Magnetic Resonance Imaging (MRI) – Dynamic Pelvic Floor

Dynamic pelvic floor magnetic resonance imaging (MRI) is a noninvasive test that uses a powerful magnetic field, radio waves and a computer to produce detailed pictures of the pelvic floor, a network of muscles that stretches between the pubic bone and spine and the abdominal organs it supports. It is used to obtain information about the pelvic floor’s structure and the function of the muscles within it and to identify any abnormalities or damage.

Tell your doctor about any health problems, recent surgeries or allergies and whether there’s a possibility you are pregnant. The magnetic field is not harmful, but it may cause some medical devices to malfunction. Most orthopedic implants pose no risk, but you should always tell the technologist if you have any devices or metal in your body. Guidelines about eating and drinking before your exam vary between facilities. Unless you are told otherwise, take your regular medications as usual. Leave jewelry at home and wear loose, comfortable clothing. You may be asked to wear a gown. If you have claustrophobia or anxiety, you may want to ask your doctor for a mild sedative prior to the exam.

What is dynamic pelvic floor MRI?

Magnetic resonance imaging (MRI) is a noninvasive medical test that physicians use to diagnose medical conditions.

MRI uses a powerful magnetic field, radio frequency pulses and a computer to produce detailed pictures of organs, soft tissues, bone and virtually all other internal body structures. MRI does not use ionizing radiation (x-rays).

Detailed MR images allow physicians to evaluate various parts of the body and determine the presence of certain diseases. The images can then be examined on a computer monitor, transmitted electronically,
Dynamic pelvic floor MRI provides detailed pictures of the pelvic floor, a network of muscles that stretches between the pubic bone and spine, and the abdominal organs it supports, including three distinct areas or compartments:

- the anterior (front) compartment, including the bladder and urethra
- the middle compartment, including the vagina, cervix and uterus
- the posterior (rear) compartment which includes the rectum.

During dynamic pelvic floor MRI, images are obtained while the patient is contracting or squeezing the pelvic muscles and while the pelvic muscles are relaxed.

What are some common uses of the procedure?

Physicians use dynamic pelvic floor MRI to:

- obtain information about the structure of the pelvic floor and how well the pelvic muscles are working
- determine which compartments of the pelvis are damaged and to help identify specific pelvic muscle defects
- provide information for surgical and treatment planning
- diagnose pelvic floor dysfunction (also called pelvic floor disorders), including:
  - one or more of the pelvic organs falling out of position (a condition called prolapse).
  - the stretching or tearing of the pelvic floor which may cause urinary incontinence, fecal incontinence, pelvic pain and/or constipation.

How should I prepare?

You may be asked to wear a gown during the exam or you may be allowed to wear your own clothing if it is loose-fitting and has no metal fasteners.

Guidelines about eating and drinking before an MRI exam vary with the specific exam and with the imaging facility. Unless you are told otherwise, you may follow your regular daily routine and take food and medications as usual.

Some MRI examinations may require you to receive an injection of contrast material into the bloodstream. The radiologist, technologist or a nurse may ask if you have allergies of any kind, such as an allergy to iodine or x-ray contrast material, drugs, food, or the environment, or if you have asthma. The contrast material most commonly used for an MRI exam contains a metal called gadolinium. Gadolinium can be used in patients with iodine contrast allergy. It is far less common for a patient to have an allergy to a gadolinium-based contrast agent used for MRI than the iodine-containing contrast for CT. However, even if it is known that the patient has an allergy to the gadolinium contrast, it may still be possible to use it after appropriate pre-medication. Patient consent will be requested in this instance. For more information on adverse reactions to gadolinium-based contrast agents, please consult the ACR Manual on Magnetic Resonance Imaging (MRI) – Dynamic Pelvic Floor.
Contrast Media

You should also let the radiologist know if you have any serious health problems, or if you have had any recent surgeries. Some conditions, such as severe kidney disease, may prevent you from being given gadolinium contrast for an MRI. If you have a history of kidney disease or liver transplant, it will be necessary to perform a blood test to determine whether the kidneys are functioning adequately.

Women should always inform their physician or technologist if there is any possibility that they are pregnant. MRI has been used for scanning patients since the 1980s with no reports of any ill effects on pregnant women or their unborn babies. However, because the unborn baby will be in a strong magnetic field, pregnant women should not have this exam in the first three to four months of pregnancy unless the potential benefit from the MRI exam is assumed to outweigh the potential risks. Pregnant women should not receive injections of gadolinium contrast material except when absolutely necessary for medical treatment. See the MRI Safety page for more information about pregnancy and MRI.

If you have claustrophobia (fear of enclosed spaces) or anxiety, you may want to ask your physician for a prescription for a mild sedative prior to your scheduled examination.

