

# MR enterography is as good or better than standard imaging exams for pediatric Crohn's patients

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MR enterography is superior to CT enterography in diagnosing fibrosis in pediatric patients with Crohn disease and equally as good as CT enterography in detecting active inflammation, and a new study shows.

The study, conducted at Massachusetts General Hospital in Boston, found that MR enterography was 77.6% accurate in depicting [fibrosis](#) compared to 56.9% for CT enterography. MR enterography had an 82.1% accuracy rate versus 77.6% accuracy rate for CT enterography for detecting active inflammation, said Keith Quencer, MD, one of the authors of the study. The study included 23 [pediatric patients](#) with Crohn disease. All patients had both a CT enterography and MR enterography examination.

Accurately identifying fibrosis or inflammation in these patients is key to determining appropriate treatment, said Dr. Quencer. Pediatric Crohn's patients often have nonspecific symptoms. If their symptoms are due to inflammation, then [medical therapy](#) is appropriate, said Dr. Quencer. On the other hand, if the symptoms are due to [bowel obstruction](#) from fibrosis, then a surgical approach may be necessary, he said.

"While our study shows that MR enterography is as good or better than CT enterography, CT enterography is faster than MR enterography, less expensive and more widely available," Dr. Quencer said. CT

enterography remains the preferred imaging modality to evaluate Crohn disease.

"We are seeing a change in our practice though," he added, "in part because MR enterography does not use radiation. "Crohn disease is a chronic disease, with patients often requiring frequent imaging studies due to symptom recurrence. As we strive to minimize [radiation dose](#), particularly in the pediatric population, MR enterography should be considered, Dr. Quencer said.

Provided by American Roentgen Ray Society

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