



# **ISUOG Basic Training**

## Examining the Ovaries and Adnexa

# Learning objectives

At the end of the lecture you will be able to:

- Use International Ovarian Tumor Analysis (IOTA) terms, definitions and measurements

# Key questions

- How do I describe my ultrasound findings using the standardized (IOTA) terminology?
- How do I assess and describe vascular flow in structures in the adnexa?
- How do I measure and describe papillations in ovarian lesions?

# Key points

- Understand how to use IOTA terminology
- Understand how to arrange ultrasound settings to assess vascular flow in ovarian lesions
- Understand how to measure and assess papillations in ovarian lesions

# International Ovarian Tumour Analysis (IOTA)

**Terms, definitions and measurement methods**

# Definitions

- Ovarian lesion
- Solid component
- Papillary projection – cyst wall irregularity
- Complete – incomplete septum
- Five tumor types
- Different types of cyst content
- Acoustic shadowing
- Color score
- Ascites

# Ovarian lesion

Ultrasound Obstet Gynecol 2000; 16: 500-505.

## **Terms, definitions and measurements to describe the sonographic features of adnexal tumors: a consensus opinion from the International Ovarian Tumor Analysis (IOTA) group**

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- Part of an ovary inconsistent with normal physiology
- Adnexal mass inconsistent with normal physiology

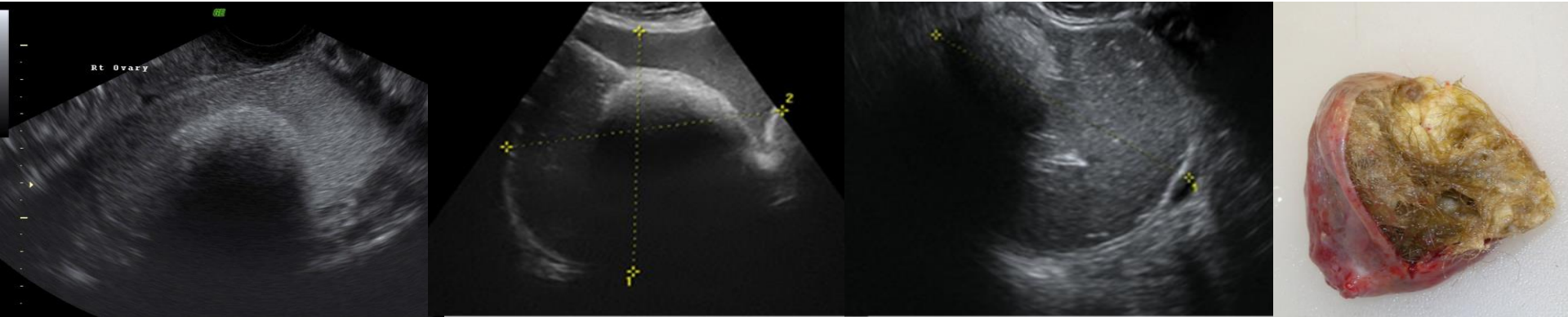
# IOTA definition of a solid component

- A structure that has (high) echogenicity suggestive of *tissue* (myometrium, ovarian stroma, myomas, fibromas)



# IOTA definition of a solid component

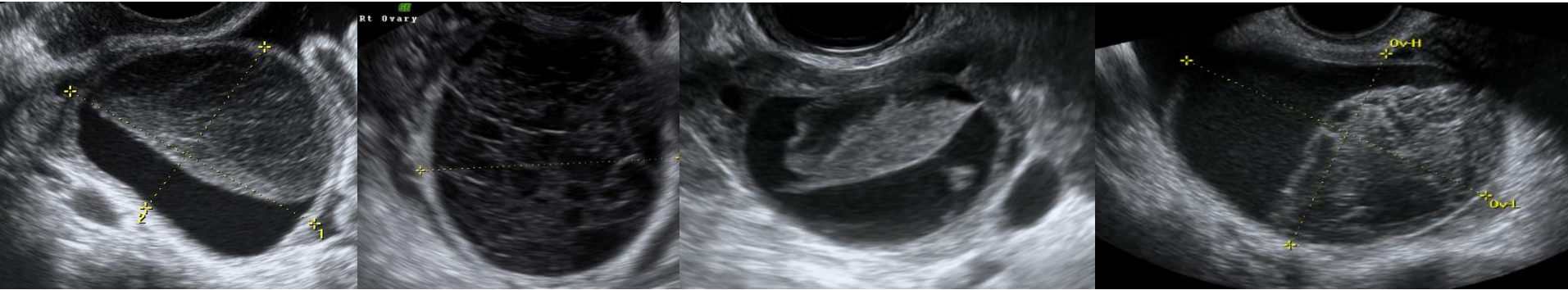
- The white ball in a dermoid cyst is **NOT** solid tissue



# IOTA definition of a solid component

- Blood clot, amorphous material or solid tissue?
- Push on the lesion
- Use colour doppler