Jewelry and other accessories should be left at home, if possible, or removed prior to the MRI scan. Because they can interfere with the magnetic field of the MRI unit, metal and electronic items are not allowed in the exam room. In addition to affecting the MRI images, these objects can become projectiles within the MRI scanner room and may cause you and/or others nearby harm. These items include:

- jewelry, watches, credit cards and hearing aids, all of which can be damaged
- pins, hairpins, metal zippers and similar metallic items, which can distort MRI images
- removable dental work
- pens, pocket knives and eyeglasses
- body piercings

In most cases, an MRI exam is safe for patients with metal implants, except for a few types. People with the following implants cannot be scanned and should not enter the MRI scanning area:

- cochlear (ear) implant
- some types of clips used for brain aneurysms
- some types of metal coils placed within blood vessels
- nearly all cardiac defibrillators and pacemakers

You should tell the technologist if you have medical or electronic devices in your body. These objects may interfere with the exam or potentially pose a risk, depending on their nature and the strength of the MRI magnet. Many implanted devices will have a pamphlet explaining the MRI risks for that particular device. If you have the pamphlet, it is useful to bring that to the attention of the scheduler before the exam and bring it to your exam in case the radiologist or technologist has any questions. Some implanted devices require a short period of time after placement (usually six weeks) before being safe for MRI examinations. Examples include but are not limited to:

- artificial heart valves
- implanted drug infusion ports
- artificial limbs or metallic joint prostheses
- implanted nerve stimulators
• metal pins, screws, plates, stents or surgical staples

If there is any question of their presence, an x-ray may be taken to detect and identify any metal objects. In general, metal objects used in orthopedic surgery pose no risk during MRI. However, a recently placed artificial joint may require the use of another imaging procedure.

Patients who might have metal objects in certain parts of their bodies may also require an x-ray prior to an MRI. You should notify the technologist or radiologist of any shrapnel, bullets, or other pieces of metal that may be present in your body due to prior accidents. Foreign bodies near and especially lodged in the eyes are particularly important because they may move during the scan, possibly causing blindness. Dyes used in tattoos may contain iron and could heat up during an MRI scan, but this is rare. Tooth fillings and braces usually are not affected by the magnetic field, but they may distort images of the facial area or brain, so you should let the radiologist know about them.

What does the equipment look like?

The traditional MRI unit is a large cylinder-shaped tube surrounded by a circular magnet. You will lie on a moveable examination table that slides into the center of the magnet.

Some MRI units, called short-bore systems, are designed so that the magnet does not completely surround you. Some newer MRI machines have a larger diameter bore which can be more comfortable for larger size patients or patients with claustrophobia. Other MRI machines are open on the sides (open MRI). Open units are especially helpful for examining larger patients or those with claustrophobia. Newer open MRI units provide very high quality images for many types of exams. Older open MRI units may not provide the same image quality. Certain types of exams cannot be performed using open MRI. For more information, consult your radiologist.

The computer workstation that processes the imaging information is located in a separate room from the scanner.

How does the procedure work?

Unlike conventional x-ray examinations and computed tomography (CT) scans, MRI does not utilize ionizing radiation. Instead, radiofrequency pulses re-align hydrogen atoms that naturally exist within the body while you are in the scanner without causing any chemical changes in the tissues. As the hydrogen atoms return to their usual alignment, they emit different amounts of energy that vary according to the type of body tissue from which they come. The MR scanner captures this energy and creates a picture of the tissues scanned based on this information.

The magnetic field is produced by passing an electric current through wire coils in most MRI units. Other coils, located in the machine and in some cases, placed around the part of the body being imaged, send and receive radio waves, producing signals that are detected by the coils. The electric current does not come in contact with the patient.

A computer then processes the signals and generates a series of images, each of which shows a thin slice
of the body. The images can then be studied from different angles by the interpreting radiologist.

Frequently, the differentiation of abnormal (diseased) tissue from normal tissues is better with MRI than with other imaging modalities such as x-ray, CT and ultrasound.

**How is the procedure performed?**

MRI examinations may be performed on outpatients or inpatients.

You may be asked to empty your bladder.

You will be positioned on a moveable examination table lying on your back. Straps and bolsters may be used to help you remain still and maintain the correct position during imaging. A device that contains coils capable of sending and receiving radio waves will be strapped around your pelvis.

You will be placed into the magnet of the MRI unit and the radiologist and technologist will perform the examination while working at a computer outside of the room.

Images will be obtained while you are contracting or squeezing the pelvic muscles and while the pelvic muscles are relaxed. You may also be asked to bear down or forcibly exhale while keeping your mouth and nose closed. The technologist will give you instructions during the exam.

