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Editorial

Time ticks away—six months have passed and it is time for the second edition of our journal to come up. The Journal is indeed a sincere effort to depict the journey, we have undergone in these six months—the achievements of our students and the endeavour of our Faculty Members.

The First edition, despite our most sincere attempts, could have been made better. As we thrive towards our betterment we have tried to leave no stone unturned to make this edition a most acceptable, readable, informative and enjoyable issue. In this edition we have tried to put together all the case presentations prepared by our students and some extremely informative and interesting discussions which we hope will enrich our knowledge.

In this context we feel prudent to request all our students to actively cooperate with the editorial board and subscribe so that we can present our subsequent editions at the end of every sessions in future.

Elastography A New Technique

In recent years Tissue Elasticity Imaging has attracted interest. It is well known that many disease may alter the stiffness of tissue but the change of stiffness by standard Ultrasound cannot be detected. Elastography is an imaging modality that can be capable of mapping local internal strains that a tissue gets after a compression. In this technique local displacement are typically computed by applying cross correlation analysis to the pre and post compression ultrasonic radio frequency echo signal.

It is a non-invasive method to image a soft tissue by compressing the tissue, as per elasticity. The image is different particularly in tumor. The elasticity of Benign and Neoplastic tumour differs, so it casts different type of image.

Ultrasound imaging has the most advantage than other technique such as MRI and C.T. as it is safe cheaper and easily accessible.

Breast tumour assessment by Ultrasound Elastography is used now a days and sensitivity is about 90%.

Thyroid ultrasound Elastography using carotid artery pulsation is also applied to differentiate Benign and Malignant tumour. The Thyroid Stiffness Index (TSI) is more in case of Papillary Carcinoma than the Being nodular Goiter. Thyroid ultrasound Elastography has substantially reduced the number of FNA biopsy by detecting the begin nodule. Type II nodule or suspected nodule may referred for FNA.

Malignant Liver tumour has significantly greater stiffness than the Benign tumor, Fibrolic Liver or Normal Liver.

In near future more equipments with Elestography Transducer will come up and this technique will be popularised.

Dr. A. K. Roy