

Bonopty®

C1-C2 CT-guided biopsy

Case history

58 year old male with a history of squamous cell carcinoma of the buccal mucosa. One year after radiation therapy, the CT follow-up revealed C2 basilar invagination and erosive process of C1-C2. Differential diagnosis included tumor recurrence, infection, and radiation necrosis.

Biopsy details

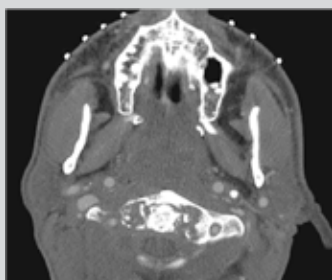
After analysis of “vascular roadmap” a 22G 15 cm spinal needle K-wire was inserted. The Bonopty® Biopsy Set 14G coaxial cannula was placed over the K-wire. A 16G core biopsy and FNA was obtained.

Analysis of the sample

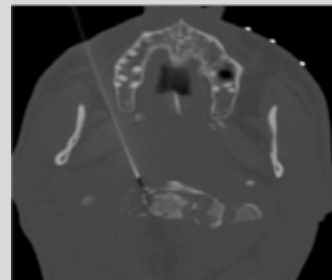
Microbiological culture of the sample grew streptococcus agalactiae, indicating osteomyelitis.

Comments

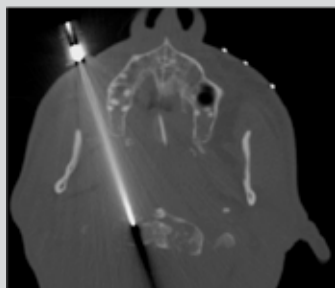
The small caliber and the light-weight design of the Bonopty® biopsy cannula, together with the possibility of operating coaxially, was ideal in this delicate anatomical environment.



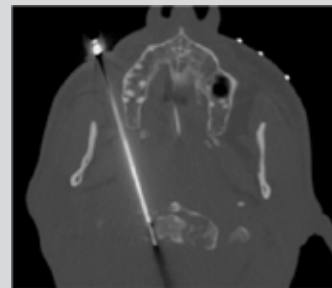
Vascular roadmap.



22G 15 cm spinal needle K-wire.



Penetration cannula placed over K-wire.



Final dx: streptococcus.

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