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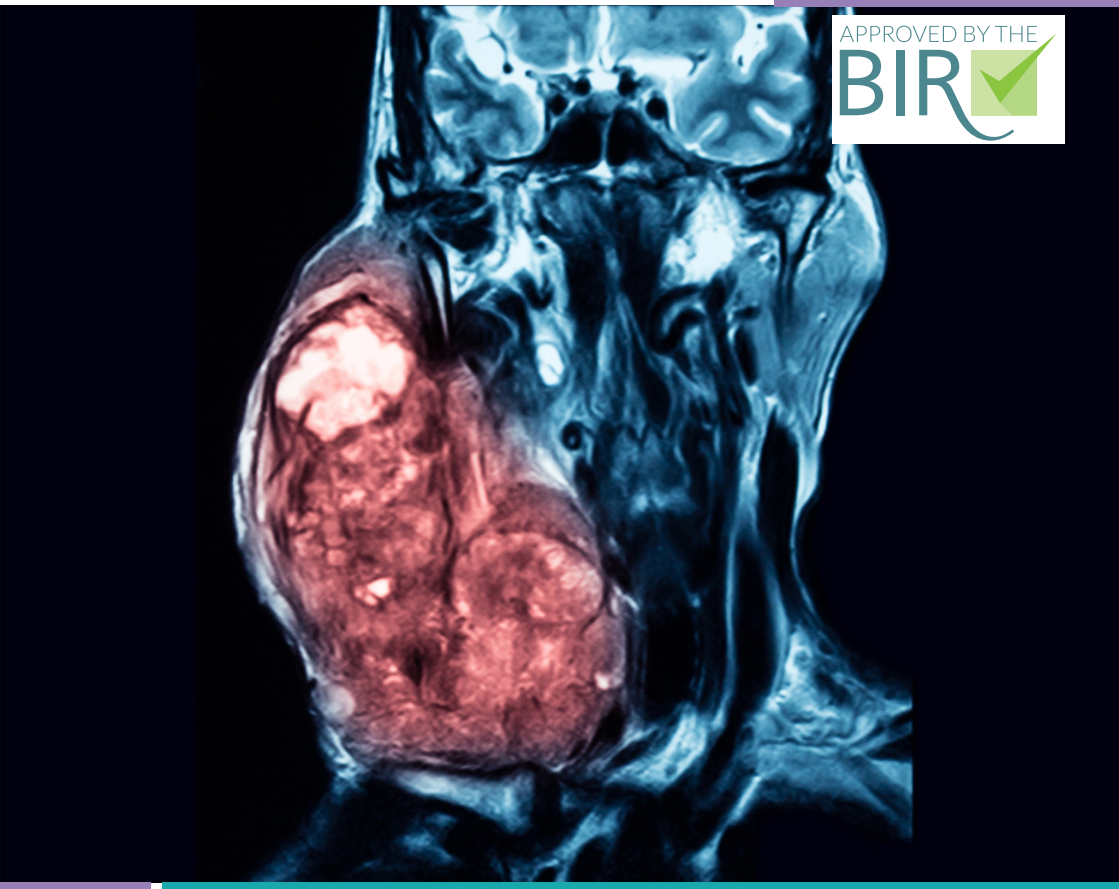

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Biographies

Dr Corinne Binns
Consultant Radiologist, Hull University Teaching Hospitals NHS Trust

After transferring from Manchester to complete her radiology training in Hull, Dr Binns was appointed as a Consultant in General Radiology with an interest in Head and Neck imaging in 2008, recently becoming the lead radiologist for head and neck imaging in Hull. With an emphasis on cancer imaging she is an active participant in Head and Neck and Skin MDT meetings. Dr Binns has also developed a complimentary interest in PET-CT reporting since working as a consultant.

