

CAN WE MISS A SOLITARY OSTEOCHONDROMA ?

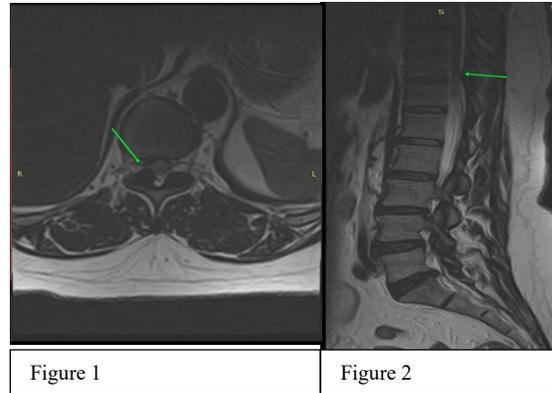
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INTRODUCTION:

Solitary osteochondroma is common bone tumor which constitutes 20-24% of all benign bone lesion. The occurrence of solitary osteochondroma in spine is relatively rare, estimating 4-7% of all primary benign spinal tumor. Several cases being reported where the clinical presentation of patient varies from mild to severe symptoms such as lower back pain, lower extremity pain and even compressive myelopathy. Due to rarity of the condition, its may be missed in present other coexisting common condition. In addition to that, one should also be aware of rare entities such as osteochondroma.

REPORT:

A 49-year-old female presented with 1 year history of back pain radiating to the right lower extremities. Clinical assement demonstrates localized tenderness at thoarolumbar junction with positive straight leg raising test(SLR) on right lower limb. Plain X-ray of thoracic and lumbar spine is normal. magnetic resonance imaging (MRI) showed an abnormal bony mass arising from the right facet joint of T11 with protrusion to the spinal canal and marked cord compression(**Figure 1 and 2**). The cortex and medulla of the lesion had continuity with those of the T12 superior articular facet. Treatment strategies for this patient was complete marginal excision of osteochondroma lesions and short segment posterior instrumenetation T10-T12. Histopathological examination revealed osteochondroma. Postoperatively evaluation shows patient symptom resolved.



CONCLUSION:

Osteochondromas are developmental lesions, rather than true neoplasms, and are often referred to as simply exostosis. Osteochondroma lesion occurs as solitary or multiple lesions as hereditary multiple exotoses(HME). Rarely, they exhibit extension into the spinal canal resulting in canal stenosis and myelopathy. Presentation of patient may varies according to anatomical location of compression and severity of stenosis. Precise diagnosis through careful history taking, physical examination, and radiological evaluation are essential to avoid misdiagnosis.

REFERENCES:

1. Yakkanti, R., Onyekwelu, I., Carreon, L. Y., & Dimar, J. R. (2017). Solitary Osteochondroma of the Spine—A Case Series: Review of Solitary Osteochondroma With Myelopathic Symptoms. *Global Spine Journal*, 8(4), 323–339. <https://doi.org/10.1177/2192568217701096>