

Role of MRI in the Evaluation of Anterior Knee Pain

Thesis

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List of Contents

| Title | Page No. |
|---|----------|
| List of Abbreviations | 5 |
| List of Tables | 6 |
| List of Figures | 7 |
| Abstract | 13 |
| 1- Introduction & Aim of the work | 1 |
| Review of Literature | |
| 2- Gross Anatomy of the Knee Joint | 16 |
| 3- Technique and Normal Anatomy of Knee M | RI32 |
| 4- Different Etiologies of Anterior Knee Pain a MRI Findings | |
| 5- Patient and Methods | 84 |
| 6- Results | 89 |
| 7- Case Presentation | 100 |
| 8- Discussion | 123 |
| 9- Summary & Conclusion | 135 |
| References | 137 |
| Arabic Summary | |

List of Abbreviations

Full term Abb. ACL Anterior cruciate ligament AKP......Anterior knee pain CP Chondromalacia patella FFE Fast field echo FOV.....Field of view FSE.....Fast spin echo IPB.....Infrapatellar bursitis ITB..... Iliotibial band LCLLateral collateral ligament LTI.....Lateral trochlear inclination MCL..... Medial collateral ligament MPS..... Mediopatellar plica syndrome MRI Magnetic resonance imaging OSD.....Osgood Schlatter disease PAPatella alta PCLPosterior cruciate ligament PDProton density PFPS.....Patella femoral pain syndrome PPBPrepatellar bursitis PT.....Patellar tendinitis QT.....Quadriceps tendon SE.....Spin echo SI.....Signal intensity SLJSending-Larson-Johansen syndrome STIR.....Short time inversion recovery TE Time of echo TR Time of repetition

List of Tables

| Table No. | Title F | Page No. |
|--------------------|---|----------|
| Table (1): | MRI sequences parameters on high strength scanners. | |
| Table (2): | Grading of Chondromalacia patella | 54 |
| Table (3): | Classification of trochlear dysplasia | |
| Table (4): | The descriptive statistics of the age | |
| , , | patient's sample. | 89 |
| Table (5): | Distribution of the sample according to | sex89 |
| Table (6): | Percentages of the prevalence of diff | |
| | causes of AKP by sex. | |
| Table (7): | Demonstrates overlapping between pa | tients |
| | who have more than one disease | |
| Table (8): | Demonstrates percentage of sex preva | alence |
| | among different diseases. | |
| Table (9): | Demonstrates percentage of prevaler | |
| | different grades of chondromalacia pate | |
| Table (10): | Demonstrates percentage of different g | grades |
| | of trochlear dysplasia among the pa | tients |
| | with patellar instability | 96 |
| Table (11): | Demonstrates percentage of pa | ıtellar |
| | instability and transient patellar dislo | cation |
| | 66.7% and 33.3% respectively out of | total |
| | number of patellar dislocation | 97 |
| Table (12): | Demonstrates the statistically calcu | ılated |
| | minimum, maximum, median and | |
| | values of trochlear groove depth by | |
| | trochlear facet asymmetry by (%) and l | |
| | inclination angle by (°). | 98 |

List of Figures

| Fig. No. | Title | Page | No. |
|---------------------|---|--------|-----|
| Figure (1): | Famoratibial joint | | 17 |
| Figure (1): | Femorotibial joint | | |
| Figure (2): | Ligaments around the knee | | |
| Figure (4): | Sagittal section in flexion showing | | 21 |
| rigure (4). | menisci | | 25 |
| Figure (5): | Illustrative diagram of knee bursae | | |
| Figure (6): | Normal medial and lateral Menisci. | | 20 |
| g (-), | Sagittal sections | , | 40 |
| Figure (7): | Normal Cruciate Ligaments | | |
| Figure (8): | Axial proton density fat saturation | | |
| | shows both normal anterior cru | ıciate | |
| | ligament and posterior cruciate ligam | ient | 41 |
| Figure (9): | Normal patellar and quadriceps tende | | 42 |
| Figure (10): | | | |
| | images with fat saturation demonst | | |
| | the LCL | | 43 |
| Figure (11): | Coronal T2 weighted MR image wit | | |
| | saturation shows the superoint | | 44 |
| Figure (19). | extent of the MCL | | 44 |
| rigure (12): | Axial T1 weighted MR image s patellar retinacula, cruciate ligan | | |
| | and periarticular tendons | | 46 |
| Figure (13): | A) Sagittal STIR and B) PD WIs o | | 40 |
| 119410 (10) | knee with lateral joint-line tender | | |
| | following a knee injury | | 50 |
| Figure (14): | A) Sagittal STIR WI and B) PDWI of | | |
| | knee in a patient with ch | | |
| | osteochondral injury, demonstrating | g the | |
| | absence of a bone marrow edema pat | tern. | |
| | Remodelling of the under | | |
| | subchondral bone (arrows) result | | |
| | proud bone anteriorly and depression | • | 51 |