Dr Brook Adams
Consultant Radiologist, York Teaching Hospitals NHS Foundation Trust

Dr Adams is a head and neck radiologist at York & Scarborough Teaching Hospitals. He trained at HYMS and studied medical physics and bioengineering at UCL before completing his medical and radiology training in Leeds. In 2019, he became a fellow of ESHNR. Locally, he is the clinical lead for MRI and chairs the neuroREALM meeting. As honorary senior lecturer for HYMS, he is involved in undergraduate teaching, teaching on the Leeds Academy program and delivering radiographer practitioner training. He has been a council member of the York Medical Society for several years, setting up a regional prize to showcase research in the region and has convened the Yorkshire Neuroradiology study day. Outside of work he enjoys travelling (preferably on a bicycle), badminton and singing.

Dr Reena Dwivedi
Consultant Neuroradiologist, NHS Lothian

Dr Reena Dwivedi is a Consultant Neuroradiologist with Head and Neck Interest, based at the Department for Clinical Neurosciences, Edinburgh (NHS Lothian).

Her medical career initially started with ENT specialist training in Liverpool, following which she developed a passion for radiology and completed her neuro/head and neck fellowship training in Oxford. She is a Trustee and educational lead for Worldwide Radiology, a charity aiming to improve access to diagnostic imaging particularly in low and middle income settings. She is also reading for an MSc in Global Health Policy with the London School of Hygiene and Tropical Medicine.

Biographies

Dr Raekha Kumar
Consultant Radiologist, West Hertfordshire Teaching Hospitals NHS Trust

Having graduated from Imperial College, subsequently obtaining my MRCP and FRCR, Dr Raekha Kumar completed her training in head and neck radiology at the London North West University NHS Trust. As a current consultant at West Hertfordshire Hospitals, she is in charge of developing and expanding the head and neck unit whilst part of the regional North West London head and neck cancer network. She has an established interest in research and education, having been involved with establishing the curriculum for an international medical school, presented at several national and international conferences, provided a webinar for the royal college of radiologists e-learning platform, published several papers and co-edited a textbook in 2021 related to head and neck imaging.

Dr Richard List
Consultant in Head and Neck and Neuroradiology, Hull University Teaching Hospitals NHS Trust

Dr Richard List undertook radiology training in Yorkshire before taking up his consultant post in 2017. He is a core member of the head and neck, thyroid and skull base MDTs in addition to other neuroradiology commitments. His areas of practice include MRI, ultrasound, fluoroscopy and CT of the head and neck.

Dr Ravi Lingam
Consultant Radiologist, Northwick Park Hospital

Currently a senior consultant radiologist and educational supervisor at London North West University Healthcare NHS Trust and Senior Clinical Lecturer Imperial College London, Dr Lingam is also the Vice President of the British Society of Head & Neck Imaging (BSHNI). He obtained the European Diploma in Head and Neck Imaging in 2013 and is a training centre tutor for the European School of Radiology (ESOR) foreign exchange fellowship in head and neck imaging and fellow and mentor of the ESHNR. He is also the head and neck radiology section editor for EJR and ACTA Radiologica journals.

Dr Lingam has many peer-reviewed publications in head and neck imaging and his main interest is in the imaging of the temporal bones. https://www.researchgate.net/profile/Ravi-Lingam

Biographies

Dr Elizabeth Loney
Associate Medical Director and Consultant Radiologist, Calderdale and Huddersfield NHS Foundation Trust

Dr Elizabeth Loney is Past President of the BSHNI and current Executive Committee member of the ESHNR. She also sits on its Education Committee and was recent co-organiser of its Head and Neck Masterclass in December 2021. Elizabeth loves teaching and has lectured widely in the UK and beyond. She reviews for 8 journals and was ECR Head and Neck Subcommittee Chair in 2021.

She is an elected Council Member and Trustee of the RCR and currently standing for President. She chairs the BIR Leadership and Management group and is a published member of the Faculty of Medical Leadership and Management.

Occasionally, she sees her family (!) and enjoys playing board games, horse riding and crafting.

