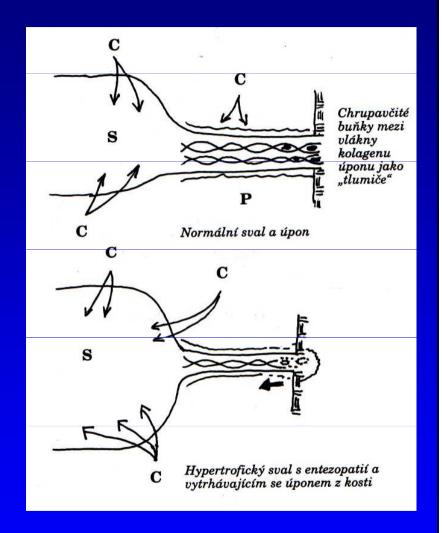
Entesopathies

Z. Rozkydal I.Ortopedická klinika MU v Brně

Entezopathy

Patological changes of insertions of tendons, ligaments and joint capsules into the bone

Dystrophia, microruptures of Sharpey's filaments from bone inflammation, periostitis ossifications, metaplasia



Cause

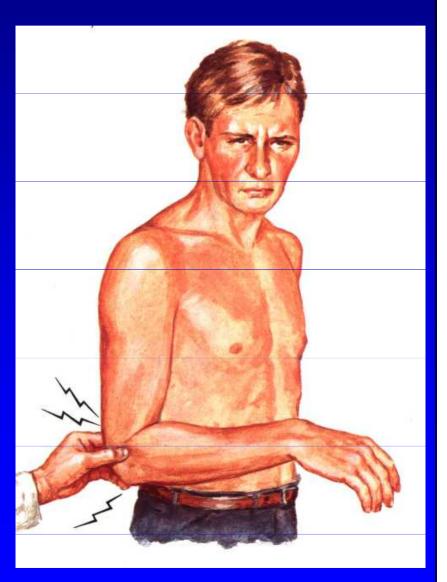
Acute and chronic overloading

Microtraumatisation

Repetitive movements and activities

Epicondylitis radialis humeri Tennis elbow

Pain with activity of extensors
Tenderness
Painfull supination
Painful resisted dorsiflexion of the wrist
and of the third finger
Chair test



Tennis elow- the cause

Entesopathy
Bursitis
Ossifications of insertion of extensors
Painfull annular ligament
Painful synovial plica
Osteochondrosis dissecans
Pressure od radial nerve
Referred pain from cervical spine and shoulder

Tennis elbow

Conservative treatment:
Rest, NSAID
Stretching, sling
Corticoids locally
fysiotherapy
Orthesis or immobilisation



Operative treatment
Op. sec. Hohman
Op. sec. Boyd- Mc Leod

Golf elbow -Epicondylitis ulnaris humeri

Entesopathy of insertions of flexors on ulnar epicondyle Pain, tendernes Resisted movements

Treatment: Conservative

Operative
Distalisation of flexor's insertion

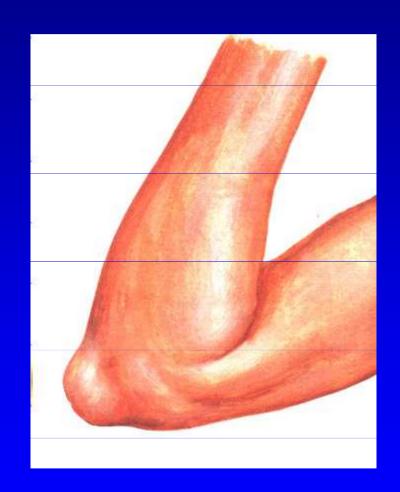


Bursitis of olecranon

Swelling and fluid Tenderness

Treatment:
Aspiration, NSAID
Bandage, immobilisation
Corticoids locally

Risk of pyogenic inflammation

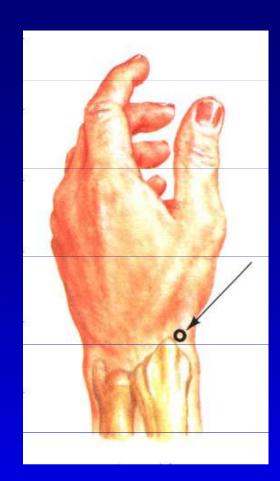


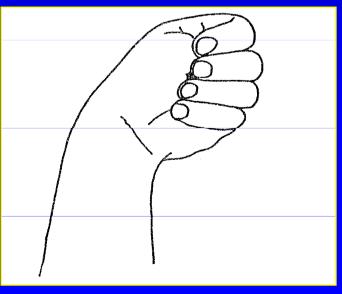
M. de Quervain

Stenosing tenosynovitis of long abductor and short extensor of the thunb

Tenderness over styloid process Finkelstein test

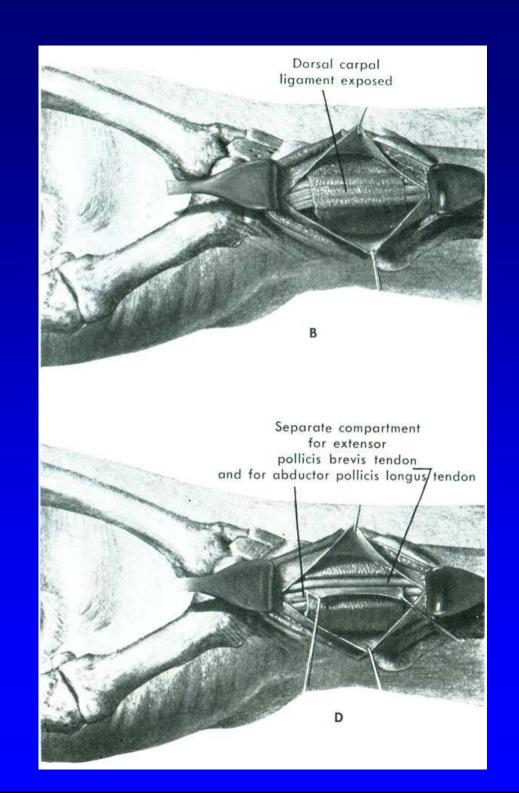
Treatment
Rest, orthesis, plaster
NSAID, corticoids
Surgery





