

Case Presentation

Rodrigo Re,^{*} Maximiliano Negri^{**}

^{*}Diagnostic Imaging Service, Osteoarticular/Musculoskeletal Area – Interventionism, Sanatorio Allende, Córdoba, Argentina

^{**}Department of Orthopedics and Traumatology, Sanatorio Allende, Córdoba, Argentina

Case resolution on page 454.

An 8-year-old male consulted for a tumor on his right leg. He reported that the pain had started approximately 2 months earlier, that it was continuous, occurred in the evening, and had increased over the days. At the time of consultation, the pain was constant, of variable intensity, and increased with weight-bearing and activity. It did not wake him up at night, he had not had a fever, sweats, or concomitant systemic symptoms.

On physical examination, a rapidly growing mass was palpated on the proximal anteromedial aspect of the leg. A notable increase in the size of the diameter of the leg was observed in comparison to the contralateral. The tumor was of stony consistency, with pain. It measured approximately 6 x 5 cm (Figure 1). The distal range of motion was normal. Anteroposterior and lateral radiographs of the right knee were requested.

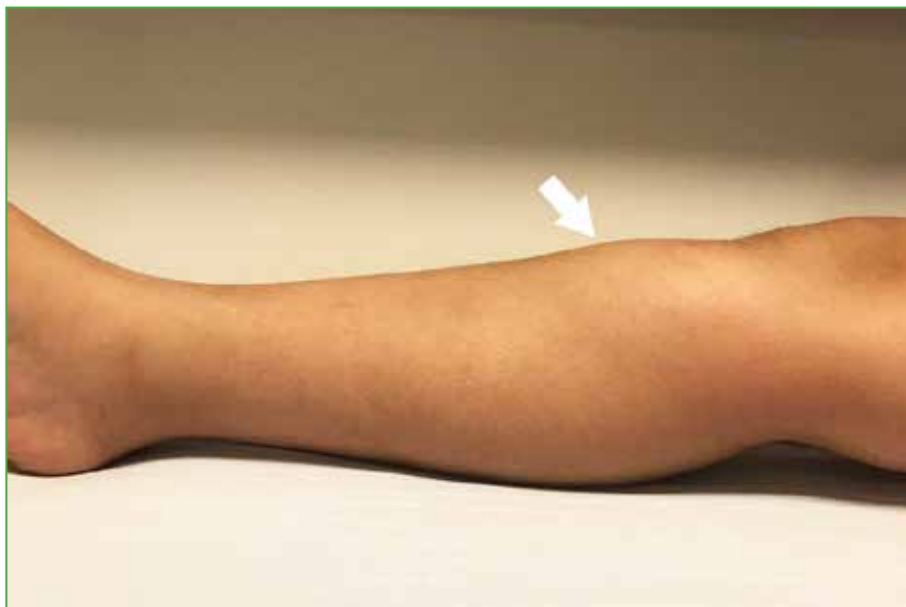


Figure 1. Image of the right leg of the patient with a tumor (arrow).

Dr. RODRIGO RE • rodrigo_re@hotmail.com  <https://orcid.org/0000-0001-7382-9459>

How to cite this article: Re R, Negri M. Postgraduate Orthopedic Instruction – Imaging. Case Presentation. *Rev Asoc Argent Ortop Traumatol* 2022;87(3):305-306. <https://doi.org/10.15417/issn.1852-7434.2022.87.3.1560>

FINDING AND INTERPRETATION OF IMAGING STUDIES

The radiographs of the right knee (**Figure 2**) showed a lesion with a mixed, moth-eaten appearance with radiolucent and radiodense areas, located at the proximal end of the tibia, in the metaphyseal-diaphyseal sector. There was significant periosteal involvement and increased soft tissue density. A wide zone of transition was observed, with poorly defined edges. Notably, there was no epiphyseal compromise.

The imaging evaluation was completed with an MRI of the right knee.

