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Clinical Image OMICS International

## Large Popliteal Cyst in Patient with Complaint of Posteromedial Knee Pain

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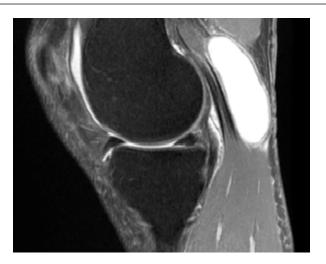
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## **Clinical Image**

The patient was a 44-year-old emergency room physician who presented to a direct access physical therapy clinic with right posteromedial knee pain. The patient had completed rehabilitation following a right partial medial meniscectomy 1 year prior at the same clinic, but continued to have progressively worsening posteromedial knee pain. The patient was considering further arthroscopic surgery to evaluate the medial meniscus following a consult from the orthopaedic surgeon, but sought out direct access physical therapy for a second opinion, as he felt the symptoms were consistent with tendinitis.



**Figure 1:** Sagittal proton density, fat saturated magnetic resonance image of the right knee demonstrating a 3.0 mm and 4.0 mm popliteal cystic process probably leaking fluid in the calf adjacent to the medial gastrocnemius and along the pes ansurine tendon regions.

Upon evaluation the patient presented with signs and symptoms consistent with medial meniscal pathology, including medial joint line tenderness and a mild effusion. In addition, there were impairments of hip strength, increased pain with toe and heel walking, increased pain during terminal stance phase of gait, and palpable thickening of the posteromedial knee capsule. The possibility of a popliteal cyst was

discussed. He underwent 6 physical therapy sessions with little change in symptoms. Being a physician, the patient ordered a magnetic resonance image (MRI) of his right knee, which revealed gross enlargement of a popliteal cyst adjacent to the medial gastrocnemius (Figures 1 and 2). Benign cystic and "cyst-like" lesions in and around the knee joint are common, in which case an MRI is useful to differentiate and diagnose these lesions [1]. Physical examination will miss one half of these cysts, and in older patients there is usually a coexisting problem [2]. Based on the findings, the patient underwent successful removal of the cyst.



**Figure 2:** Axial proton density, fat saturated magnetic resonance image of the right knee demonstrating a 3.0 mm and 4.0 mm multiloculated popliteal cyst has developed and is probably leaking fluid superficial to the medial gastrocnemius in the calf.

## References

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