

# Key imaging information in salivary gland lesions

**April 21, 2020: Roberto Maroldi, Brescia/IT**

## Prof. Roberto Maroldi

Prof. Roberto Maroldi is Head of the Department of Radiology at the Spedali Civili - University of Brescia as well as full professor of radiology at the Medical School, University of Brescia in Italy. He is also a fellow of ESHNR since 2012, and past President of the Head and Neck Radiology College of the Italian Society of Radiology (SIRM).

Prof. Maroldi has a particular interest in radiology of head and neck cancer, larynx, salivary, sinonasal and skull base imaging and has performed several thousand CT and MR examinations of the Head and Neck, and hundreds of vascular examinations and interventional procedures.



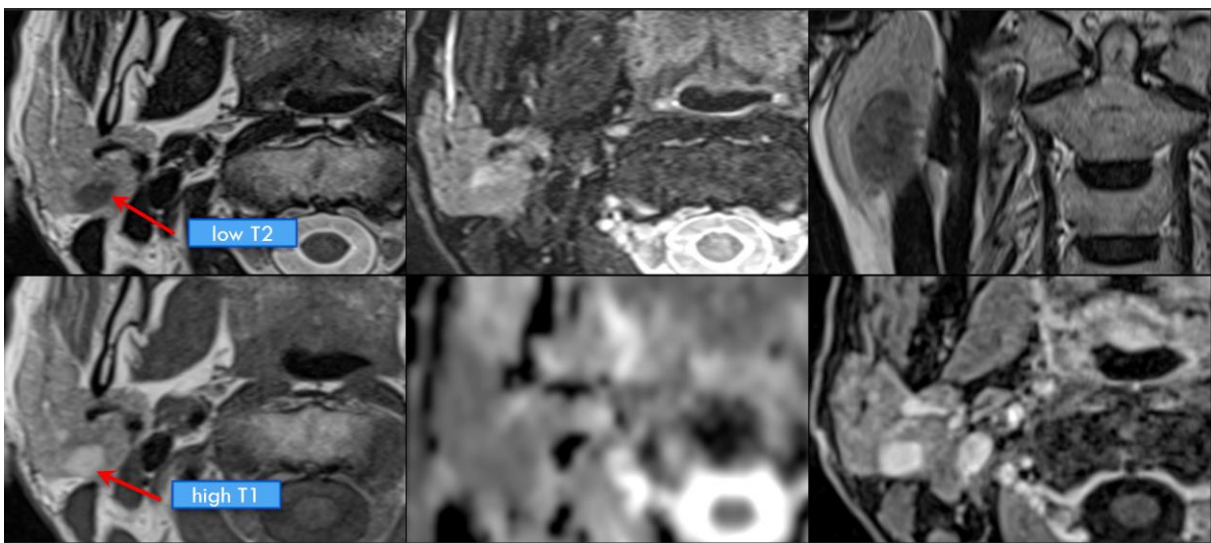
## Learning Objectives

1. To become familiar with the Imaging techniques to be used for inflammatory and neoplastic salivary gland lesions
2. To learn about the Imaging findings of most frequent benign and malignant parotid gland neoplasms
3. To understand the key issues in planning surgery for salivary gland neoplasms
4. To learn about minor salivary gland distribution and most frequent lesions

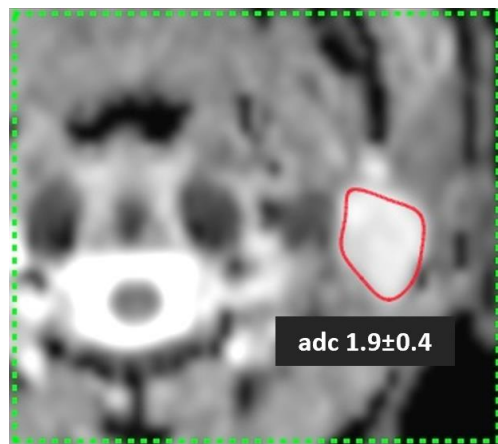
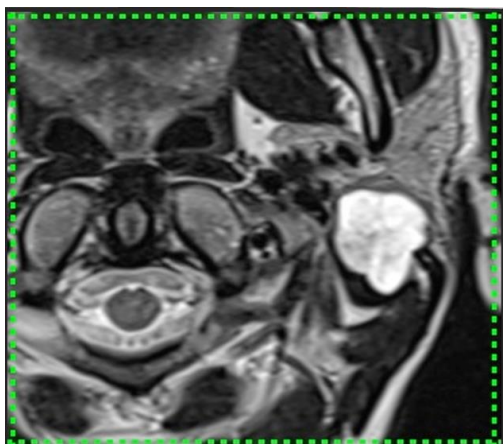
## Test Your Knowledge

1. Parotid gland nodule: Which MR feature does not suggest a pleomorphic adenoma?
  - a. Hyper-intensity on T2
  - b. Regular margins
  - c. Inhomogeneous enhancement
  - d. Hyper-intense rim on T2
2. Parotid gland nodule: Which MR feature does suggest malignancy?
  - a. A nodule hyper-intense on T2
  - b. A nodule hyper-intense on T1

- c. A nodule hypo-intense on T2
  - d. A nodule hypo-intense on T1
  - e. High ADC value ( $>1.4$ ) on DWI
3. Parotid nodule, mostly hyper-intense on T2, high values on ADC. If an intra-nodular component hypo-T2 and with low value ADC ( $<1.4$ ) is present, what it could indicate?
- a. Necrosis in a pleomorphic adenoma
  - b. Malignant degeneration in a pleomorphic adenoma
  - c. Cystic degeneration in a pleomorphic adenoma
  - d. Hyper-cellular component or malignant degeneration in a pleomorphic adenoma
  - e. Fibrotic component in a pleomorphic adenoma
4. 45yo male, small lump in R parotid gland. Your guess?



- a. A complicated branchial cleft cyst type I
  - b. Pleomorphic adenoma
  - c. Warthin tumor
  - d. Adenoid cystic carcinoma
  - e. Intra-parotid nodal metastasis
5. 38yo female, long standing lump in L parotid gland. Your guess?



- a. A complicated branchial cleft cyst type I
- b. Pleomorphic adenoma
- c. Warthin tumor
- d. Adenoid cystic carcinoma
- e. Intra-parotid nodal metastasis