

MI-COD

MSS INDIA- Case Of the Day



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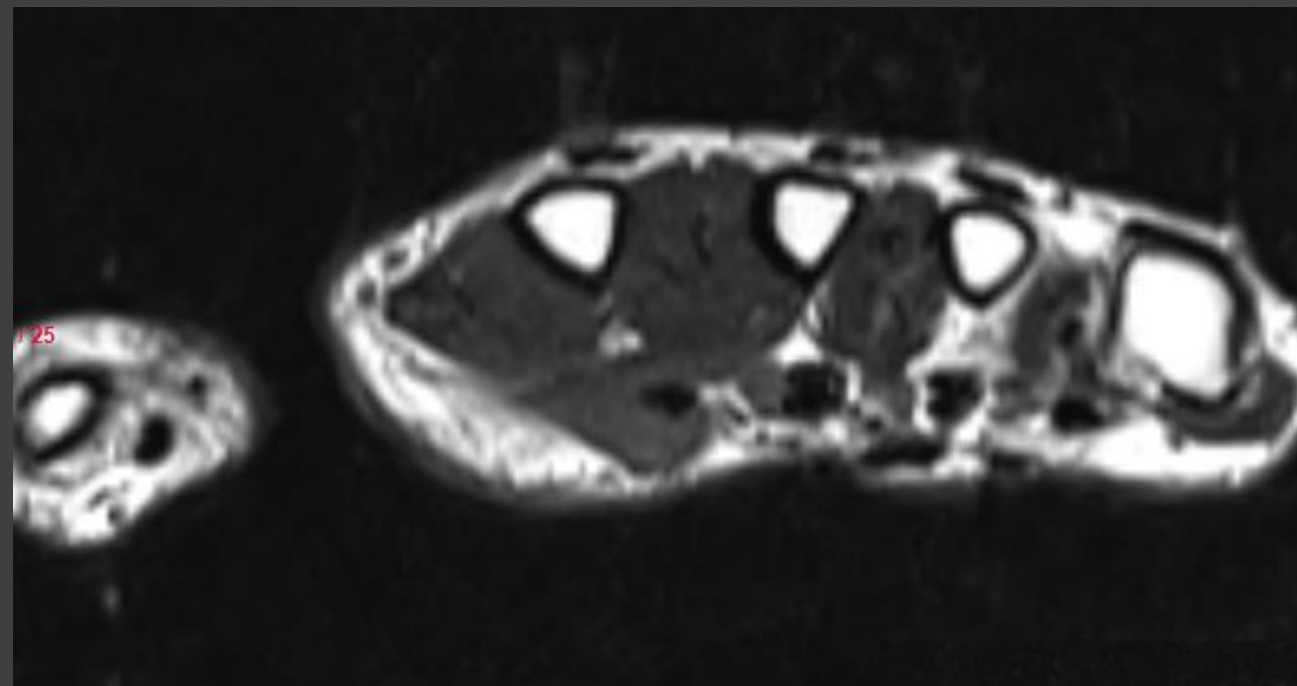
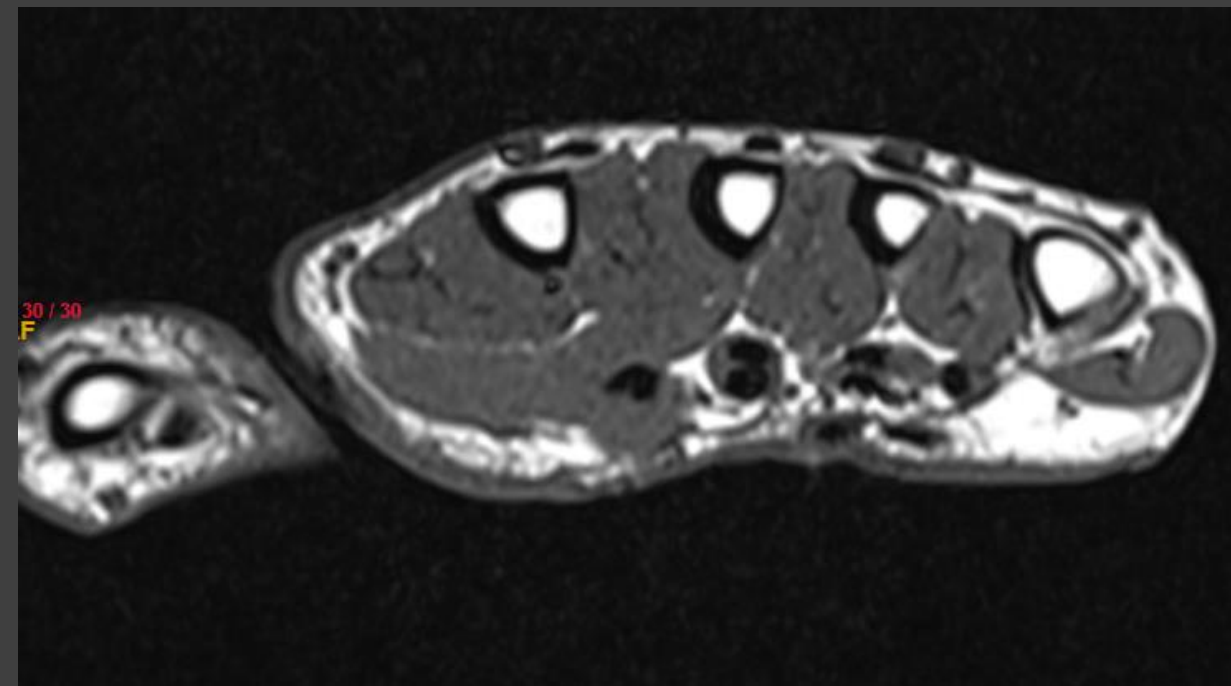
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Images



