

RÉUNION ÉLARGIE DE PERFECTIONNEMENT
EN CHIRURGIE ORTHOPÉDIQUE ET TRAUMATOLOGIQUE

44^e
GECO

VEN. 17 > LUN. 20 JANVIER 2020
HÔTEL DU GOLF - ARC 1800

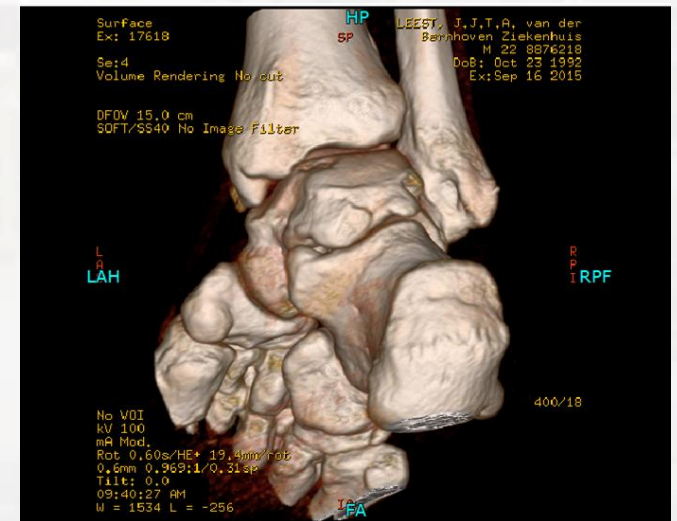
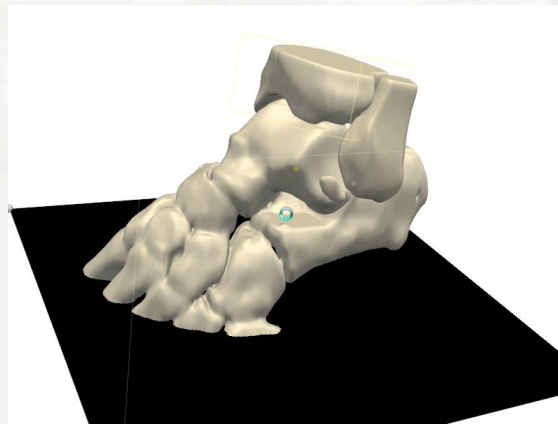
GECO

2^e COURS
PRATIQUE
D'ÉCHOGRAPHIE
MUSCULO-
SQUELETTIQUE
DU MEMBRE
INFÉRIEUR



ICONE Orthopaedics & Sports Trauma

Ultrasound ankle / foot



Ankle conditions

- Posttraumatic impingement
 - Bone spurs
 - Scar impingement
 - Loose bodies
- Tarsal tunnel
- Ganglion / bursa/ tendinitis
- Instability tendon /ligaments
- Arthritis / Gout



Achilles tendon pathology

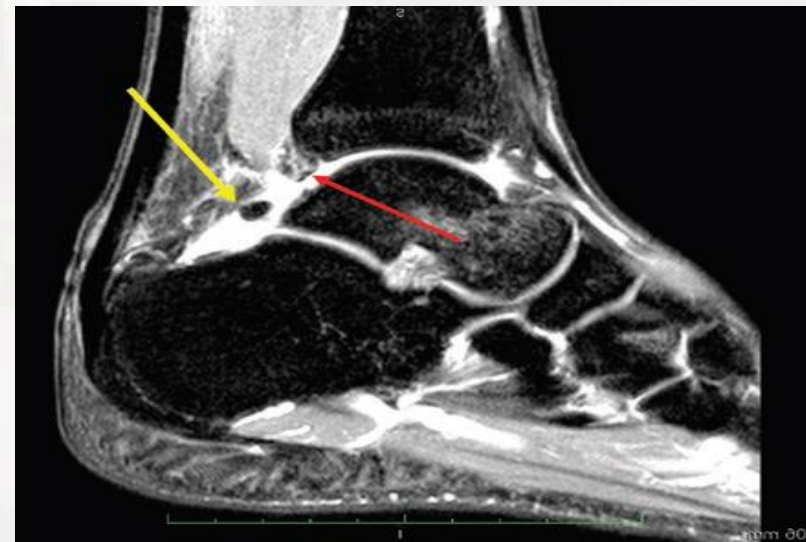
- 1.Achilles tendinitis
- 2.Achilles partial degenerative rupture
- 3.Achilles tendon insertional tendinopathy
- 4.Haglund exostosis bone impingement
- 5.Bursitis
- 6.Retrocalcaneal bursitis
- 7.Posterior ankle impingement



