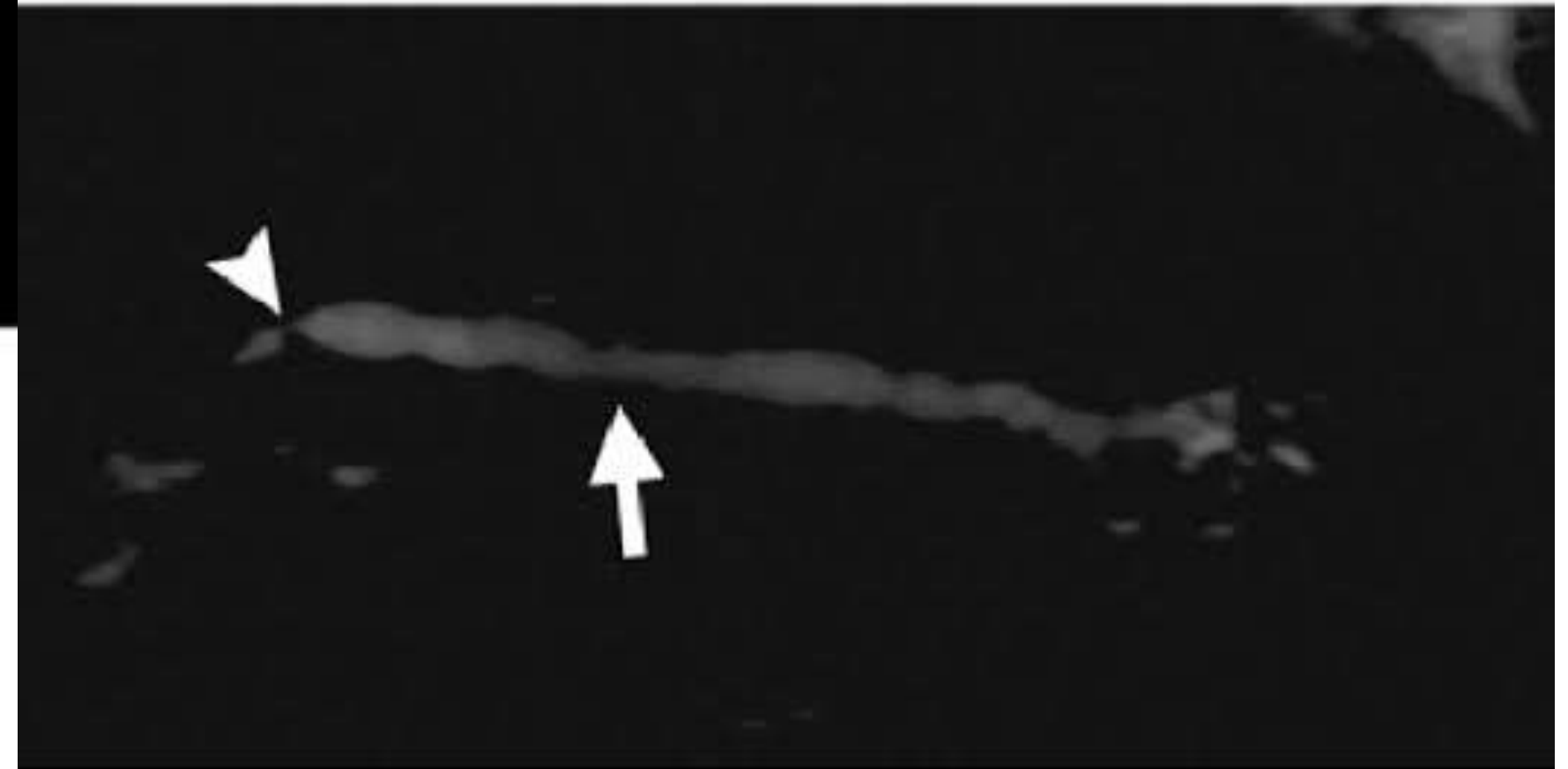
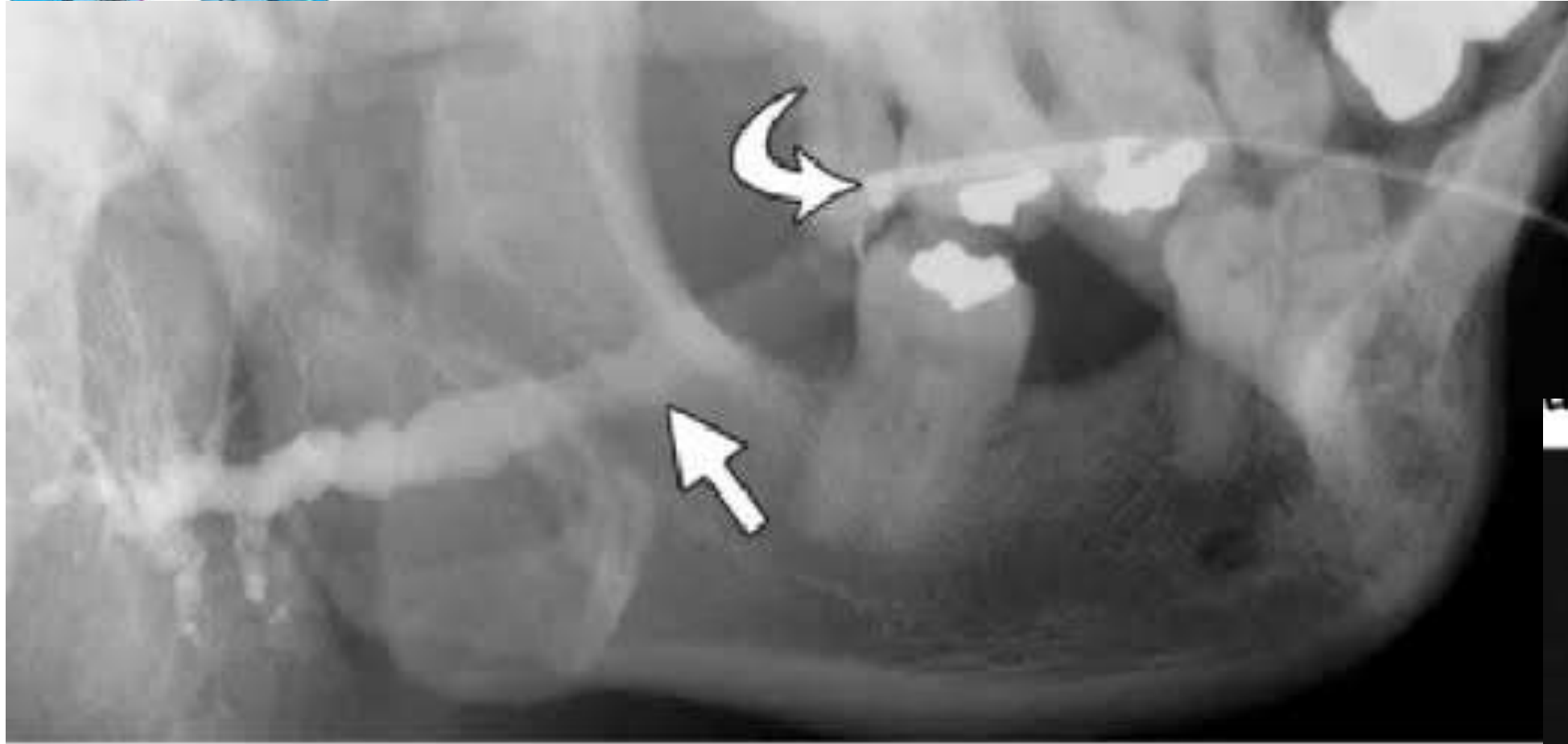


Sialolithiasis (salivary stones)

Pathologies



Pathologies



b.

Ductal obstructions