

Ankle impingement: arthroscopic treatment of anterior osteophyte in patients with haemophilia

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Introduction: The haemophilic joint is prone to bleed with trauma. Spontaneous bleed could occur in severe haemophilic patients (< 1% activity coagulation factors)¹. Anterior impingement is made with the clinical symptoms and signs of pain and dorsiflexion limitation in ankle anterior region². Images studies as Rx and MRI has to be performed³. This pathology has important disability in patients with haemophilia.⁴

Objective: The aim of this work is to evaluate arthroscopic treatment of painful ankle arthropathy with movement limitation with anterior osteophyte.

Methods: Twelve ankles in 11 patients underwent surgery, all of them with ankle anterior osteophyte, with pain and movement limitation. The mean age was 24 ± 8. There were 5 (41,7 %) patients with haemophilia A mild, 6 (50%) with A severe, and 1 (8,3%) B severe. AOFA (American Orthopaedic Foot and Ankle Society) score was taken before surgery. Images studies were performed to demonstrated the lesion (photo 1 and 2). Ankle arthroscopy with anterior osteophyte resection was performed in all patients (photo 3). All of them have 6 weeks of without weight bearing. 18.5 month of follow up (5-37 month). 6 month after surgery AOFAS score was taken again to evaluate the progress.

Results: According to the AOFAS score significant differences between preoperative 44 and postoperative 78 was found (p < 0,001). There is an improvement in the patient's clinical, in all patients decreased pain and could resume their daily activities.

