

Problems in Musculoskeletal system

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Objectives

- Refreshment of your knowledge
- Clarify the importance of basic knowledge
- Connect the information you get in this module
- How to reflect this information on daily practice

Case 1

- Patient is 60 year old ,complain of knees pain on walking .pain disappear on sitting and lying and aggravated on going up stairs , associated with swelling of knees

- patient is 60 year old male patient ,he was doing well till 15 year ago, he started complaining of knees pain on and off on walking long distance more than 2 hours
- Gradually increase in severity with time and on short distance.
- Since 6 months the patient complain of pain on walking at home from bed room to living room
- Relieved at rest and on lying down, associated with swelling of knees. Patient has difficulty on praying , now he is unable to pray on the ground, he prays on chair

- Varus deformity of knees, atrophy of vastus medialis, flexion contracture of knees
- Tenderness on the joint line medially and laterally
- Range of motion limited from 10 -95
- Crepitation on motion
- Medial and lateral instability





- **what to do?**
- **What is the DX?**



Femur

This is an anatomical diagram of a human knee joint in a frontal view. The diagram shows the femur (thigh bone) at the top, the patella (kneecap) in the center, and the tibia (shin bone) at the bottom. The quadriceps tendon is shown as a thick band of tissue connecting the femur to the patella, and the patellar tendon connects the patella to the tibia. Blue lines point from the text labels to the corresponding anatomical structures.

