Table C-17a. Reported data: MRI versus ERUS for rectal staging T

| **Study****N Patients,****Author’s Conclusion** | **Outcome** | **MRI****Reported T Stage Data** | **ERUS****Reported T Stage Data** | **T Stage by Pathology** | **MRI T1** | **MRI T2** | **MRI T3** | **MRI T4** | **ERUST1** | **ERUS T2** | **ERUS T3** | **ERUS T4** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Yimei et al. 20129369 MRI, 60 ERUSConclusion: **ERUS is better for early-stage, but MRI is better for locally advanced** | Accuracy | 79.7% | 83.3% | pT1 | 6 | 0 | 0 | 0 | 14 | 1 | 0 | 0 |
| T1/T2 vs. T3/T4Sensitivity | 92.9% | 89.7% | pT2 | 6 | 12 | 3 | 0 | 1 | 14 | 1 | 0 |
| T1/T2 vs. T3/T4Specificity | 88.9% | 96.8% | pT3 | 0 | 3 | 21 | 1 | 0 | 2 | 11 | 3 |
| pT4 | 0 | 0 | 1 | 16 | 1 | 0 | 1 | 11 |
| Halefoglu et al. 20089434 patientsConclusion: **MRI was slightly superior to ERUS** | Accuracy | 89.70% | 85.29% | pT1 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 |
| T1/T2 vs. T3/T4Sensitivity | 95.8% | 87.5% | pT2 | 0 | 5 | 4 | 0 | 0 | 4 | 5 | 0 |
| T1/T2 vs. T3/T4Specificity | 60.0% | 50.0% | pT3 | 0 | 1 | 18 | 2 | 0 | 3 | 18 | 0 |
| pT4 | 0 | 0 | 0 | 3 | 0 | 0 | 1 | 2 |

| Table C-17a. Reported data: MRI versus ERUS for rectal staging T (continued) |
| --- |
| **Study****N Patients,****Author’s Conclusion** | **Outcome** | **MRI****Reported T Stage Data** | **ERUS****Reported T Stage Data** | **T Stage by Pathology** | **MRI T1** | **MRI T2** | **MRI T3** | **MRI T4** | **ERUST1** | **ERUS T2** | **ERUS T3** | **ERUS T4** |
| Starck et al. 19959635 had MRI, but tumor not detected in 3) 34 of these also had ERUSConclusion: **ERUS is better; MRI seems to underestimate the extension of rectal tumors** | Accuracy | 66% | 88% | pT1 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 |
| T1/T2 vs. T3/T4Sensitivity | 78.3% | 91.3% | pT2 | 4 | 5 | 0 | 0 | 0 | 8 | 1 | 0 |
| T1/T2 vs. T3/T4Specificity | 100.0% | 90.9% | pT3 | 1 | 4 | 18 | 0 | 0 | 2 | 21 | 0 |
| pT4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Thaler et al. 19949734 patientsConclusion: **ERUS is better, except when there is stenosis** | Accuracy | 82.3% | 88.2% | pT1 | NR | NR | NR | NR | NR | NR | NR | NR |
| T1/T2 vs. T3/T4Sensitivity | 76.9% | 92.3% | pT2 | NR | NR | NR | NR | NR | NR | NR | NR |
| T1/T2 vs. T3/T4Specificity | 85.7% | 85.7% | pT3 | NR | NR | NR | NR | NR | NR | NR | NR |
| pT4 | NR | NR | NR | NR | NR | NR | NR | NR |
| Waizer et al. 19919813 patientsConclusion: **Both have a place in staging** | Accuracy | 76.9% | 84.6% | pT1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 |
| T1/T2 vs. T3/T4Sensitivity | 88.9% | 88.9% | pT2 | 0 | 3 | 1 | 0 | 0 | 2 | 1 | 0 |
| T1/T2 vs. T3/T4Specificity | 75.0% | 75.0% | pT3 | 0 | 1 | 7 | 1 | 0 | 1 | 8 | 0 |
| pT4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

CI=Confidence interval; ERUS=endorectal ultrasound; MRI=magnetic resonance imaging; NR=not reported; pT=pathologic tumor stage; T=tumor stage.