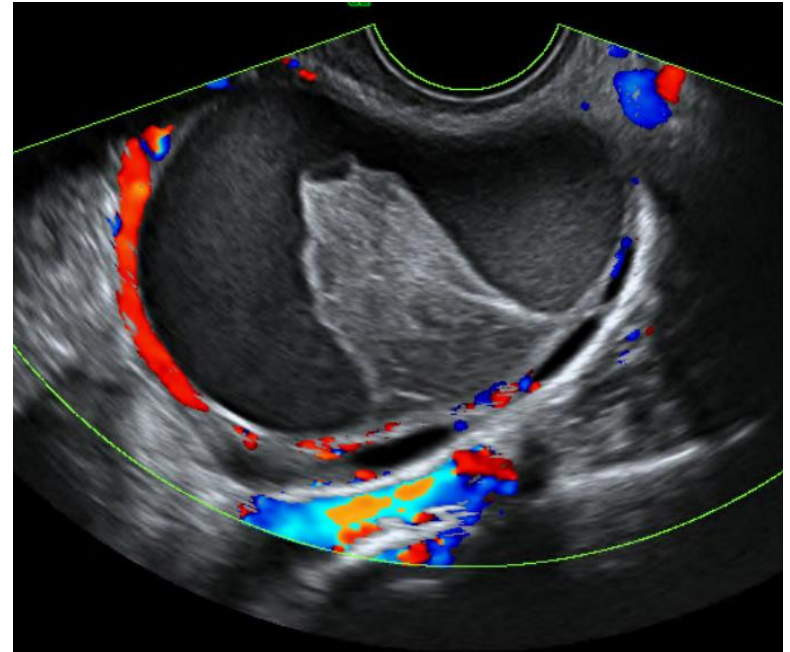
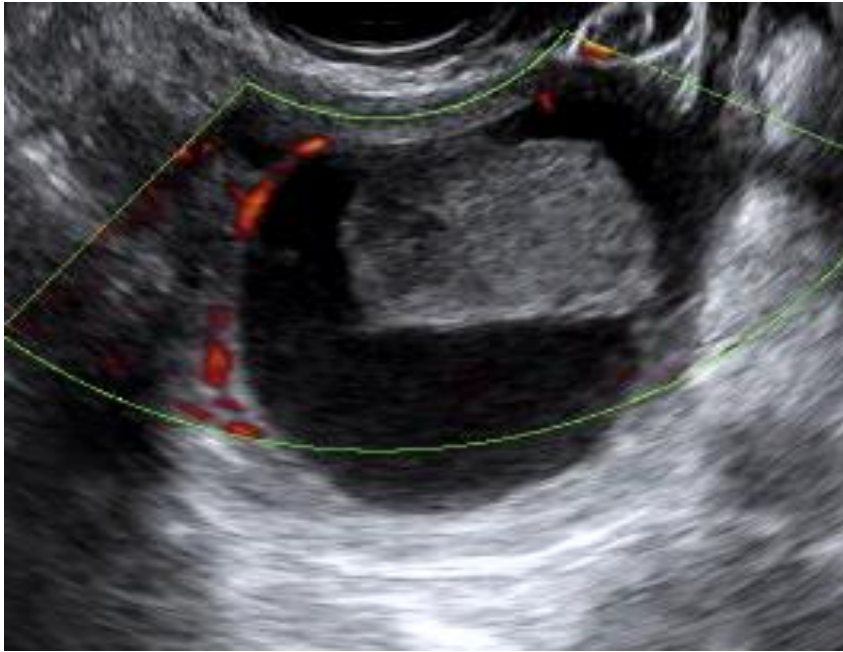
*If in doubt – classify as solid tissue!*



# Push on the lesion



# Use colour Doppler

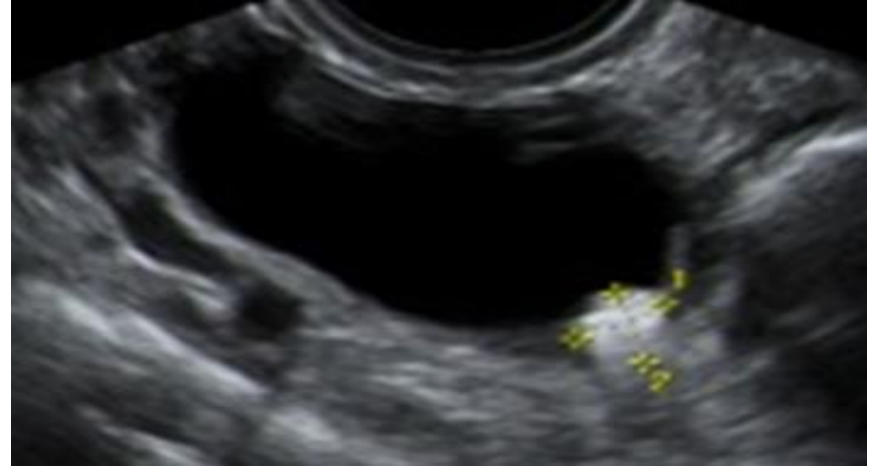
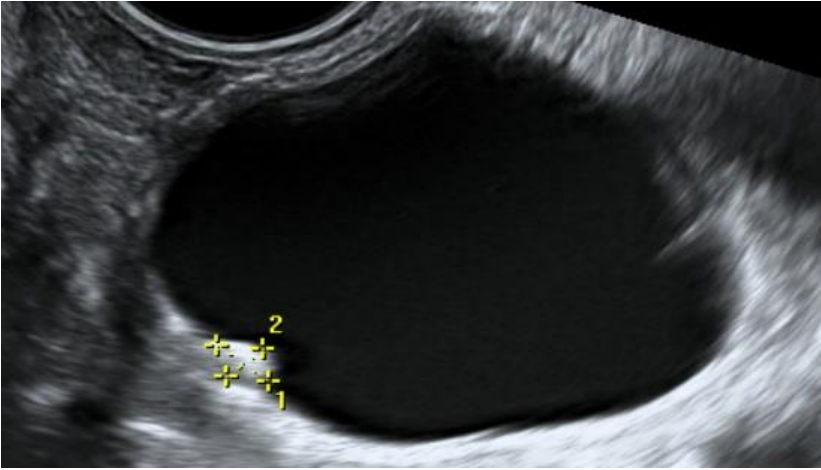


# IOTA definition of a papillary projection

- A papillary projection is any solid protrusion into the cyst cavity from the cyst wall with a height of  $\geq 3\text{mm}$
- Papillary projection = solid tissue

