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Giant Cell Tumour of Talus.

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ABSTRACT

Giant cell tumour of talus is a rare presentation. Younger age group is mostly affected by this giant cell tumour because it is multicentric in contrast to giant cell tumours of long bones. A Patient with a case of Giant cell tumour of Talus was examined because of the extensive involvement total talectomy with tibio calcaneal arthrodesis was done.Follow up after 6 months showed painless and well arthrodesed ankle.
Follow up after 18 months showed no recurrence.
Keywords: tumour, giant cell, talus

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CASE PRESENTATION

- A 19 yr old boy presented with the chief complaints of pain in the right ankle for 2 years
- Pain is insidious on onset
- Swelling is present in the right ankle since the last six months and inability to bear weight on right side since the last six months.
- There was no history of fever
- No History of loss of appetite
- No History of loss of weight
- No Similar complaints in other joints or history of similar complaints in the past.
- The family, occupational, recreational and drug histories were not significant.
- The general physical and systemic examinations were within normal limits.

Local Examination

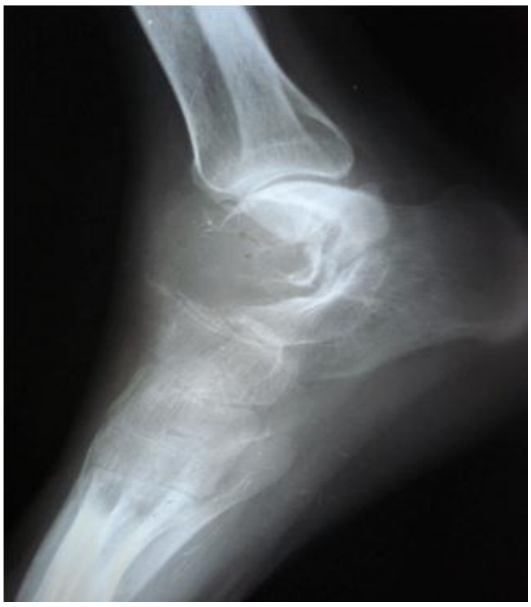
Attitude of the limb: Neutral

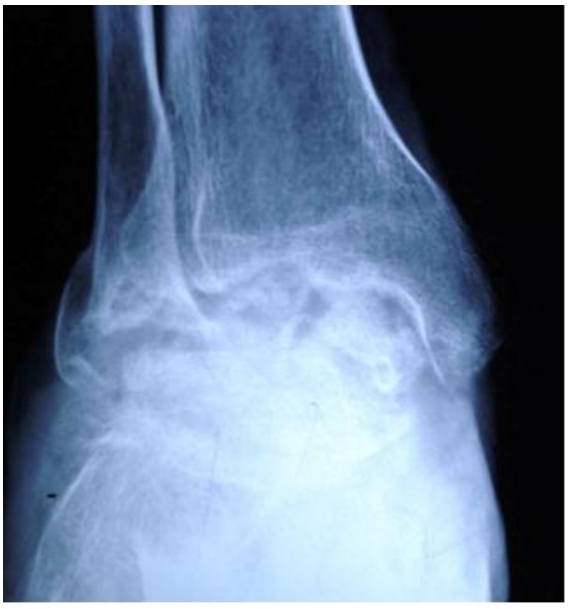
5 × 4 cm swelling over dorsum of right foot and anterior aspect of ankle joint.
The local temperature was increased and the swelling was tender.
All movements at the ankle joint were painfully restricted

Investigation:

- Serum biochemistry: Within normal limits.
- AP and lateral radiographs of ankle: Shows a radiolucent lesion occupying the whole of talus with expansion and thinning of the cortex.
- CT scan: Revealed an expansile soft tissue mass in the talus causing cortical destruction and extension into soft tissues. The joint space between calcaneum and talus was well preserved.
- Fine Needle Aspiration Cytology study of the swelling was done and a provisional diagnosis of Giant cell tumour was made.

Pre op: **Post op:**





DISCUSSION [1-3]

- Giant cell tumour, also known as osteoclastoma, is a fairly common bone tumour accounting for 5% of all the primary Bone tumours.

- It is a locally aggressive benign tumour with high chances of recurrence.
- The most common sites are:
    - distal end of femur, upper end of tibia, lower end of radius
- Foot is an unusual site of presentation.
- The clinical picture is that of insidious onset pain, which in many cases may be mismanaged as ankle sprain.
- A history of preceding trivial trauma may be present.

Radiologically:

- Eccentric lytic lesion with cortical thinning and expansion.
- NO reactive new bone formation.
- May invade Joint.
- Pathological fracture may also be seen
- CT scanning permits accurate delineation of the tumour

Treatment Options:

- Partial Talectomy ->Extensive involvement.
- Arthrodesis
- Fresh frozen osteochondral allograft reconstruction.

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