Diagnose met echo

- Bursitis INJ DYN
- Tendinitis INJ DYN
- Impingement INJ DYN
- Adhaesions INJ DYN
- Syndesmosis INJ DYN
- Loose body INJ 3D

Achilles tendon



Achilles tendon bursa





Ankle trauma in sports

Ligaments

Fractures

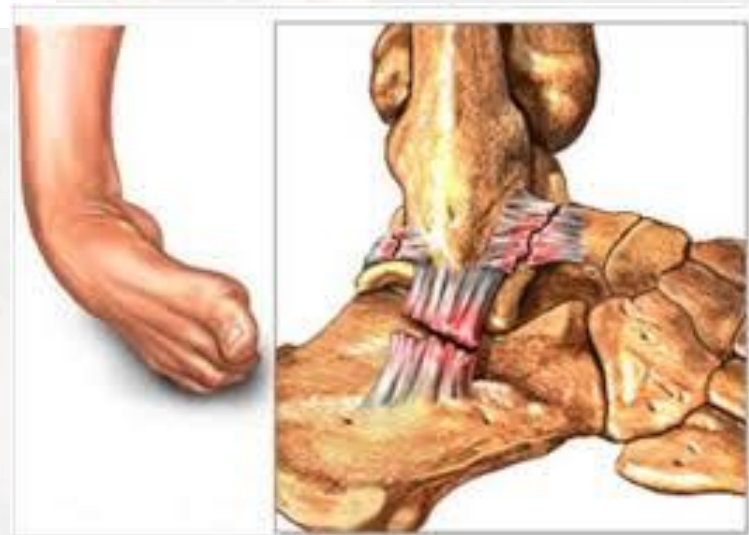
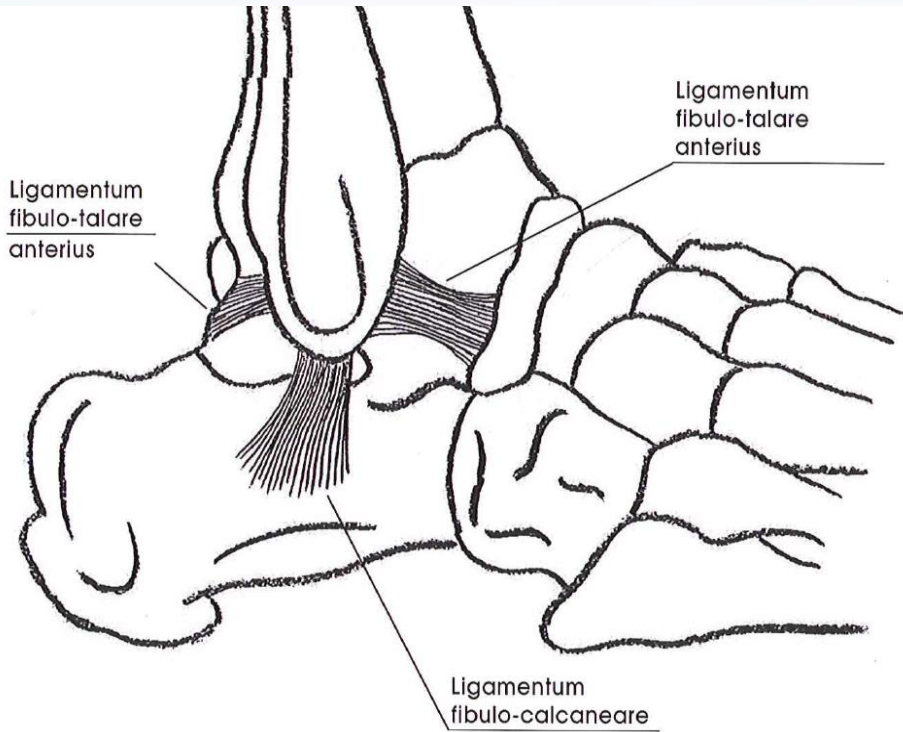
Syndesmosis

Growth plate injury



Occult widening is an insensitive finding for syndesmotic widening such that only the absence of tibiofibular overlap correlates with a syndesmosis disruption on radiographs (double arrow). Medial clear space widening greater than 4 mm correlates with deep deltoid ligament disruption (single arrow).