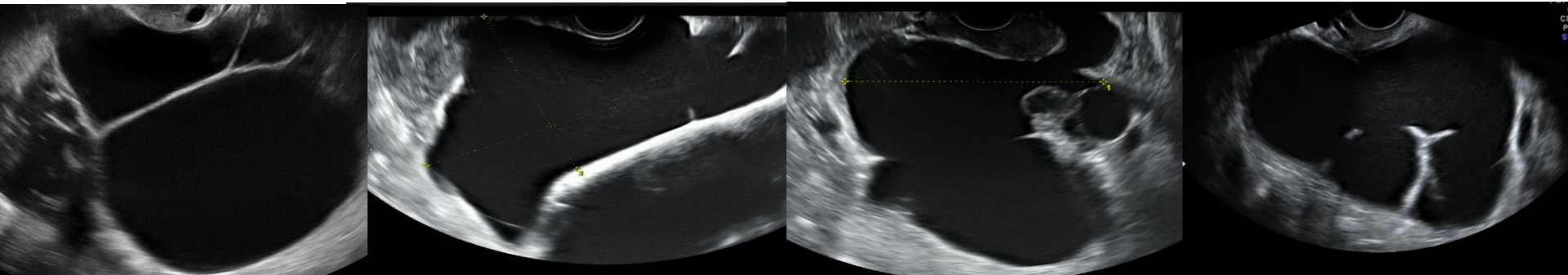


# A protrusion <3mm: cyst wall irregularity



# IOTA definition of septum and incomplete septum

- **Septum** = thin strand of tissue that runs from one internal cyst surface to another
- **Incomplete septum** = thin strand of tissue that does not reach the opposite wall of the cystic structure in some scanning planes (seen in diseased tubes)

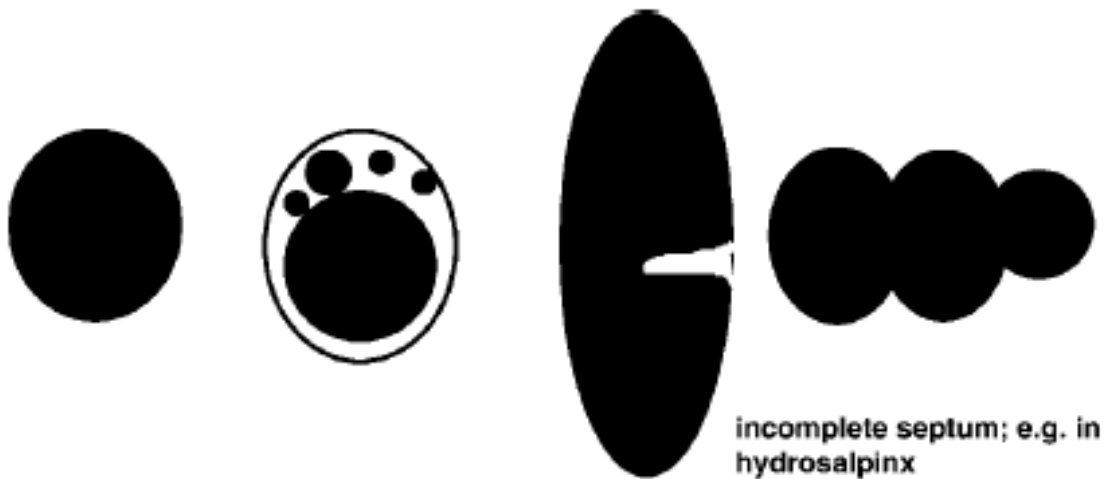


# Five types of lesions

- Unilocular
- Unilocular-solid
- Multilocular
- Multilocular-solid
- Solid



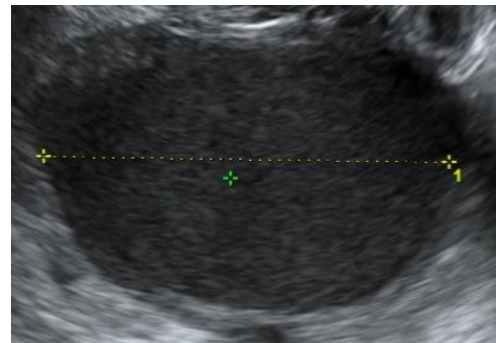
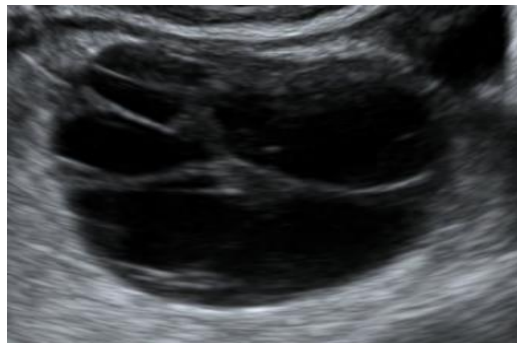
# Unilocular



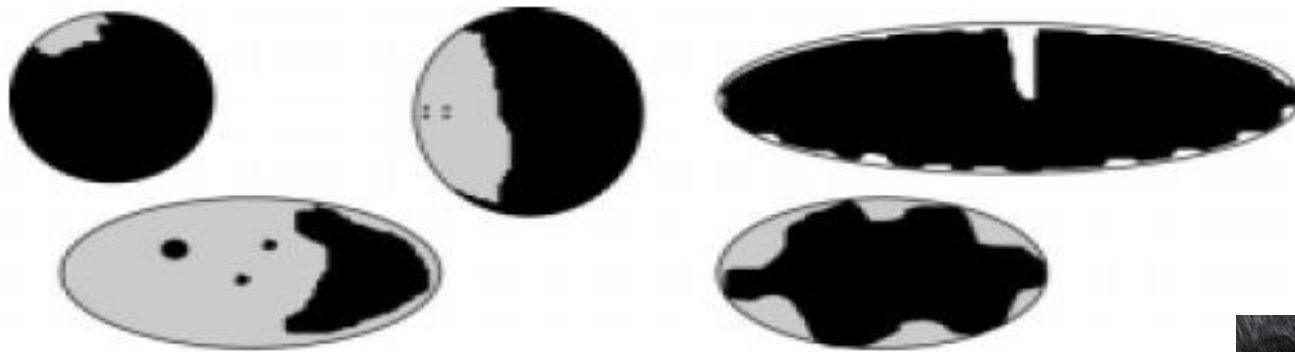
Timmerman et al. Ultrasound Obstet Gynecol 2000;16:500-5

