

Case Presentation

Juan Manuel Trebino Molteni, Leticia I. Rodríguez

Foot and Ankle Sector, Orthopedics and Traumatology Service, Clínica Modelo de Lanús, Lanús, Buenos Aires, Argentina

Case Resolution on page 197.

Pain in the Hindfoot

ABSTRACT

We present the case of a 20-year-old male football player who consulted for medial hindfoot pain in his left foot, lasting for a few months, with no identifiable history of trauma and unresponsive to analgesics. On physical examination, pes planovalgus was observed, more pronounced on the affected side. Radiographs and magnetic resonance imaging (MRI) revealed an expansile, eccentric, well-defined, multilobulated lesion with internal fluid-fluid levels.

Keywords: Bone cysts; calcaneus

Level of Evidence: IV

Dolor en el retropié

RESUMEN

Se presenta a un varón de 20 años, que practica fútbol habitualmente y consulta por dolor interno del retropié izquierdo, de un par de meses de evolución, sin poder determinar un antecedente traumático y que no calma con analgésicos. En el examen físico, se constata pie plano valgo, más acentuado del lado del dolor. Se solicitan radiografías y una resonancia magnética que muestran una lesión expansiva, excéntrica, de contornos bien definidos, polilobulada, con niveles líquido-líquido en su interior.

Palabras clave: Quistes óseos; calcáneo.

Nivel de Evidencia: IV

INTRODUCTION

A 20-year-old male, a regular soccer player, presented with pain in the medial hindfoot of his left foot, with no history of trauma to the region. Physical examination revealed pes planovalgus, more pronounced on the affected side (Figure 1). Weight-bearing foot and ankle radiographs and a non-contrast magnetic resonance imaging (MRI) scan were requested.

FINDINGS AND INTERPRETATION OF IMAGING STUDIES

The lateral weight-bearing radiograph of the foot revealed a multilobulated, polycystic lesion confined within the cortices of the left calcaneus (Figure 2). Non-contrast MRI showed an expansile, eccentric lesion with well-defined margins, multilobulated morphology, and internal fluid-fluid levels, measuring 3.3 cm in anteroposterior and transverse dimensions and 2.7 cm in cephalocaudal extension (Figure 3).

Received on February 20th, 2025. Accepted after evaluation on February 24th, 2025 • Prof. Dr. JUAN MANUEL TREBINO MOLTENI • mtrebino@gmail.com  <https://orcid.org/0009-0001-0643-8391>

How to cite this article: Trebino Molteni JM, Rodríguez LI. Postgraduate Orthopedic Instruction – Imaging. Case Presentation. *Rev Asoc Argent Ortop Traumatol* 2025;90(2):112-114. <https://doi.org/10.15417/issn.1852-7434.2025.90.2.2125>



Figure 1. Pes planovalgus, more pronounced on the painful left side.



Figure 2. Lateral weight-bearing radiograph of the left foot. A polycystic, multilobulated lesion is observed in the calcaneus, without cortical breach.

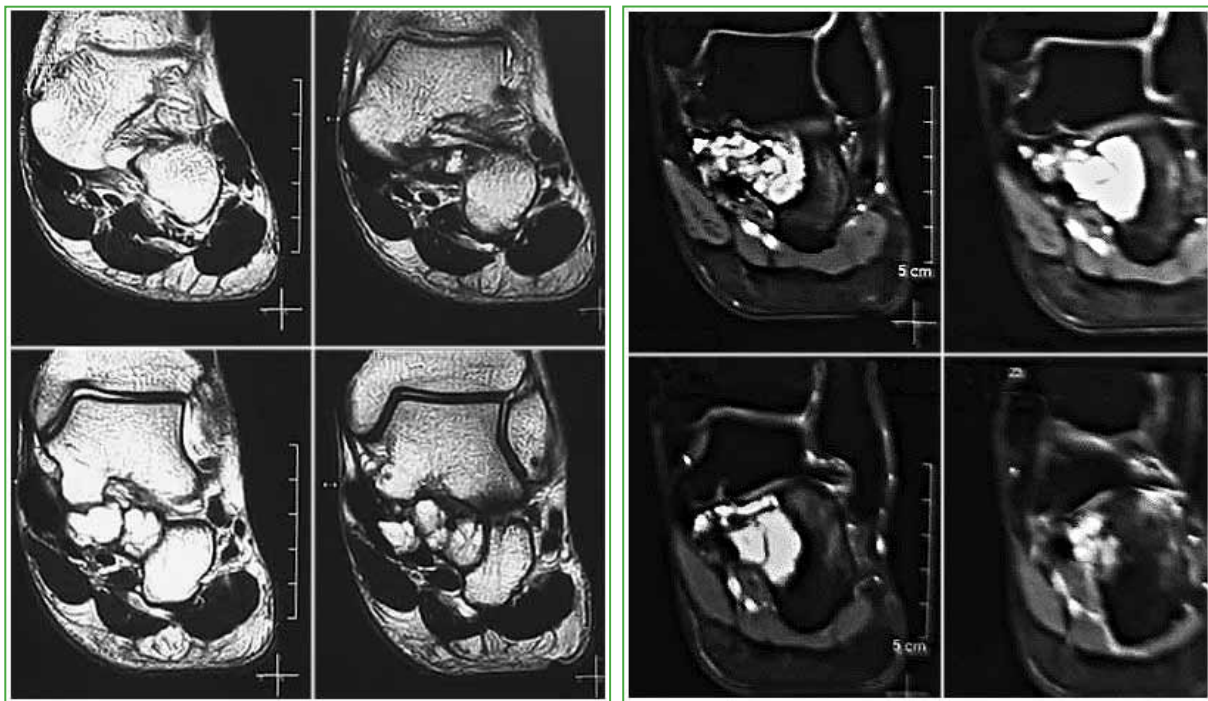


Figure 3. Coronal non-contrast MRI of the left foot. A multilobulated, polycystic lesion with fluid-fluid levels is seen, confined within the cortices of the left calcaneus.