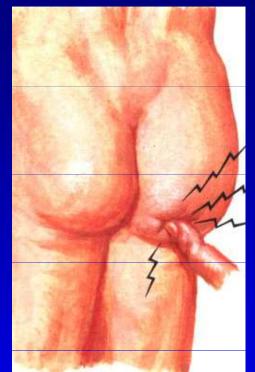
M. de Quervain

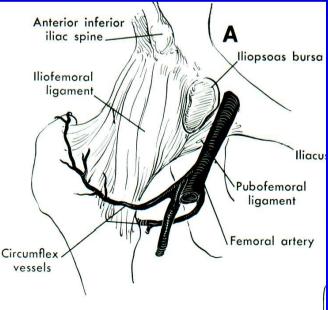
Dissection of the tendon sheat



Bursitis and entesopathies in hip region

Greater trochanter
Ischial tubercle
Bursa ileopectinea
Gracilis syndrom (natažené tříslo)
Spina iliaca ant. sup.
Spina iliaca ant inf.



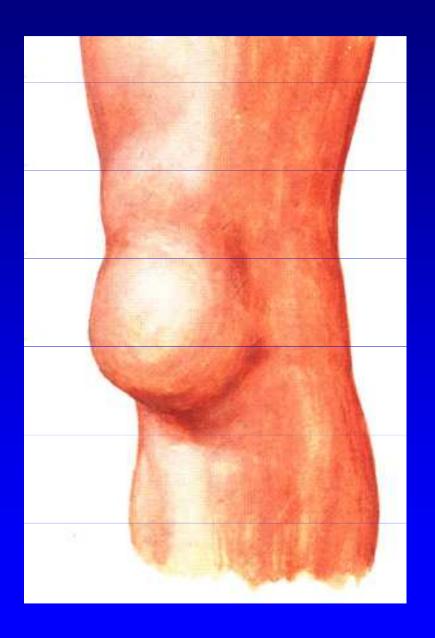


Bursitis in the knee region

Prepatelar bursitis

Bursitis of pes anserinus

Therapy:
Rest, aspiration, corticoids
NSAID, surgery



Baker's cyst

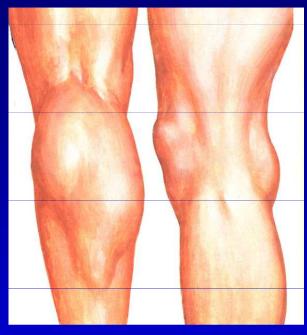
Bursa gastrocnemio- semimembranacea Is connected with joint space Swelling, soft mass in popliteal region Limited movements Pressure onto large veins in popliteal region.

Secondary to pathology in the knee

Therapy:

Conservative – aspiration, local corticoids, NSAID

Surgery





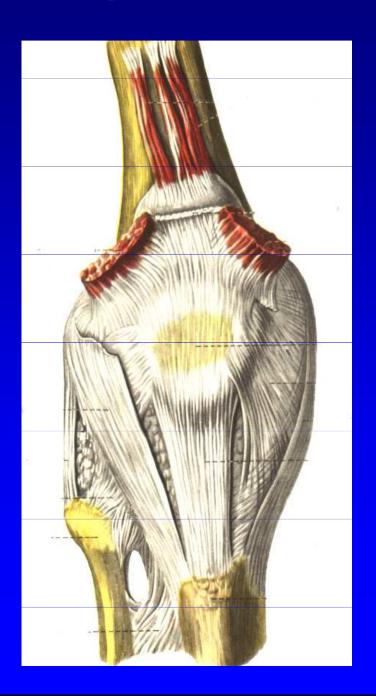
Entesopathies in knee region

Jumper's knee
- distal pole of the patella

m. Osgood- Schlatter

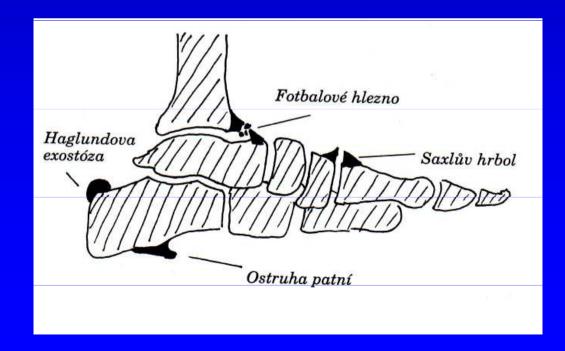
Entesopathy in ligaments insertion

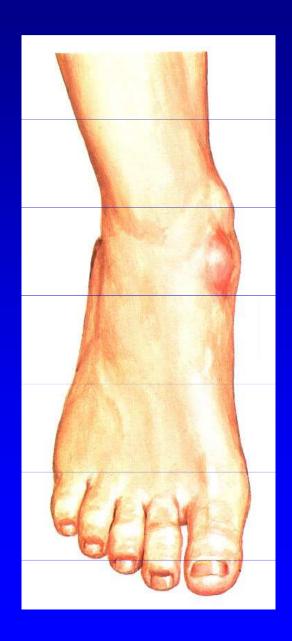
Entesopathy at Gerdy's tubercle



Bursitis and entesopathies in the foot

Achillodynia
Calcaneal spur
Haglund's exostosis
Osteophytes – dorsal
Os tibiale externum