# Definition of a unilocular cyst

- ONE cyst locule
- No septa
- No solid components
- Any type of cyst fluid

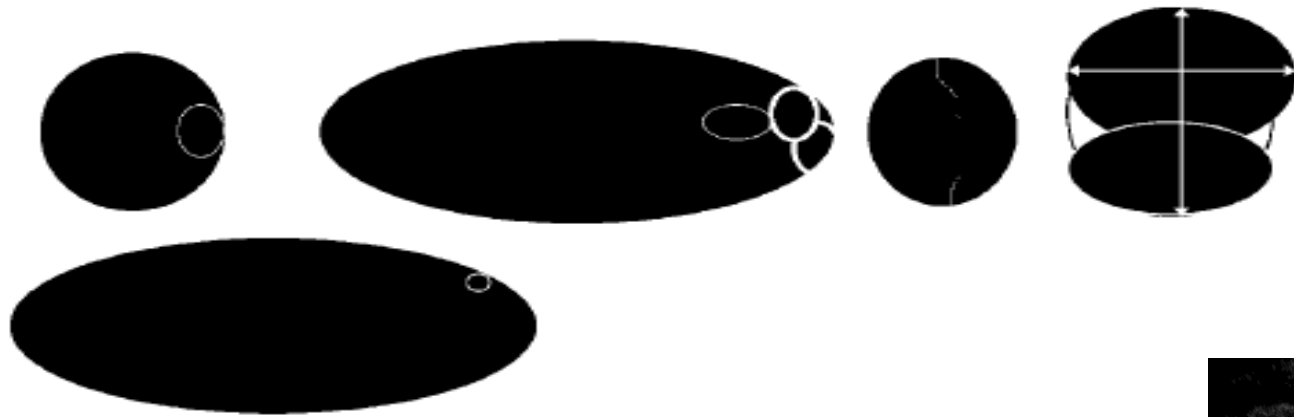


# Unilocular-solid



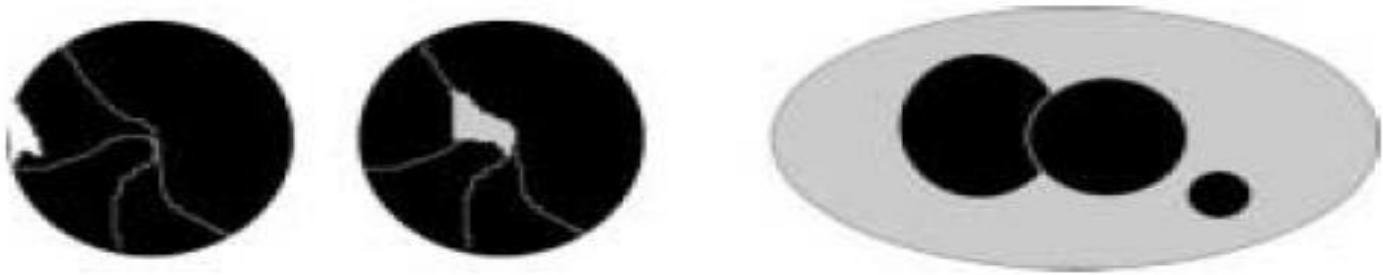
Timmerman et al. Ultrasound Obstet Gynecol 2000;16:500-5

# Multilocular



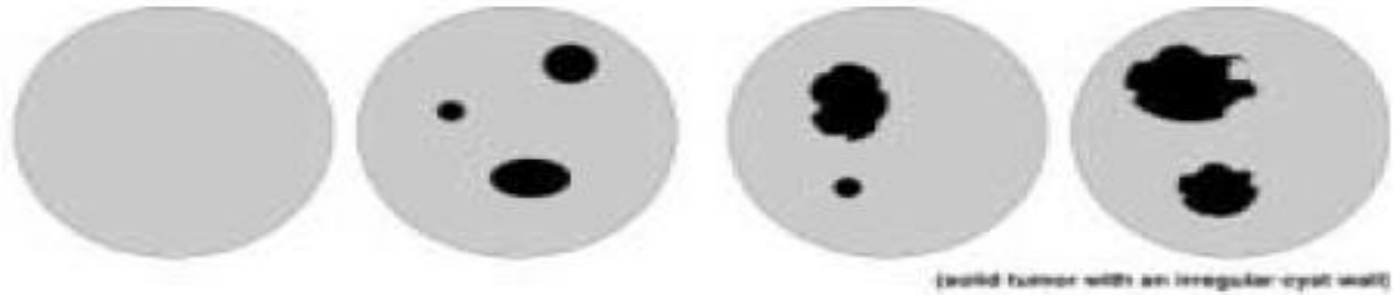
Timmerman et al. Ultrasound Obstet Gynecol 2000;16:500-5

# Multilocular-solid



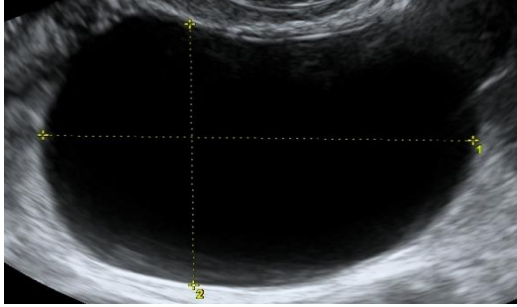
Timmerman et al. Ultrasound Obstet Gynecol 2000;16:500-5