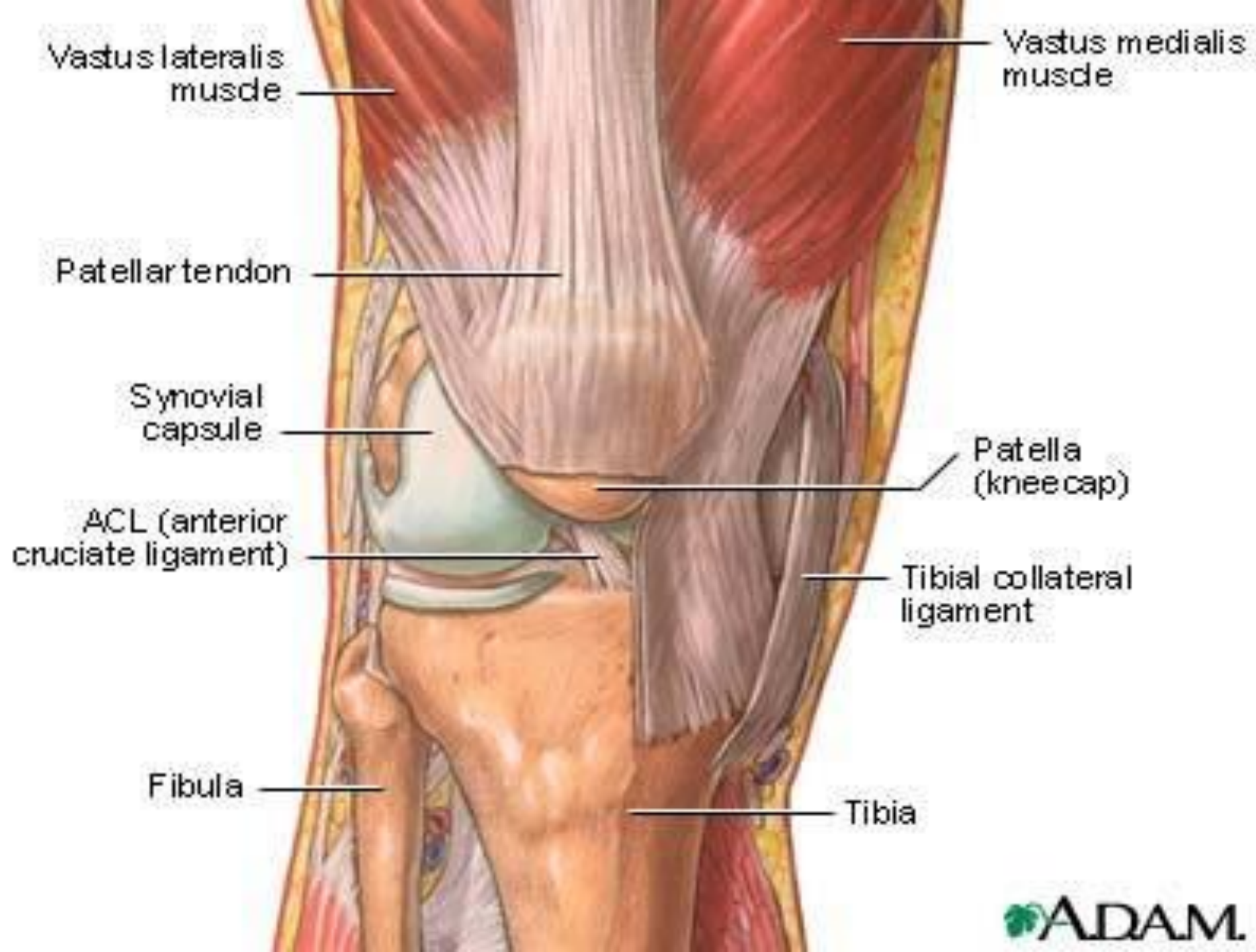
Quadriceps
Tendon

Patella

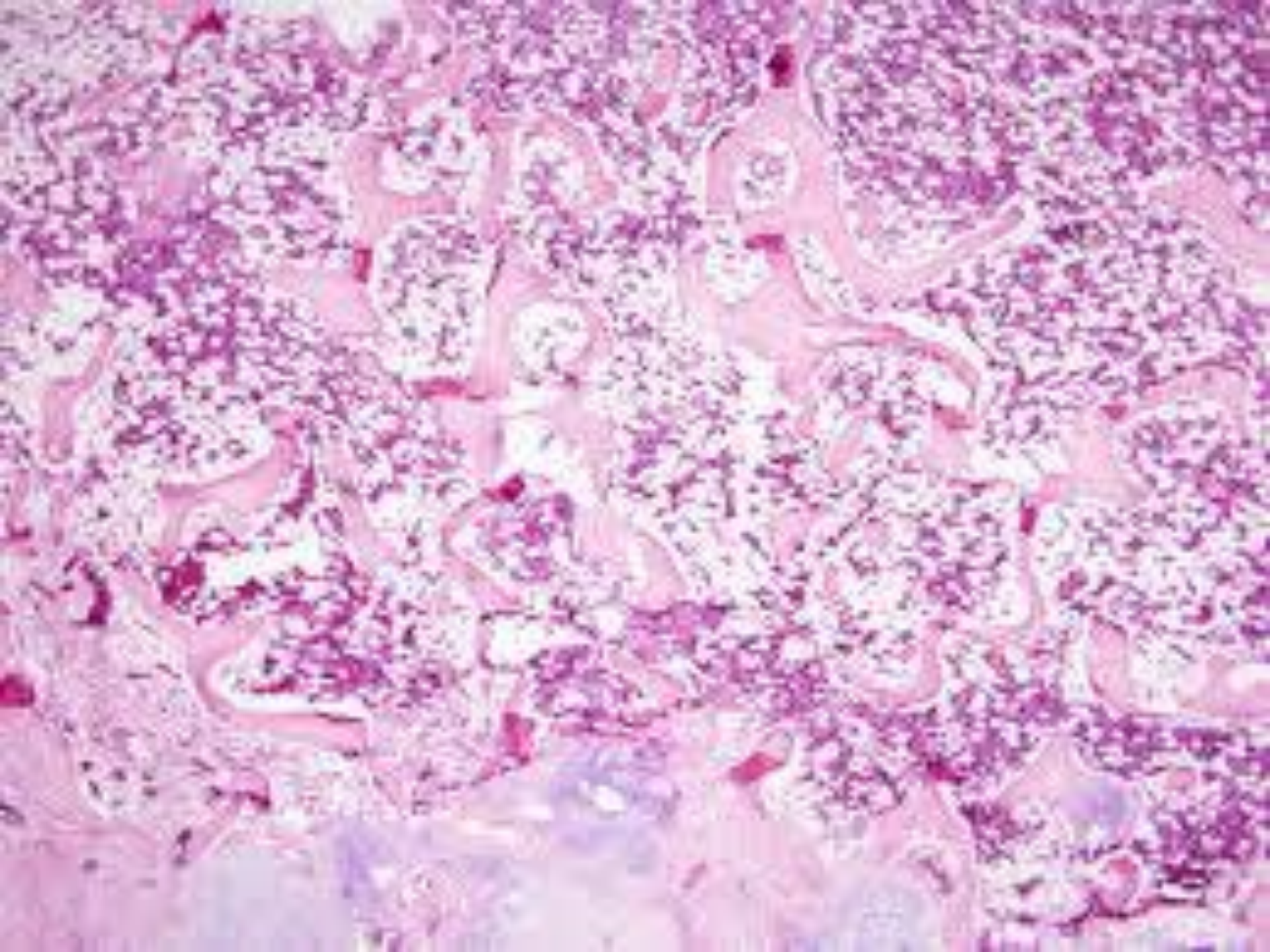
Tibia

Patellar
Tendon

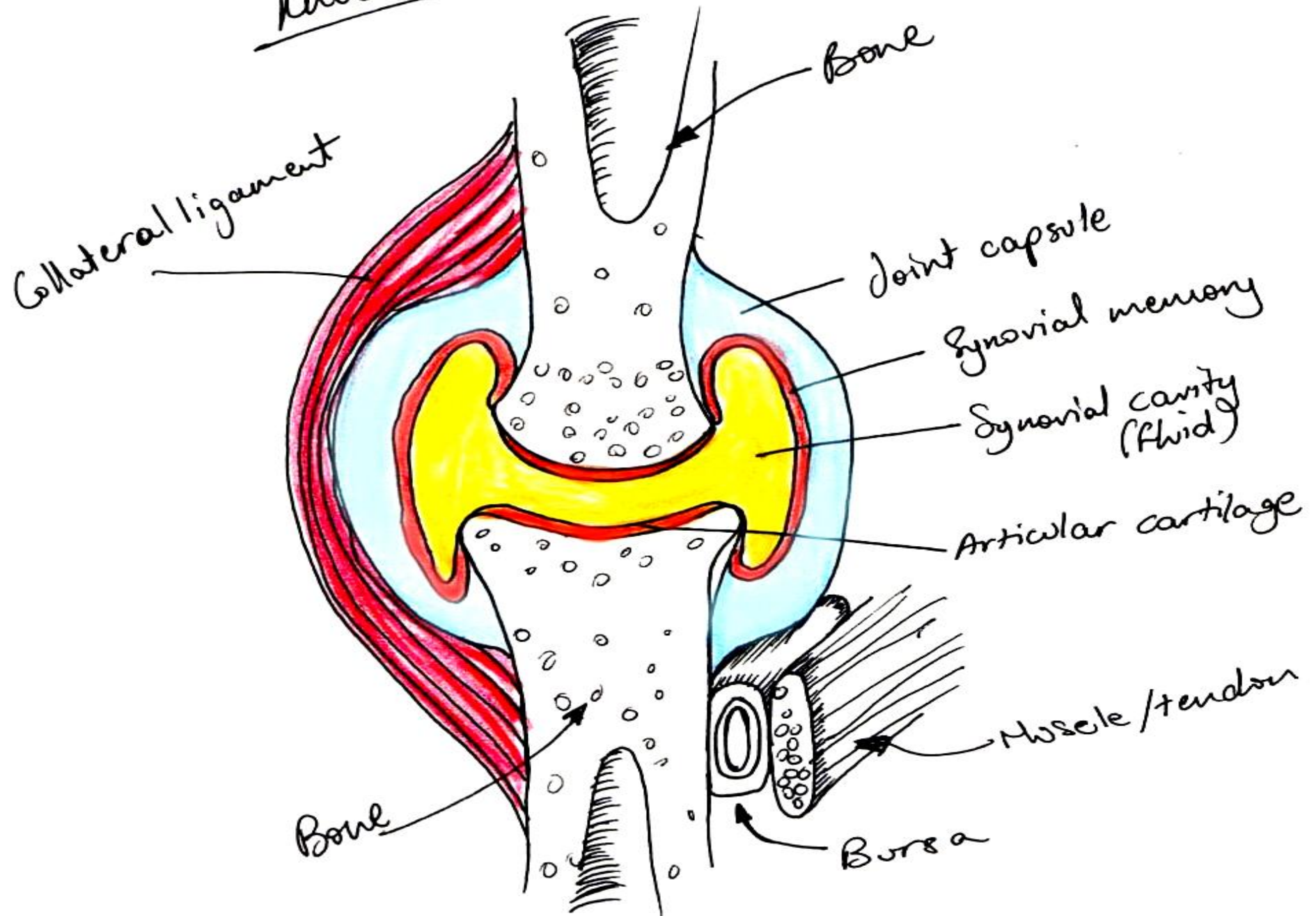
NORMAL KNEE



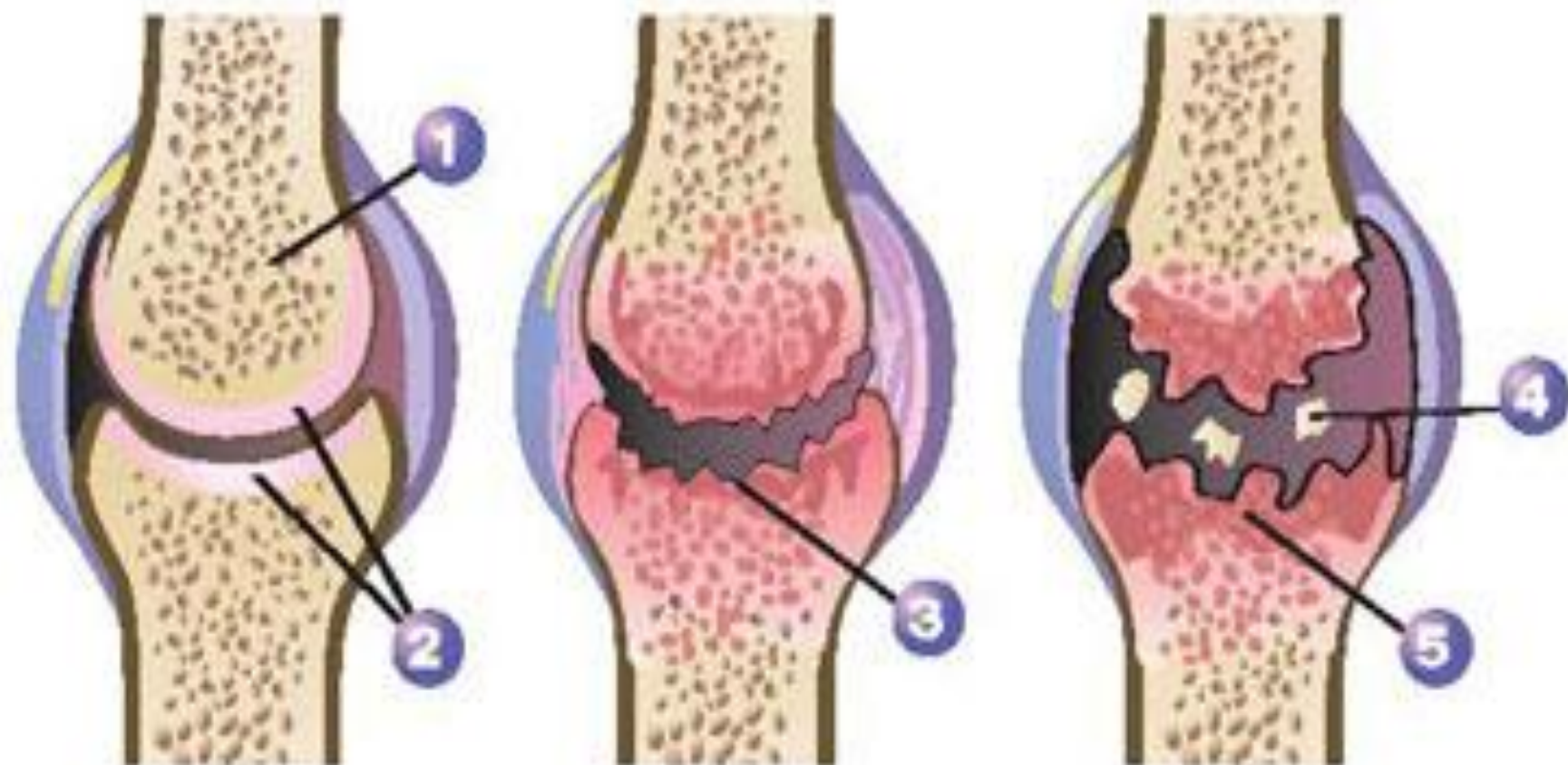




