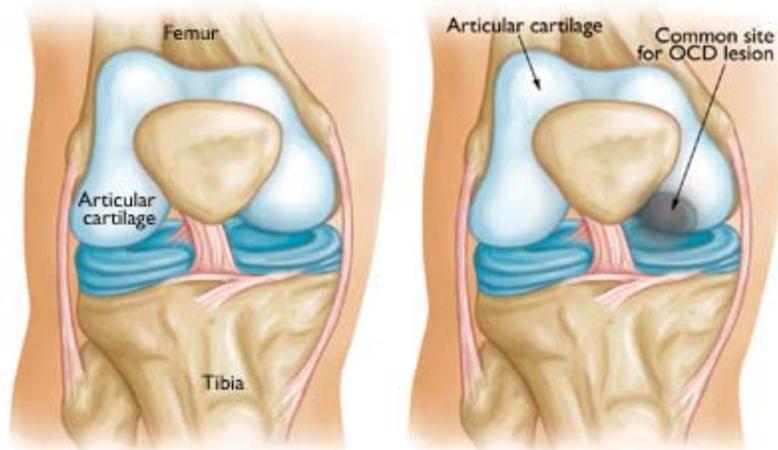


Orthopaedic Surgeon:
Henry G. Krull, M.D.

Hand and Wrist Specialist:
Edwin D. Vyhmeister, M.D.

Osteochondritis Dissecans

Osteochondritis dissecans (OCD) is a condition that develops in joints, typically in children, that causes loosening and separation of a segment of cartilage and small section of bone from the remaining bone. It is most common in the knee, usually on the end of the femur. It can occur in any joint, but is most common in the elbow, where it is called Little Leaguer's elbow.



Symptoms:

Pain, fluid in the joint, and mechanical symptoms (locking, catching) and sometimes instability, are common symptoms. There is sometimes an injury, although it is thought that overuse and growth spurts may be more likely associated with the development of OCD. Usually just one joint is affected, although some children develop the condition in multiple joints.



291 North Fireweed
Soldotna, AK 99669
907-262-6454

www.kenaipeninsulaortho.com

Cause:

The precise cause of OCD is unknown. It is thought that a small segment of cartilage and the bone underneath it loses its blood supply and “dies”, sometimes causing the piece to detach from its surrounding attachment. The segment can detach completely and move throughout the joint, causing a “loose body.” An injury may facilitate detachment of a segment at risk, as can overuse.

Diagnosis:

A careful history and physical examination may reveal clues as to the diagnosis, but plain x-rays and sometimes MRI are necessary to reveal the problem. MRI may be obtained to assist with treatment decisions, as it can show whether the lesion is stable or unstable.

Treatment:

Most patients with OCD are treated nonsurgically if the lesion is determined to be stable. A stable lesion has enough remaining attachments to the surrounding bone that it often heals with immobilization and weight bearing restriction (crutches). Unstable lesions are seen on MRI to be surrounded by fluid, and have little chance of healing without surgery. Surgery involves repairing the OCD back to bone with screws or pins, or removing the piece if it is small or has damaged cartilage. If a large defect is left, it may need to be reconstructed with other tissue. Cortisone injections have no role in the treatment of OCD. Physical therapy is not typically used as initial treatment, but may be required after the lesion heals, whether with surgery or without.