Clinical Presentation

It is a woman of 42 years old, without any pathological history, which has a painful mass of left knee at popliteal fossa, beginning progressively without any inflammatory clinical or biological signs. The patient doesn’t report of trauma or nerve pain (electric discharge). The radiographs (Antero-posterior (AP) and lateral) without any anomalies are shown in (Figure 1). The ultrasonography (Figure 2) and MRI of the left knee is performed (Figure 3a -b).

What is your diagnosis? : According to clinical and radiological data, a number of diagnosis are discussed:

• Nerve schwannoma.
• Myxoid liposarcomas.
• Myxofibrosarcoma.
• Juxta-Articular Myxoma.
• Synovial ganglion.

Reserved diagnosis: depending on histological examination data:

• Juxta-Articular Myxoma (Figure 4).

Review

Cardiac Myxoma is a classic tumor. The other locations none cardiac, Juxta-articular are uncommon [1]. Juxta-articular Myxoma is a rare benign tumor, with peak incidence between 30 and 50 years with a female predominance [2]. Radiological assessment: ultrasonography [3] and Magnetic Resonance Imaging (MRI) of the affected knee showed acystic appearance of the lesion, sight of the importance of water content related to mucinous component and low of collagen [4]. In the literature, there is no clear description of the MRI aspect of Myxoma Juxta-Articular and intramuscular. But histologically have the same presentation. Some authors describe the characteristics of MRI to make the difference between Myxoma Juxta - Articular and intramuscular [5].
Figure 2: Ultrasonography images show a mass near the popliteal fossa of left knee.

Figure 3a-b: MRI show a mass of popliteal fossa, measuring 54×48×67 cm, which displaces the distal part of these membranous muscle. Hypointense in T1 and hyperintense in T2.

Figure 4: Macroscopic view of the tumor Myxoma.

Finally, it is important to recognize this tumor, although rare, can occur. Histological examination is the only exam to confirm the diagnosis of juxta-articular Myxoma and rule out other differential diagnosis including schwannoma, liposarcomas.

References