Question

For the given case, which of the following structures/ structures will produce flexor contracture of both the MCP and PIP joints?

- A. Peritendinous cord.
- B. Natatory cord.
- C. Spiral Cord.
- D. Lateral cord.
- E. Central cord.

Cleland's ligament

Lateral sheet

Spiral band

Natatory ligament

Pretendinous band

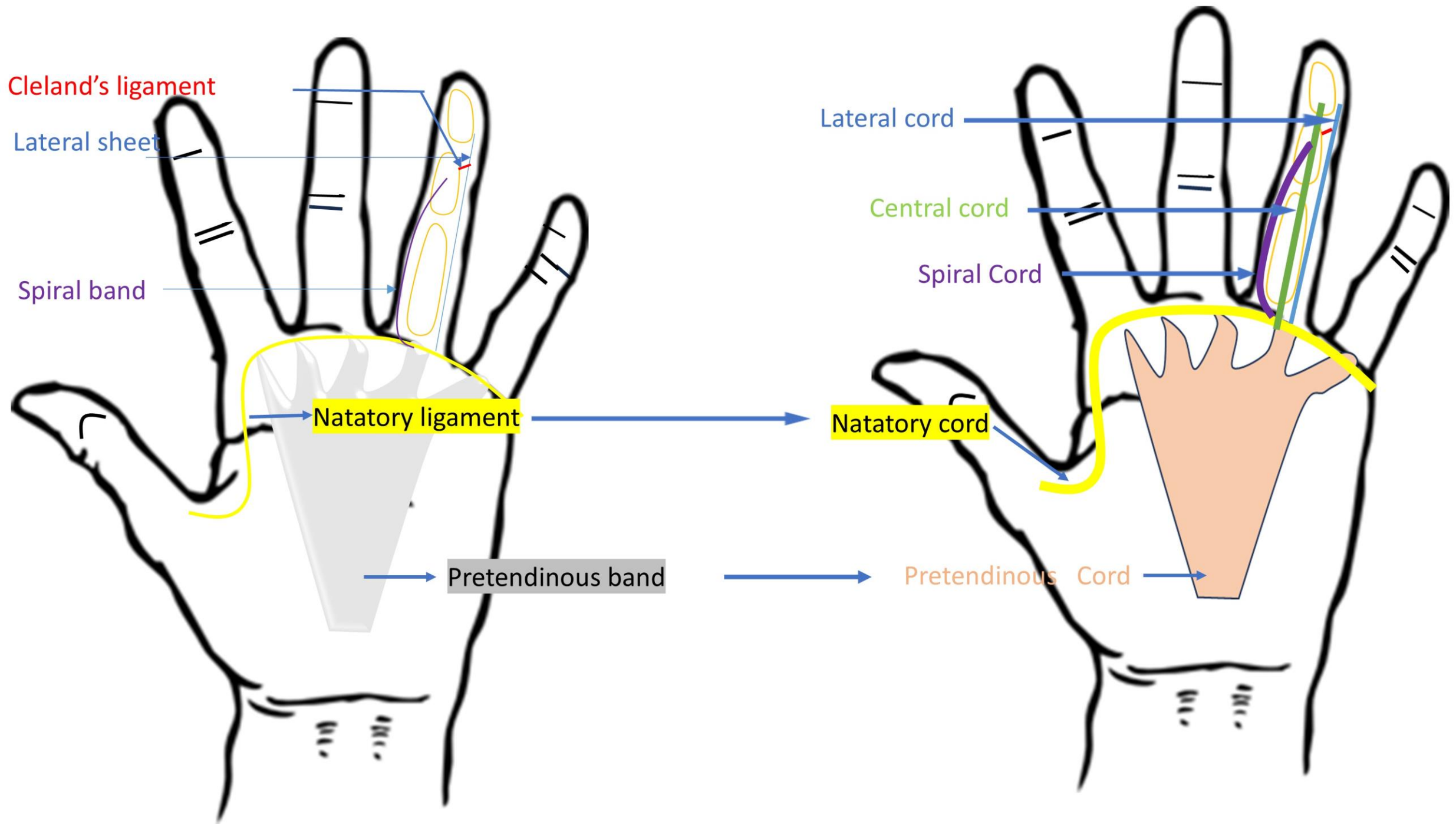
Lateral cord

Central cord

Spiral Cord

Natatory cord

Pretendinous Cord