Knee Joint



Evolution of Osteoarthritis



1. Bone
2. Cartilage
3. Thinning of cartilage

4. Cartilage remnants
5. Destruction of cartilage

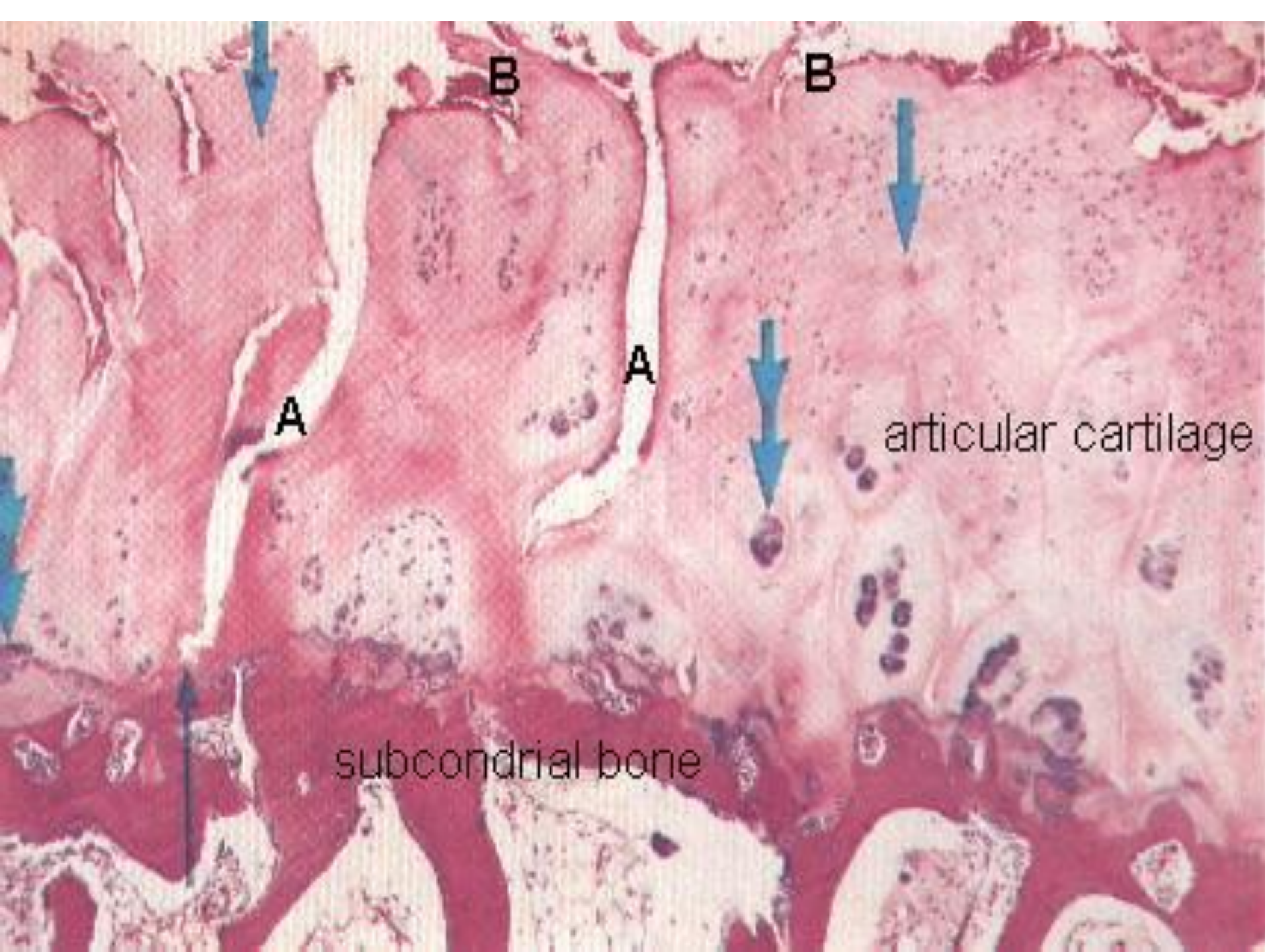
Histology of Human Normal and Osteoarthritic Cartilage

