

AN UNUSUAL CASE OF OSTEOCHONDRITIS DISSECANS

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Eskilstuna

The common localization of osteochondritis dissecans in the elbow joint is the capitulum humeri. The following is a case, diagnosed as osteochondritis dissecans, resulting in an osteocartilaginous sequestrum situated in the supratrochlear septum, a lamina of bone at the lower end of the humerus, separating the coronoid from the olecranon fossa.

CASE REPORT

K.-E. V. (No. 1886/52), mechanic, 19 years old. Admitted to the Hospital in August 1952. For about one year he had had a flexion contracture in his right elbow joint. He also suffered from pain and tenderness in his elbow, especially after hard work, and when lifting weights.

Clinical examination revealed tenderness immediately above the tip of the olecranon process and a flexion contracture of about 20 degrees.

Roentgenographic examination of the right elbow showed a separate button of bone, measuring about 2 centimeters in width, height and thickness, situated in the supratrochlear septum. (Fig. 1, 2.)

On September 9th, an operation was performed under general anesthesia, the posterior approach being used, through the tendon of the triceps. It was very easy to remove a buttonlike, hard, cartilaginous body partly embedded in the bone. This was a clear case of osteochondritis dissecans.

Two weeks later, the patient had complete movement of his elbow joint and went back to work symptomfree.

*Fig. 1.**Fig. 2.*

DISCUSSION

Osteochondritis dissecans was first described by König in 1889 as an aseptic necrosis of a segment of subchondral bone. The etiology remains obscure. The most common localisation is the knee joint, but many other places are described.

This unusual localisation is reported in the literature by Morton and Chrysler, who in 1945 published six cases of osteochondritis dissecans of the supratrochlear septum. As far as the author is aware, these are the first published cases. Earlier, some cases were reported by Grauer 1927, Hirsh 1927, Winkler 1928, Atsatt 1933 and by Burman 1941, in which an ossicle was found in or near the supratrochlear septum. None of these, however, was described as osteochondritis dissecans.

The author has not been able to find any additional cases in the literature.

SUMMARY

A case of osteochondritis dissecans with an unusual localisation above the elbow joint is reported.

RESUME

Un cas d'osteochondritis dissecans avec une localisation peu usuelle au-dessus de l'articulation du coude est rapporté.

ZUSAMMENFASSUNG

Über einen Fall von Osteochondritis dissecans mit ungewöhnlicher Lokalisation oberhalb des Ellbogengelenkes wird berichtet.

LITERATURE

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