35 y/o M status post gun shot wound presents w/ knee pain

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Pellegrini Stieda lesion

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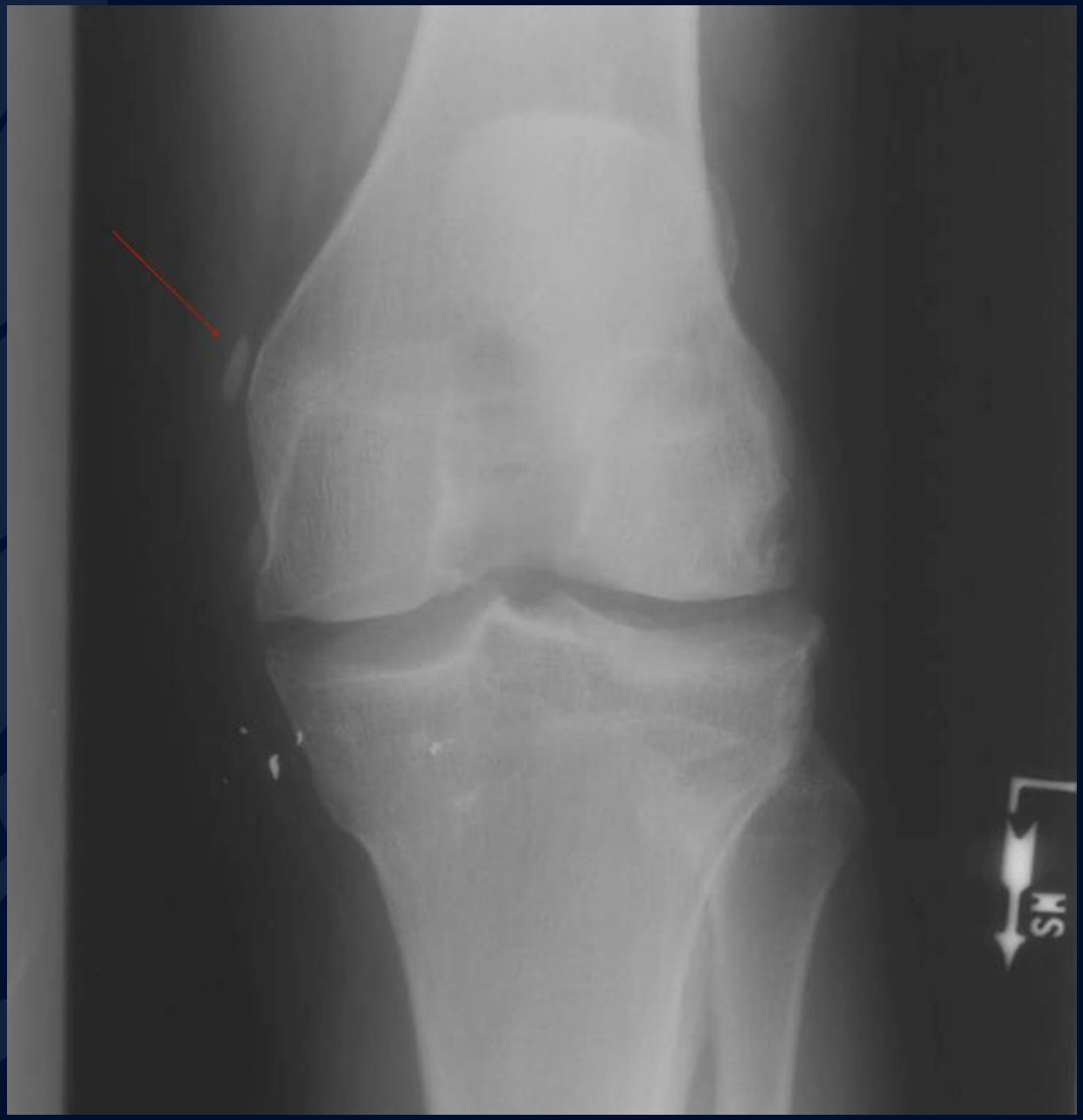

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Pellegrini Stieda lesion

What is it?

Post traumatic ossification at or near the medial collateral ligament adjacent to the margin of the medial femoral condyle.

Most common etiology

Presumed mechanism of injury is a Stieda fracture (avulsion of the medial collateral ligament at the medial femoral condyle). Calcifications begIn to form a few weeks after injury.

Clinical presentation

Most patients are asymptomatic while a small proportion have medial knee pain.

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Pellegrini Stieda lesion

Imaging features

Plain radiograph: calcification adjacent o the medial femoral condyle, often linear in shape.

MRI: ossicle or enthesophyte with bone marrow signal at the medial femoral condyle. Medial collateral ligament is usually thickened.

Rx

Mild and moderate cases are managed conservatively with steroid injections and range of motion exercises. Surgical excision of calcifications and MCL repair is considered for refractory cases.

Top differential

Reverse Segond – bone fragment in the medial articular surface of the proximal tibia (PCL)

Segond fracture – lateral tibial plateau (ACL)

Arcuate sign – avulsion of the head of the fibula

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References

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