Normal cartilage

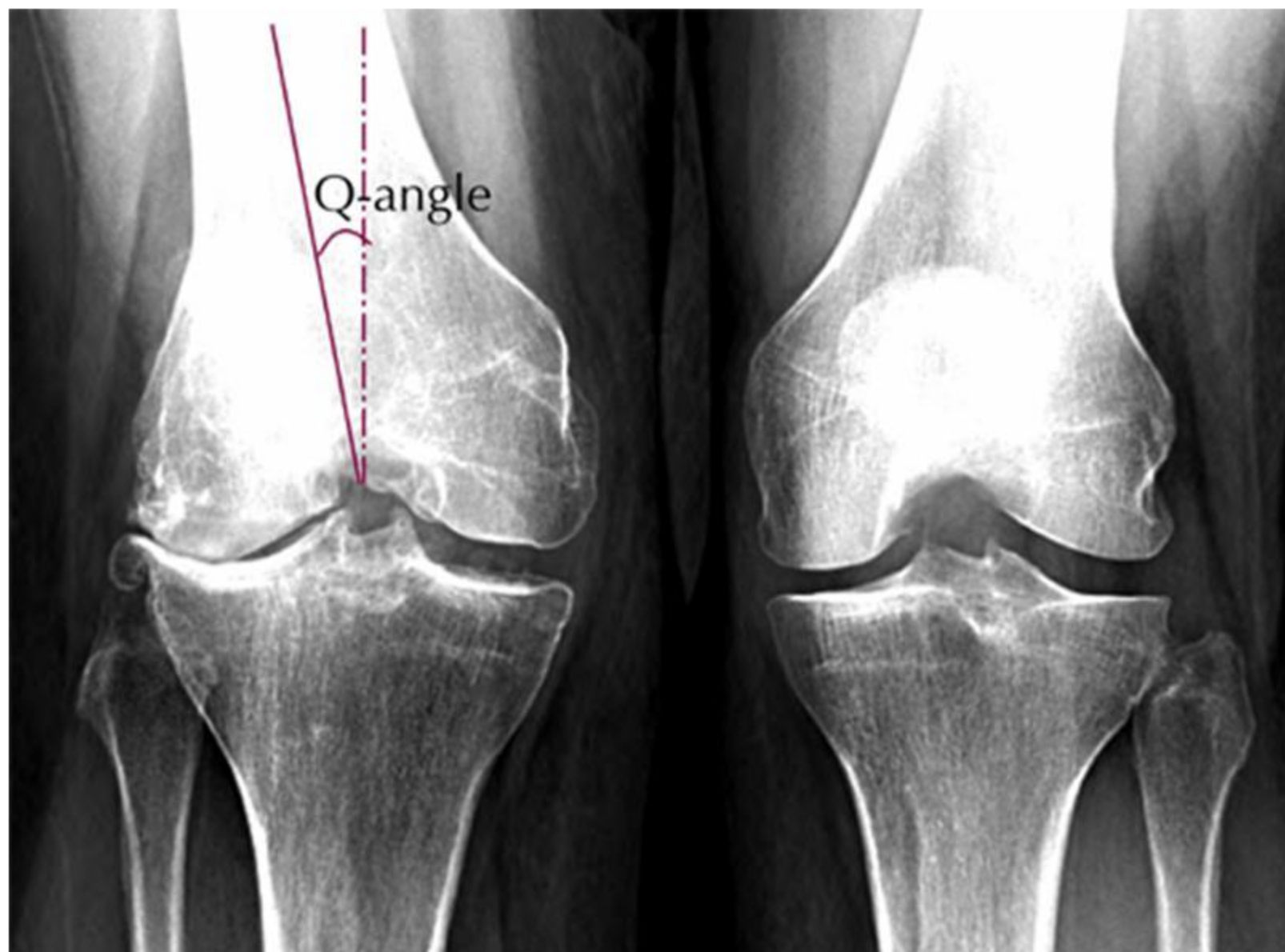


OA cartilage







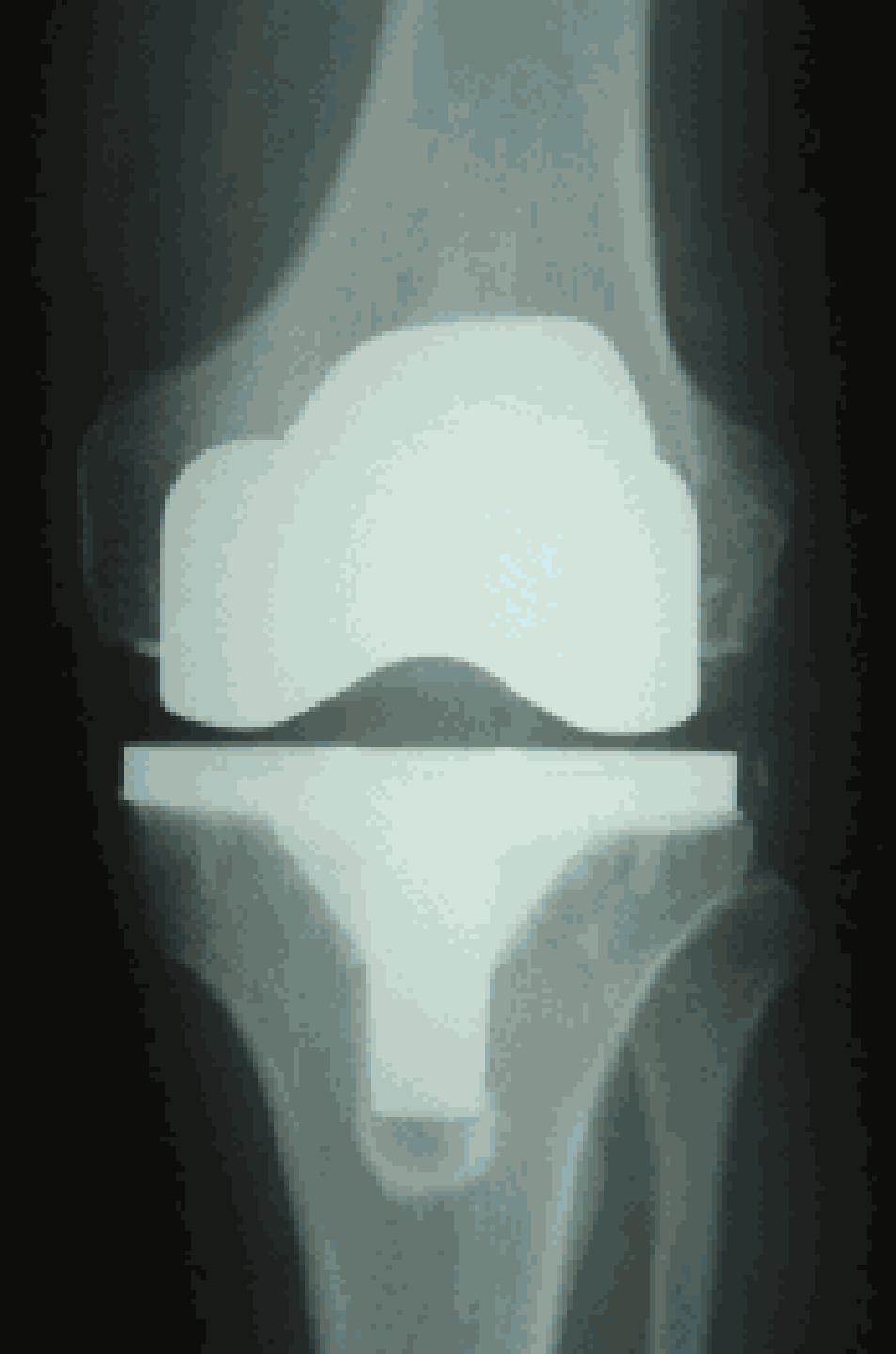














Learning Objectives

- 1- What are the anatomical structure of knee joint
- 2-discuss the function of meniscus and collateral ligament
- 3-Discuss how the cartilage get nutrition
- 4- Discuss how the cartilage degenerate
- 5-Discuss the path physiology of pain

Case 2

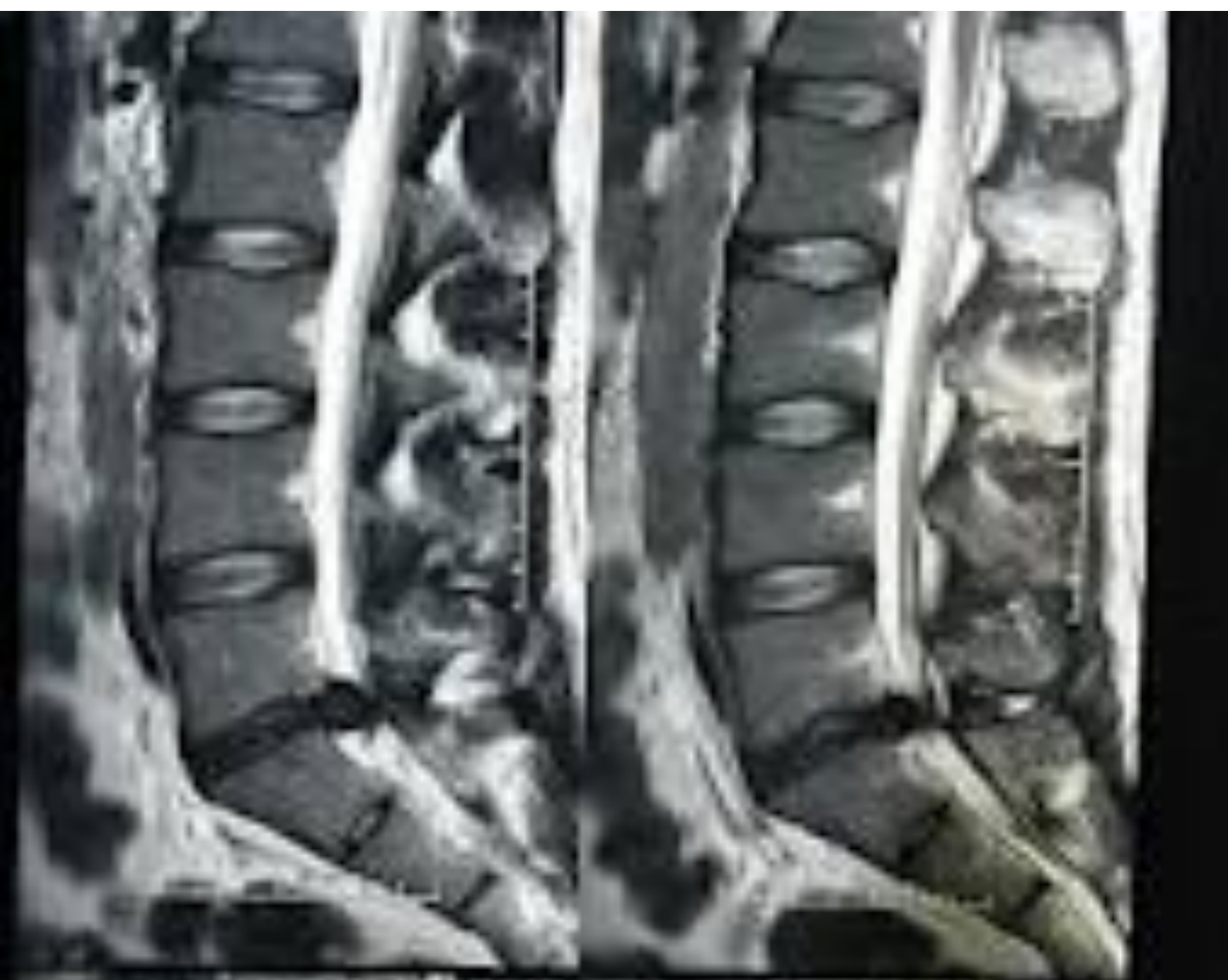
- Patient is 35 year old patient complain of back pain ,this pain radiating to the right lower limb aggravated on leaning foreword and on coughing associated with numbness in the legs and feet
- On examination the patient had tenderness on lumbar area and decrease sensation and weakness in feet dorsiflexion .