MRI acute ankle trauma



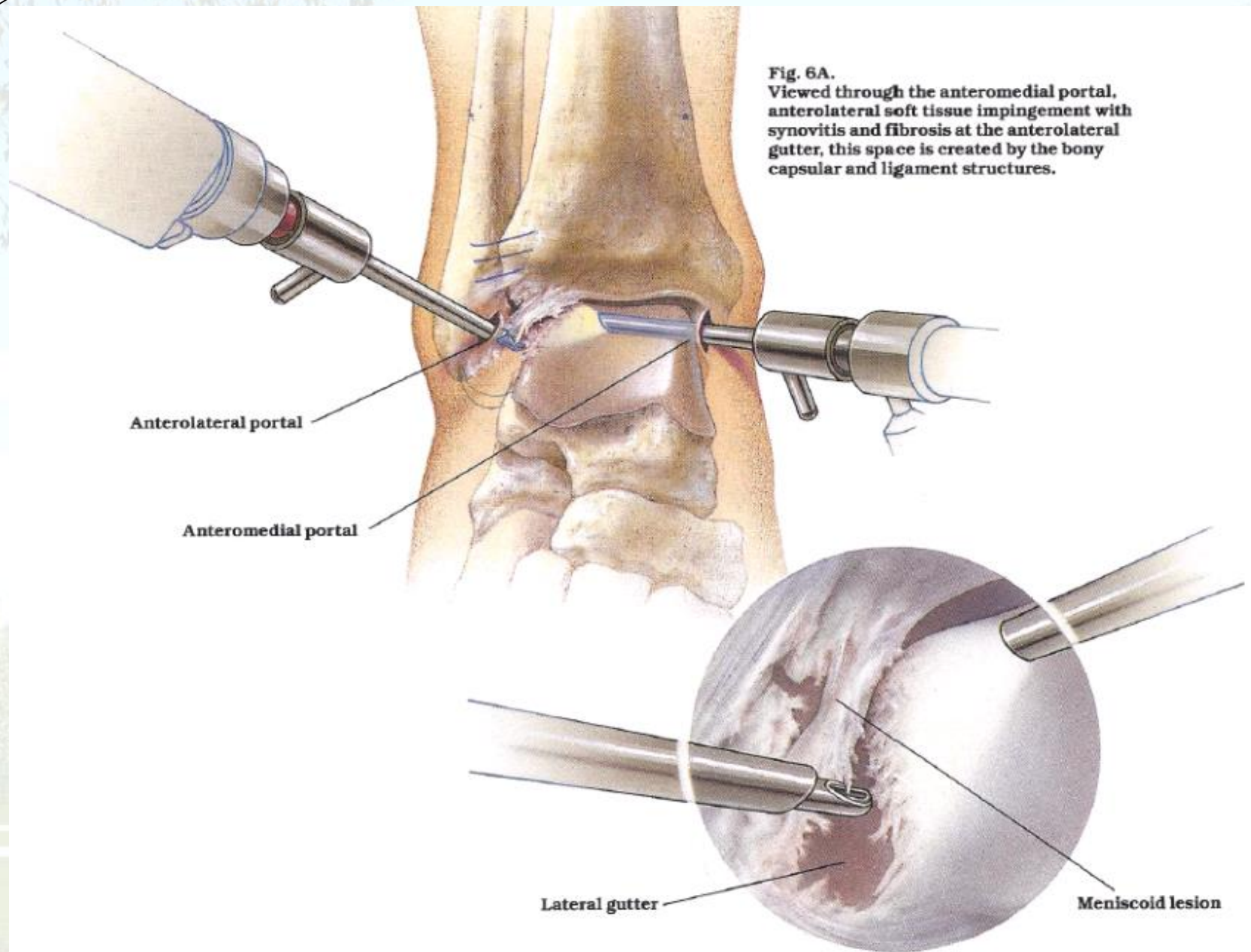
