

# 與大師對談

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- 模擬臨床情境，學習大師之影像判讀及鑑別診斷邏輯。
- 了解大師對影像品質之建議。

**CASE1**

**60 Y/O MAN**

**PIGMENTED VILLONODULAR SYNOVITIS  
(PVNS)**

# Brief history

- 60 y/o man
- Chief complain
  - Left knee pain and swelling
  - Mild limited range of motion
- Post-OP 10 years ago, cause unknown

- 2018-05 xray
- 2018-06 left knee MRI +C

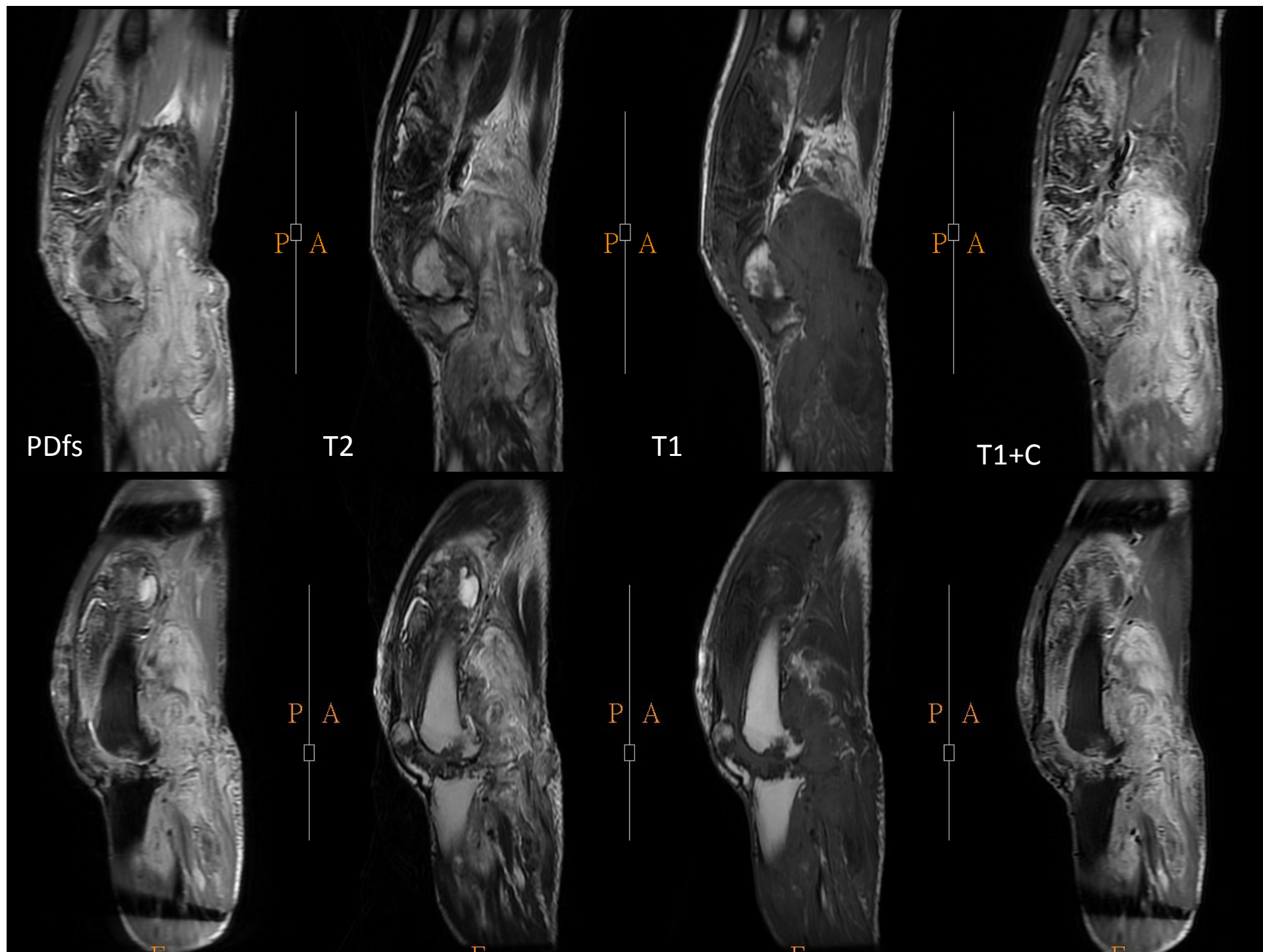


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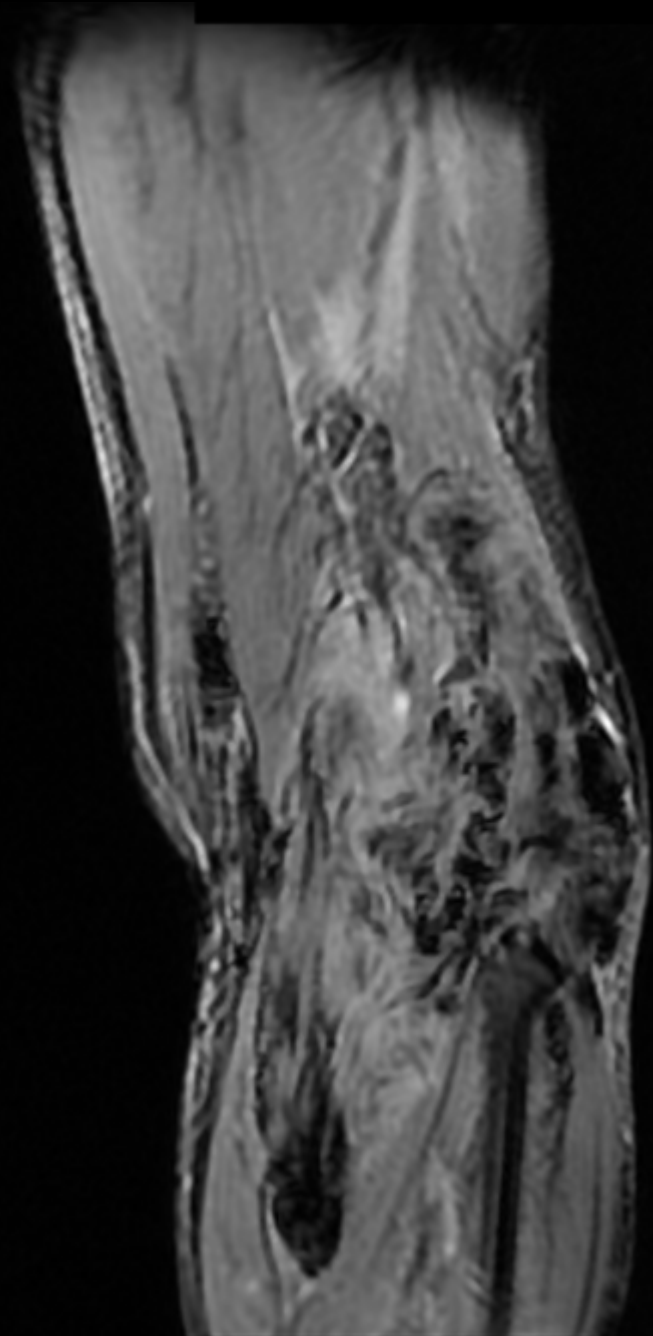
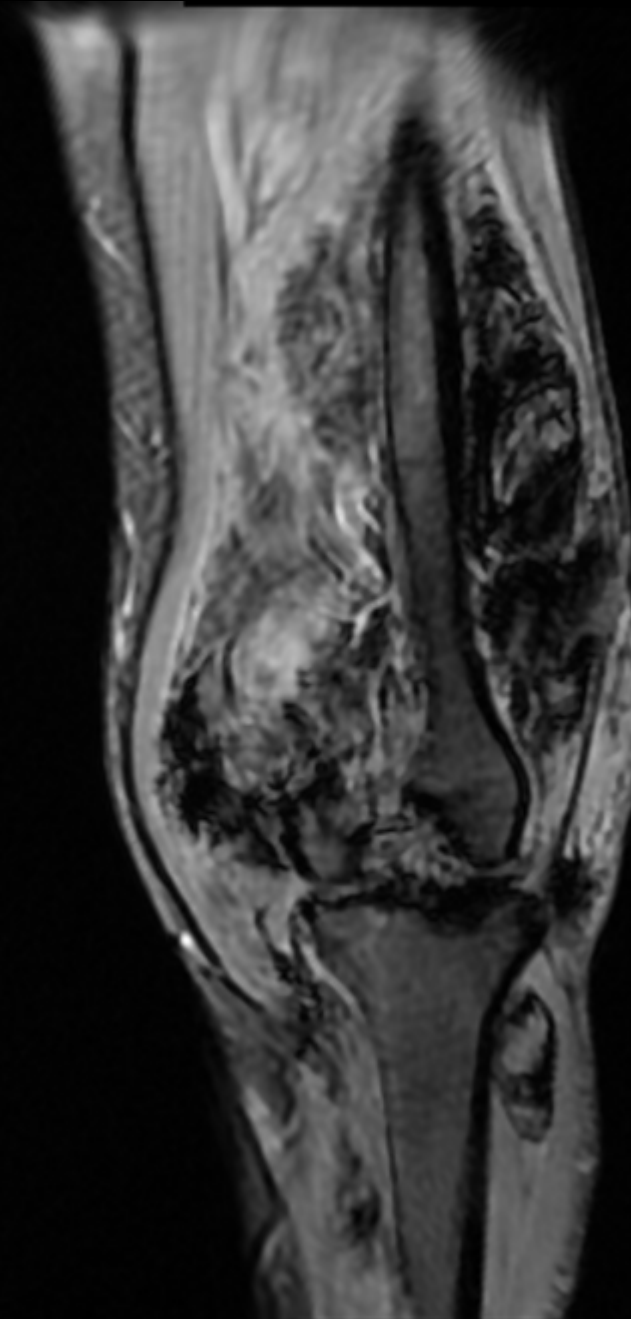
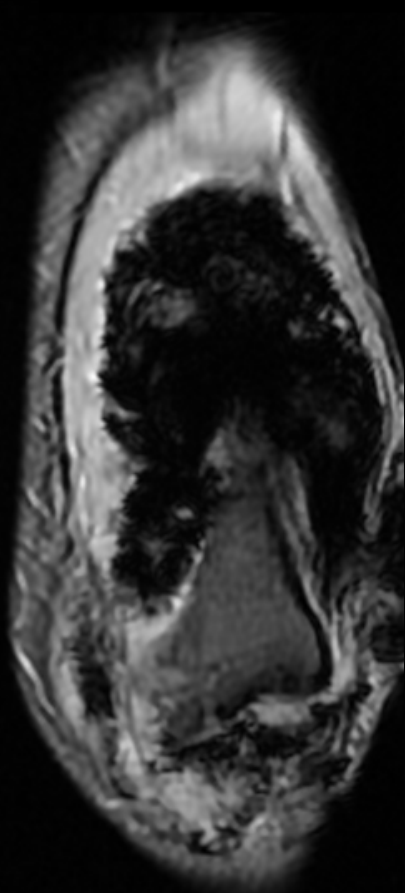