Dr Nalinda Panditaratne
Consultant Radiologist, Mid Yorkshire Hospital NHS Trust

Dr Nalinda Panditaratne trained in clinical radiology in the Yorkshire deanery and has been a consultant head and neck and thoracic radiologist since 2012. He is currently working at Mid Yorkshire NHS Trust. He is the current organiser of this BSHNI refresher course and a member of the BSHNI council. He is regularly involved in local and national teaching and is a regular reviewer of head and neck articles for multiple journals.

Dr Derek Smith
Consultant Neuroradiologist, NHS Lothian

Dr Derek Smith is a Consultant Neuroradiologist working between Edinburgh and Fife in Scotland. His main interests include neuro-oncology and acute neck imaging, with further interests in teaching and training. He is on the editorial board of Radiopaedia.org.

Biographies

Dr Ram Vaidhyanath
Consultant Radiologist, University Hospitals of Leicester NHS Trust

Dr Ram Vaidhyanath is a Consultant Radiologist based at the University Hospitals of Leicester, UK and is a specialist in Head and Neck Imaging. He is a passionate teacher with an interest in Radiological Anatomy. He has published many peer-reviewed papers, book chapters as well as books. He was awarded a Visiting Professorship by The Royal College of Radiologists and is the first recipient of the British Society of Head and Neck Imaging Special Contribution Award in recognition of his outstanding services to BSHNI. He is an invited member of the International Committee of the American Society of Head and Neck Radiology.

Abstracts

Pharyngeal anatomy and imaging techniques
Dr Derek Smith

A run-through of anatomy from the choana to the glottis, highlighting important clinical and imaging review areas.

Education aims:

- Recognise important imaging landmarks in the nasopharynx, oropharynx and hypopharynx
- Appreciate potential routes of spread for disease along the pharynx and associated structures

Imaging nasopharyngeal pathology – top tips
Dr Corrine Binns

The talk will look at the role different modalities of imaging have in imaging of the nasopharynx, including the importance of identifying incidental or unexpected findings. Benign appearances will be considered. The talk will than focus on nasopharyngeal carcinoma, its presentation and patterns of spread and a detailed look at staging. Key differentials will be covered. The imaging features of skull base osteomyelitis and lymphoma will be discussed, with a brief look at other nasopharyngeal tumours.

Educational aims:

- To have an approach to nasopharyngeal imaging
- To be able to identify benign findings
- To understand the imaging features and staging of nasopharyngeal carcinoma
- To be aware of key differential diagnoses and discriminating factors

References and citations:

1. Peters B, De Cuyper K, Vanhoenacker FM. Pear-Shaped Lesion of the Fossa of Rosenmüller. Journal of the Belgian Society of Radiology. 2016;100(1):68. DOI: http://doi.org/10.5334/jbr-btr.921
2. Nasopharyngeal Mucosa and Adenoids:Appearance at MRI imaging KSSBhatia, AD King,AC Vlantis, AT Ahuja,GMTs Published online May 1 2012. Radiology vol 263 No2
3. Significance of Incidental Nasopharyngeal uptake on (18)F-FDG PET/CT:Patterns of Benign/ Physiologic Uptake and Differentiation from Malignancy. N Lee, LR Yoo, SY Park, H Yoon, Y Lee, JK Oh Nuc Med Mol Imaging 2015 Mar 49(1):11-18
4. Utility of (18)F-FDG PET/CT uptake patterns in Waldayer's ring for differentiating benign from malignant lesions lateral pharyngeal recess of the nasopharynx. Y-K Chen, C-T Su, K-H Chi, R-H Cheng, S-C Wang, C-H Hsu J Nucl Med, 2207 Jan;48(1):8-14

Abstracts

Further reading:

1. CT and MRI of Nasopharyngeal Cancer, AAKA Razek, A King. AJR 2012 198:11-18
2. Diagnosis of Skull Base Osteomyeliti, FA Janez, LQ Barriga, FR Lora. Radiographics vol 41 no1. Published Online: Jan 7
3. Skull Base Osteomyelitis:A Comprehensive Review, PR Chapman, G. Choudhary and A. Singhal AJNR Jan20 2021, DOI:https://doi.org/10.3174/ajnr.A7015

Oropharyngeal and hypopharyngeal pathology – pearls and pitfalls
Dr Elizabeth Loney

This presentation will not be an exhaustive (exhausting!) list of every pathology affecting the oro- and hypo- pharynx. Rather it will address two main topics- how to spot pathology and how to report it.