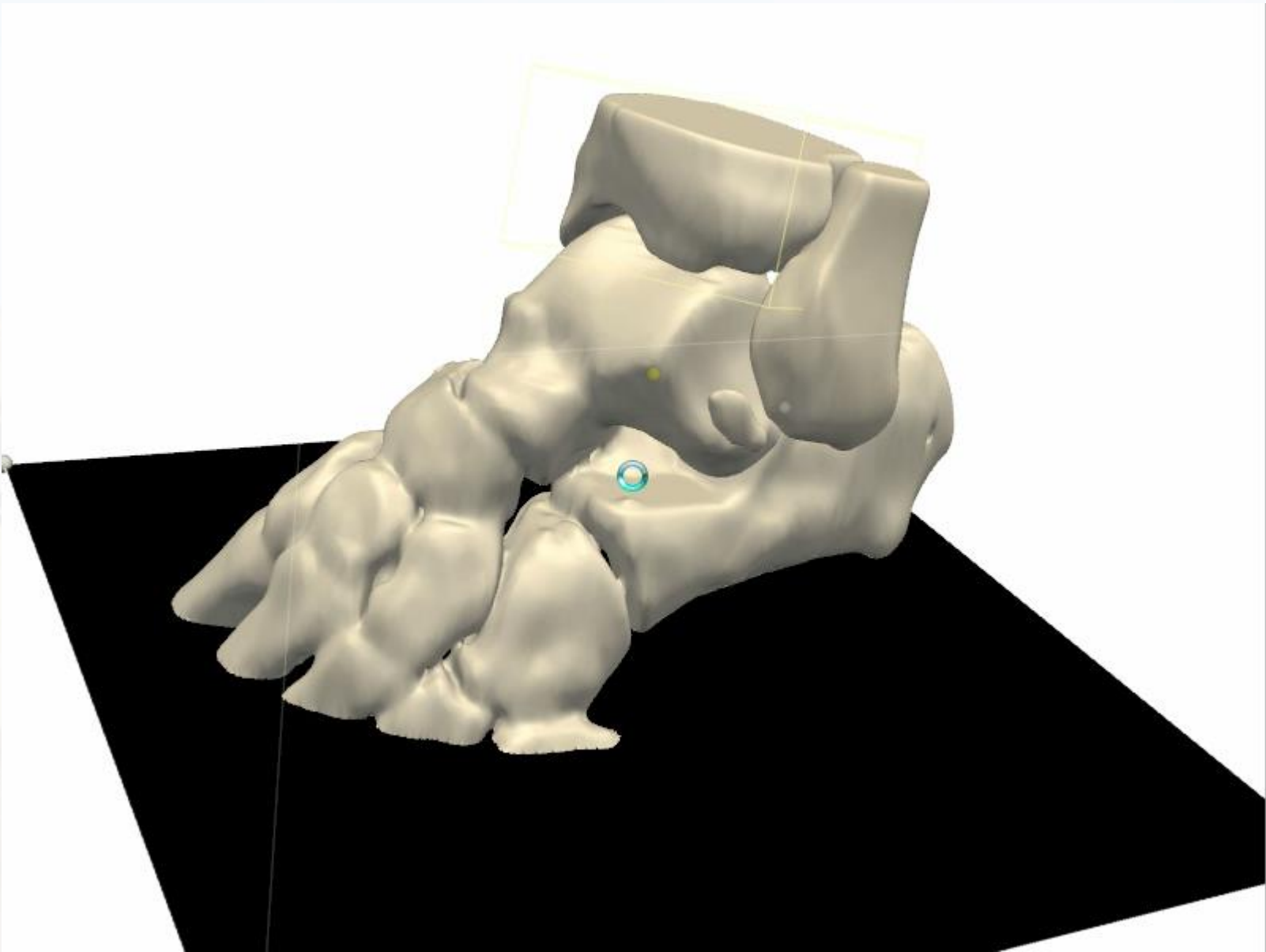
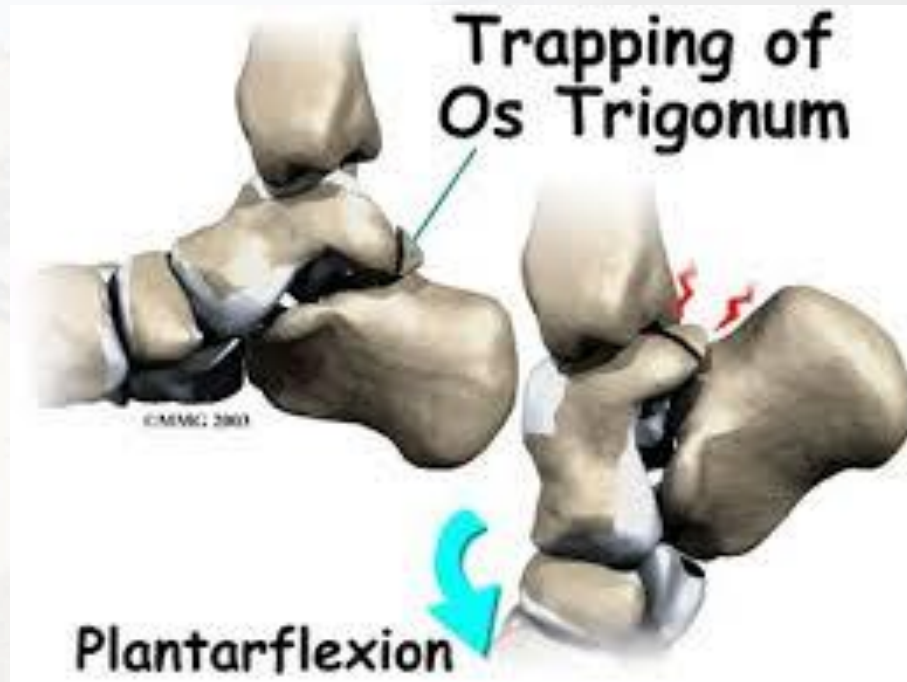