Photo 1: Radiography



Photo 2: Nuclear Magnetic Resonance

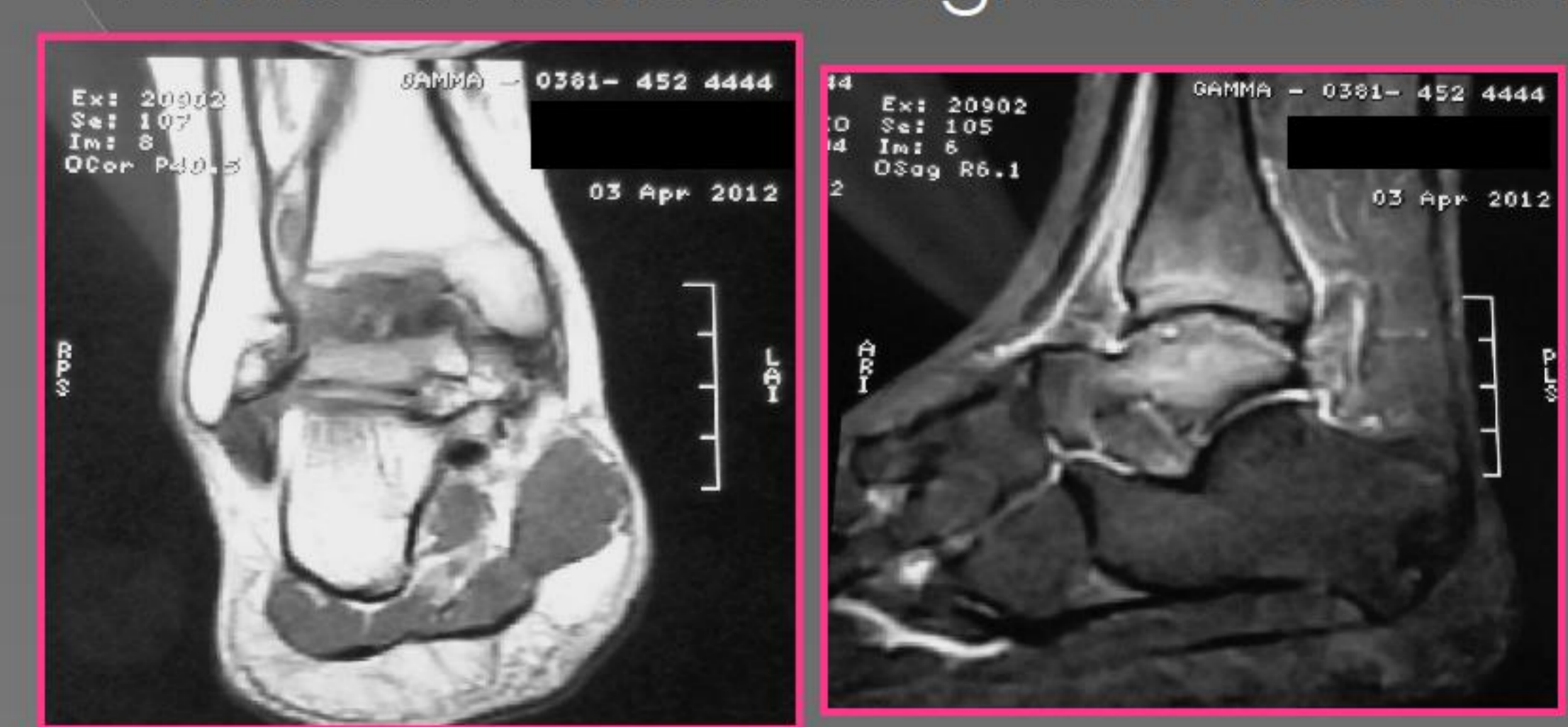
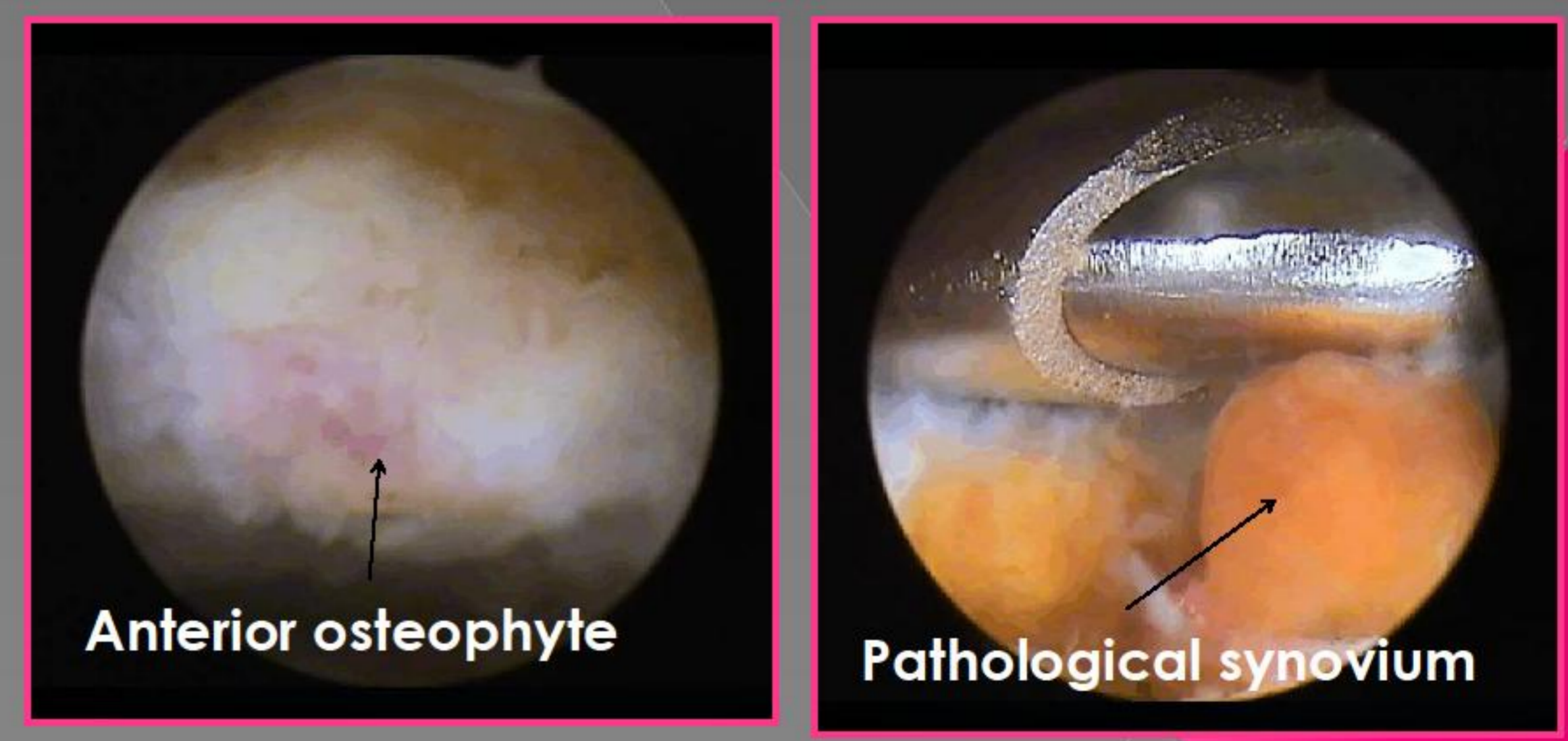


Photo 3: Arthroscopy Images



Patients	Age	Follow up (month)	Haemophilia Type	Diagnostic	AOFA presurgical	AOFA post surgical
1	33	37	B severe	Ankle anterior osteophyte	43	79
2	16	27	A severe	Osteochondritis/ osteophyte	44	74
3	24	22	A mild	Osteochondritis/ osteophyte	40	75
4	24	12	A mild	Osteochondritis/ osteophyte	45	75
5	14	23	A mild	Osteochondritis/ osteophyte	43	76
6	18	14	A mild	Ankle anterior osteophyte	45	80
7	24	14	A severe	Ankle anterior osteophyte	50	79
8	41	9	A mild	Osteophyte/ arthropaty	45	75
9	23	7	A severe	Osteochondritis/synovitis	40	79
10	20	5	A severe	Osteocondritis/osteonecrosis	45	80
11	30	22	A severe	Ankle anterior osteophyte	43	82
12	26	30	A severe	Ankle anterior osteophyte	43	82

Conclusions: Arthroscopic treatment has small approach and less surgery time than open surgery, being this a benefit to haemophilic patients. Arthroscopic treatment based on AOFAS score has significant improvement, in this way improving the quality of life of patients.

Bibliography

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