We will start by considering modalities and sequences and move onto how to logically approach a mass in these regions. What to look for that makes a difference, to clinicians and patients.

The main emphasis will be on the main pathology we encounter- SCC, with a brief mention of infection. However, the reporting principles are equally valid, whatever the pathological process. How has TNM 8 changed what we say in our reports? Can we spot HPV +ve and -ve disease before the pathologists?

In each area, pearls and pitfall will be considered.

Educational aims:
In relation to pathology of the oro- and hypo-pharynx:

- To consider which modalities to use and their strengths/ weakness
- To logically approach reporting pathology in these areas
- To revise relevant TNM staging
- To understand how pathology does, and doesn't, spread in these areas

References:

- Head and Neck Cancers- Major Changes in the AJCC 8th Edition Cancer Staging Manual- WM Lydiatt, SG Patel, B O'Sullivan et al . Ca Cancer J Clin 2017; 67:122-137
- Imaging of Head and Neck Cancer With CT, MRI, and US. Jacqueline C Junn, Karl A Soderlund, Christine M Glastonbury. Semin Nucl Med. 2021 Jan;51(1):3-12

Abstracts

Further reading:

- Evaluating oropharyngeal carcinoma with transcervical ultrasound, CT, and MRI- Farhoud Faraji, Stephanie F Coquia et al. Oral Oncol. 2018 Mar;78:177-185.
- Development and Validation of a Staging System for HPV-related oropharyngeal cancer by the International Collaboration on Oropharyngeal cancer Network for Staging (ICON-S): a multicentre cohort study. B O'Sullivan, SH Huang, J Su et al. The Lancet Oncology 2016; 17(4); 440-451
- 18F-FDG-PET/CT vs panendoscopy for the detection of synchronous primary tumours in patients with head and neck SCC. Haerle SK, Strobel K et al. Head Neck 2010; 32: 319-25
- Differences in Imaging Characteristics of HPV-positive and HPV-negative oropharyngeal cancers. A Blinded Matched-Pair Analysis. Cantrell SC, Peck BW et al. AJNR (2013) 34:2005-09
- Human Papillomavirus and Survival of Patients with Oropharyngeal Cancer- KK Ang, J Harris, R Wheeler et al. N Engl J Med 2010;363:24-35
- Dynamic contrast-enhanced MRI, Diffusion-weighted MRI and 18F-FDG PET/CT for the prediction of survival in oropharyngeal or hypopharyngeal squamous cell carcinoma treated with chemoradiation. Nh S-H, Liao C-T et al. Eur Radiol (2016) 26;4162-72
- 18 FDG PET and PET-CT for the detection of bone metastases in patients with head and neck cancer. A meta-analysis. Yi X, Fan M et al . J Med Imaging Radiat Oncol 2013;57:674-9
- Morphologic and topographic radiologic features of HPV-related and –unrelated oropharyngeal carcinoma. Chan MW, Yu E et al. Head Neck (2017) Aug;39(8):1524-34
- Screening for distant metastases in patients with head and neck cancer: is chest CT sufficient? Brouwer J, de Bree R et al. Laryngoscope 2005;115:1813-17
- Accuracy of whole-body PET and PET-CT in initial M staging of head and neck cancer; a meta-analysis. Xu GZ, Zhu XD et al. Head Neck 2011;33:87-94
- Cystic lymph node metastasis in patients with head and neck cancer: An HPV-associated phenomenon. Goldenberg D, Begum S et al. Head Neck 2008; 30(7):898-903
- Cystic nodal masses in Oropharyngeal Cancer: Relationship with HPV status and treatment failure patterns. Huang YH, Chih-Hua Y et al. PLoSONE 12(7) 2017

Laryngeal imaging
Dr Nalinda Panditaratne

Summary of tips for laryngeal image acquisition and interpretation.