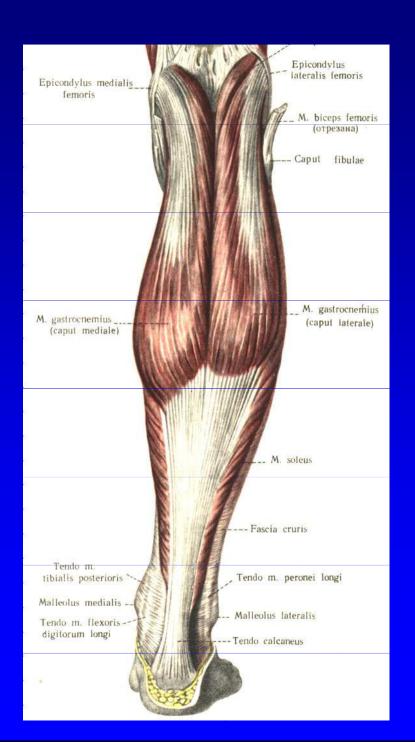


Achillodynia

Painful Achillis tendon and it's insertion

Degeneration
Haemorhage, ruptures
Peritenonitis

The risk of rupture

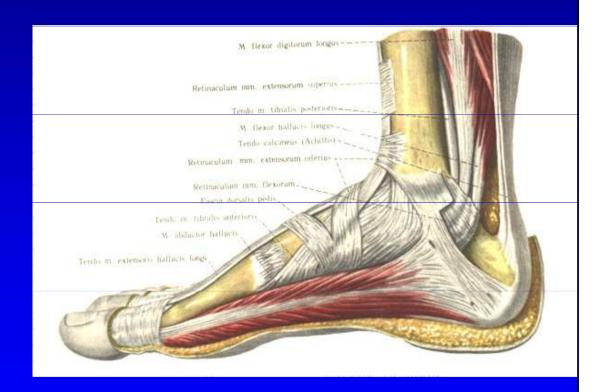


Achillodynia

Conservative treatment:

Rest, taping, NSAID
Physiotherapy
Orthesis
No corticoids!

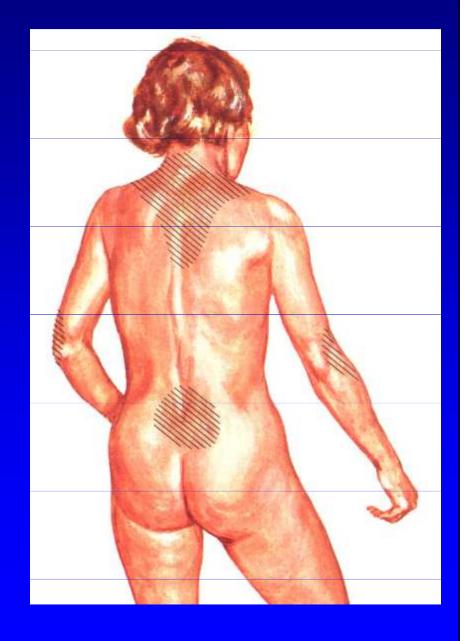
Surgery:
Peritenonectomy
Excision of necrotic tissue



Entesopathy at the spine

Painfull insertions of ligaments and tendons:

Transverse or spinal process Scapula, pelvis



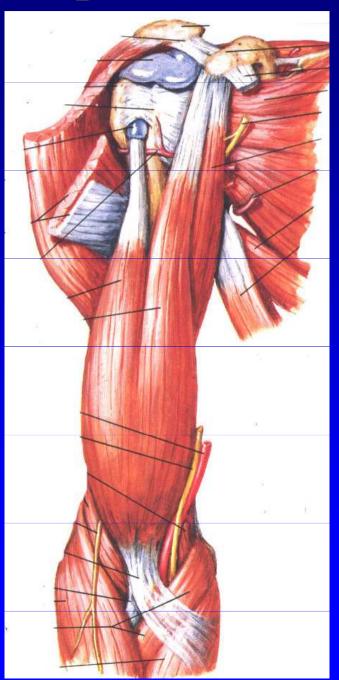
Painful shoulder

Tenosynovitis of tendon of long head of biceps Rupture of tendon of long head of biceps Subacromial bursitis Supraspinatus tendinitis Rotator cuff rupture Impimgement syndrom Frozen shoulder syndrom Osteoarthritis of glenohumeral joint Disorders of acromioclavicular joint **Inflammations Tumors** Referred pain from cervical spine

