early postoperative period. Provided the diagnosis is established early in the postoperative period, and adequate antituberculosis chemotherapy is instituted, the outcome of joint arthroplasty may not be adversely affected.

No benefits in any form have been received or will be received from a commercial party related directly or indirectly to the subject of this article.

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FABELLAR JOINT CAUSING PAIN AFTER TOTAL KNEE REPLACEMENT

LINDSAY LAIRD

Case report. A 68-year-old man presented in October 1988 with a four-year history of increasing pain in the right knee. The clinical and radiological signs were consistent with osteoarthritis and the symptoms did not respond to conservative measures.

In January 1989 a cemented press-fit condylar (PFC) total knee replacement (Johnson & Johnson, Brunswick, New Jersey) was performed. The patient progressed uneventfully and achieved 100° flexion of the knee.

However, three months postoperatively he complained of pain behind the knee. A hard lump could be palpated in the lateral aspect of the popliteal fossa and pressure on the lump during flexion and extension caused increased pain.

The pain persisted and radiographs, taken at seven months, showed that the fabellar articular surface was parallel to the posterior condyle of the prosthesis (Fig. 1). Manipulation under image intensification confirmed

Fig. 1

Fig. 2

L. Laird, FRCS, FRACS
386 King Street, Newcastle, New South Wales 2300, Australia.

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their close apposition. The fabella did not appear to get caught on the prosthetic components during flexion and extension movements.

A needle was introduced into the fabellar joint under radiographic control and 2 ml bupivacaine was injected

with immediate relief of pain. Surgical removal of the fabella was later performed through a small posterolateral incision. At operation direct articulation was found between the fabella and the posterior condyle of the prosthesis. The fabella showed macroscopic changes of degeneration of its articular surface (Fig. 2) which was confirmed by histological examination.

The knee functioned without pain some four months later.

Discussion. The fabella is a sesamoid bone often present in the lateral head of the gastrocnemius, close to its origin.

There have been isolated reports of pain secondary to a fracture of the fabella (Sagel 1932) and also from chondromalacia of the fabella (Goldenberg 1956; Zimny and Redler 1972; Weiner and MacNab 1982).

Jaffe, Kushner and Klein (1988) reported a case of fabellar impingement upon the posterior rim of the tibial

component, causing pain after total knee replacement. In this case an arthritic fabella articulated with the posterior condyle of the femoral prosthesis to cause localised pain.

No benefits in any form have been received or will be received from a commercial party related directly or indirectly to the subject of this article.

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