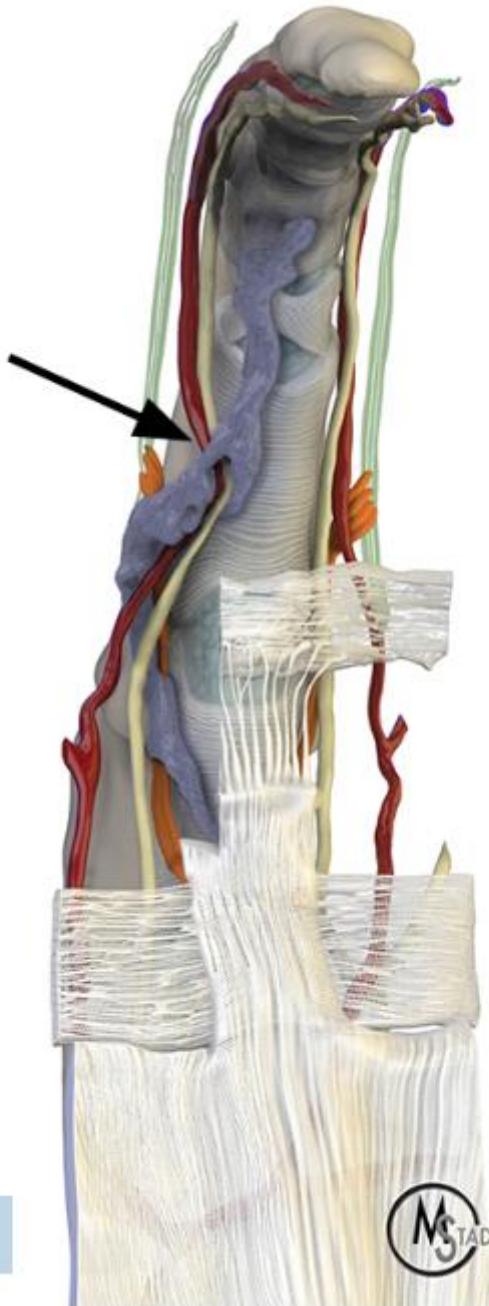


Rule 1: Normal structures are named bands, ligaments, or sheets, while the term “cord” denotes an abnormal structure.

Rule 2: Some cords carry the same name as the normal structure from which they derive (e.g., pretendinous cords arise from pretendinous bands).

Rule 3 : Multiple fingers may be affected by the same cord type, or multiple different cord types can occur in the same or different fingers.