Tenosynovitis of long head of biceps

Tenderness
Resisted flexion and supination
of the elbow

Therapy:
Corticosteroids locally
Rest, sling
NSAID

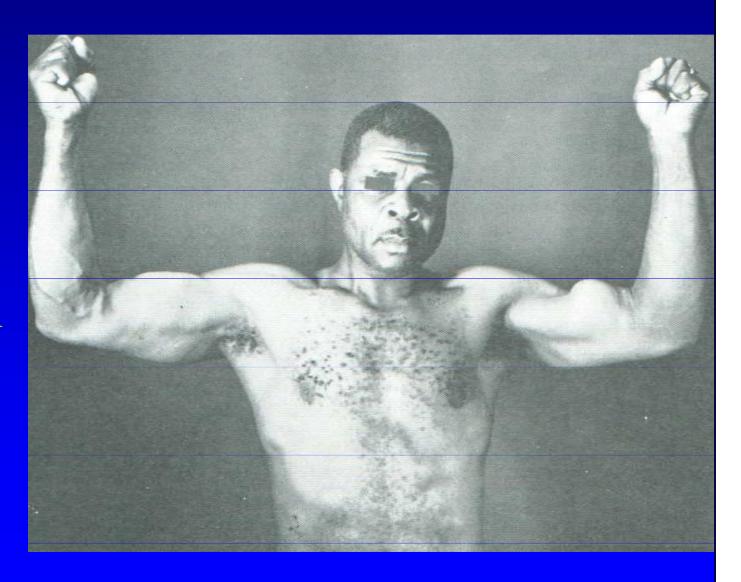


Rupture of long head of biceps

Tenderness

Distalisation of muscle belly

Diminished strength

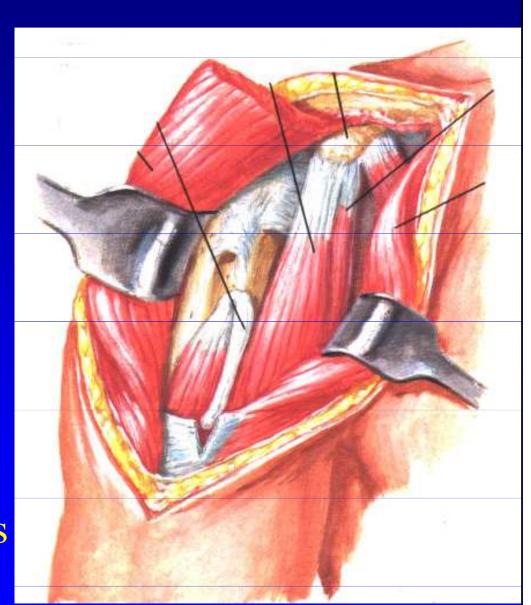


Rupture of long head of biceps

Therapy:

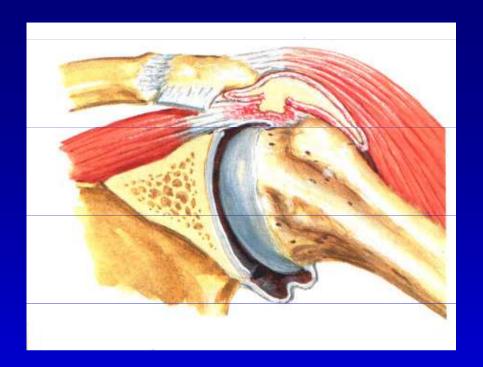
Rest, sling
NSAID
Surgery – up to 40 years
Conservative- over 40 years

Surgery:
key hole fixation to the humerus
Suture to the short head
of biceps



Subacromialis bursitis

Inflammation
White fluid
Severe, burning pain
Restricted movements
Tenderness
Calcifications

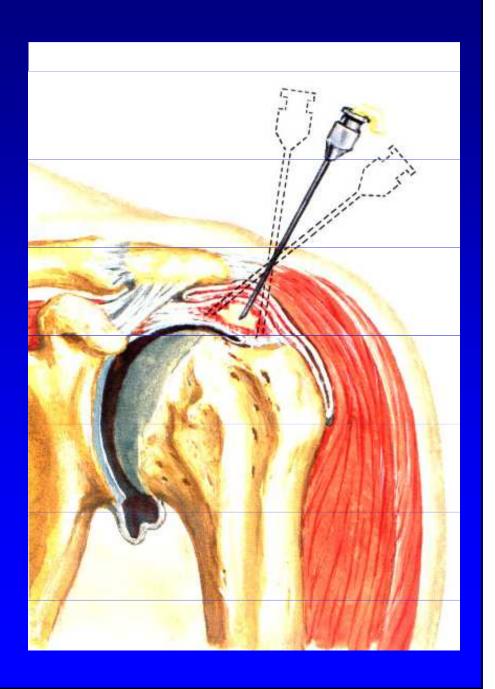




Subacromial bursitis

Conservative treatment:
Rest, sling
Lavage with 2 needles
Corticosteroids locally
NSAID
Physiotherapy

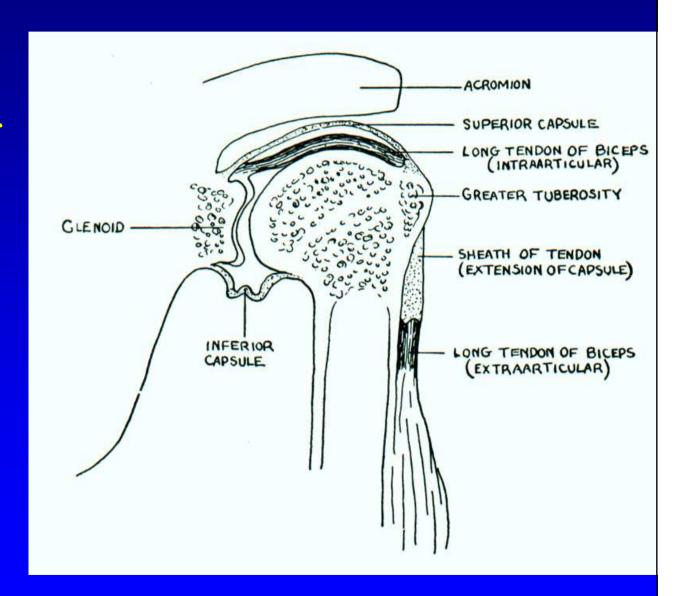
Surgery: Removal of bursa



Supraspinatus tendinitis

Tenderness over greater tuberosity
Limited movements

Therapy:
Rest, NSAID
Corticosteroids
Physiotherapy



Rotator cuff

Rotator cuff:

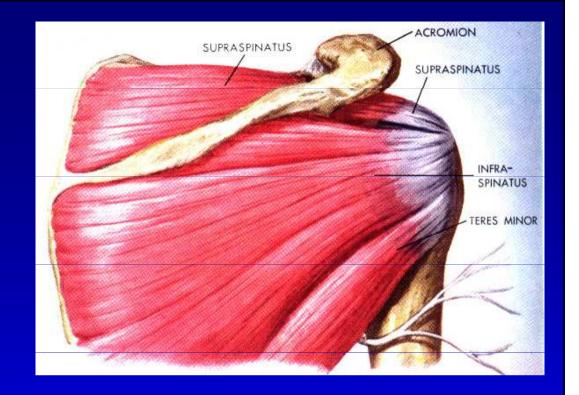
m. supraspinatus

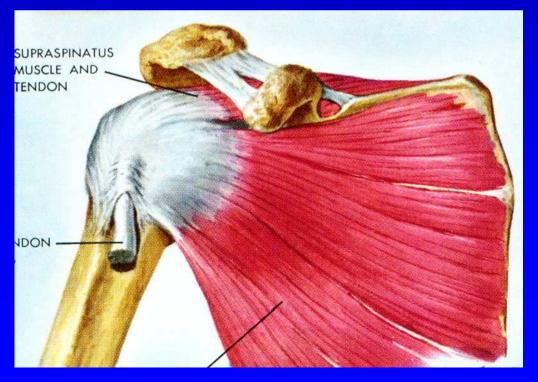
m. infraspinatus

m. teres minor

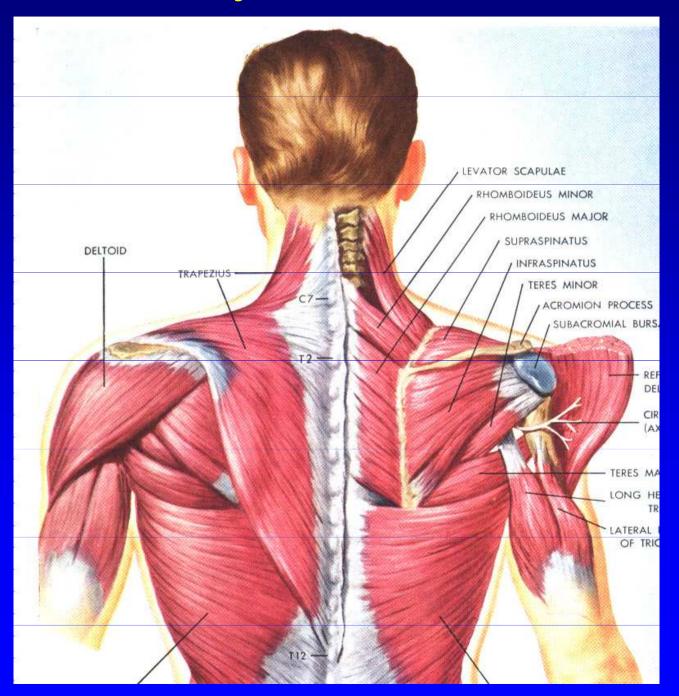
m. subscapularis

Function:
First 30 ° of abduction
Pressure of the humeral head
into glenoid cavity
Depressor of the humeral
head

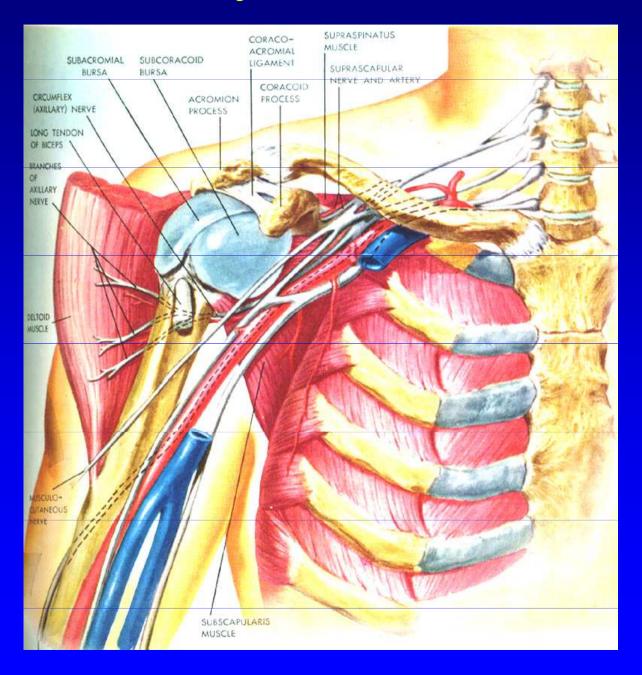




Anatomy of the shoulder



Anatomy of the shoulder



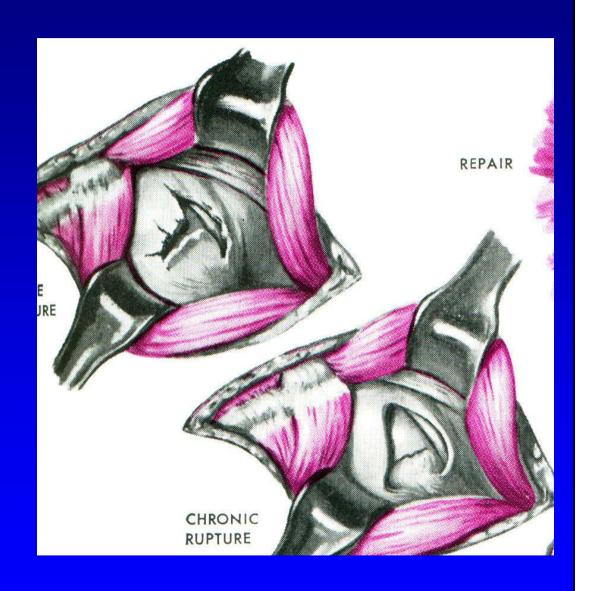
Rupture of rotator cuff

Partial rupture:

Severe pain
Painful arc
Painful abduction
Keeps the arm in position
of adjusted abduction

Ultrasonography

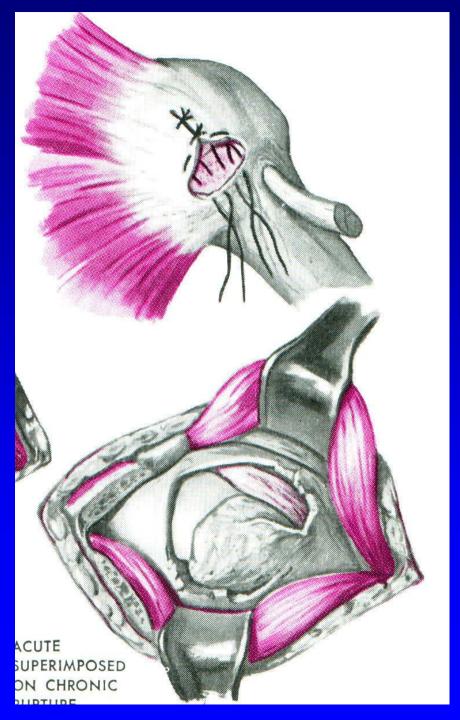
Management: conservative



Rupture of rotator cuff

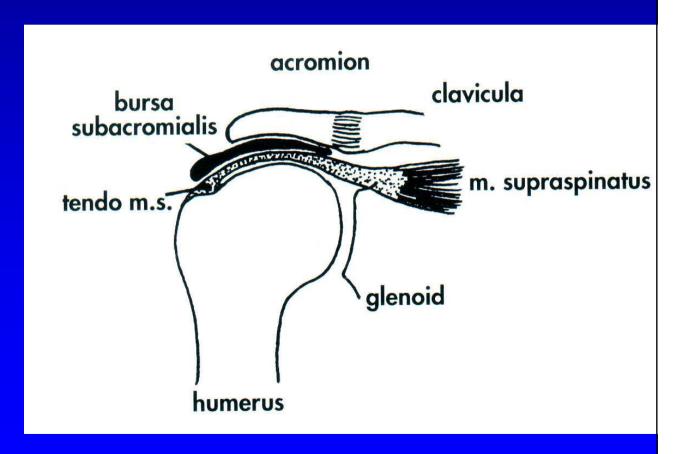
Complete rupture:
No active abduction
Lifting of the shoulder

Managemet: suture: ASK, open attachment to greater tuberosity



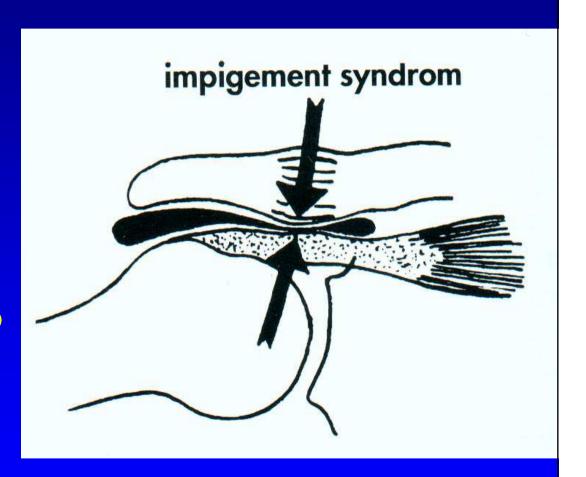
Greater tuberosity impinges to distal surface of acromion and coracoacromial ligament

Narrowing of subacromial space



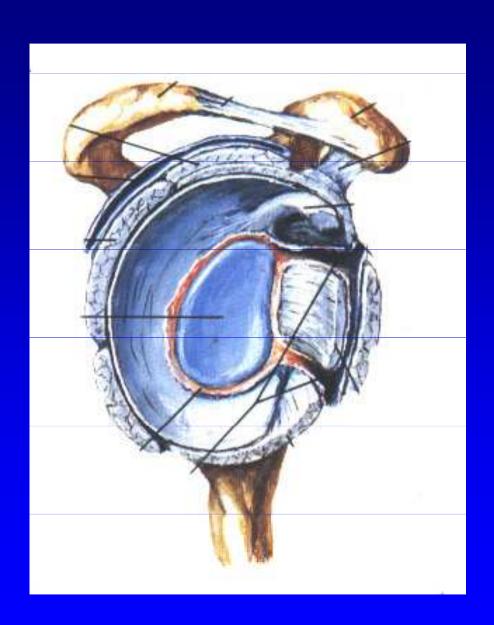
The cause:

Spure of acromion
Change of contours
of acromion
Distal osteophytes of acromio
- clavicular joint
Prominence of gr. tuberosity