# Solid

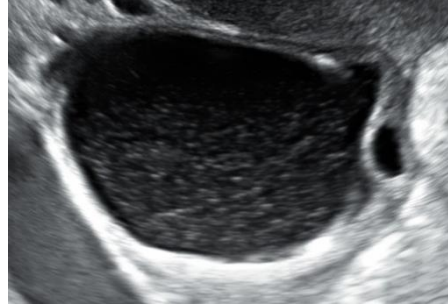


Timmerman et al. Ultrasound Obstet Gynecol 2000;16:500-5

# Five types of cyst content



Anechoic



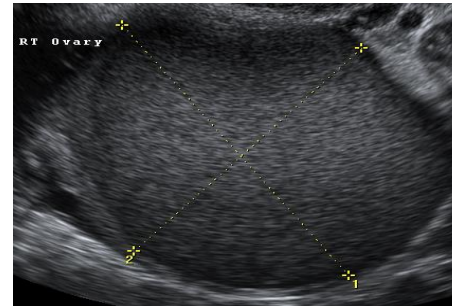
Low level



Hemorrhagic

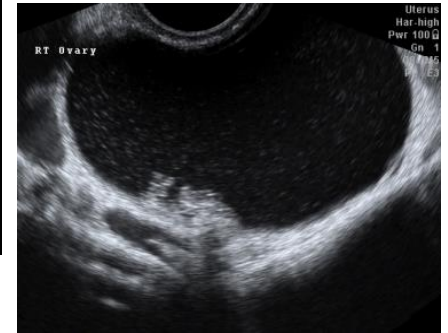


Mixed



Ground glass

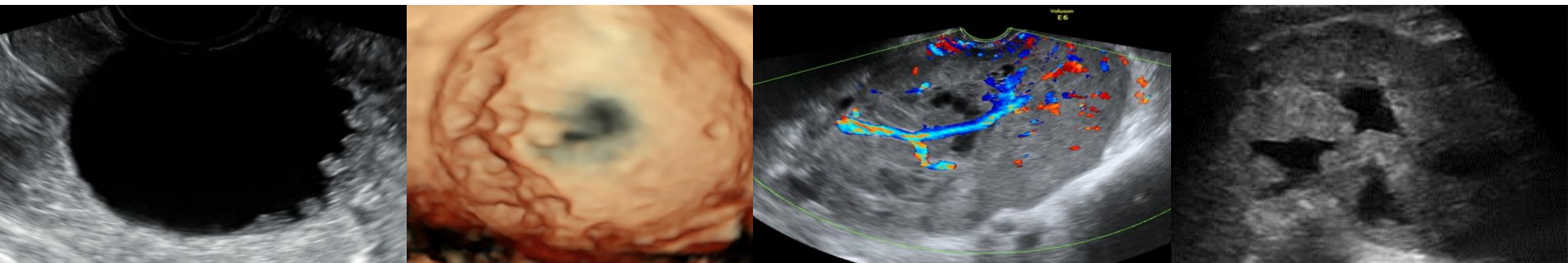
# Acoustic shadowing





# Irregular cyst wall

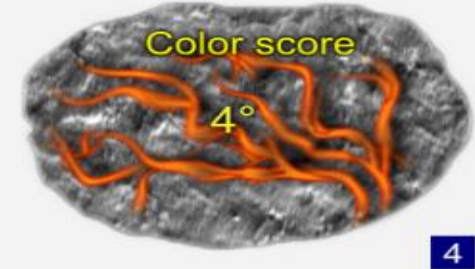
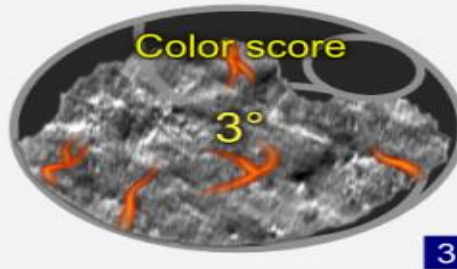
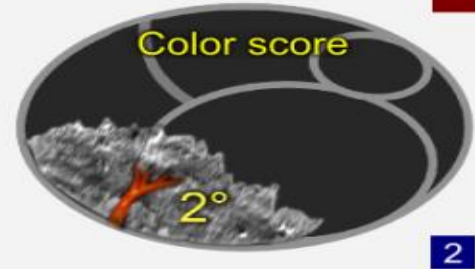
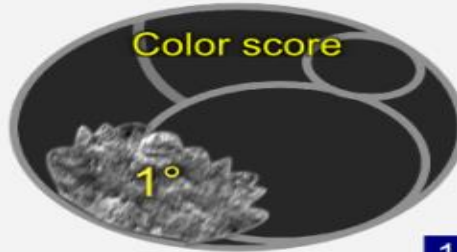
- Irregularity in the inner wall of a cyst
- Irregularity of outer contour of a solid tumor or irregularity of the inner wall of a cystic component in a solid tumor



