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A case report on osteochondroma in humerus in young male

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Abstract

Aim: A case report of 17 year male patient with osteochondroma of humerus bone.

Method: 17 year male patient presented with swelling of left arm since 16 months. On X-ray there was bony swelling with bony stalk present there was no neurovascular involvement in same limb. Patient was planned for removal of tumor lesion with fibula cortical graft fixed with cortical screw.

Result: Patient had full range of motion at shoulder and elbow joint with full incorporated fibula graft at 6 months.

Keywords: Osteochondroma, fibula graft, distal femur

Introduction

Osteochondromas are common benign tumors. They are probably developmental malformations rather than true neoplasm. The lesion consist of a bony mass, often in a form of stalk, produced by progressive endochondral ossification of growing cartilaginous cap. Most lesions are found during a period of rapid skeletal growth. Approximately 90% patients have single lesion. Usually found on metaphysis of long bone near the physis. They are seen most often on the distal femur, the proximal tibia and the proximal humerus.

Case study

A 17 years old male patient with swelling over left arm since one year presented with a size of 7*4*3 cm on lateral aspect of left arm 5 cm distal to acromian process with normal distal neurovascularity. Following complete radiological evaluation including MRI that revealed sessile benign Osteochondroma arising from humeral diaphysis.

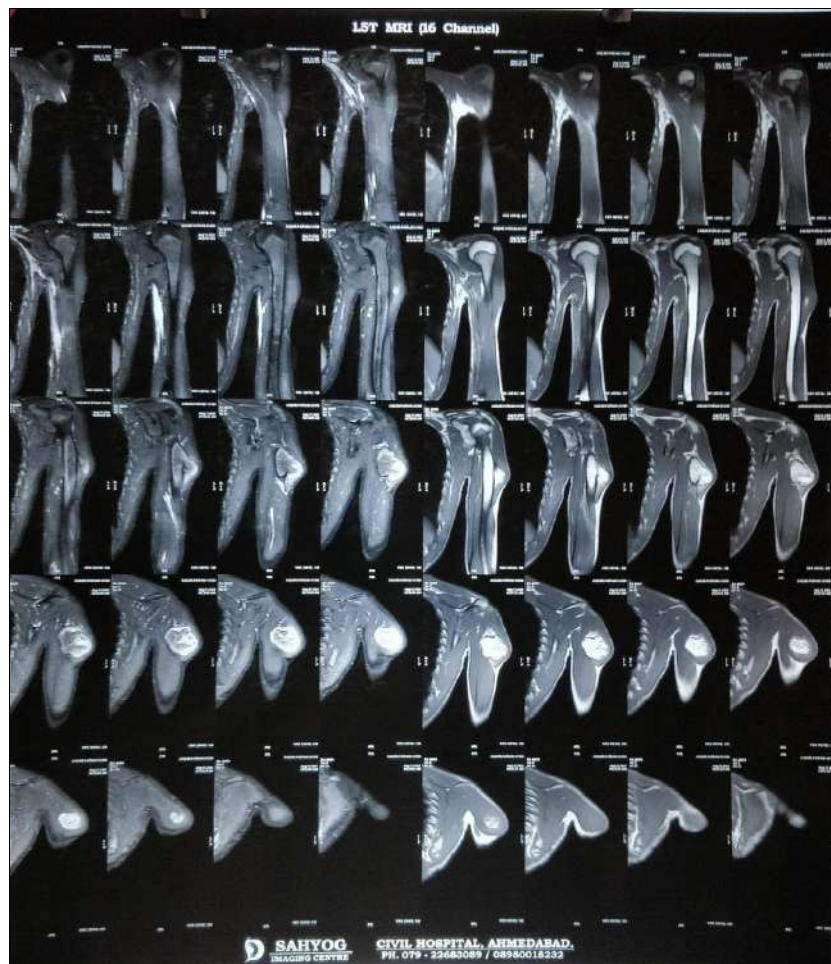


Fig 1: Pre-operative Photo s/o Osteochondroma lesion with stalk

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Fig 2: Pre-operative plain radiograph



