



## Uncommon Cause of Knee Pain in Behçet's Disease: Suprapatellar Synovial Chondromatosis

*Behçet Hastasında Nadir Diz Ağrısı Nedeni: Suprapatellar Sinoviyal Kondromatozis*

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### To the Editor;

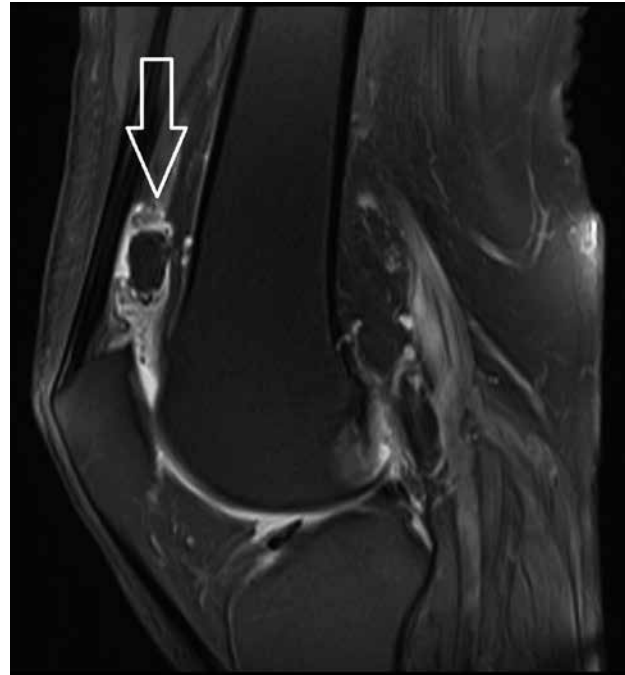
A 44-year-old male patient with Behçet's disease presented to our clinic with progressively worsening right knee pain and suprapatellar swelling. The knee pain started about a month previously and increased over time. The characteristic of the pain was mechanical. He did not feel pain while sleeping. Previously, he had received analgesic medications but there had been no significant improvement. There was no pain in any other joint, and there was no history of disease or trauma and arthritis attack associated with the knee. The patient had a history of Behçet's disease for five years and patient was using colchicine 3x1 pozology a day. On physical examination there was no arthritis findings. Patella shock test was negative. The patient was seen to have visibly swollen suprapatellar area. On palpation the swelling was hard, non-mobile, well defined, and measured 2x1 cm. Radiography of the knee indicated multiple soft tissue calcifications outside the joint capsule of the right knee. Knee magnetic resonance imaging revealed expanded synovium that contained osteochondromas, which were hypointense all sequences (Figure 1). The patient's blood tests were normal. Arthroscopic debridement were performed with symptomatic right knee joint. Pathology results were evaluated as synovial chondromatosis (SC).

SC is a rare arthropathy of unknown etiology. The disease is generally monoarticular, usually occurs unilaterally in the large joints like the knee, hip, and elbow (1). Primary or idiopathic form may occur in an otherwise normal joint, but secondary SOC may occur due to trauma or degenerative diseases. On the other hand, it may occur in the setting of preexistent osteoarthritis, rheumatoid arthritis, osteonecrosis, osteochondritis dissecans, neuropathic osteoarthropathy, tuberculosis, or osteochondral fractures (2,3). To the best of our knowledge, the suprapatellar SOC of the knee in a Behçet disease is rare, and this encouraged us to report this

case. Secondary SC should be included in the differential diagnosis of Behçet disease's joint pain.

**Keywords:** Behçet's disease, knee pain, suprapatellar synovial chondromatosis

**Anahtar kelimeler:** Behçet hastalığı, diz ağrısı, suprapatellar sinoviyal kondromatozis



**Figure 1.** Magnetic resonance imaging revealed findings consistent with synovial osteochondromatosis in the right suprapatellar area

## Ethics

*Informed Consent:* A consent form was completed by all participants.

*Peer-review:* Internally peer-reviewed.

## Authorship Contributions

*Surgical and Medical Practices:* Fatih Bağcıer, Ahmet Çelik, Akın Erdal, *Concept:* Fatih Bağcıer, *Design:* Fatih Bağcıer, *Surgical and Medical Practices:* Fatih Bağcıer, *Analysis or Interpretation:* Fatih Bağcıer, *Literature Search:* Fatih Bağcıer, *Writing:* Fatih Bağcıer.

*Conflict of Interest:* No conflict of interest was declared by the authors.

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## References

1. Llauger J, Palmer J, Roson N, Bague S, Camins A, Cremades R. Nonseptic monoarthritis: imaging features with clinical and histopathologic correlation. *Radiographics* 2000;20 Spec No: 263-78.
2. Shearer H, Stern P, Brubacher A, Pringle T. A case report of bilateral synovial chondromatosis of the ankle. *Chiropr Osteopat* 2007;15:18.
3. Moll C, Bogas M, JA G-P, Celis R, Vázquez I, Rodríguez F, et al. Macroscopic features of knee synovitis in early untreated Behçet disease and psoriatic arthritis. *Clinical Rheumatology* 2009;28:1053-7.