- Patient is 35 year old male patient , he was doing fine till 2 days prior to presentation to the emergency room , where he left heavy object suddenly and he felt severe pain in his back
- 2 hours later the pain radiated to the Rt lower limb associated with numbness and parasthesia
- Patient was unable to walk without help
- The pain aggravated with time ,and not respond to analgesia ,later on patient unable to walk because of difficulty to keep shoe in his Rt foot.

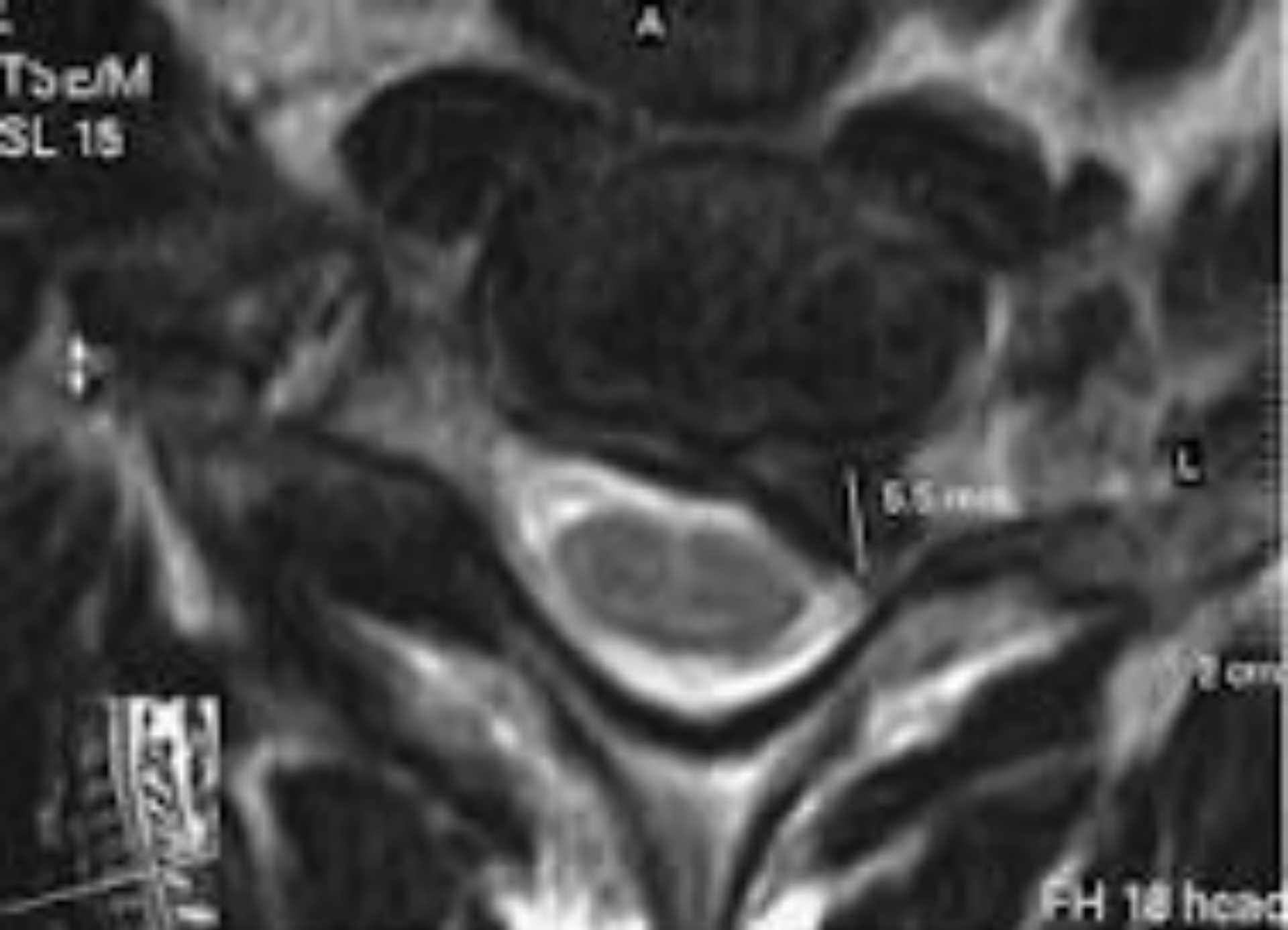
- On physical exam patient has tenderness on lower lumbar area especially on the right side
- Straight leg raising on Rt 30 on Lt 90
- Power was normal on both sides except
- dorsiflexion of ankle 3/5
- Decrease sensation over dorsum of foot
- Decrease reflex of ankle on Rt side



