Our Method of Taking the Radiogram of the Optic Canal.

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There have been reported\textsuperscript{1} over 40 kinds of positioning technique in taking the radiogram of the optic canal. It seems to us, however, some of them are too complicated, while others are inconvenient for the practice. For the purpose of taking it more accurately and conveniently, we devised the following positioning technique.

1. Arrange the X-ray tube and the film so that the central X-ray falls perpendicular to the center of the film which is laid horizontal.

2. Draw a line joining the meatus acusticus externus and the angulus oculi lateralis of the opposite side of the concerned optic canal, and make a triangle with this line as a base. And let the base angles be 110 degrees at the meatus acusticus, externus and 35 degrees at the angulus oculi lateralis. We call the vertex of this equilateral triangle point A. ($A=35^\circ$).

3. Next, take a point at the margin of the lower eyelid, 8 mm distant from the angulus oculi lateralis of the same side of the concerned optic canal. We call this, point B.

4. Lay the patient prone on the roentgenographic table and adjust the point B at the center of the film.

5. Adjust then the point A on the vertical line fallen from the tubefocus.


Under this positioning, 44 cases of healthy female and male were roentgenographed. And we obtained the clear X-ray image of the optic canal in 42 cases. Only in two cases out of 44 the central X-ray did not hit to the direction of the optic canal.

From the statistical point of view, we conclude then as follows:

When we adopt this positioning technique in the case of roentgenographing of the optic canal, the confidence limit (possibility in percentage) of missing the optic canal, is calculated between 7.2 and 6.6 under the confidence coefficient $\alpha$ of 0.05.

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References.