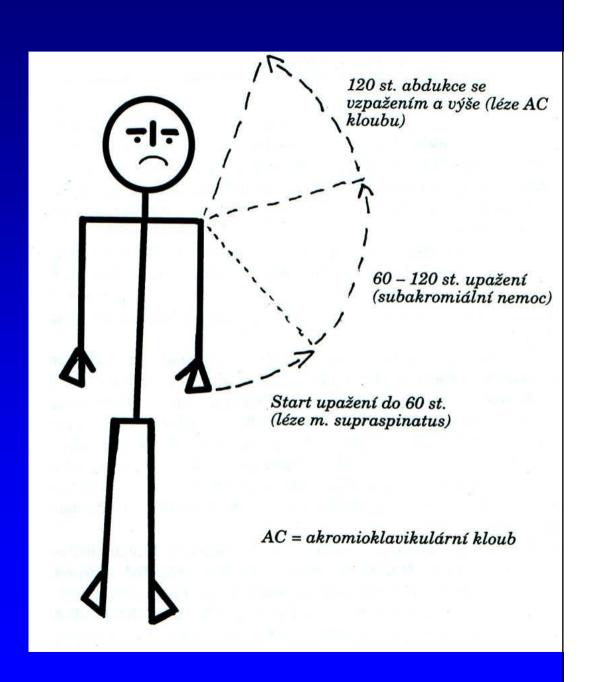
Stages:

- 1. Swelling, hemorhage of supraspinatus
- 2. Fibrosis, tendinitis, bursitis degenerative changes of cuff
- 3. Rupture od rotator cuff and long biceps tendon



Symptoms:
Painful arc
Impingement sign
Impingement test
Jobe test

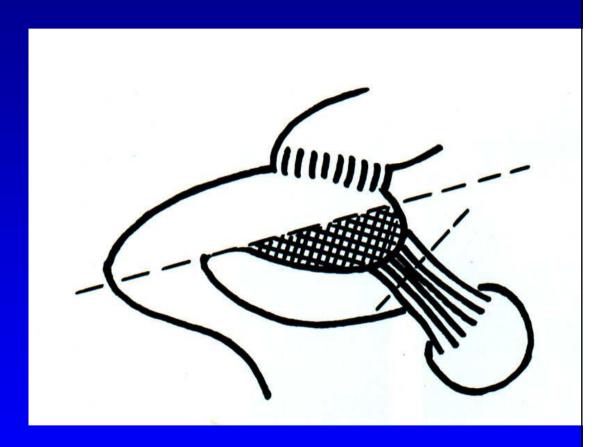
X-ray:
Narrowed subacromial space
Y view- outlet view
Arthrography
Ultrasonography



Therapy:

1. stage: conservative Rest, NSAID, Physiotherapy, Local corticosteroids

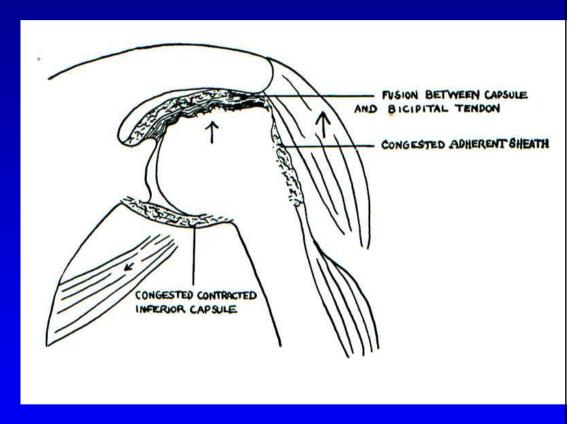
- 2. stage: the same
- + bursectomy, arthroscopy
- 3. stage: ASK or surgery Subacromial decompression Neer- acromioplasty ASK



Frozen shoulder- capsulitis adhesiva

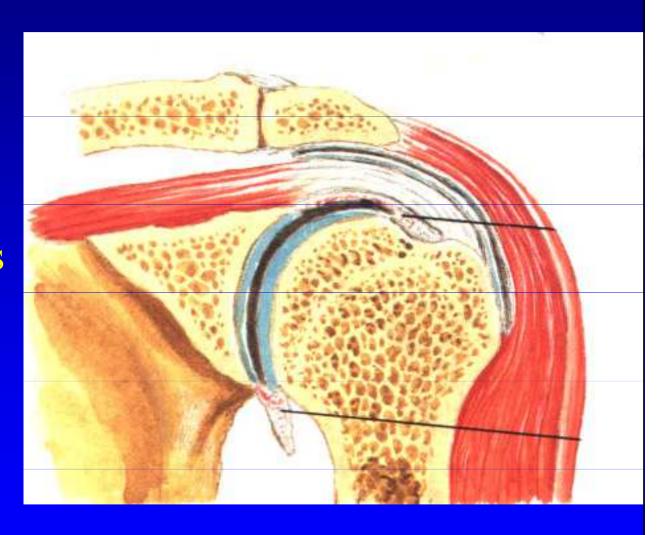
Progressive limitation of movements
Pain
No motivation for movement

Shrinkage of capsule
Adhesions in distal recesus
Tightening of soft tissue
Muscle spasm
Low capacity of joint space



The cause

All conditions limiting joint movements: Impingement syndrom Arthrosis of AC joint Posttraumatic conditions Inflammations Thoralic outlet syndrom Tumors of the lungs Disorders of pleura Cardiac disorders

