



MRI in diagnosing subclinical hip pointers

DEAR SIR,

Hip pointers are synonymous with blunt trauma resulting in contusion of iliac crest and adjoining region. The pain and edema in the local soft tissue causes tenderness and agony which at times is disabling. High energy injury results in telltale features of regional swelling and skin discoloration but the low energy ones are conspicuously deficient in associated clinical signs. The early diagnosis thus is interfered and the course of the pain is prolonged. MRI (Magnetic resonance imaging) in this scenario can be a reliable tool to delineate the disorder for further appropriate management.

A 40 year old female patient presented with tripping and fall into the hard surface over right aspect of hip region. There was mild pain initially with no radiographic evidence of bony injury and patient remained ambulant with pain relieving medication. The localized episodes of sharp pain around right iliac crest region was noted which was worsened with prolonged weight bearing and walking. The tenderness was located well by patient over affected iliac crest region. The lateral recumbent posture on affected side was painful and pain was not relieved fully after three weeks. The repeat radiograph of pelvis was unremarkable and patient was advised MRI scan which yielded signal changes in the outer muscle attachments of iliac crest. The muscle strain was the culprit hip pointer. (Fig.1)

The hip pointer or blunt trauma to iliac crest usually affects contact sports players as they are prone to collision and falls. The resultant sub-periosteal hematoma and edema in surrounding muscles is associated with the condition[1]. The importance of clinic-radiological evaluation to rule out significant pathologies has resulted in optimal care and prevention[2]. The importance of early diagnosis in non-sports subjects is equally critical as it affects quality of life and prevents considerable healthcare burden.

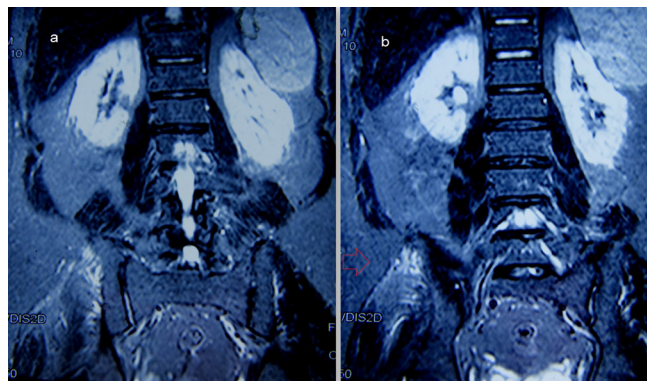


Fig.1. MRI depicting edema and signal changes in outer muscle attachments of iliac crest (a,b), identified by arrow mark.

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