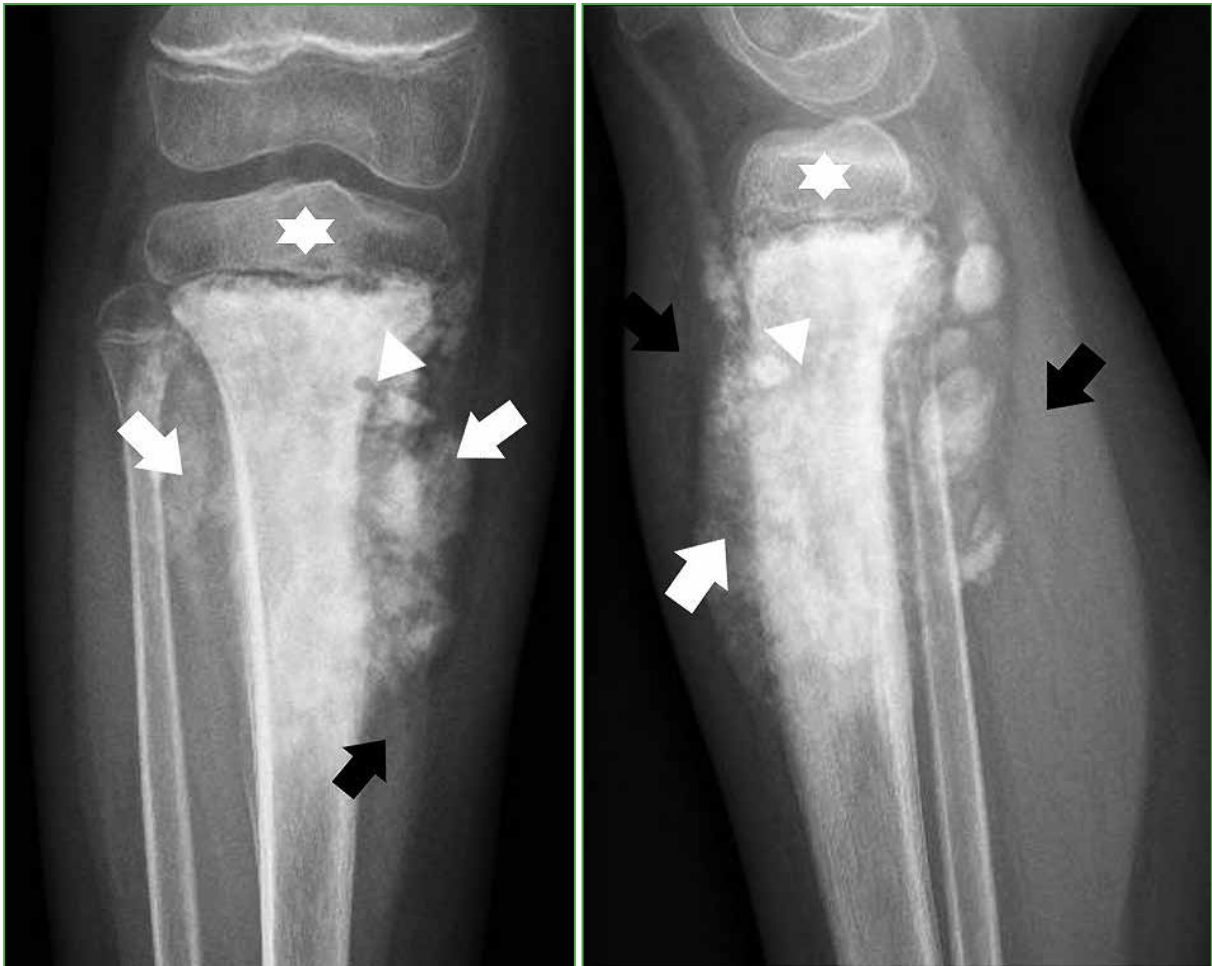


Figure 2. Anteroposterior (A) and lateral (B) radiographs of the right knee. A mixed lesion, with radiolucent areas (arrowhead) and radiodense areas (arrow), and a moth-eaten appearance. Poorly defined edges, a wide zone of transition without epiphyseal involvement (asterisk), and a large soft-tissue mass with increased density (black arrow) can be seen.