# Color score

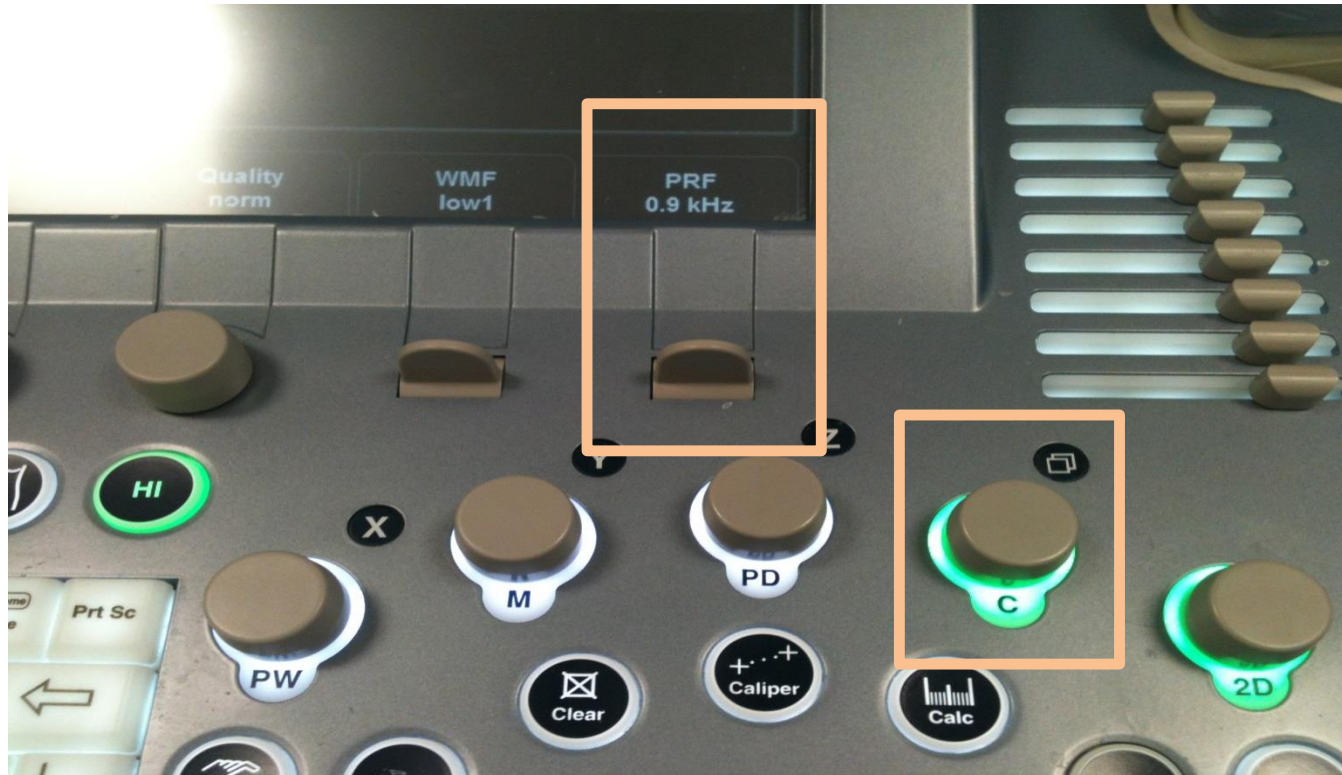
## Subjective assessment of blood flow

- 1 Color score of 1** is given when no blood flow within the septa, cyst walls, or solid tumor areas.
- 2 Color score of 2** is given when only minimal flow can be detected.
- 3 Color score of 3** is given when moderate flow is present.
- 4 Color score of 4** is given when the adnexal mass appears highly vascular with marked blood flow.



