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Just a shoulders pain? Think again

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Method: Review of 23 articles about Osteopoikilosis. Research conducted by Pubmed, from 2007 to 2015, with the keywords: osteopoikilosis; spotted bone disease; osteoblastic metastasis.

Background: Osteopoikilosis is a rare, benign, osteosclerotic dysplasia with autosomal dominant inheritance and is observed equally in both sexes and all ages. Usually is asymptomatic and found incidentally on radiographic examination. In 25% is associated with skin manifestations, rheumatic and skeletal disorders and endocrine dysfunction.

Case report: Female, 20 years old, student. No important personal and family history. The patient referred a slight bilateral shoulder pain, intermittent, with 4 months of evolution. Physical examination showed shoulder pain that worsens with movements of the joints. Shoulders X-ray showed multiple, small, round and ovoid, symmetric, radio-opaque spots in the humerus, with periarticular distribution and predominant meta-epiphyseal location. Laboratory tests unchanged. Radionuclide technetium-99m bone scan excluded metastases. Was hypothesized Osteopoikilosis, that was confirmed with similar lesions at X-ray of the hands, pelvis, knees and femurs.

Conclusions: The discovery of bone spots on a radiograph is often disturbing, and benign conditions need to be differentiated from serious disease, mainly osteoblastic metastases. Know Osteopoikilosis may alleviate both, patient and physician anxiety, minimize unnecessary testing, treatments and medical costs. Diagnosis can be done on the basis on the clinical, personal history, physical examination and imaging characteristics and distribution of spots. Osteopoikilosis is usually asymptomatic but joint pain and swelling may be seen in 15-20%. It is relatively easy to make the diagnosis when the characteristically benign-looking spots are found incidentally in an otherwise healthy person or in a patient presenting with a traumatic injury. Difficulty occurs when patients present joint pain, such our case. In these situations, a review of previous imaging, radionuclide technetium-99m bone scan, analysis and or biopsy may be necessary. No specific treatment for Osteopoikilosis is required.