Fig. 6A.
Viewed through the anteromedial portal, anterolateral soft tissue impingement with synovitis and fibrosis at the anterolateral gutter, this space is created by the bony capsular and ligament structures.

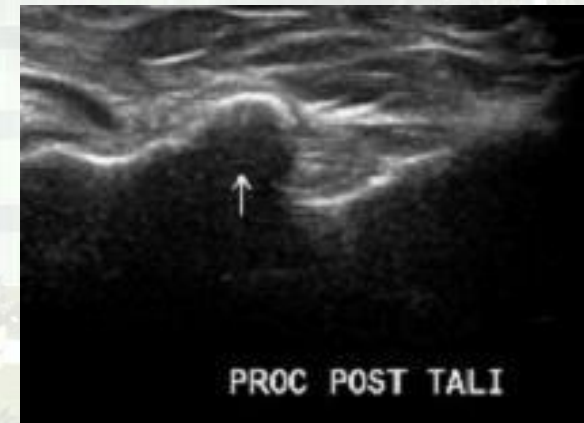
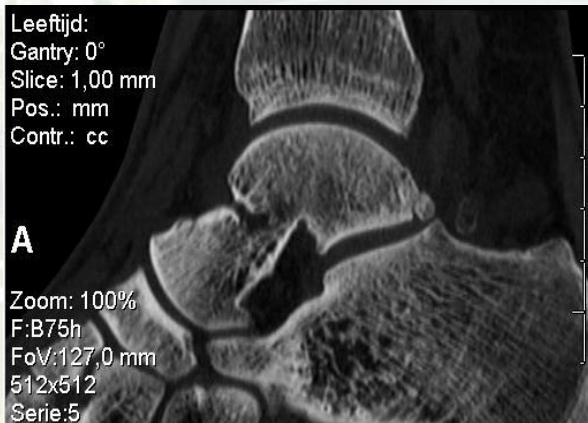
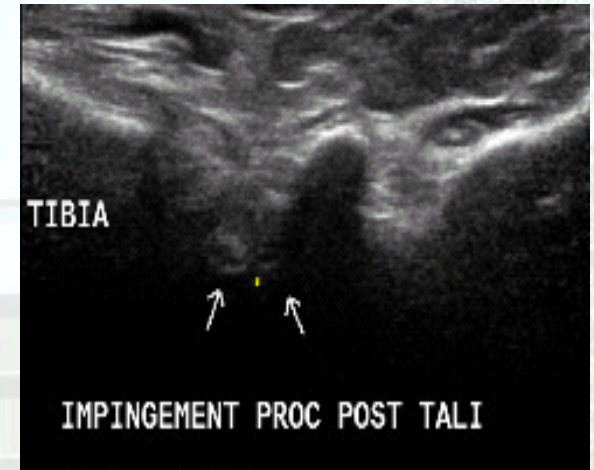
Fig. 6B.
A 2.9 mm full-radius shaver is in position through the anterolateral portal for synovectomy and debridement.



