Pathological Fracture in Fibrodysplasia of Polyostotic of Bilateral Foot

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INTRODUCTION:

According to Lichtenstein's 1938 original description of the condition, fibrous dysplasia is characterised by fibrous tissue gradually replaces the regular bone constituent. In the clinical situation, FD may show as either monostotic (i.e., affecting a single bone) or polyostotic (i.e., affecting numerous bones). As in the case of McCune-Albright syndrome, the polyostotic type may be accompanied by numerous endocrine abnormalities. The prognosis for FD is often good, and the tumor's biological activity is unrelated to localisation.

REPORT:

We report a case of 5 year old girl, presented to us with pain over over left foot preceeding with trauma. She jumped from a sofa then suddenly complain of pain over right foot. On presentation, child was afebrile with normal vital signs. Child had antalgic gait. Right lower limb strength and passive range of motion were normal. Mild tenderness over medial aspect of midfoot. Other physical examination and blood investigations were unremarkable. Radiographic investigations shows torus fracture base of right 1st MTB and multiple ossification centres of navicular and medial cuneiform bones bilaterally.

DISCUSSIONS

FD is usually diagnosed based upon radiological investigations and biopsy is unnecessary in typical cases. The aim of treatment in asymptomatic and undeformed cases is surveillance. In polyostotic cases and when surgical treatment is not proper, medical treatment is advised to end the pain, stabilizing the lesion, and support bone structure to avoid fractures. Bisphosphonates are preferred in such treatments at various dosages. Surgical therapy is preferred in treating deformities, to avoid pathological fractures and treating symptomatic lesions.

CONCLUSION:

FD is an uncommon bone tumour that is often benign in nature. A thorough and accurate diagnosis may help to stop malignant transformation and recurrence.

Figure 1. x-ray of right foot

Figure 2. CT scan of bilateral foot

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