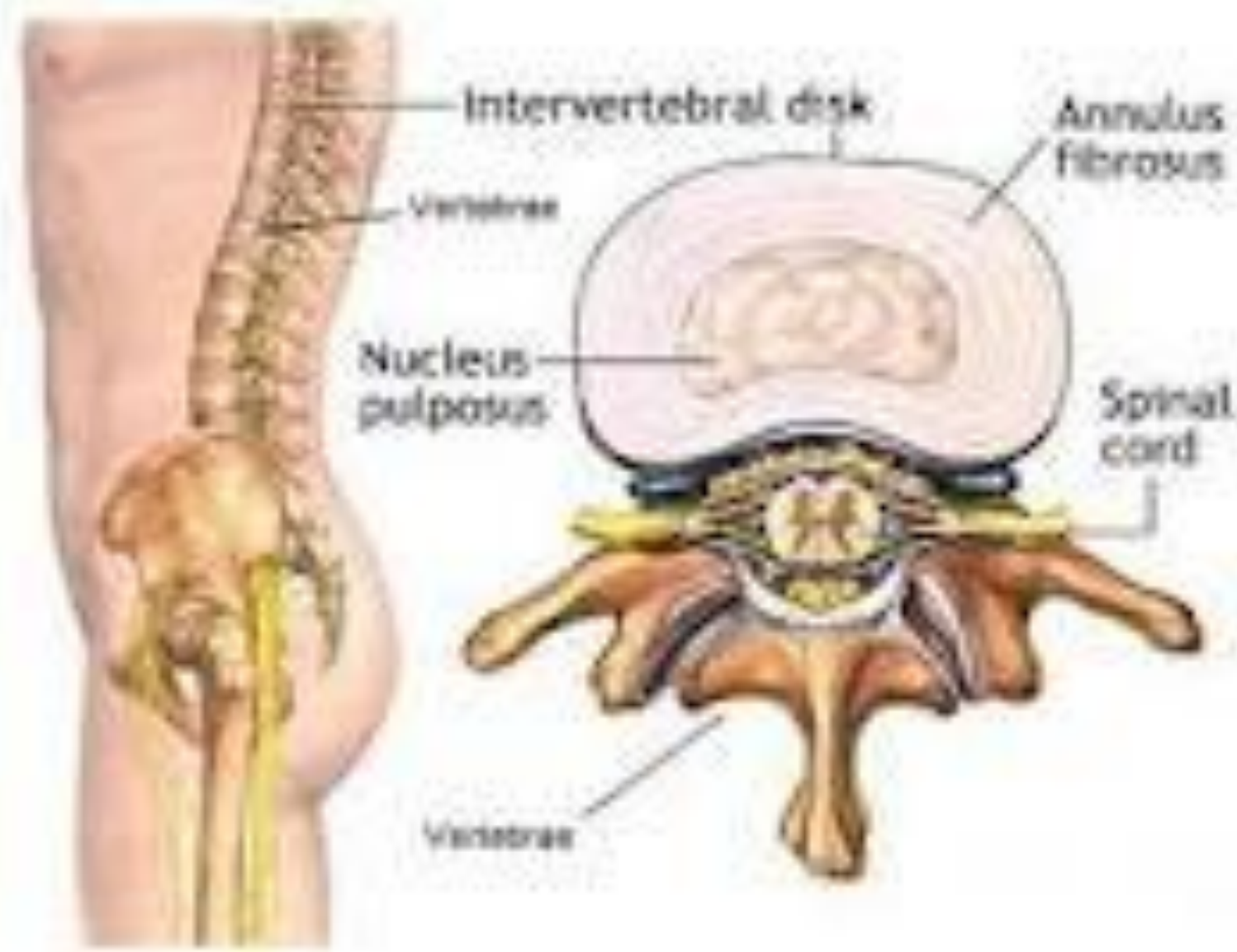


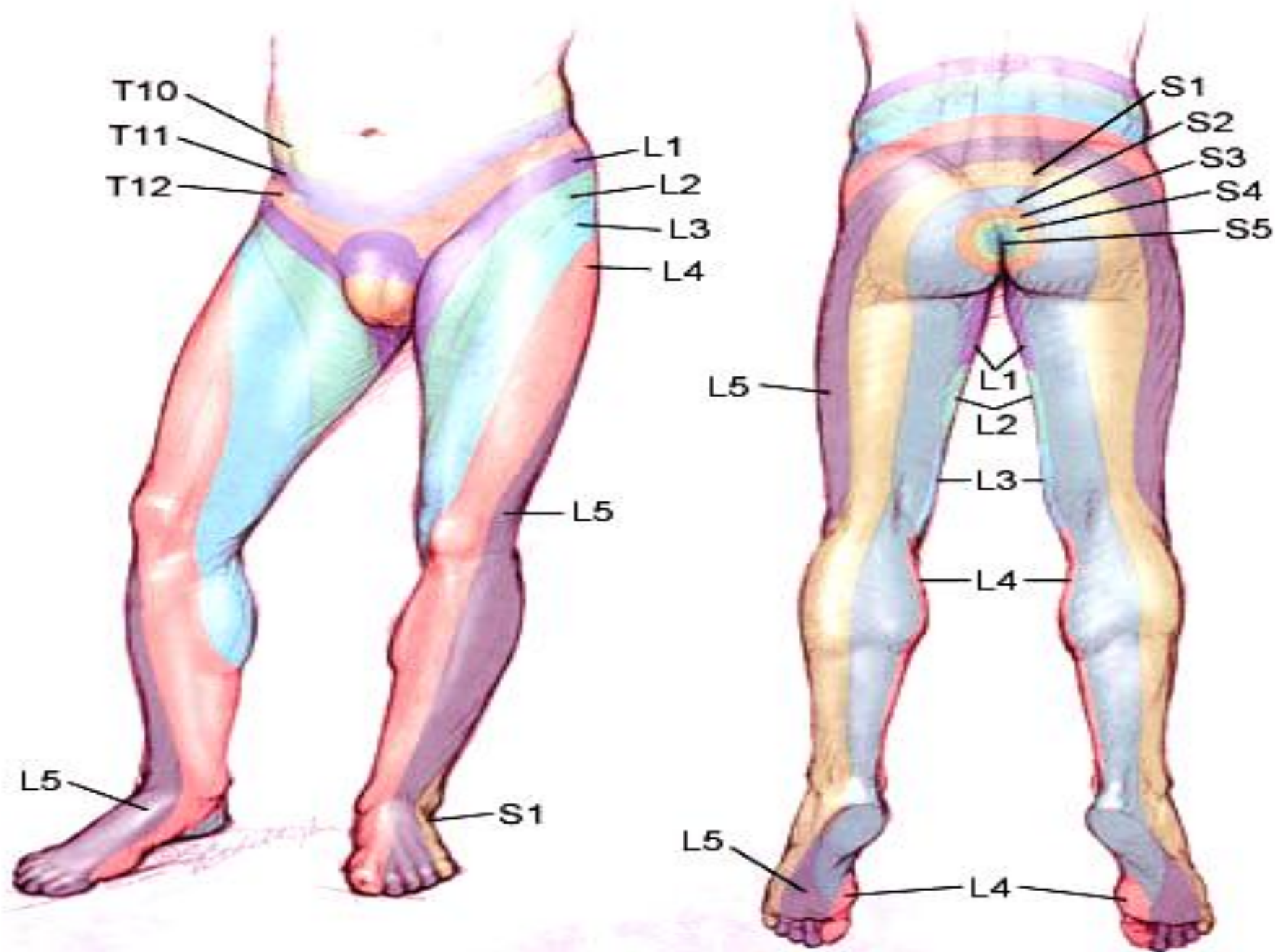


TSEM
SL 15