Os trigonum injury



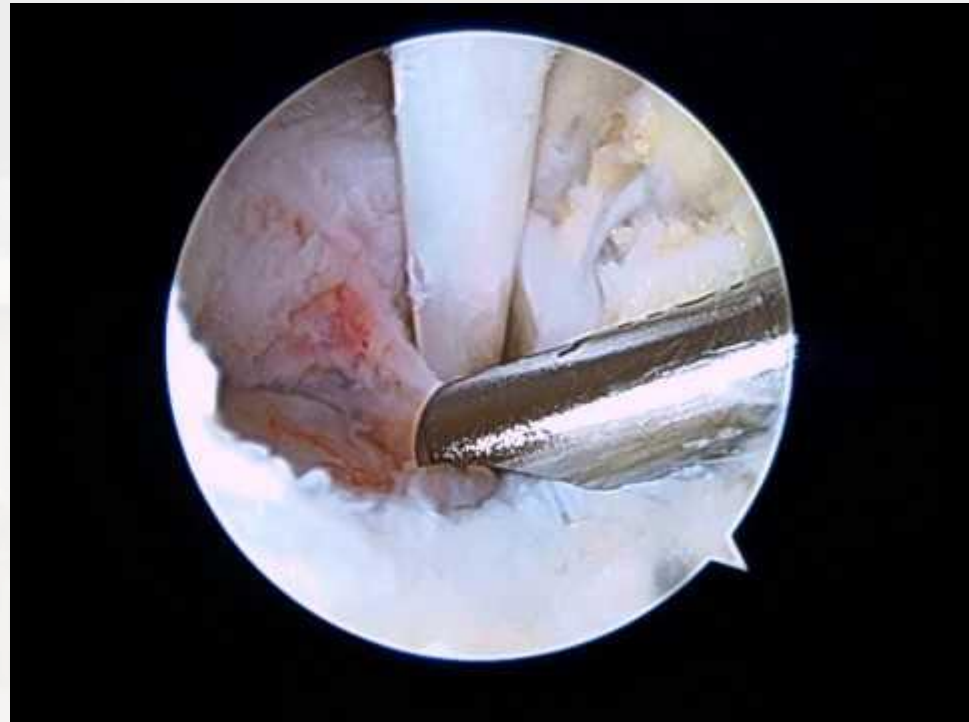
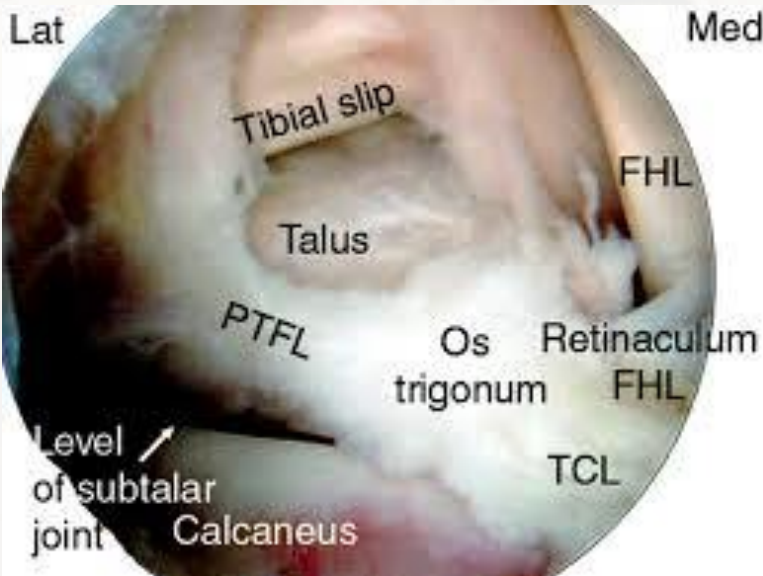
DYNAMIC HAND-HELD ULTRASOUND SCANNING DIAGNOSIS IN POSTERIOR IMPINGEMENT OF THE ANKLE