- A. Pretendinous cords are derived from pretendinous bands, which are extensions of the palmar aponeurosis. These end at the level of the natatory ligament. It causes flexion contracture of the MCP but not the PIP.
- B. Natatory cords represent fibrosis of the normal natatory ligaments that run at the level of the web spaces perpendicular to peritendinous bands. Natatory cords do not cause flexion deformities or affect neurovascular bundles.



7e

C. In the complex course, spiral cords begin along the dorsal surface of pretendinous bands near the MCP joints.

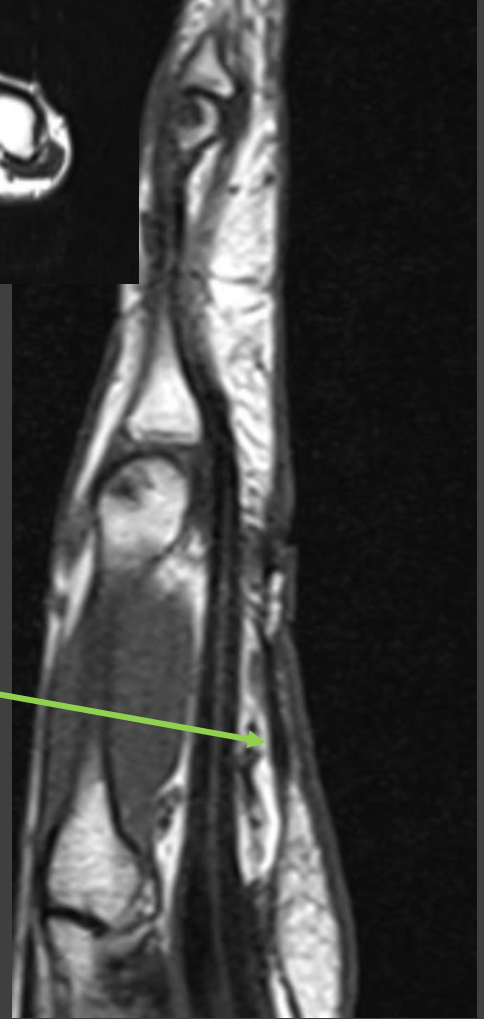
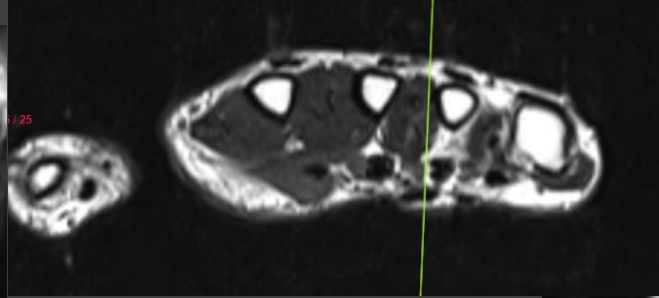
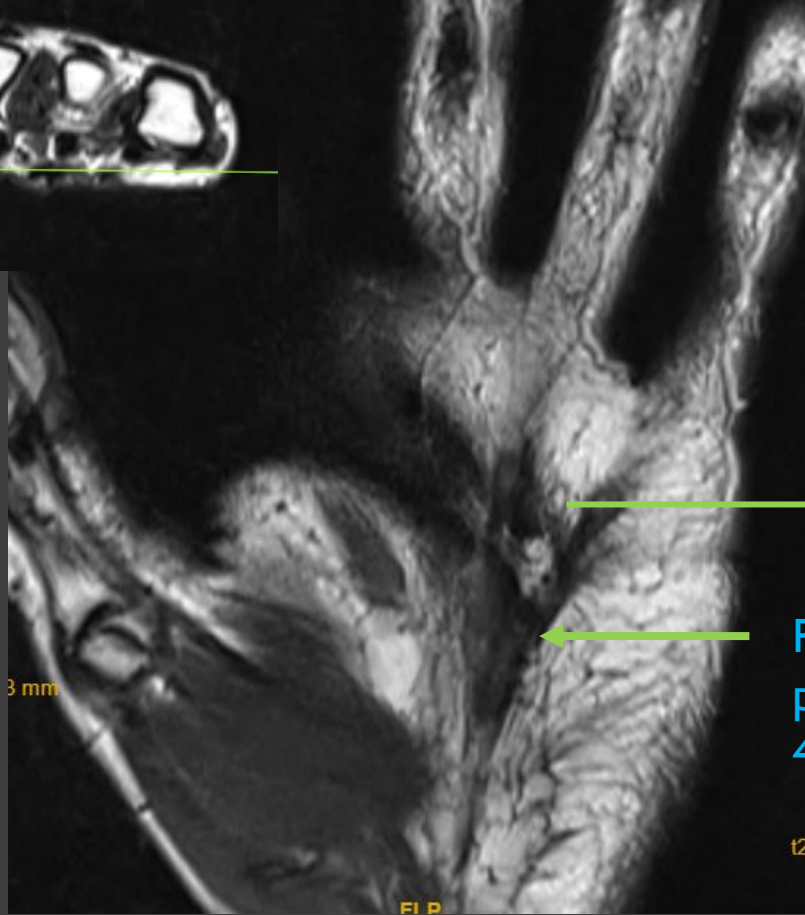
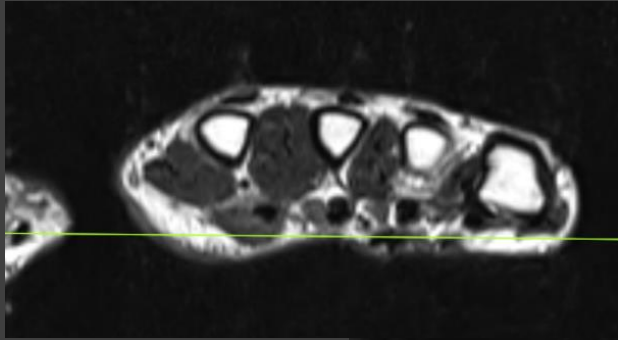
Distally, they tend to dive into the deeper soft tissues, encircling the neurovascular bundle coursing back superficially towards the midline middle phalanx base.

