

Fistulae (AB-48)

The majority of fistulas (75-85%) are iatrogenic, resulting from trauma or surgery, while a minority form spontaneously due to factors such as foreign bodies, radiation, infection/inflammation, epithelialization, neoplasia, or distal obstruction (FRIEND). Diagnosis involves history-taking, physical examination, and laboratory testing. However, imaging techniques like CT and MRI play a crucial role in pinpointing the location and path of the fistula, as well as identifying any associated complications such as foreign bodies or abscesses. Due to its superior resolution, MRI is preferred over CT, particularly when a pelvic fistula is suspected.

References

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