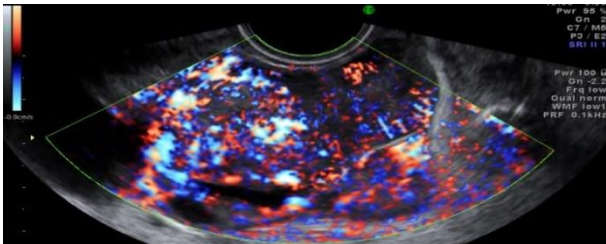
9

# Use of color or power Doppler

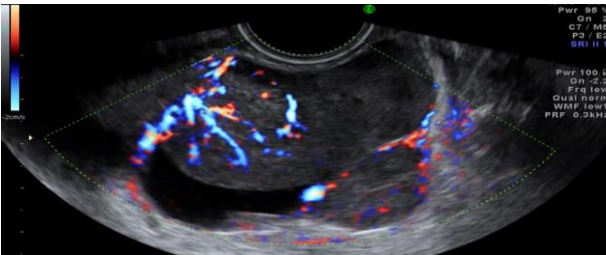


# Use of Pulse Repetition Frequency (PRF)

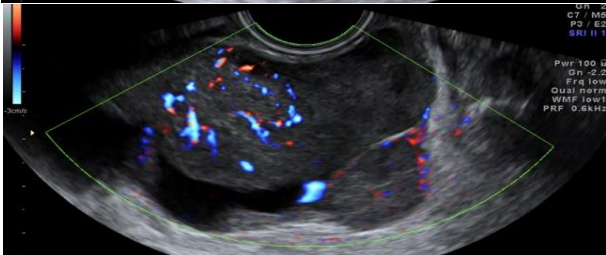
0.1



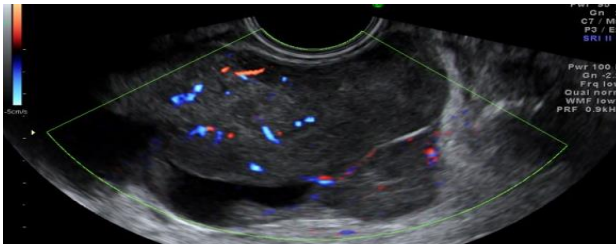
0.3



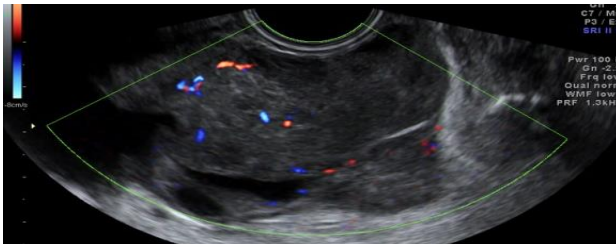
0.6



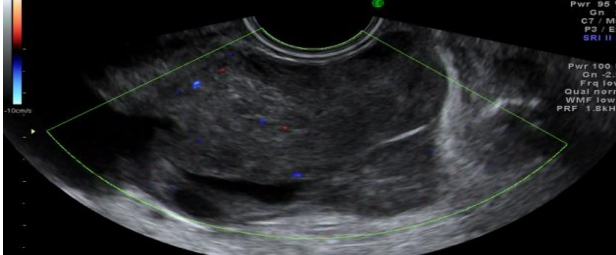
0.9



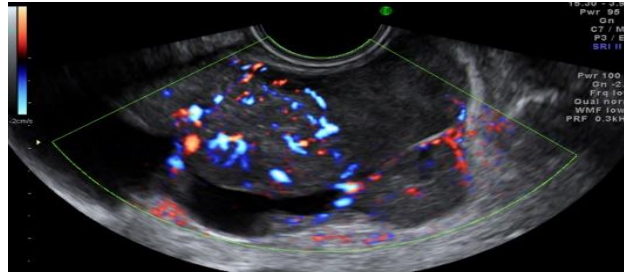
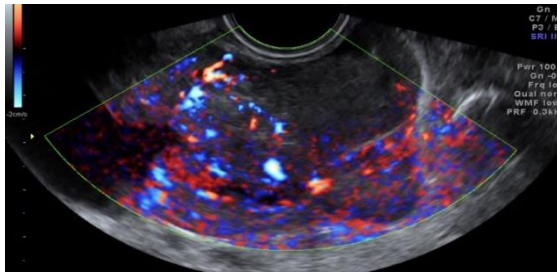
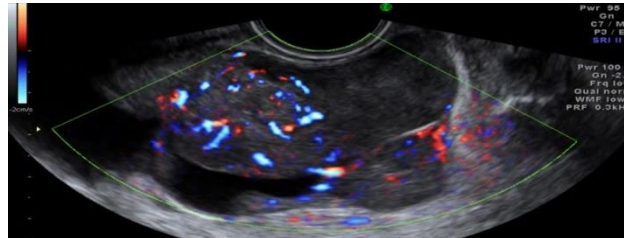
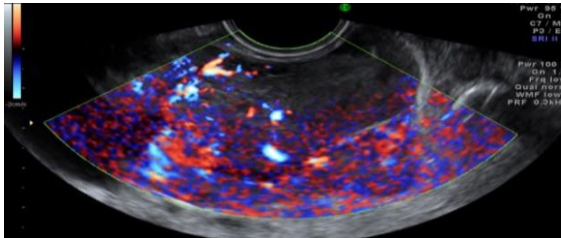
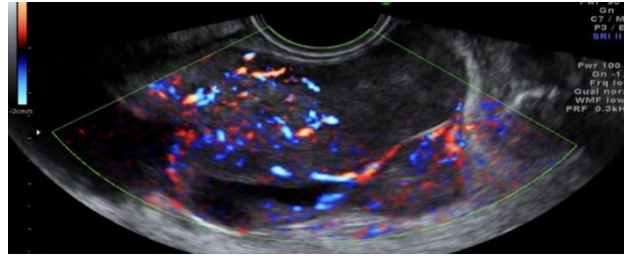
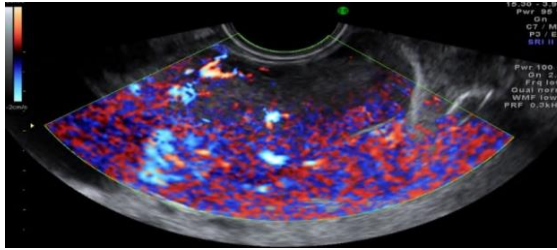
1.3



1.8



# PRF fixed at 0.3, lower GAIN...



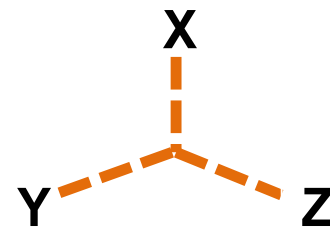
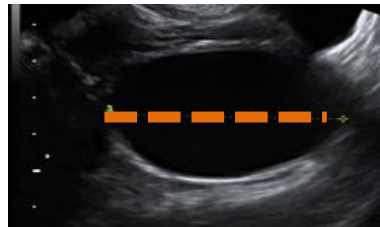
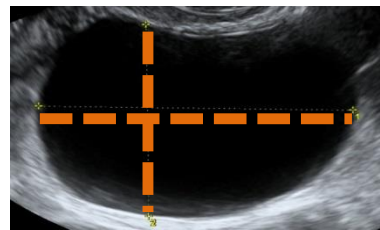
# Ascites

- Fluid outside the pouch of Douglas



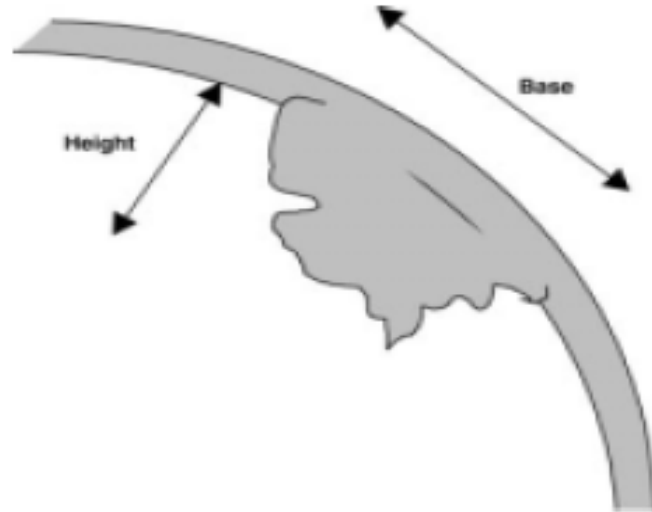
# How to measure an ovary, a lesion or a solid component in a lesion

- Three orthogonal diameters
- Where the lesion/ ovary/ solid component appears to be at its largest
  - Maximum diameter
  - Mean diameter
  - Volume: (L x D x W x 0.5)



