

ENCHONDROMA: AN INCIDENTAL FINDING ON IMAGE INTENSIFIER MACHINE

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Introduction: Enchondromas are benign cartilaginous lesion that are the commonest primary bone tumors of the hand. They are usually asymptomatic, however, some enchondromas can be presented with pain after minor trauma which results in a pathological fracture. Intralesional curettage is the standard surgical procedure for symptomatic enchondroma. Postcurettage surgical adjuncts still remain a controversy.

Discussion: A 31-year-old master trainee, presented with incidental finding of lytic lesion over the proximal phalanx right middle finger on image intensifier machine while performing surgery. The patient noticed there was swelling over the right middle finger for the past 10 years, however, the patient was symptomatic. There is no significant history of injury to right middle finger, no fever and did not have any constitutional symptoms. There is no swelling in other body part and no family history of malignancy. Clinical examination revealed a bony swelling over the proximal phalanx right middle finger. there was no attachment to skin and the range of motion of the finger was not affected. Distal neurovascular was intact and no lymph node was palpable. Plain radiograph and magnetic resonance imaging (MRI) of right hand was performed and suggestive of endonchroma. Intra-operatively there was two lesions over the proximal phalanx, cartilaginous material was curated from the lesions. Demineralized bone matrix was inserted after curettage. Surgery was uneventful, patient was discharged well after surgery. Histopathology examination confirmed the diagnosis of enchondroma.

Conclusion: Outcome of surgery is satisfactory as reported by various literatures. Incidentally detected lesions may be monitored, symptomatic lesions are effectively treated with intralesional curettage. Patient with large osseous defects or potential risks of pathological fracture, bone grafting is beneficial for early rehabilitation and functional recovery. Nevertheless, postcurettage surgical adjuncts still remain controversy. Generally, surgical outcome is favorable, with low major complications and recurrence rates for solitary lesions.