

Evidence Discussion (AB 47)

- Ultrasound may be used as a screening tool, but has low sensitivity and is often insufficient to distinguish retroperitoneal fibrosis from other abdominal masses.
- CT and MR allow for characterizing morphology and extent of retroperitoneal fibrosis both at initial diagnosis and in treatment monitoring. It also helps to define the involved vascular structures, and can visualize disease in other abdominal viscera that may be associated with retroperitoneal fibrosis. CT may have advantages in imaging availability and imaging time. MR may have advantages in avoiding ionizing radiation and improved soft tissue characterization.
- PET may be used to evaluate metabolic activity and may be of value after diagnosis to characterize active inflammation versus malignancy and to document response to treatment. The role of PET scan in establishing a diagnosis is limited due to the potential for nonspecific uptake.
- Follow-up may be appropriate every 3-12 months to assess disease status and response to therapy.

References

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