**Axial (Overhead) View
of Intervertebral Disc**

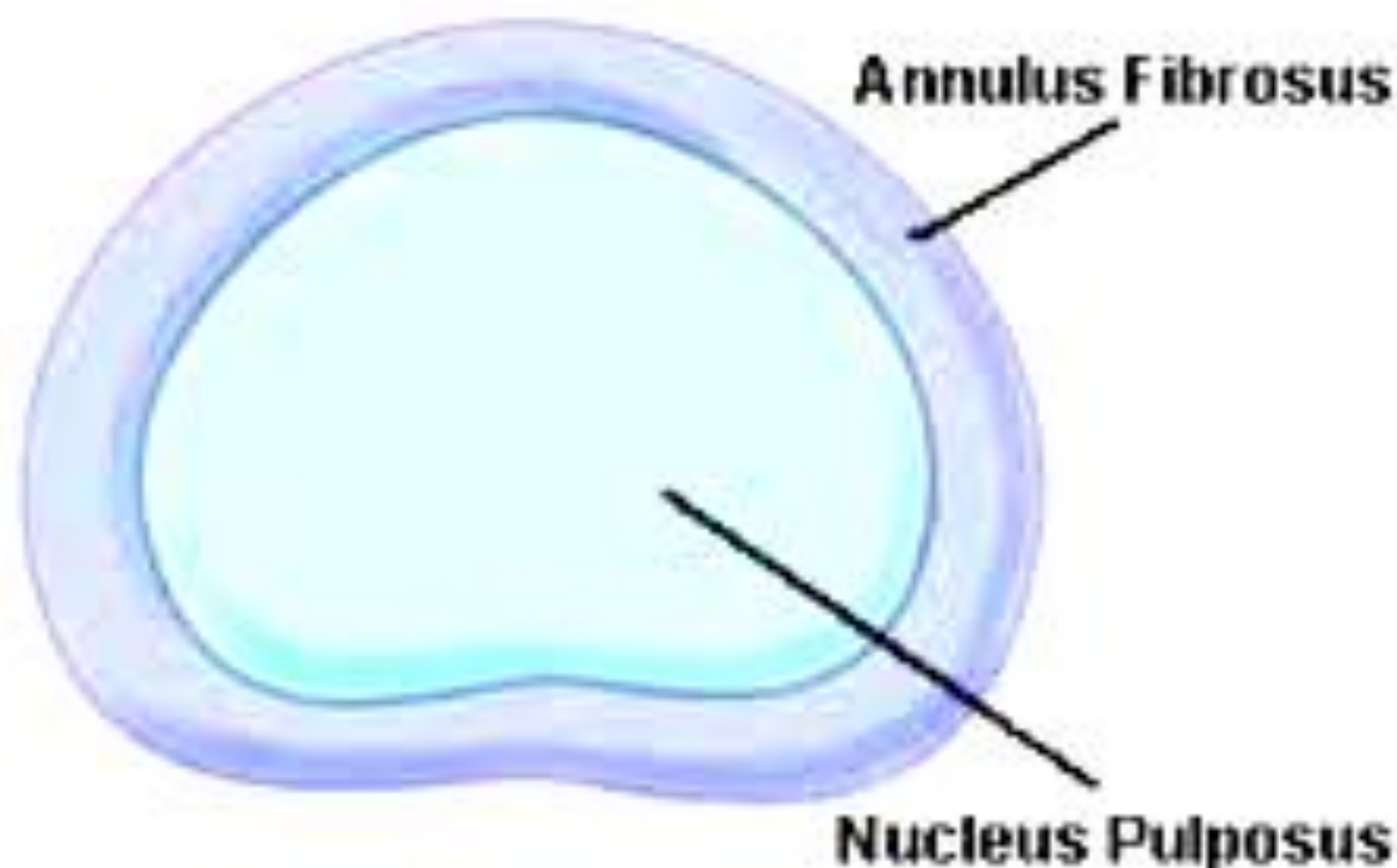
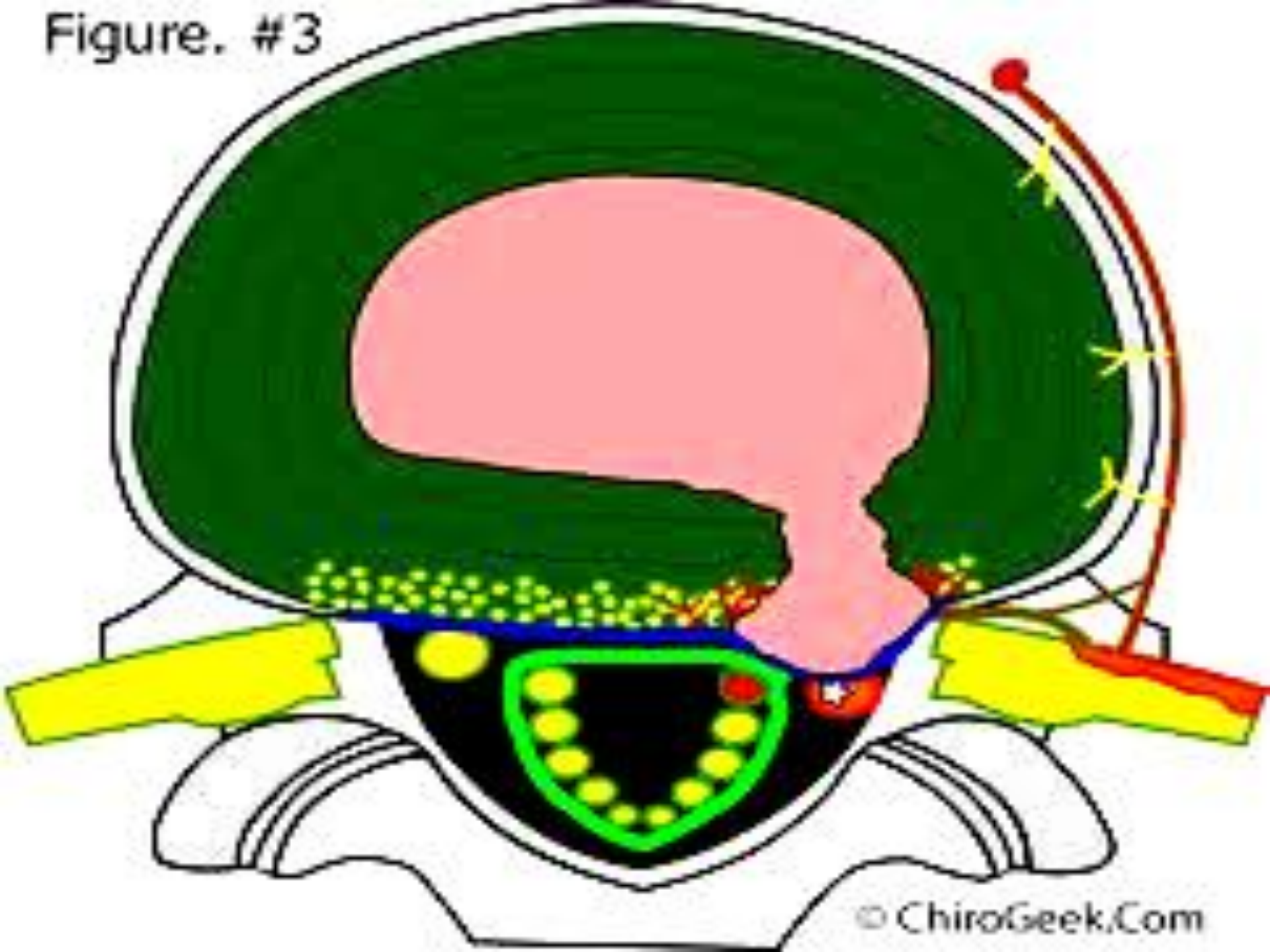