Dynamic ultrasound posterior impingement



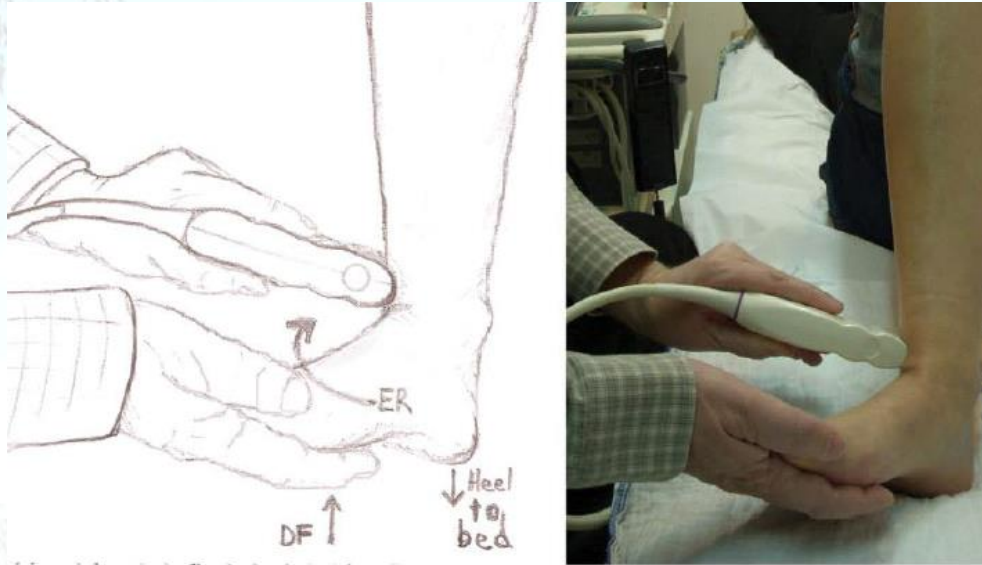
Anterior vs posterior arthroscopy



Syndesmotic lesion



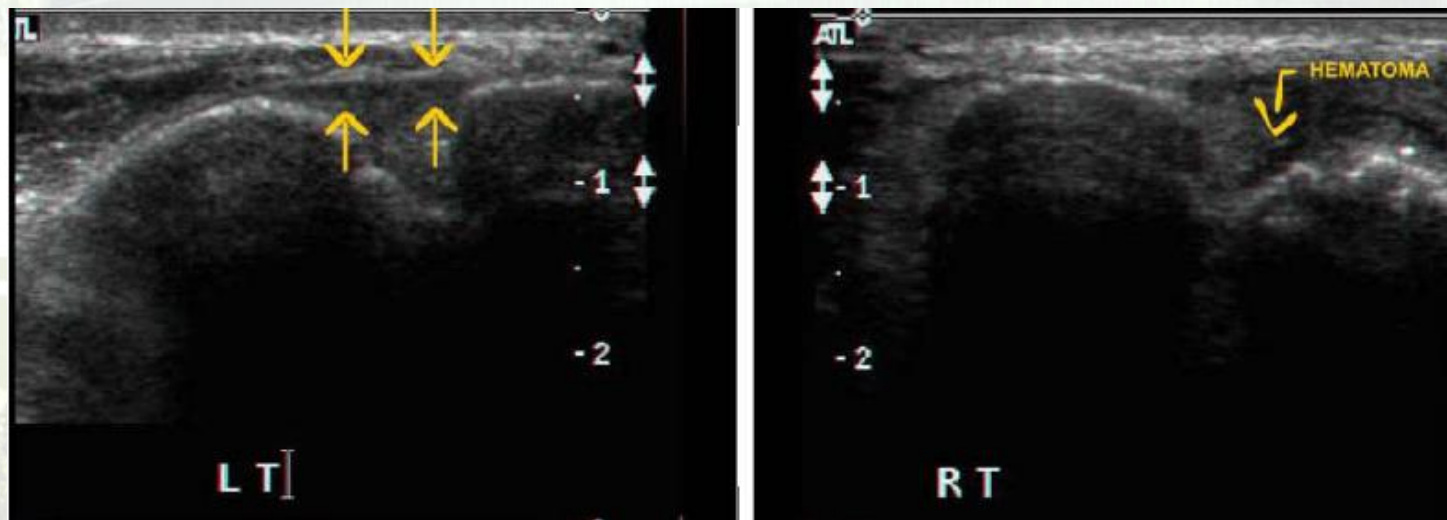
A Dynamic Ultrasound Examination for the Diagnosis of Ankle Syndesmotic Injury



With a cutoff point of 0.9 mm, the measured difference between external rotation (ER) of both injured and uninjured ankles showed a specificity of 100% and sensitivity of 100%

With a cutoff point of 0.4 mm at the injured anteroinferior tibiofibular ligament (AITFL) only, the Δ measured between the external rotation (ER) and neutral (N) positions ($\Delta = ER - N$) showed a specificity of 89% and sensitivity of 89%

*Center for Sport Medicine
Sciences and Research, Wingate Institute, Netanya, Israel*





