

LETTER TO THE EDITOR

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Comment on: Locking knee after intra-articular migration of broken patella tension band wire: an extraordinary intra-articular migration via pseudarthrosis line

Dear Editor,

We read with great interest the case report entitled "Locking knee after intra-articular migration of broken patella tension band wire: an extraordinary intraarticular migration via pseudarthrosis line"^[1] in the 2013;47(6):444-447 issue of Acta Orthop Traumatol Turc, and we congratulate the authors on their management of the case. However, we would like to make some comments which we believe will contribute to this study:

1. The authors of the case report state that; *a*) specific to patella wires, only one case of intra-articular migration of a broken patella wire has been published in the literature, namely by Chen et al.,^[1,2] and *b*) to the best of their knowledge, their case is the first documented case of patella wire migration intra-articularly via a pseudarthrosis line. ^[1] However, we would like to draw attention to one other study related to this complication.^[3] Hsu WH et al. reported two cases of intra-articular broken patella wire pieces which were successfully removed with simultaneous use of arthroscopy and image intensifier. Thus, contrary to the authors' claim, theirs is not a unique case in the literature.

2. The authors' hypothesis, which is difficult although not impossible, is that the route for intra-articular migration of a patella wire is the pseudarthrosis line providing an orifice to the joint space. However, in the two cases reported by Hsu et al. intra-articular migration occurred in the absence of pseudarthrosis. Therefore, this hypothesis, while it may appear logical and be valid for their case, is not the only mechanism for intra-articular migration of broken wires.

3. Arthroscopy is a good choice for removal of small intra-articular foreign bodies. It is not an easy procedure however, particularly if a significant amount of hypertrophic synovial tissue envelops the object or the object is out of sight of the scope. For removing radiopaque substances, an image intensifier may provide information on the exact location of the object within the joint cavity. Hsu WH et al. used an image intensifier during arthroscopic probing to precisely locate the wires enveloped by synovial tissue.^[3]

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