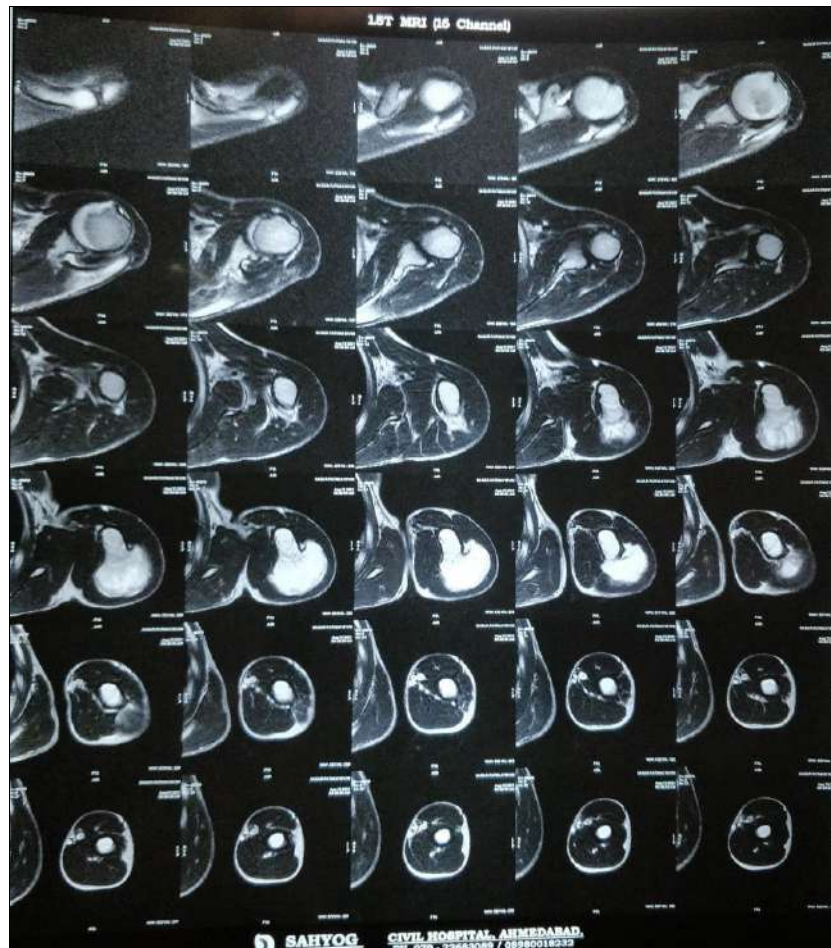
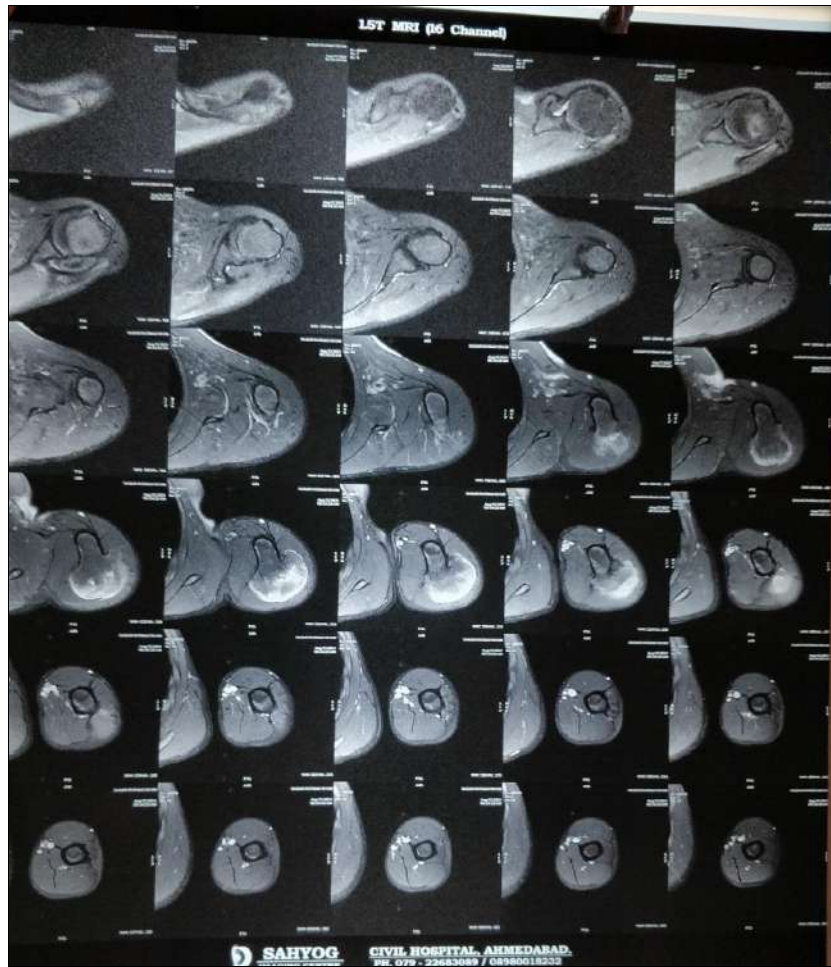