| Fig. No. | Title | Page | No. |
|---------------------|--|-------------------------|-----|
| Figure (15): | A) Sagittal STIR WI and B) I demonstrate characteristic transcho | ndral | |
| Figure (16): | A) Coronal T1WI and B) sagittal STI demonstrate large uns osteochondritis dissecans lesion | IR WI stable | |
| Figure (17): | Chondromalacia patella grade I | | |
| _ | Chondromalacia patella grade II | | |
| _ | Chondromalacia patella grade III | | |
| • | Chondromalacia patella grade IV | | |
| _ | : A) Sagittal T1 and B) sagittal suppressed T2WI demonstrating elinvolving a significant portion of | l fat dema | |
| | infrapatellar fat pad | | 58 |
| Figure (22): | Osgood Schlatter disease | | |
| • | Non-resolved Osgood Schlatter lesion. | | |
| Figure (24): | Patellar dislocation (relocated) A-D) fat-suppressed PD and E) coronal I shows evidence of recent lateral padislocation with bone contusions is medial patella (white arrow) and lateral patella (white arrow) are pat | PDWI tellar n the | |
| | femoral condyle (asterisk | | 62 |
| Figure (25): | Four types of trochlear dysplasia | | 63 |
| Figure (26): | Lateral trochlear inclination assessed | | |
| Figure (27): | axial fat-saturated T2-weighted MR in Trochlear facet asymmetry assesse axial fat-saturated T2- weighted images | ed on MR | 66 |
| Figure (28). | Trochlear depth assessed on axia | | 00 |
| 1 iguit (20): | saturated T2-weighted MR images | | 67 |
| Figure (29): | Patella Alta and maltracking | | |

| Fig. No. | Title Page | e No. |
|---------------------|---|-------|
| Figure (30): | MRI image demonstrates how to assess patella Alta depending on Insall -Salvati ratio. | |
| Figure (31): | Patellar tendinosis. Sagittal PD FSE demonstrates severe proximal patellar tendinosis with slight expansion of the | |
| Figure (32): | tendon and surrounding edema | |
| Figure (33): | Pes anserinus bursitis. Sagittal STIR MR image shows the distension of the bursa (arrow) filled with hyperintense synovial | |
| | pannus | |
| Figure (34): | Pes anserine bursitis | |
| • | Prepatellar bursitis | |
| Figure (36): | Hemorrhagic prepatellar bursitis | 75 |
| • | Hemorrhagic deep infrapatellar bursitis | |
| • | Mediopatellar plica syndrome A,C) Axial, B) Sagittal T2, and D) Sagittal fat suppressed weighted images demonstrating mediopatellar plica that has a shelf-like appearance and covers the anterior aspect | |
| | of the medial femoral condyle | 78 |
| Figure (39): | Quadriceps tendinosis | 79 |
| Figure (40): | Distal quadriceps tendon rupture | 80 |
| Figure (41): | Sending-Larson-Johansen disease | 82 |
| Figure (42): | Bipartite patella | 83 |
| Figure (43): | Sex distribution of the sample according | |
| | to sex. | 90 |
| Figure (44): | Percentage of different AKP types among males and females | |

| Fig. No. | Title | Page | No. |
|---------------------|--|--|-----|
| Figure (45): | The percentages of prevalence of the diseases by sex. | ne 11 | 94 |
| Figure (46): | The percentage of prevalence of diffigrades of chondromalacia patella | | 95 |
| Figure (47): | Demonstrates percentages of difference grades of trochlear dysplasia amon patients with patellar instability | g the | 96 |
| Figure (48): | Demonstrates percentage of pa instability and transient pa dislocation 33.3% and 66.7% respec | tellar tellar | |
| Figure (49): | out of total number of patellar dislocation. Demonstrates the statistically calcuminimum, maximum, median and values of trochlear groove depth by | lated mean (mm), | 97 |
| Figure (50): | trochlear facet asymmetry by (%) lateral inclination angle by (°) | STIR tibial | 99 |
| Figure (51): | A- Axial T2, B-Axial PD SPIR, C-PD SPIR, D-Sagittal PD SPIR are Sagittal PD SPIR show bild chondromalacia patellae denoted articular cartilage disruption extension to underlying subchondral marrow edema pattern changes | nd E- ateral l by and bone | 101 |

