13 y/o M presents with right elbow pain

Samantha Huq, MD, MPH
Michael Baldwin, MD
Osteochondritis dissecans of the Capitellum
AP radiograph demonstrates subchondral radiolucency within the capitellum, measuring 1.2 x 1.1 cm with a sclerotic margin. No evidence of an intra-articular loose body.

Anatomic alignment. Joint spaces maintained.
Osteochondritis dissecans

Focal joint disorder with progressive changes in subchondral bone and overlying articular cartilage that may lead to early joint degeneration.

In particular, elbow involvement of osteochondritis dissecans is rare. Etiology is unclear; likely multiple contributing factors (trauma, ischemia, genetic). Favored etiology is repetitive stress (microtrauma).

Radiographs demonstrate an ovoid radiolucent subchondral osseous lesion surrounded by sclerotic margin, +/- in situ or displaced intraarticular osseous fragment. Radiograph does not assess cartilage integrity with stability poorly evaluated.
Osteochondritis dissecans

MR or MR arthrography is the optimal diagnostic imaging modality as it can assess cartilage and OCD lesion stability.

Treatment: Stable lesions: rest, casting, NSAIDS over 3-12 months;
Unstable lesions require surgical intervention.
References

