

Grey matter heterotopia occurred with other developmental disorders of central nervous system rather than solely and in most cases it was bilateral.

Schizencephaly and abnormalities of the corpus callosum were the most often developmental disorders accompanying GMH.

Conclusions. 1. Subependymal grey matter heterotopia was more common than subcortical GMH. Subependymal GMH showed tendency to localize in the region of lateral ventricles bodies. The least common was laminar GMH. 2. Grey matter heterotopia occurred more often with other developmental disorders of central nervous system rather than solely. The most often concurrent disorders of central nervous system were: schizencephaly, developmental abnormalities of the corpus callosum, arachnoid cyst, abnormalities of the septum pellucidum and the fornix. 3. GMH foci were more often bilateral than unilateral. 4. In the diagnosis of cell migration abnormalities, grey matter heterotopia included, MR imaging remains method of choice.

CLEAR-CELL KIDNEY SARCOMA AND NEPHROBLASTOMATOSIS AS A RELATIVELY RARE CHILDHOOD KIDNEY TUMORS — OWN EXPERIENCE

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Aim. The aim of our study was to present two cases of less common renal tumors in children.

Material and methods. Two cases were presented: a case of 20-month-old boy with renal clear-cell sarcoma, and a 2-month-old boy with polycystic kidney disease, who was also diagnosed with comorbid outbreak of nephroblastomatosis.

Results. Tumors of the kidney, other than fetal nephroblastoma (Wilms' tumors) occur in children relatively rarely. These include, among others: nephroblastoma mesoblasticum, nephroblastomatous syndrome, muscular rhabdomyosarcoma tumor and renal clear-cell sarcoma.

Conclusion. The image of small changes is usually not a characteristic, while in the case of large tumors there exists a syndrome of the morphological characteristics in the computer tomography and magnetic resonance images, suggesting the diagnosis of a specific type of tumor. Further development of modern imaging techniques will allow more accurate diagnoses, that allow for better planning of the scope of the surgery, because of its completeness has a significant effect of reducing the risk of local recurrence and improves long-term prognosis in young patients.

RATHKE'S CLEFT CYST IN OUR OWN MATERIAL – DIAGNOSTIC DIFFICULTIES IN MAGNETIC RESONANCE IMAGING

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Rathke's cleft cyst (RCC) is a non – neoplastic cyst arising from the embryologic remnants of epithelial Rathke's.

The aim of the study was to present differential diagnosis for cystic lesions of the pituitary gland.

Materials and methods. We retrospectively analysed MRI images of Rathke's cleft cysts in 29 patients.

Results. Diagnostic imaging, in particular MRI imaging is currently considered the modality of choice and plays an essential role in the diagnosis as well as preoperative assessment of sellar and parasellar tumors. The main differential diagnosis of RCC are: cystic craniopharyngiomas, cystic pituitary adenomas, pars intermedia cysts as well as epidermoid, dermoid and arachnoid cysts.

Conclusions. Preoperative differential diagnosis of cystic sellar and suprasellar tumors is important for neurosurgeons for choosing method of treatment. The MRI assessment of cysts considering solely intrinsic fluid signal may be difficult if not impossible. The finding of nodules within the cyst with characteristic signal intensity in T1- and T2-weighted images and no contrast enhancement may implicate diagnosis of Rathke's cleft cyst.

THE ORTHOPEDIST COMES TO RADIOLOGIST – SCOLIOSIS YESTERDAY AND NOWADAYS

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Aim. The aim of this report was the presentation of up-to-date and interdisciplinary approach to the problem of scoliosis in children and presentation of a still very important and leading role of X-ray examinations in its diagnosis.

Material and methods. The analysis of children's X-rays in the ages between 5 and 18 was made, who were examined in the Clinical Department of Radiology in Provincial Hospital No 2 in Rzeszów in the period between January the 1st 2015 and March 31st 2015, with suspected or diagnosed scoliosis (354 children). All of the children had an X-ray examination of the whole vertebral column in two basic projections (AP and lateral), whereas in children qualified for surgical treatment additional projections, supplementary to initial X-rays as well as CT and/or MRI were performed.

Results. X-ray examination still remains the basic diagnostic imaging in diagnosis of scoliosis, it allows among others to evaluate the grade of scoliosis based on Cobb's angle measurement and to qualify the patients to the proper treatment. In case of children with high grade scoliosis CT and MRI are additionally made before the surgery.