Educational aims:

- CT protocols and reconstruction for laryngeal imaging
- Review basic laryngeal anatomy
- Staging tips based on anatomical site in the larynx

References:
- Shi J, Uyeda JW, Duran-Mendicuti A, Potter CA, Nunez DB. Multidetector CT of Laryngeal Injuries: Principles of Injury Recognition. Radiographics. 2019 May-Jun;39(3):879-892.
- Baugnon KL, Beitler JJ. Pitfalls in the staging of cancer of the laryngeal squamous cell carcinoma. Neuroimaging Clin N Am. 2013 Feb;23(1):81-105.
- Becker M, Zbären P, Casselman JW, Kohler R, Dulguerov P, Becker CD. Neoplastic invasion of laryngeal cartilage: reassessment of criteria for diagnosis at MR imaging. Radiology. 2008 Nov;249(2):551-9.
- Beale T, Twigg VM, Horta M, Morley S. High-Resolution Laryngeal US: Imaging Technique, Normal Anatomy, and Spectrum of Disease. Radiographics. 2020 May-Jun;40(3):775-790.
- Jones TM, De M, Foran B, Harrington K, Mortimore S. Laryngeal cancer: United Kingdom National Multidisciplinary guidelines. J Laryngol Otol. 2016 May;130(S2):S75-S82.

Anatomy of the paranasal sinuses and anterior skull base
Dr Brook Adams

A review of paranasal sinus and anterior skull base anatomy.

Educational aims:
- Review basic paranasal sinus and anterior skull base anatomy
- Explore the embryology of the ethmoid bone
- Understand detailed air cell anatomy and variants
- What anatomy does the sinus surgeon want to know?

References:
- Danielsen A, Olofsson J. Endoscopic endonasal sinus surgery: a review of 18 years of practice and long-term follow-up. Eur Arch Otorhinolaryngol 2006;263(12):1087–1098.
- Souza SA, Souza MM, Gregório LC, Ajzen. S. Anterior ethmoidal artery evaluation on coronal CT scans. Rev Bras Otorrinolaringol (Engl Ed) 2009;75(1):101–106.
- Keros P. On the practical value of differences in the level of the lamina cribrosa of the ethmoid [in German]. Z Laryngol Rhinol Otol 1962;41:809–813.
- Dessi P, Moulin G, Triglia JM, Zanaret M, Cannoni M. Difference in the height of the right and left ethmoidal roofs A possible risk factor for ethmoidal surgery Prospective study of 150 CT scans. J Laryngol Otol. 1994;108:261.
- Stammberger HR, Kennedy DW Anatomic Terminology Group. Paranasal sinus: Anatomic terminology and nomenclature. The anatomic terminology group. Ann Otol Rhinol Laryngol. 1995;167:7–16.
- Howard Levine, MC. Sinus Surgery: Endoscopic and Microscopic Approaches. 2004: Thieme. Michael Schunke, ES. PROMETHEUS LernAtras Anatomie. First Japanese edition ed. 2009: Thieme.
- T. Hiyama, M. Shiigai et al. The ethmoid bone: clinical imaging anatomy from an

embryological point of view. ECR 2013. C-2208
- William T. O'Brien, Sr , Stefan Hamelin, Erik K. Weitzel The Preoperative Sinus CT: Avoiding a "CLOSE" Call with Surgical Complications Radiology 281:1, 10-21.

Further reading:
- William T. O'Brien, Sr , Stefan Hamelin, Erik K. Weitzel The Preoperative Sinus CT: Avoiding a "CLOSE" Call with Surgical Complications Radiology 281:1, 10-21.

External ear and middle ear – optimal evaluation of common pathologies
Dr Ravi Lingam

The presentation will cover the imaging of common external and middle ear pathologies, focussing on infections, their sequelae and complications.