Girl 11 years gymnast

Injury 2011

Recurrent pain after weight loading

Impossible sports participation

Conservative treatment , fysio / bracing

2011 injury



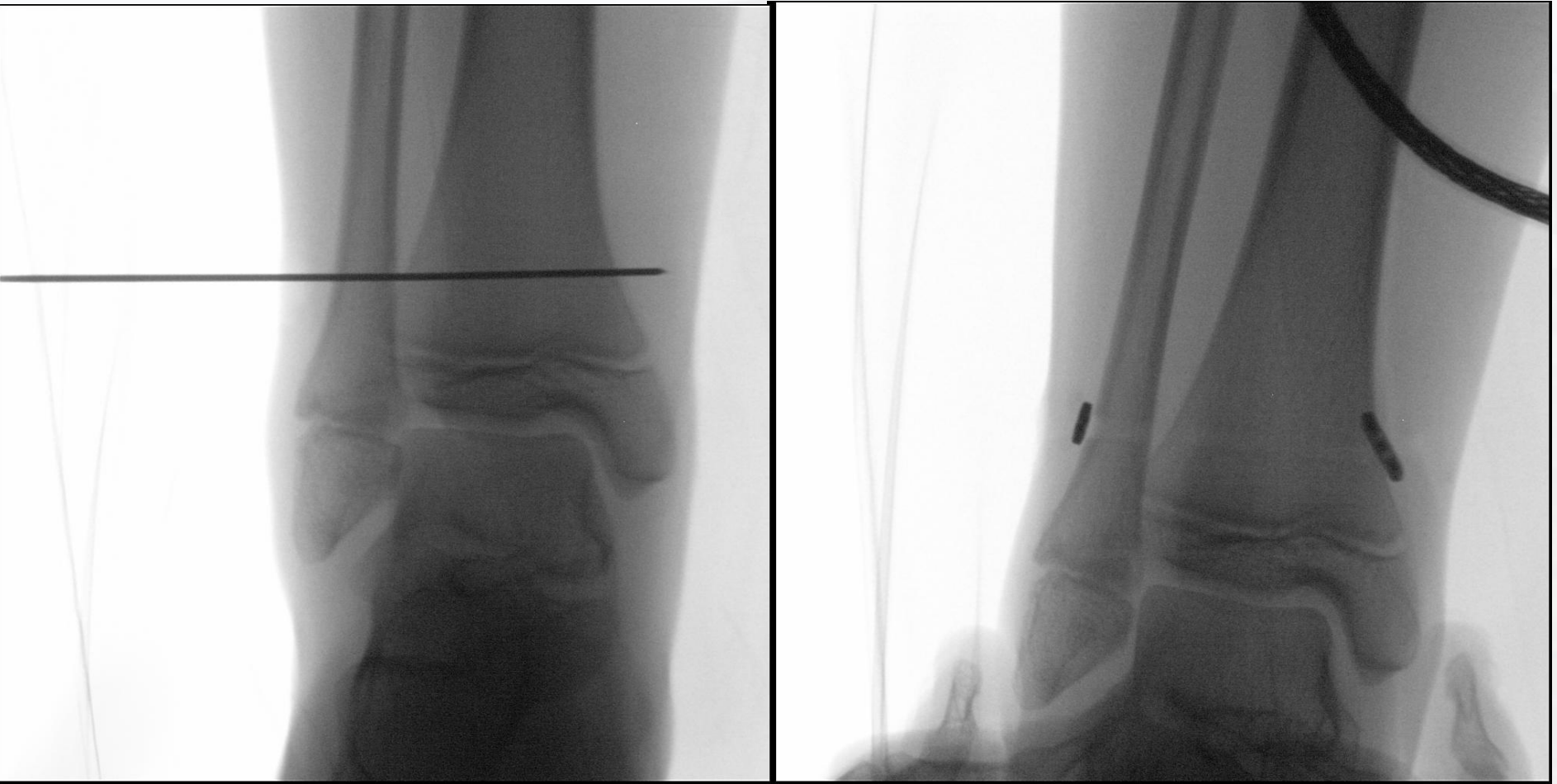
X ray 2015



Dynamische Ultrasound Ankle

Dynamic High Resolution
stress Ultrasound of the
Syndesmotic Ankle Injury

Tension rope fixation syndesmosis



2 yrs after



Conclusion

- Ankle and foot dynamics
- Intervention possible and improved positioning for injection
- Syndesmosis/ Impingement