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T2\*





- DDx:
  - Pigmented Villonodular Synovitis (PVNS)
    - Diffuse intraarticular + extraarticular PVNS
  - Siderotic synovitis
  - Synovial chondromatosis

# Pigmented Villonodular Synovitis (PVNS)

- Proliferation of abnormal synovium, with hemorrhage (joints, bursae, tendon sheaths)
- Different Location:
  - Intraarticular
    - 80% occur in knee
      - Knee > ankle > hip > shoulder > elbow
  - Extraarticular
    - soft tissue mass
    - Localized: giant cell tumor of tendon sheath
- Clinical issue:
  - Most common s/s: painful swollen joint, insidious onset
  - Nature history: If untreated, repeated bleeding and proliferation leads to joint destruction.
  - Treatment: Resection with synovectomy, Incomplete resection has high recurrence rate

# Pigmented Villonodular Synovitis (PVNS)

- Intraarticular type
  - Image features:
    - Effusion with synovial proliferation,
    - associated erosions and subchondral cysts,
    - blooms on gradient-echo

# Pigmented Villonodular Synovitis (PVNS)

- Extraarticular type
  - Periarticular soft tissues of knee > thigh > foot
  - Intramuscular or subcutaneous locations are less common
  - Image
    - isointense to muscle on T1WI
    - isointense to hyperintense relative to muscle on fluid-sensitive MR sequences
    - Foci of low signal on T1WI and T2WI MR are typical, but hemorrhage is less evident than with intraarticular PVNS
    - Enhancement +