



Clinical-Medical Image

ENT and Head-Neck Imaging: Diagnostic Patterns and Correlations

Joon-Ho Park*

Department of Head and Neck Imaging, Han River Medical Institute, Seoul, South Korea

Short Communication

Imaging of the Ear, Nose, Throat (ENT) and head-neck region plays a crucial role in diagnosing a wide spectrum of conditions ranging from inflammatory diseases to tumors and congenital anomalies. Because of the intricate anatomy and overlapping structures in this region, radiologic evaluation requires careful interpretation and correlation with clinical findings. CT and MRI is the cornerstone imaging modalities. CT excels in depicting bony anatomy and sinus pathology, while MRI provides superior soft tissue contrast for assessing lesions of the salivary glands, neck spaces and cranial nerves. A problem-solving approach that integrates imaging patterns with anatomical landmarks and clinical symptoms helps in narrowing differential diagnoses and improving diagnostic accuracy.

Understanding characteristic imaging features is particularly important in differentiating benign from malignant head and neck lesions. For instance, asymmetric enhancement patterns on MRI or bone erosion on CT may suggest neoplastic involvement, while well-defined fluid collections are typical of inflammatory processes. The correlation of imaging findings with endoscopic and histopathologic data ensures comprehensive evaluation and guides therapeutic planning. Advances in image fusion, diffusion imaging and AI-based pattern recognition continue to enhance diagnostic precision, enabling early detection, accurate staging and tailored treatment strategies for patients with ENT and head-neck disorders [1].

Recent advancements in imaging technology have revolutionized the evaluation of ENT and head-neck disorders, providing clinicians with unparalleled diagnostic clarity. High-resolution CT and 3D MRI reconstructions now enable detailed visualization of minute anatomical structures, such as the ossicles, cochlea and paranasal sinus drainage pathways. These developments are particularly useful in preoperative mapping for sinus surgery, cochlear implantation, or skull base tumor resection. For thyroid and salivary gland disorders, contrast-enhanced ultrasound and elastography are emerging as non-invasive tools that provide valuable information on tissue stiffness and vascularity, supporting early and accurate diagnosis.

The future of ENT and head-neck imaging lies in the integration of artificial intelligence, radiomics and molecular imaging. AI-driven algorithms are increasingly being used to automatically segment anatomical regions, detect subtle abnormalities and predict disease behavior based on quantitative image features. Radiogenomic correlations linking imaging biomarkers with genetic alterations are opening new pathways for precision diagnosis and personalized therapy in head and neck oncology. Additionally, hybrid modalities such as PET/MRI are combining functional and structural imaging to assess both anatomy and metabolic activity in a single scan. These innovations not only enhance diagnostic accuracy but also improve patient outcomes through better treatment planning, early disease monitoring and reduced exposure to invasive procedures [2].

Keywords: Head and neck imaging, Diagnostic radiology, ENT pathology

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Conflict of Interest

None.

References

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*Corresponding author: Joon-Ho Park, Department of Head and Neck Imaging, Han River Medical Institute, Seoul, South Korea, Email: jh.park@hanriver.ac.kr

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