Abstract

ABSTRACT: OBJECTIVES: To show the role of enhanced spiral computed tomography in clinically suspected acute pulmonary embolism (PE) patients. PATIENTS AND METHODS: From October 2003 to October 2004, forty-two patients with clinically suspected acute pulmonary embolism were examined by thin slices contrast enhanced spiral computed tomography as the primary diagnostic test to rule out or confirm the diagnosis of pulmonary embolism. Patients were examined in the Radiology Departments of (Al-Kadymia, Al-Yarmook & Ibn Al-Bittar Teaching Hospitals). RESULTS: Pulmonary embolism diagnosed in 43% of the patients by showing clot within pulmonary arteries with or without non-specific signs like effusion, wedge infarct & dilated pulmonary artery. CT was normal or gave an alternative diagnosis that could explain the patient's signs & symptoms in 52%. Inconclusive findings were seen in 5%. CONCLUSION: Computed tomography can be used safely as the primary diagnostic tool in clinically suspected acute pulmonary embolism patients, to confirm or rule out the diagnosis.

Acute pulmonary embolism (PE) is a common and sometimes fatal disease. The approach to the evaluation should be efficient while simultaneously avoiding the risk. Clinical, laboratory, roentgenographic, and electrocardiographic findings in patients with acute pulmonary embolism and no pre-existing cardiac or pulmonary disease. Chest 1991; 100:598. Stein PD, Saltzman HA, Weg JG.