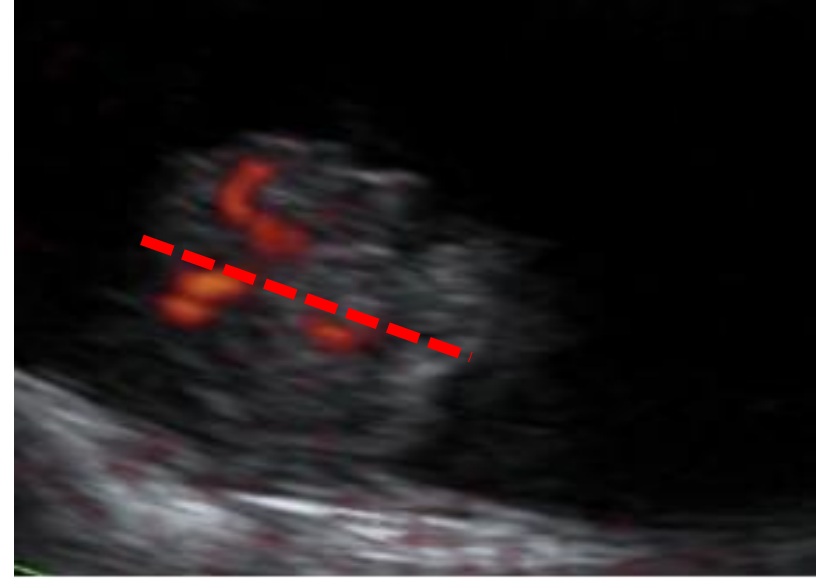
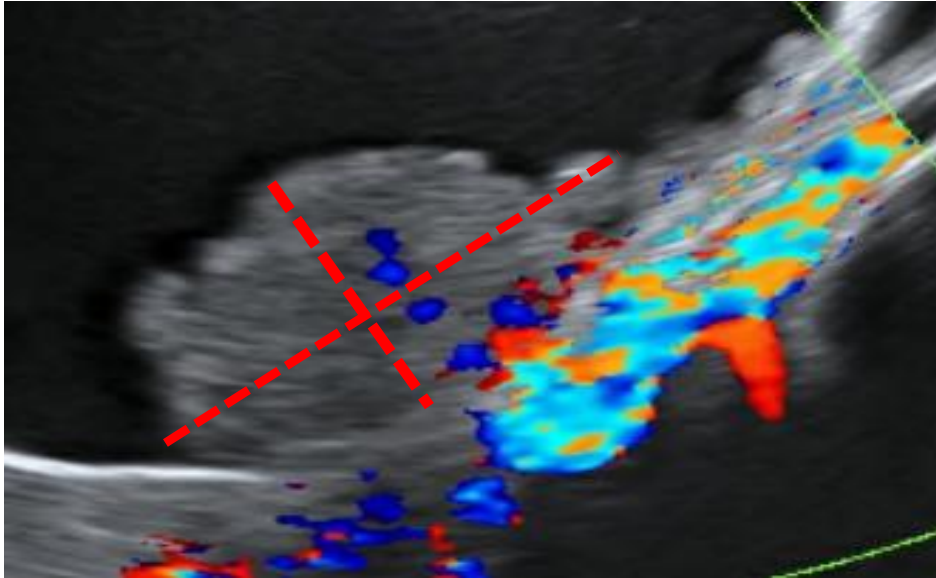
# How to measure a papillary projection

- All papillary projections are measured in two perpendicular planes: *height* and *base*

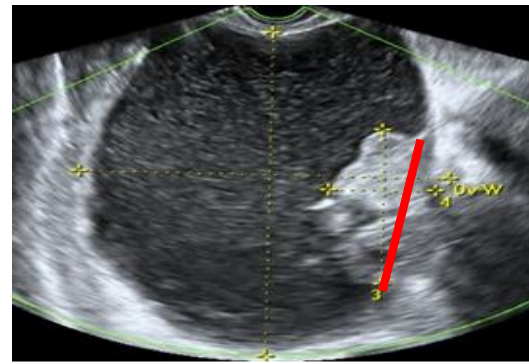
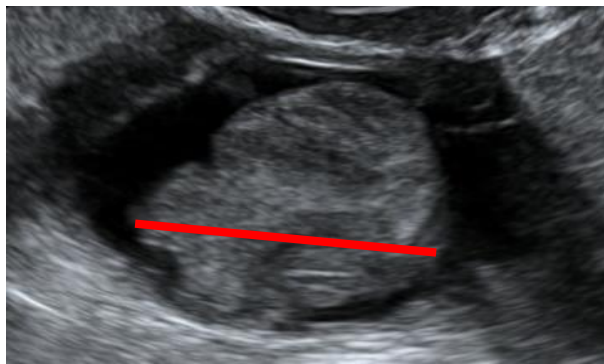
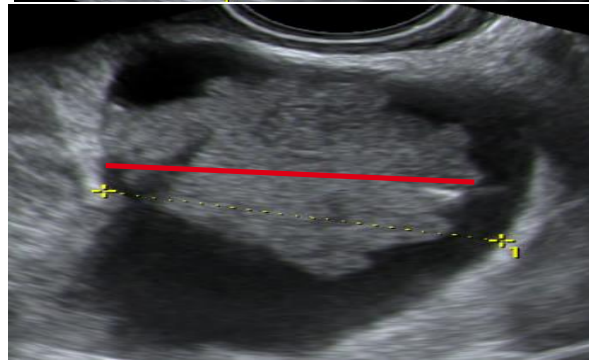
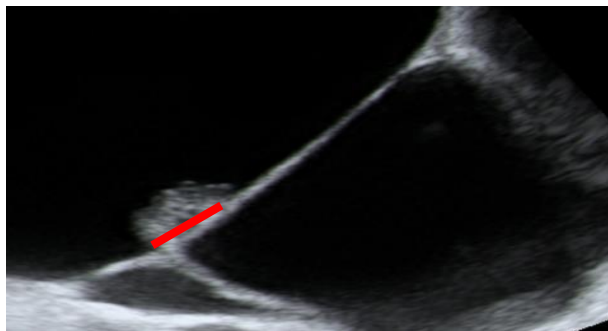
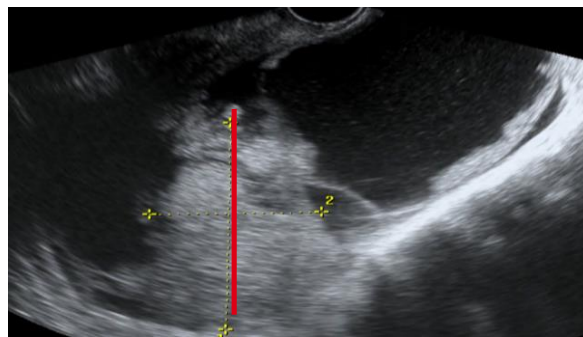




# How to measure a papillary projection



# Maximum diameter of largest solid component





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