They often produce flexion contractures both at the MCP and PIP

D. Lateral cords arise from the normal lateral digital sheets along the proximal and middle phalanges. This can produce PIP flexion contractures.

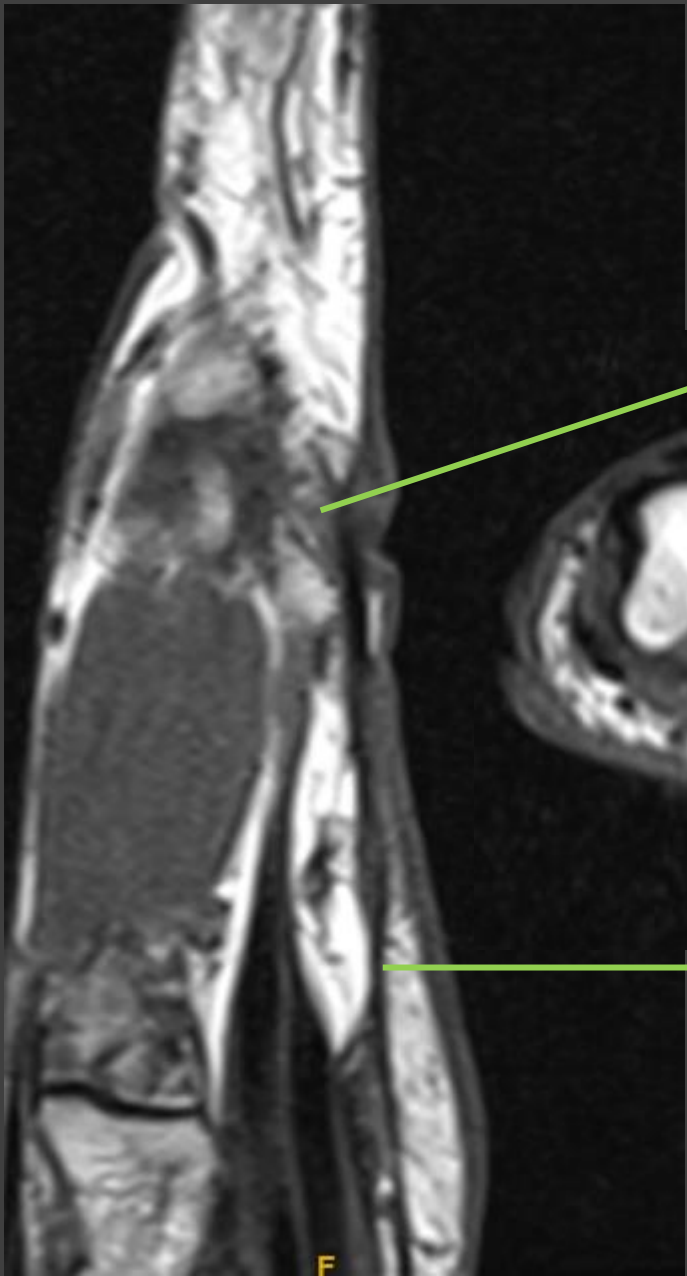
E. Central cord can arise in denovo or as continuation or peritendinous cord. Central cords occur in the fingers, volar to proximal phalanges, and PIP joints. The central cord usually causes PIP joint contractures. However, in cases where the central cord is continuous with the pretendinous cord, it can result in fixed flexion at both MCP and PIP joints.