The entire exam is usually completed within 15 minutes and is performed without using an intravenous contrast agent.

**What will I experience during and after procedure?**

Most MRI exams are painless. However, some patients find it uncomfortable to remain still during MR imaging. Others experience a sense of being closed-in (claustrophobia) while in the MRI scanner. Therefore, sedation can be arranged for those patients who anticipate anxiety, but fewer than one in 20 require medication.

It is normal for the area of your body being imaged to feel slightly warm, but if it bothers you, notify the radiologist or technologist. It is important that you remain perfectly still while the images are being obtained, which is typically only a few seconds to a few minutes at a time. You will know when images are being recorded because you will hear and feel loud tapping or thumping sounds when the coils that generate the radio frequency pulses are activated. Some centers provide earplugs, while others use headphones to reduce the intensity of the sounds made by the MRI machine. You will be able to relax between imaging sequences, but will be asked to maintain your position without movement as much as possible.

You will usually be alone in the exam room during the MRI procedure. However, the technologist will be able to see, hear and speak with you at all times using a two-way intercom. Many MRI centers allow a friend or parent to stay in the room as long as they are also screened for safety in the magnetic environment.
Who interprets the results and how do I get them?

A radiologist, a physician specifically trained to supervise and interpret radiology examinations, will analyze the images and send a signed report to your primary care or referring physician, who will share the results with you.

What are the benefits vs. risks?

Benefits

- MRI is a noninvasive imaging technique that does not involve exposure to ionizing radiation.
- MR images of the soft-tissue structures of the body—such as the heart, liver and many other organs—are clearer and more detailed than with other imaging methods. This detail makes MRI an invaluable tool in early diagnosis and evaluation of cancer.
- MRI has proven valuable in diagnosing a broad range of conditions, including heart and vascular disease, stroke, and joint and musculoskeletal disorders.
- MRI can help physicians evaluate both the structure of an organ and how it is working.
- MRI enables the discovery of abnormalities that might be obscured by bone with other imaging methods.
- Dynamic pelvic floor MRI allows physicians to assess the pelvic floor and pelvic organs at the same time, both while the muscles are relaxed and contracting, which is especially helpful when evaluating disorders that involve more than one area or compartment.

Risks

- The MRI examination poses almost no risk to the average patient when appropriate safety guidelines are followed.
- Although the strong magnetic field is not harmful in itself, implanted medical devices that contain metal may malfunction or cause problems during an MRI exam.

What are the limitations of dynamic pelvic floor MRI?

High-quality images are assured only if you are able to remain perfectly still and follow breath-holding instructions while the images are being recorded. If you are anxious, confused or in severe pain, you may find it difficult to lie still during imaging.

A person who is very large may not fit into the opening of certain types of MRI machines.

The presence of an implant or other metallic object sometimes makes it difficult to obtain clear images due to streak artifacts from the metallic objects. Patient movement can have the same effect.

A very irregular heartbeat may affect the quality of images obtained using techniques that time the
imaging based on the electrical activity of the heart, such as electrocardiography (EKG).

All muscles can be seen on MRI, but not all ligaments. The radiologist will use the muscle findings to make assumptions about tears within the ligaments.

Although there is no reason to believe that magnetic resonance imaging harms the fetus, pregnant women usually are advised not to have an MRI exam during the first trimester unless medically necessary.

Disclaimer

This information is copied from the RadiologyInfo Web site (http://www.radiologyinfo.org) which is dedicated to providing the highest quality information. To ensure that, each section is reviewed by a physician with expertise in the area presented. All information contained in the Web site is further reviewed by an ACR (American College of Radiology) - RSNA (Radiological Society of North America) committee, comprising physicians with expertise in several radiologic areas.

However, it is not possible to assure that this Web site contains complete, up-to-date information on any particular subject. Therefore, ACR and RSNA make no representations or warranties about the suitability of this information for use for any particular purpose. All information is provided "as is" without express or implied warranty.

Please visit the RadiologyInfo Web site at http://www.radiologyinfo.org to view or download the latest information.

Note: Images may be shown for illustrative purposes. Do not attempt to draw conclusions or make diagnoses by comparing these images to other medical images, particularly your own. Only qualified physicians should interpret images; the radiologist is the physician expert trained in medical imaging.

Copyright

This material is copyrighted by either the Radiological Society of North America (RSNA), 820 Jorie Boulevard, Oak Brook, IL 60523-2251 or the American College of Radiology (ACR), 1891 Preston White Drive, Reston, VA 20191-4397. Commercial reproduction or multiple distribution by any traditional or electronically based reproduction/publication method is prohibited.

Copyright © 2017 Radiological Society of North America, Inc.