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Pellegrini-Stieda syndrome as a cause of knee pain

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Background & Aim: Calcification in the soft tissue next to the medial femoral condyle after a history of trauma around the knee is a recognized radiographic finding-PS (Pellegrini-Stieda) sign. When this is associated with pain and a restricted range of motion it is known as the PS syndrome. We describe a case of PS syndrom

Method: A case of 61 years old, female patient, with no relevant medical history, who six years ago suffered a closed low-energy trauma in his left knee. He was diagnosed with grade I sprain of the medial capsuloligamentous complex of the knee, without instability in it. in the x-ray showed no radiographic changes in the anteroposterior and lateral knee. Scheduled treatment was rest and NSAIDs.

Since 2 months presents mechanical pain and with swelling characteristics of the inside of the knee. On clinical examination of the knee, mobility is stable and complete. in the ultrasound, objective, thickening of the proximal third of the medial collateral ligament in the femoral insertion adjacent and with calcification of approximately 1.5 cm.. Conventional radiography was performed, confirming the linear calcification adjacent and parallel to the medial femoral condyle Mendes type I immediately below the tubercle of the adductor magnus, which allowed to establish the diagnosis of PS region syndrome. The patient was treated by puncture and aspiration of calcification, with mepivacaine 1%, under control of ultrasound.

Results: The patient has no pain in the knee and calcification of soft tissues adjacent to the medial femoral condyle has decreased

Conclusions: The treatment of PS syndrome normally conservative. It includes rest and rehabilitation. in the case has been described the utility of the local anesthetic injection and / or corticosteroids.