Correct answer is C and E.

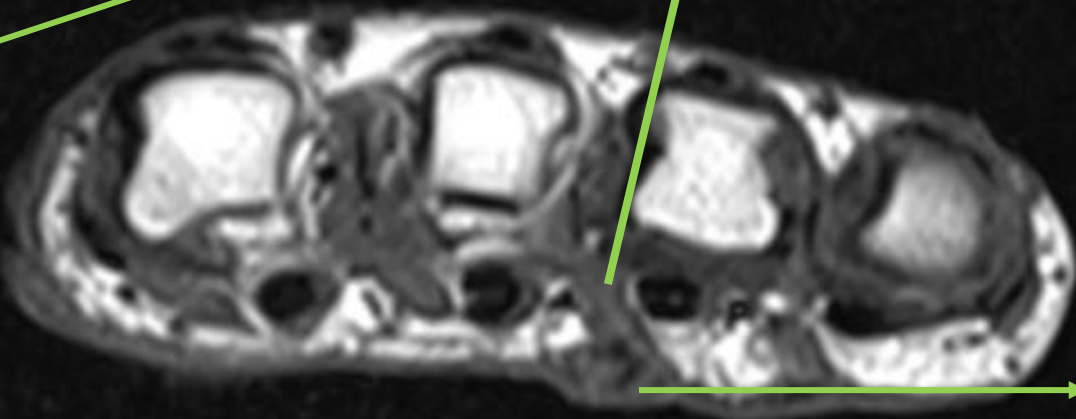


Thick proximal palmar ligaments

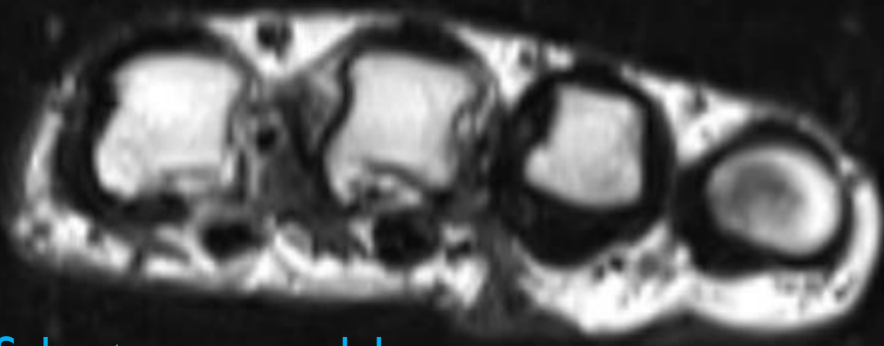
Pretendinous cords primarily affecting the 4th and 5th digits