| Fig. No. | Title | Page | No. |
|--------------|--|---|-----|
| Figure (52): | A-Sagittal PD, B-Sagittal T2, C-Sagittal SPIR and D-Axial PD SPIR demons 5x2.5 cm enlarged superficial infrapar bursa is noted showing mild symproliferation with mild surrour subcutaneous edema denoting subcutaneous edema denoting subcutaneous endema denoting subcutaneous edema den | etrate tellar novial nding acute seen | 105 |
| Figure (53): | A-Coronal T1, B-Coronal proton de SPIR, C-Coronal proton density SPII Sagittal T1 and E-Axial Proton de SPIR show Tricompartmental osteoart showing marginal articular osteophy and thinning of the lining articular cartilages most appreciated at mocompartment with narrowed joint with stress induced subchondral may edema is noted at the opposing surfact the medial femoral and tibial condyles degenerative tear of the body and PI shows increased intra substance signal indistinct boundaries with m | ensity R, D- ensity hritis ytosis cular hedial space arrow ces of with HMM with | |
| Figure (54): | degeneration of the ACLA-Sagittal PD, B-Sagittal PD SPII Axial T2 and D-Axial SPIR Demonst marked joint effusion and lateral pat dislocation with irregular medial bo | R, C- rates tellar | 107 |
| Figure (55): | thinned articular cartilage. A-Sagittal PD, B-Sagittal PD SPII Axial T2 and D-Axial SPIR Demons moderate knee effusion mainly within the distended suprapatellar r with focal synovial thickening. | trate seen ecess | 109 |

| Fig. | No. | Title | Page | No. |
|------|-----------|---|-----------------------------------|-----|
| Figu | ıre (56): | Sagittal T1 demonstrates a high repatella with patellar tendon/height repatella Alta with mix | atio = | |
| Figu | ıre (57): | effusion is noted | and the part | 112 |
| Figu | ıre (58): | edema/contusion displaying high sign SPIR images with mild joint effusion A-Coronal T1, B-Coronal T1, C-Axi and D-Coronal STIR demonstrate an of bone contusion noted in the | nal in al T2 a area | 114 |
| Figu | ıre (59): | lateral femoral condyle manifeste increased signal on STIR images A-Sagittal T2, B- Sagittal proton de SPIR, C- Sagittal proton density SPI | d by ensity R, D- | 116 |
| Figu | ıre (60): | Axial proton density SPIR and E- proton density SPIR show focal e seen at the superior aspect of the pad of fat with minimal joint effusion A- Coronal T1, B- Coronal proton de SPIR, C- Coronal proton density SPIR | dema Hoffa nensity R and | 118 |
| Figu | ıre (61): | D- Coronal proton density SPIR show osteochondral defect seen in the national condyle with sprained MCL A- Sagittal proton density, B- Sagittal C- sagittal Proton density SPIR | nedial al T2, | 120 |
| | | Sagittal Proton density SPIR an Axial T2 show partial thickness to the quadriceps tendon with skin subcutaneous tissue edema and min joint effusion. | d E- ear of and nimal | 122 |

Abstract

This study included 20 patients (no sex predilection). All presented by anterior knee pain and were referred to radio-diagnosis department of Ain Shams University hospital or private centers for MRI examination. The preliminary results have shown the great role of MRI in the diagnosis of different pathological conditions causing anterior knee pain and in guiding further clinical management.

Key Words: MRI- Anterior knee pain)

1- Introduction & Aim of the work

nterior knee pain (AKP) is the most common knee complaint, usually occurring in adolescents and young adults (Collado and Fredericson, 2010).

It is more common in athletic individuals, with the incidence rate as high as 9% in young active adults and comprises up to a quarter of all knee problems treated at sports injury clinics (*Witvrouw et al., 2000*). AKP may cause chronic disability, limited sports participation, and may affect quality of life. Despite its prevalence, AKP remains poorly understood, as it has not been well studied in the literature, making its treatment one of the most complex among the various pathologies affecting the knee (*Biedert and Sanchis-Alfonso, 2002*).

Magnetic resonance imaging (MRI) in the recent decades has become the gold standard imaging modality for different knee pathologies as it is safe, and RF pulses used in MRI do not cause ionization.

With MRI, we can obtain direct coronal and oblique image which is impossible with radiography and CT. Particularly useful for the scanning and detection of abnormalities in soft tissue structures like the cartilage tissues, tendons, and ligaments. MRI also can help determine which patients with knee injuries require surgery. MR imaging is

recognized as a standard procedure and has replaced diagnostic arthroscopy as the primary diagnostic modality for many knee pathologies. Moreover, MR images can be used to assess anatomic variants that may contribute to chronic patellar instability (Escala et al., 2006).

Aim of the Work

The main objective of our work is to review several of the most common causes of AKP, with emphasis on their MRI findings with the goal of allowing more accurate diagnosis and grading of some of the most common pathologies, for understanding, better treatment and improvement of this common complaint.