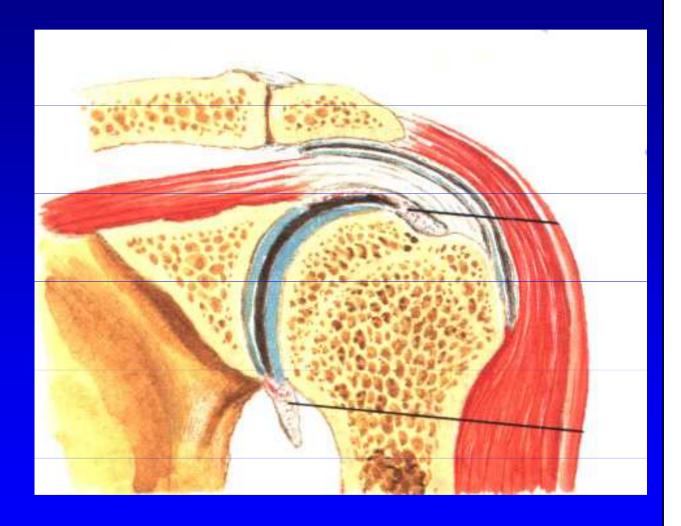


Frozen shoulder

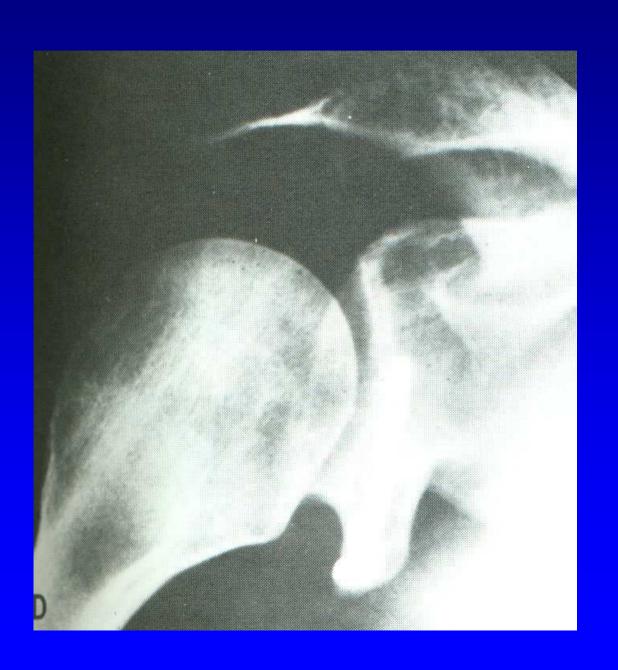
Management: Long lasting period Heat Passive movements **Positioning** Active movements Physioterapy **NSAID** Local corticosteroids **ASK-** decompression

Redressement force

Removal of adhesions

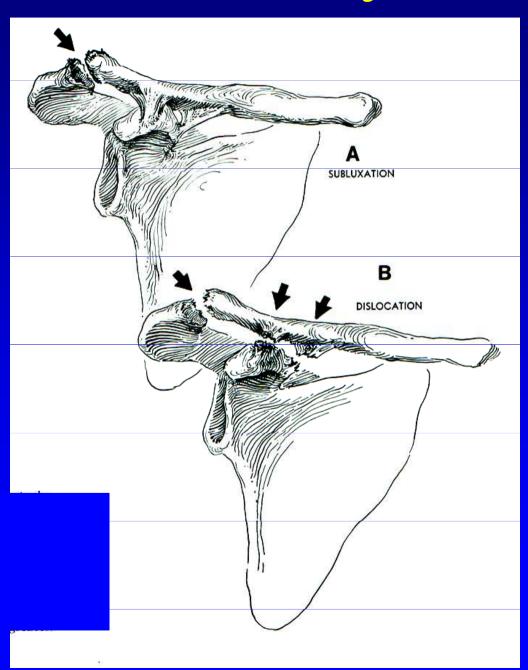


Glenohumeralis osteoarthritis - omarthrosis



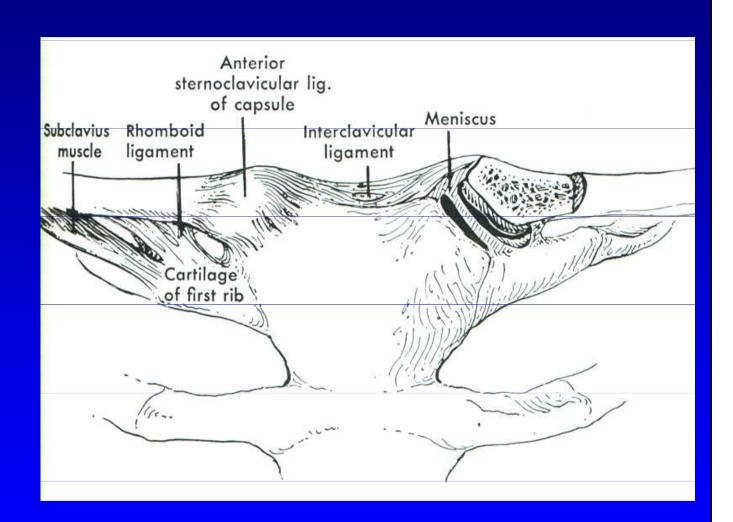
Disorders of acromioclavicular joint

Synovitis
O.A.
Sprain
Subluxation
Dislocations



Disorders of sternoclavicular joint

Synovitis
O.A.
Sprain
Subluxation
Dislocations
Chronic subluxation



Referred pain to the shoulder

Cervical spine
Thoracic outlet syndrom
Cardiac diseases
Lung and pleura disorders
Herpes zoster neuralgia