Early spiral cords



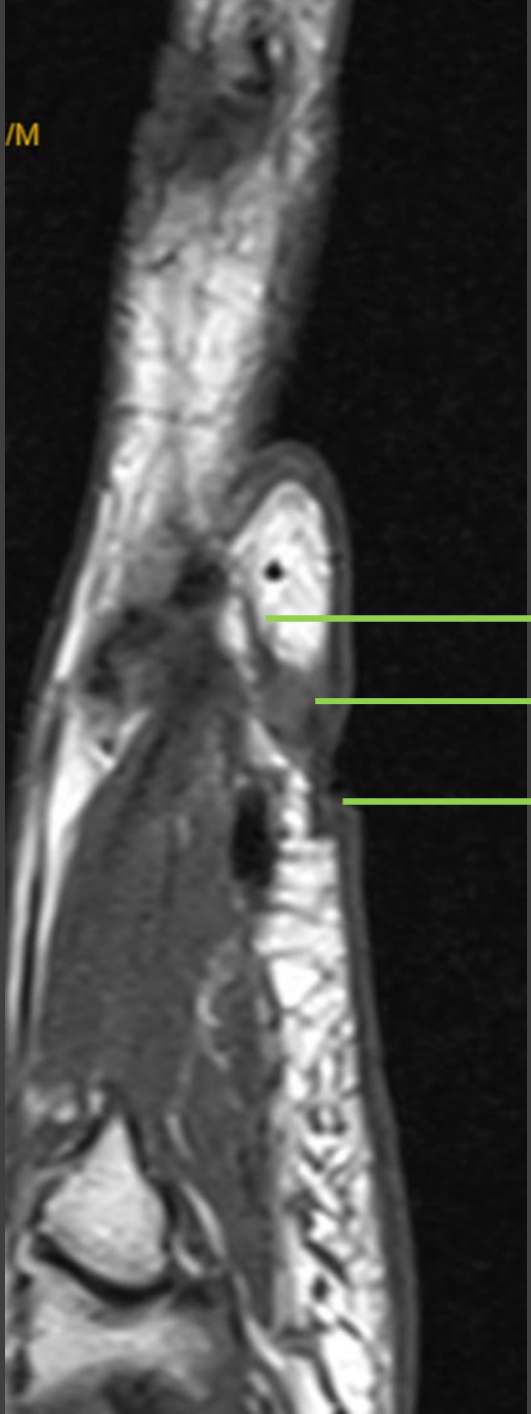
Subcutaneous nodules



Pretendinous cord



/M



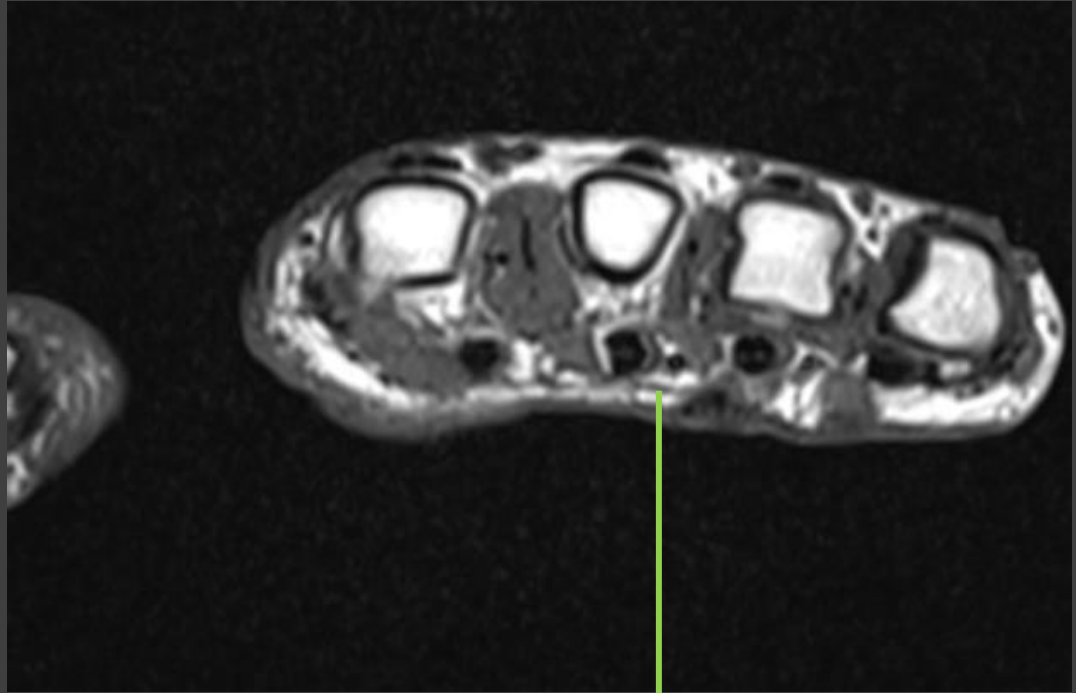
Probable early lateral
cord inseparable from
the nodule



Subcutaneous Nodule



Skin puckering



Normal natatory ligament