Fig. 3

Teen Disc

Figure. #3





TSEM
SL 15

6.5 mm

2 cm

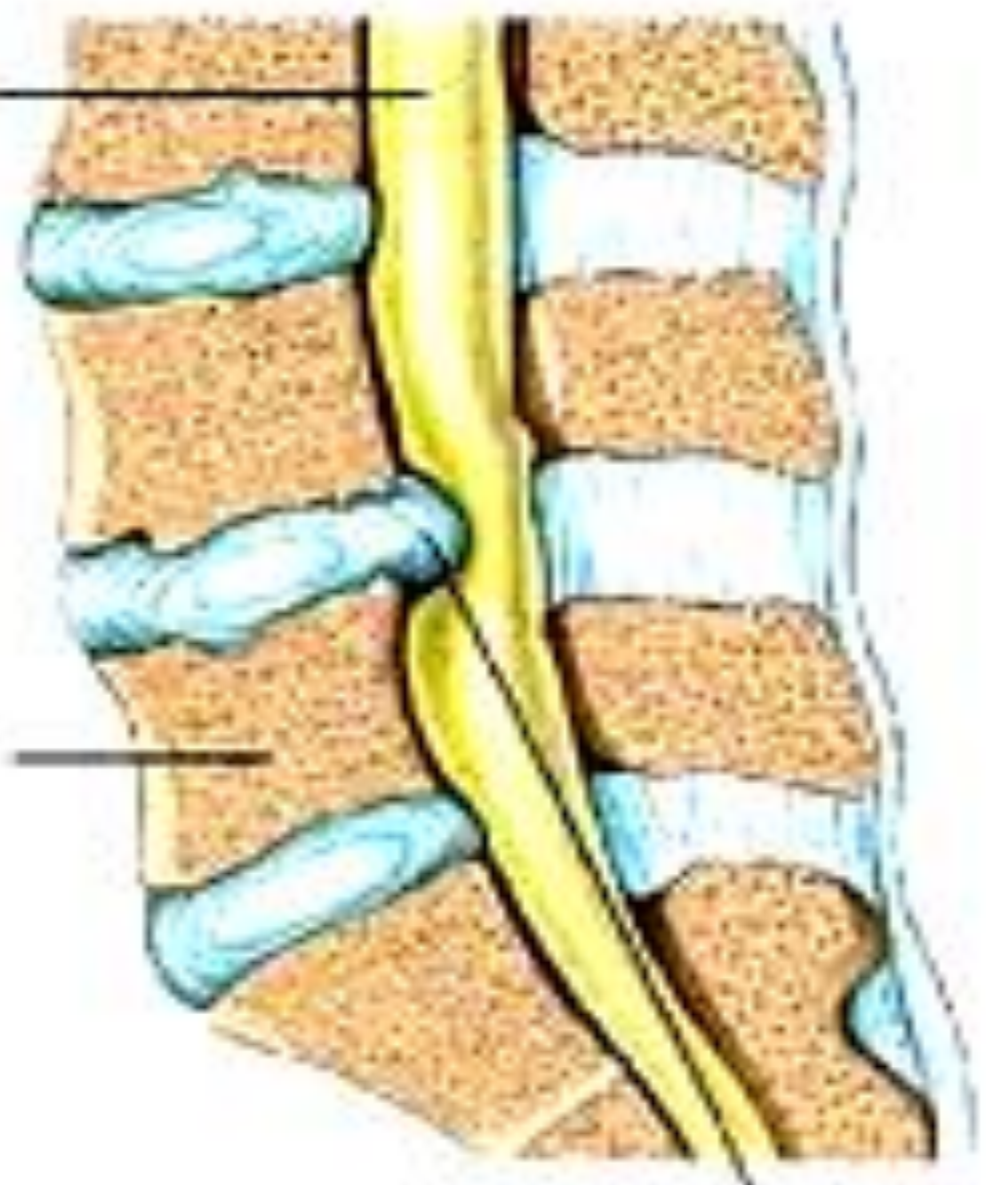
FH 18 head



Disc herniation -
a rupture and/or bulge
of a vertebral disc

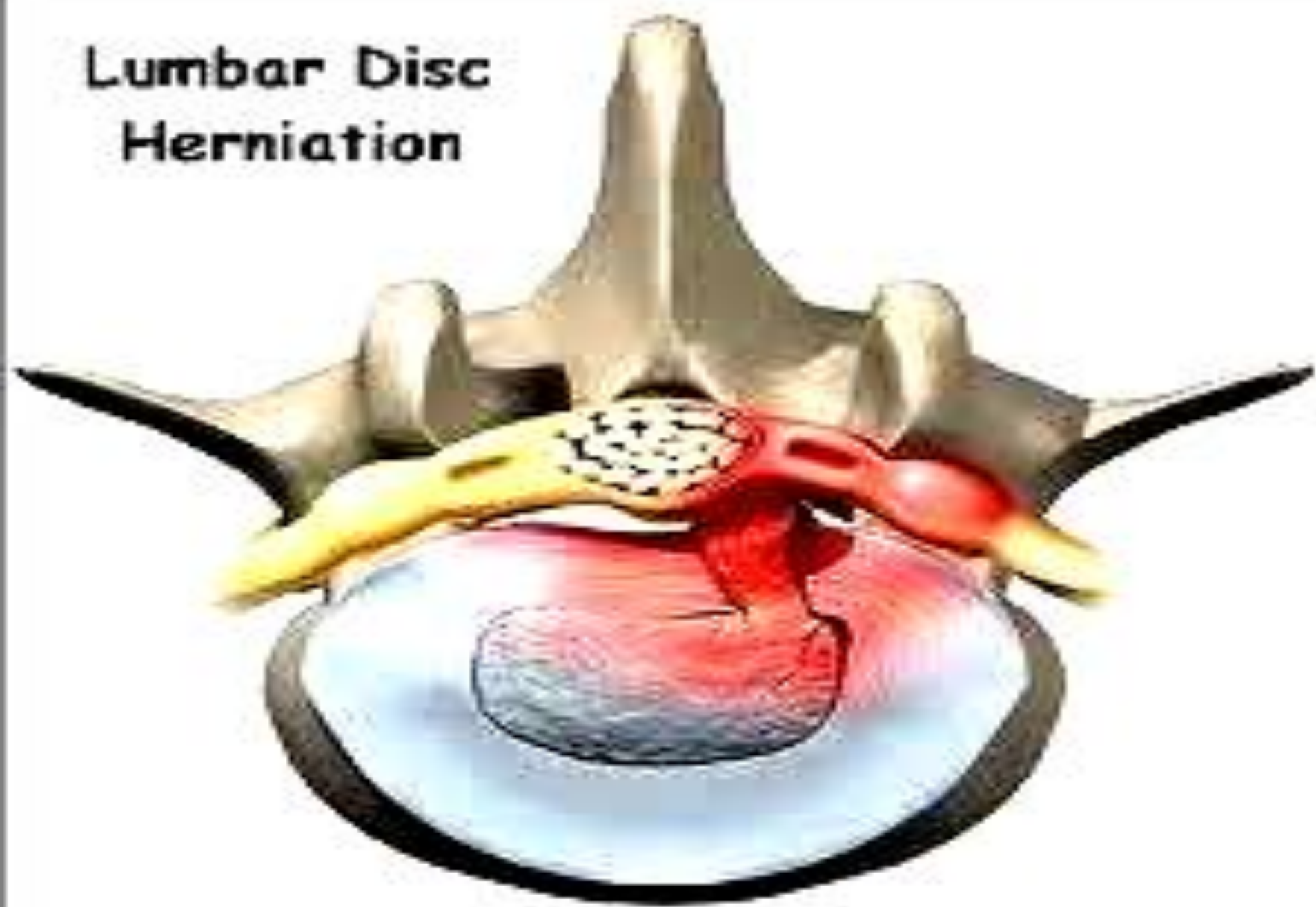
Spinal Cord

**Spinal Bone
L5 Vertebra**



Bulging Disc

Lumbar Disc Herniation



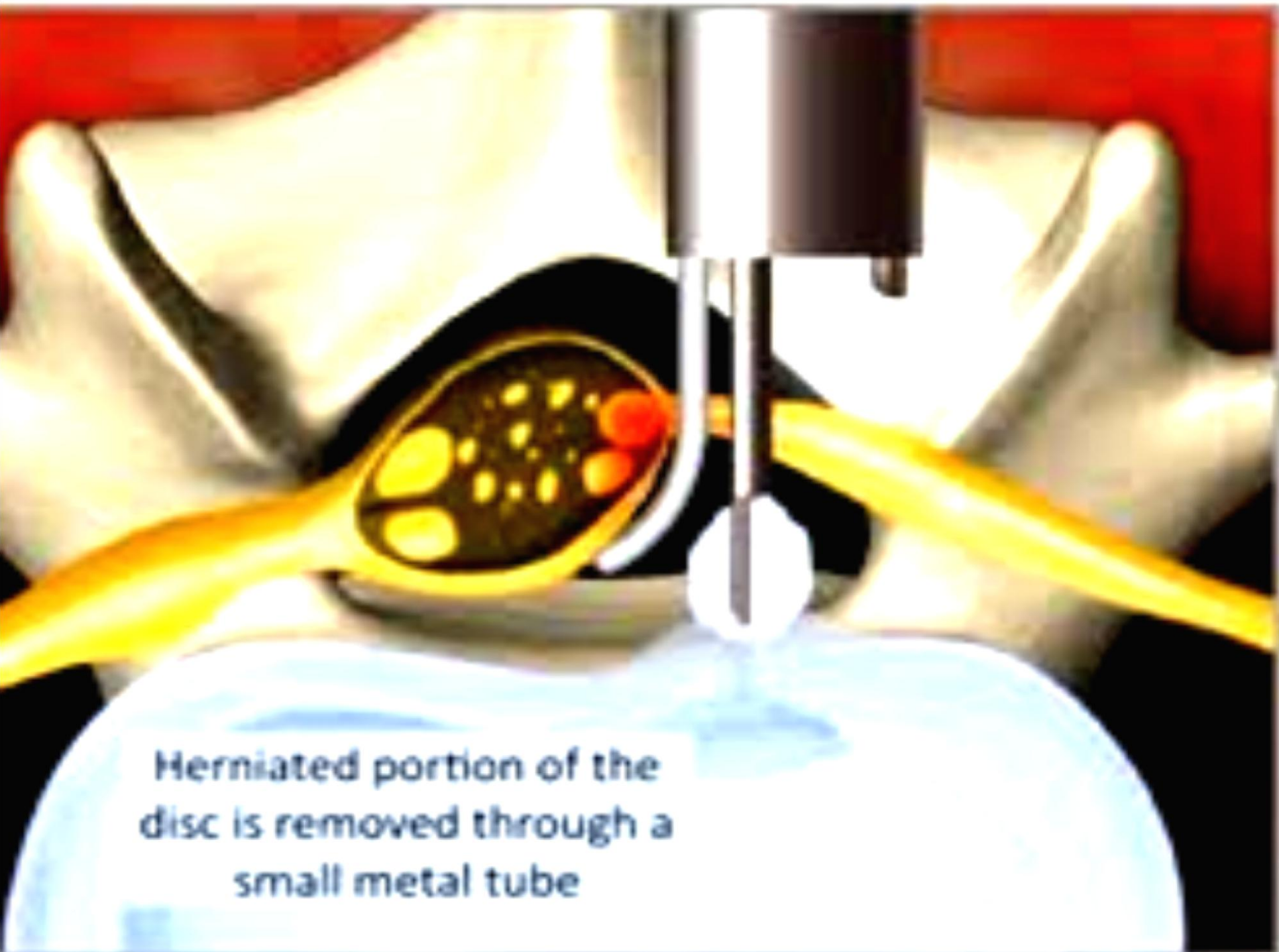


TSEM
SL 15

6.5 mm

2 cm

FH 18 head



Herniated portion of the
disc is removed through a
small metal tube





Objective of Learning

- 1-what is the anatomical structure of the vertebral segment
- 2- what is the histological structure of the disc
- 3-discuss cutaneous nerves and dermatomes of the lower extremity
- 4-discuss physiology of nerve function
- 5- discuss the regeneration and degeneration of nerve injury



**best lecture I ever
heard**

Thank you for your
attendance