Educational aims:
- To explore common indications for imaging the external ear and middle ear, principally infection and conductive hearing loss
- To appreciate how imaging supplements clinical evaluation in the management of these pathologies
- To understand which imaging modality/protocol to use and why
- To appreciate the cardinal and subtle imaging signs of various entities discussed

References:
- Inflammation of the Temporal Bone. Lingam RK, Kumar R, Vaidhyanath R .Neuroimaging Clin N Am. 2019 Feb;29(1):1-17.
- Conductive hearing loss with a "dry middle ear cleft"-A comprehensive pictorial review with CT. Nguyen T, Pulickal G, Singh A, Lingam R. Eur J Radiol. 2019 Jan;110:74-80
- Non-echoplanar diffusion weighted imaging in the detection of post-operative middle ear cholesteatoma: navigating beyond the pitfalls to find the pearl. Lingam RK, Nash R, Majithia A, Kalan A, Singh A. Insights Imaging. 2016 Oct;7(5):669-78.
- The role of imaging in the diagnosis and management of otosclerosis. Virk JS, Singh A, Lingam RK. Otol Neurotol. 2013 Sep;34(7):e55-60.
- Imaging of Acute and Chronic Skull Base Infection. Vaidyanathan S, Lingam RK. Neuroimaging Clin N Am. 2021 Nov;31(4):571-598.
- Staging primary middle ear cholesteatoma with non-echoplanar (half-Fourier-acquisition single-shot turbo-spin-echo) diffusion-weighted magnetic resonance imaging helps plan surgery in 22 patients: our experience. Majithia A, Lingam RK, Nash R, Khemani S, Kalan A, Singh A. Clin Otolaryngol. 2012 Aug;37(4):325-30.
- The utility of computed tomography and diffusion-weighted magnetic resonance imaging fusion in cholesteatoma: illustration with a UK case series. Hall A, St Leger D, Singh A, Lingam RK. J Laryngol Otol. 2020 Jan 8:1-6.

Abstracts

- Radiological imaging of cholesteatoma. January 2010. Otorhinolaryngologist 3(2):69-77

Further reading:
- MRI in otology: applications in cholesteatoma and Ménière's disease. Lingam RK, Connor SEJ, Casselman JW, Beale T. Clin Radiol. 2018 Jan;73(1):35-44.
- Apparent diffusion coefficients for detection of postoperative middle ear cholesteatoma on non-echo-planar diffusion-weighted images. Lingam RK, Khatri P, Hughes J, Singh A. Radiology. 2013 Nov;269(2):504-10.

Workshop A – Pharynx / Larynx
Dr Raekha Kumar

This workshop aims to provide a selection of interesting head and neck cases highlighting some of the common pathologies encountered in imaging the pharynx (nasopharynx, oropharynx and hypopharynx) and larynx. This will include benign conditions which general and head and neck radiologists frequently confront as well as common malignancies. Given the topic is wide, the presentation will be focused on select cases, with key tips and learning points from each case. In order to maintain an interactive element, there will be questions embedded within the talk for the audience.

Educational aims:
- Use of CT and MRI in head and neck imaging
- Recognise benign and malignant pathology
- Review potential pitfalls
- Discuss staging of malignancies

Workshop C – Temporal bone
Dr Richard List

A selection of cases illustrating issues related to imaging of the temporal bone.

Educational aims:
- To reflect on real life cases and apply knowledge to practice
- To consider various pathologies and surgical considerations in the temporal bone.

