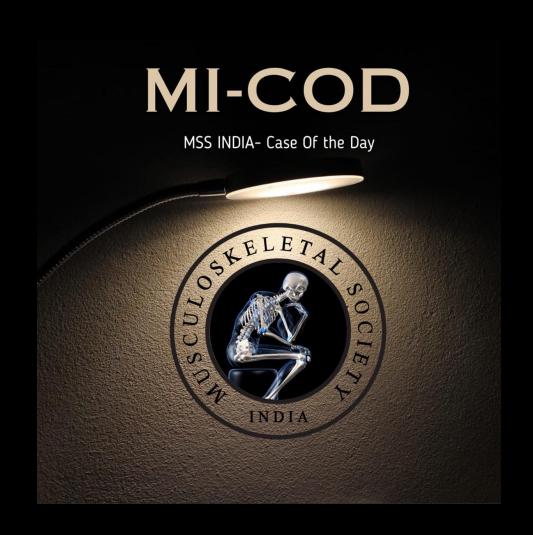
# MICOD –08/07/2024 Case contributor – Dr Vaishali Upadhyaya





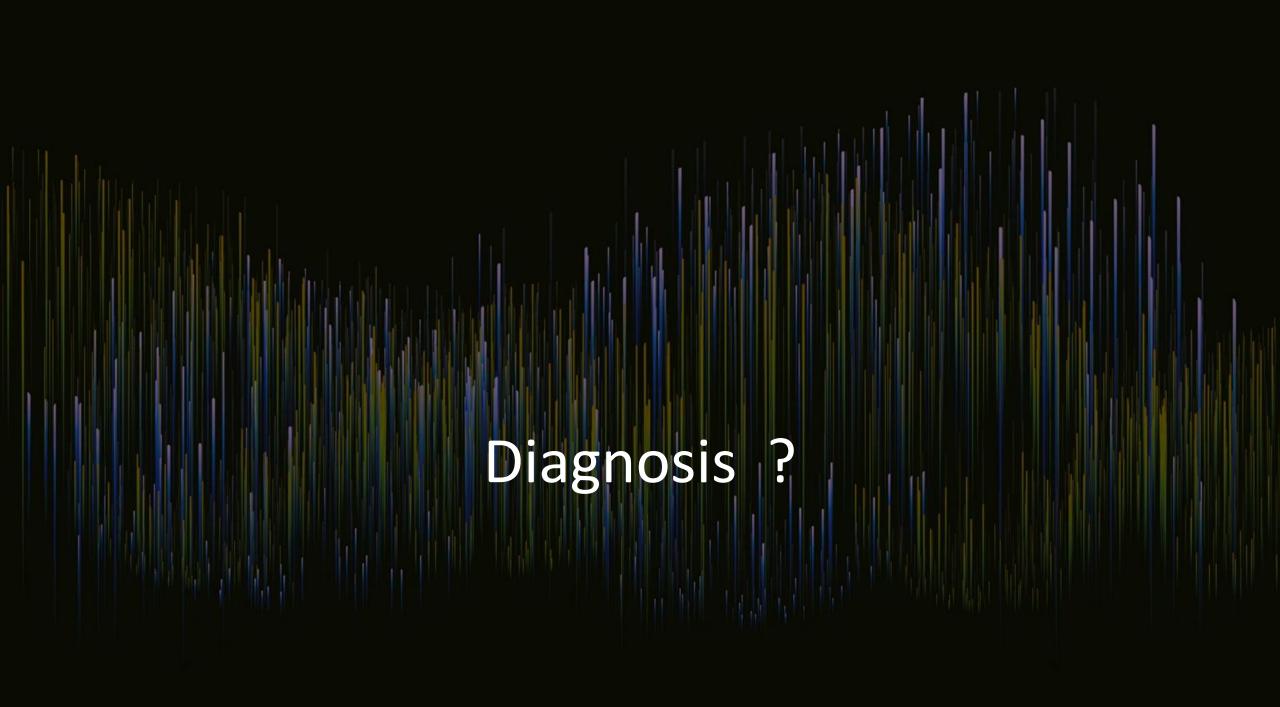
• 57-year-old lady with slowly and progressively increasing swelling in left suprapatellar region.

- No h/o fever
- No other joint involvement





AXIAL, CORONAL AND SAGITTAL MR IMAGES



Patient has osteoarthritic changes in left knee joint with geodes and secondary lipoma arborescens.

- Lipoma arborescens is a rare condition affecting <u>synovial</u> linings of the joints and <u>bursae</u>, with 'frond like' depositions of fatty tissue.
- > It accounts for less than 1% of all <u>lipomatous lesions</u>.
- ➤ Patients typically present in the 5<sup>th</sup>-7<sup>th</sup> decades, but the condition has also been reported in the young.
- ➤ Usually these lesions are sporadic, however, they can be seen in the setting of osteoarthritis, collagen vascular disorders, or previous trauma.

- MRI is the modality of choice for diagnosis. A typical appearance is of a fat-containing frond-like synovial mass, usually outlined by concurrent joint effusion.
- > The lesion follows the signal intensity of fat on all sequences.
- > **T1:** high signal; will saturate on fat suppressed sequences
- > T2: high signal; will saturate on fat suppressed sequences
- > gradient echo (GE): chemical shift artefact is sometimes seen at the fat-fluid interface

## General imaging differential considerations include

#### Loose bodies

often calcified (hypointense on all MRI sequences).

# Synovial osteochondromatosis/synovial chondromatosis

- circumscribed loose bodies
- osseous erosion is common
- may calcify.

# Intra-articular tenosynovial giant cell tumor

- low signal on T2 weighted MRI
- no fat signal.

## Synovial hemangioma

- enhancement is more conspicuous
- occasional fluid-fluid levels.

#### • Synovitis

• thickened synovium, without fat signal.

