Bilateral discoid medial menisci: A case report

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Bilateral diskoid medial menisküs: Olgu sunumu

Bilateral diskoid medial menisküsü olan 30 yaşındaki bir olgu sunulmaktadır. Hastada ağrısız klikk anamnezi ve sağ dizde bir spor sakatlanması sonrası ağrı vardır. Horizontal yırtık saptanarak artroskopik olarak parsiyel menisektomi yapılarak konturu sağlanmıştır. Semptomsuz olan diğer dizde de diskoid menisküs teşhisi MRI ile koyulmuştur.

Anahtar kelime: Diskoid menisküs

Bilateral discoid medial menisci (A case report)

The authors report a 30 year old male with bilateral discoid medial menisci. The patient had a history of painless clicking, and pain in the right knee following a sports injury. Partial meniscectomy and contouring was done arthroscopically for a horizontal tear. MRI revealed discoid meniscus in the other knee which was symtom free.

Keyword: Discoid meniscus

Discoid meniscus is an uncommon cause of internal derangement of the knee joint. Especially, discoid medial meniscus is rare. In the literature only four cases of bilateral discoid medial menisci were reported.

Before the use of MRI and arthroscopy, diagnosis of a discoid meniscus was made arthrographically. MRI is a noninvasive technique and must be the first choice for the diagnosis of this pathology.

Case presentation

Bilateral discoid medial menisci was found in a 30 year old male, who was a medical practitioner. He has had a long term history of painless clicking in both knees. In November 1993, a twisting injury happened at the right knee of the patient, when he was playing football. He was referend to the clinic in December 1993, with a pain which was localized at the medial joint line of the right knee increasing with activity. At the physical examination of the right knee a click was found at the medial side. There was no effusion and no evidence of instability. There wasn't any pathological finding at the left knee.

Antero-posterior (A-P) roentgenograms of the knees demonstrated some deeper cupping of both medial tibial plateaus, when compared with the lateral tibial plateaus. This finding was noted only retrospectively after arthroscopical examination of the right knee.

Right discoid medial meniscus was verified by arthroscopy. There was a horizontal tear at the meniscus. Partial meniscectomy and contouring was performed arthroscopically. There was no complaint at the left knee, and medial discoid meniscus of this knee was diagnosed by magnetic resonance imaging. There were no degenerative changes at the meniscus.

Discussion

Discoid medial meniscus is very rare with an incidence of 0.06 to 0.3 per cent (1, 2). The first case of medial discoid meniscus was described by Cave and Staples in 1941 (Cit 1, Cit 5).

Discoid menisci in both knees are rare, and were first reported in 1969 by Nathan and Cole (Cit 1). Our case is the fifth one reported in the literature of bilateral medial discoid menisci and the second one diagnnosed by MRI (1). Smillie described three types of discoid meniscus; 1- primitive (massive), 2- intermediate, and 3- infantile, suggesting that discoid cartilage is due to the persistence of a normal foetal state (Cit 2, Cit 3). In our case both medial discoid menisci were as the found intermediate type.

Horizontal cleavage tears are not uncommon in discoid meniscus (2). Partial meniscectomy for a torn or symptomatic discoid meniscus have been suggested by Patel and coworkers (4). If severe symptoms are not present, in order to maintain the normal function of the knee, as much as meniscal tissue should be preserved.

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