Abstracts

References:

- Caldemeyer KS, Mathews VP, Azzarelli B, Smith RR: The jugular foramen: a review of anatomy, masses, and imaging characteristics. Radiographics. 17 (5):1123-1139 1997 9308106
- Overton SB, Ritter FN: A high placed jugular bulb in the middle ear: a clinical and temporal bone study. Laryngoscope. 83 (12):1986-1991 1973 4772103
- Foramen Tympanicum, or Foramen of Huschke: Pathologic Cases and Anatomic CT Study Alexis Lacout, Kathlyn Marsot-Dupuch, Wendy R. K. Smoker, Pierre Lasjaunias American Journal of Neuroradiology Jun 2005, 26 (6) 1317-1323;
- van Kroonenburgh AMJL, van der Meer WL, Bothof RJP, van Tilburg M, van Tongeren J, Postma AA. Advanced Imaging Techniques in Skull Base Osteomyelitis Due to Malignant Otitis Externa. Curr Radiol Rep. 2018;6(1):3. doi:10.1007/s40134-018-0263-y
- Juliano AF. Cross Sectional Imaging of the Ear and Temporal Bone. Head Neck Pathol. 2018;12(3):302-320. doi:10.1007/s12105-018-0901-y

Further reading:

- Caldemeyer KS, Mathews VP, Azzarelli B, Smith RR: The jugular foramen: a review of anatomy, masses, and imaging characteristics. Radiographics. 17 (5):1123-1139 1997 9308106

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Virtual event

CPD: 5 credits

09:15	**Welcome and introduction** Dr Nalinda Panditaratne, Consultant Radiologist, Mid Yorkshire Hospital NHS Trust
	Session 1: Imaging the pharynx Dr David Summers, Consultant Neuroradiologist, Western General Hospital
09:30	**Pharyngeal anatomy and imaging techniques** Dr Derek Smith, Neuroradiologist, NHS Lothian
09:50	**Imaging nasopharyngeal pathology – top tips** Dr Corrine Binns, Consultant Radiologist, Hull University Teaching Hospitals NHS Trust
10:10	**Oropharyngeal and hypopharyngeal pathology – pearls and pitfalls** Dr Elizabeth Loney, Associate Medical Director and Consultant Radiologist, Calderdale and Huddersfield NHS Foundation Trust
10:30	**Panel discussion**
10:45	**Refreshments**
	Session 2: Larynx and sinonasal imaging Dr Sriram Vaidyanathan, Consultant Radiologist, Leeds Teaching Hospitals NHS Trust
11:00	**Laryngeal imaging** Dr Nalinda Panditaratne, Consultant Radiologist, Mid Yorkshire Hospital NHS Trust
11:20	**Anatomy of the paranasal sinuses and anterior skull base** Dr Brook Adams, Consultant Radiologist, York Teaching Hospitals NHS Foundation Trust
11:40	**Sinus pathology – when it isn't just a polyp** Dr Gitta Madani, Consultant Radiologist, Imperial College Healthcare NHS Trust
12:00	**Panel discussion**
12:15	**Lunch**

This course provides 5 CPD credits in accordance with the CPD Scheme of the Royal College of Radiologists

11 FEBRUARY 2022

	Session 3: Temporal bone imaging Dr Ram Vaidhyanath, Consultant Radiologist, University Hospitals of Leicester NHS Trust
12:45	**Inner ear, IAM and CPA – essential anatomy and common pathologies** Dr Gillian Potter, Consultant Neuroradiologist, Manchester University NHS Foundation Trust
13:05	**External ear, middle ear and ossicles – essential anatomy** Dr Alex Weller, Consultant Radiologist, St George's Univeristy Hospitals NHS Foundation Trust
13:25	**External ear and middle ear – optimal evaluation of common pathologies** Dr Ravi Lingam, Consultant Radiologist, Northwick Park Hospital
13:45	**Panel discussion**
14:00	**Announcement of poster prize winners**
14:05	**Refreshments**
	Interactive workshop Workshop A: Pharynx / Larynx , Dr Raekha Kumar Workshop B: Sinonasal, Dr Reena Dwivedi Workshop C: Temporal bone, Dr Richard List
14:15	**Workshop A**
14:45	**Workshop B**
15:15	**Workshop C**
15:45	**Close of event**

Programme organiser

Dr Nalinda Panditaratne, Consultant Radiologist, Mid Yorkshire Hospital NHS Trust

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