
	8				
:					
	: 1985	2004			20
(8~29)	8		6 , 2		17
			4 , 2 , 1 , 1		
	C-				
3					
			6 , 3 , 3		
, 2			. 2		
	, aspirin		3		
			2 , 1 , 1 ,		
Legg-Calvé-Perthes disease 1			1		
6 5					1 ,
	1		C-		
:					
	가				
		C-	가		
:					

:

6, 11) . 75% 가 20 가 17 (8~29) 4 , 2 , 1 , 1 8.3 (3 ~1) , 3 가 가 , C- (brodie abscess), (sclerosing osteomyelitis), (non-ossifying fibroma) 12) . 3 , 3 , 6 , 8 가 1 가 2 , 4 가 , 1 cm 2 , 1985 2004 aspirin 3 (Table 1). 8 1 , 1 , Legg-Calve-Perthes

Table 1.

Location	Symptoms								
	Back pain	Thigh pain	Knee pain	Siatic pain	Night pain	Limping	Muscle atrophy	Hip joint LOM	Knee joint LOM
Case 1		+	+		+	+			
Case 2		+				+		+	
Case 3	+				+			+	+
Case 4	+	+		+			+		
Case 5	+	+							
Case 6			+		+		+		
Case 7		+							
Case 8		+	+		+			+	
Total	3	6	3	1	4	2	2	3	1

disease 1 , 1 가
 3 1 24 mm
 (Table 2). C-
 , , .
 1 (Case 7)
 16 3
 8 .
 4 , 6 , 5 , ,
 1 가 .
 , 1 , 1
 , 1 (Fig. 1) 가
 1 . 가
 6 .
 5 . 1 ,
 . 5 가
 가 , (tomography) (Fig. 2)
 가 . 1 가

Table 2.

	Lab			Diagnostic error		Radiologic impression			
	WBC	ESR	CRP	Impression	Study	X-ray	CT	MRI	Bone scan
Case 1	5600	4	0.12	LCP		Normal	Infection or Oseoid oseoma	Synovitis	-
Case 2	6400	12	0.14			Radiolucent lesion	Osteoid ostema	Normal	Hot uptake
Case 3	6400	4	0.1	meniscus tear	Arthroscopy	Normal	Brodie's abscess	-	Hot uptake
Case 4	5100	2	0.1	HLD	L-MRI	Normal	Osteoid ostema	Infection	Hot uptake
Case 5	9500	2	0.4			Normal	-	Osteoid ostema	-
Case 6	8500	1	0.2	IDK	Knee MRI	Normal	Osteoid osteoma	-	Hot uptake
Case 7	6200	24	0.26			Normal	-	-	Hot uptake
Case 8	7500	14	0.3			Normal	Osteoid osteoma	-	Hot uptake

(Fig. 3).

2 (Case 8)

11

3

, 가

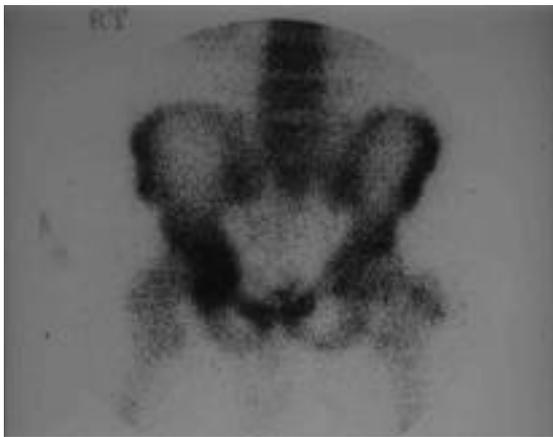


Fig. 1. Bone scintigraphy shows increased uptake in the acetabulum.



Fig. 2. Tomogram shows cortical thickening in the acetabulum

(Fig. 4) nidus

(Fig. 5)

Jeffé⁸⁾

. Brailsford¹⁾

chronic subperiosteal abscess
Henderson Hitzrot¹³⁾ non-suppurative
sclerosing osteomyelitis

. Lichtenstein¹⁰⁾

가

가

Jaffé⁸⁾

50%

8)

18

2

9)

32

6

20

8

가

가



Fig. 3. Postoperative computed tomography shows complete excision of the nidus in acetabulum.

Golding⁵⁾ 20 19

가 Nidus

¹⁰⁾ 3

6

가 8

, Cronemeyer ²⁾

1 MRI

Kattapuram ⁷⁾

, 가

Golding⁵⁾ Jaffe⁶⁾

, aspirin

가 가

가

Schulman⁶⁾

Brodie

Golding⁵⁾

abscess, sclerosing osteomyelitis of Garre,

¹²⁾ 8

2 ,

8

3

2 가

, C-

가 , 1



Fig. 4. Computed tomography shows the typical appearance of subperiosteal osteoid osteoma in the inferomedial portion of the femoral neck.



Fig. 5. Postoperative computed tomography shows complete excision of the nidus.

4,13) Glass 4)

Nelson 13)

가

가 4 1

, 2

. 1 T1

, T2

가

6 5

nidus

가 5

가

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Abstract

Osteoid Osteoma Around the Hip Joint

**Tai-Seung Kim M.D., Jong-Heon-Kim M.D., Bong-Gun Lee, M.D.,
Soon-Myung, Kim M.D.**

*Department of Orthopedic Surgery
Hanyang University College of Medicine, Seoul, Korea*

Purpose: We experienced 8 cases of osteoid osteoma arising around hip joint which had some characteristics that differ from those arising on long bone. we reports the characteristics of osteoid osteoma arising around the hip joint.

Materials and Methods: 8 cases of osteoid osteoma were diagnosed during 1985 to 2004 at hanyang university hospital. all cases were confirmed pathologically. 6 cases were male, 2 cases were female patients. The mean age was 17 years old (ranged from 8 to 29). They occurred in intertrochanteric area (4 cases), subtrochanteric area (2 cases), acetabulum (1 case) and femoral neck (1 case). We used radiologic tools including magnetic resonance image, computed tomography, bone scintigraphy. clinicopathologic test including erythrocyte sedimentation rate and C-reactive protein.

Results: The patients expressed various symptoms including thigh pain, knee pain, low back pain and radiating pain respectively. 2 patients had experienced operation on knee joint. 3 patients showed limping gait. Aspirin relieved the pain in 3 patients. The difference in circumference was 1cm between both thighs in 2 cases.

Conclusion: Patients with osteoid osteoma arising around hip joint which have various symptoms such as severe knee pain and claudication, differ from infectious disease by clinicopathologic test including erythrocyte sedimentation rate and C- reactive protein and had better diagnostic result in computed tomography.

Key Words: Osteoid osteoma, Hip joint

Address reprint requests to

Jong-Heon, Kim M.D.
Department of Orthopedic Surgery, Kuri Hospital,
Kyomoon-dong, Kuri-shi, Kyungki-do, Korea
TEL: 82-31-560-2316, Fax: 82-31-557-8781, E-mail: jhkim111@hanyang.ac.kr