Fig 3: MRI scan pre-operatively

Operative technique

Patient underwent en block resection which was followed by fibular graft fixed with cortical screws. After taking elliptical incision over the mass soft tissue dissection done and Musculocutaneous and axillary nerve isolated. After that whole bony mass resected and autograft of fibula fixed

with cortical screws. After adequate post operative management patient was discharged on post operative day 6. Histopathology of resected mass confirmed Osteochondroma. After 7 months follow up patient presented with full range of motion and no any significant complains or complications or recurrence.

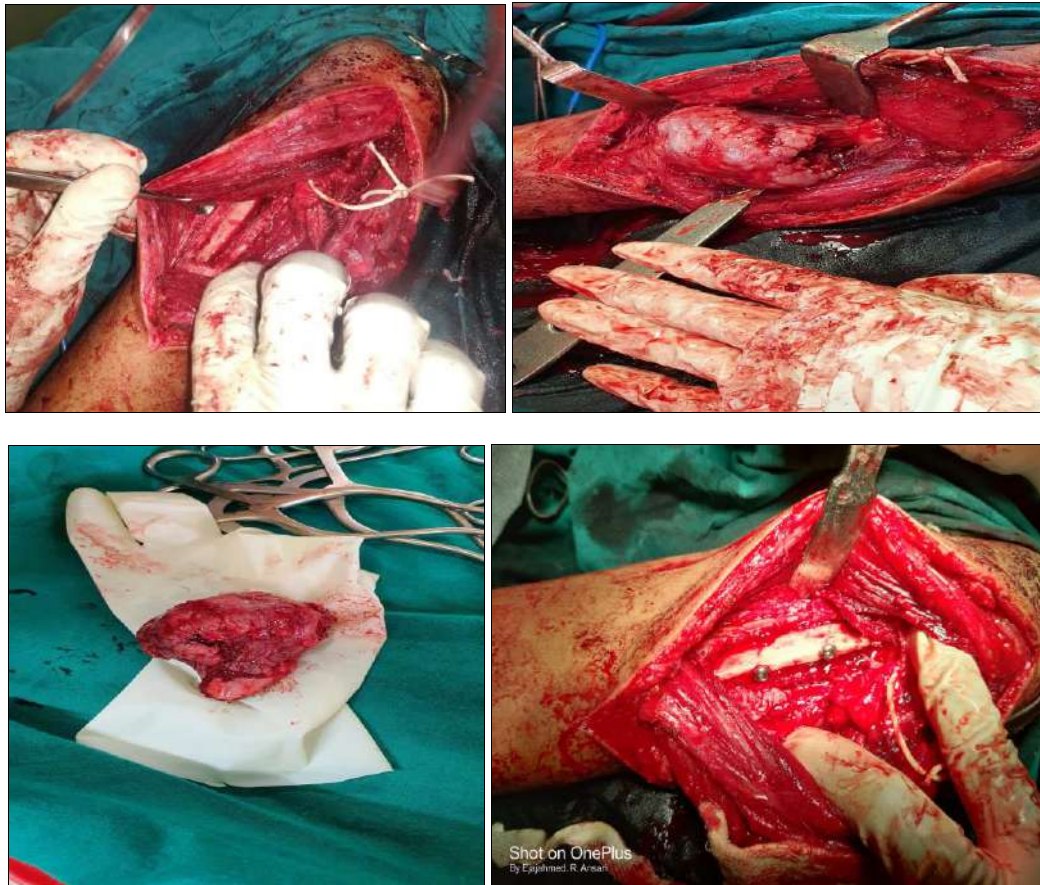


Fig 3: Intraoperative photos



Fig 4: Post-operative radiograph



Fig 5: Post-operative clinical photo



Fig 6: 7 months follow up



Fig 7: 7 month follow up plain radiograph

Conflict of Interest

Not available

Financial Support

Not available

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