

## KNEE GOUTY ARTHRITIS: A CONFLICT BETWEEN CLINICAL AND RADIOLOGICAL DIAGNOSIS

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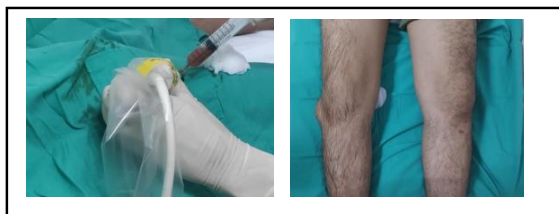
### INTRODUCTION:

Gout is a common form of inflammatory arthritis which could give a substantial impact on quality of life.<sup>1</sup> With the increasing prevalence, several innovations and updates in regards of diagnosis and management has been done.<sup>2</sup> In general, gout can be diagnosed through a thorough clinical and diagnostic imaging and lab test. We reported a case of a patient who presented with chronic right lateral knee swelling and pain after a motor vehicle accident.

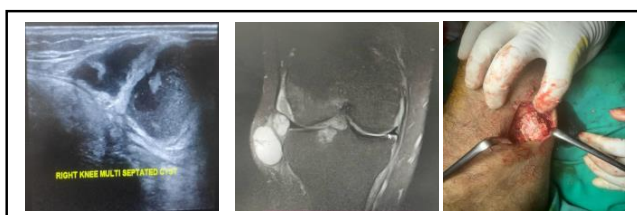
### REPORT:

A 41 year-old gentleman with a history of motor vehicle accident presented with multiple joint pains over the bilateral hand and foot, and over the right knee. Serial x-ray showed no fracture and he was treated with analgesic and physiotherapy. As the pain was not improving, referral to Rheumatology was made to rule out inflammatory arthritis which turned out negative for Rheumatoid arthritis. Six month post trauma, he presented with persistent right lateral knee swelling which is painful, but there was no sign of infection. MRI of the right knee was done and reported as lateral meniscal cyst. An ultrasound guided aspiration of the cyst was performed and thick purulent fluid was obtained. The fluid was sent for laboratory testing and was negative for infection. An incisional and drainage of the knee swelling was performed next as the swelling was not subsided and intra-operatively, white chalky material was removed. The sample was sent to the lab and returned as gouty tophi.

**Figure 1:** (Left) Ultrasound guided aspiration showed thick purulent fluid. (Right) Clinically swelling over lateral aspect of right knee.



**Figure 2:** (Left) Ultrasound bedside showing multi septated cyst over knee with debris floating. (Middle) MRI of the right knee joint showed lateral meniscal cyst involving anterior part lateral meniscus (Right) Intraoperatively finding white chalky material of the right knee joint.



### CONCLUSION:

A proper history taking with adequate clinical examination, laboratory testing or imaging tools such as Ultrasound and Dual-Energy Computed tomography is needed to diagnose gouty arthritis.<sup>3</sup> Even with the current advance diagnostic imaging tools, a proper diagnosis is still difficult to make. When in doubt, tissue sample from surgical procedure may prove beneficial in establishing the diagnosis.

### REFERENCES:

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3. Saigal, R., & Agrawal, A. (2015). Pathogenesis and clinical management of gouty arthritis. *J Assoc Physicians India*, 63(12), 56-63.