



## Mid Atlantic Regional Chapter of the American College of Sports Medicine

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### Right Knee Pain – Men's Half Marathon Runner

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**HISTORY:** A 62-year-old amateur male runner presented to the office complaining of right knee pain and swelling. Symptoms had started 6 weeks prior without a specific injury, twisting, or inciting event. He reported that the swelling felt like a firm bulge that was worse with bending and felt pain behind his patella with certain positions. He had recently increased training volume from 15 to 20 miles per week. He denied any mechanical symptoms.

**PHYSICAL EXAMINATION:** Examination of his knee revealed a mild joint effusion. With his knee flexed to 90 degrees, there was a palpable firm round mass about 2x2cm in the suprapatellar space that was moveable to the medial aspect of the knee. There was full active and passive range of motion of the knee. Ligamentous testing and meniscal testing were negative.

**DIFFERENTIAL DIAGNOSIS:** 1. Synovial hypertrophy 2. Loose body 3. Knee effusion due to osteoarthritis 4. Malignancy

**TEST AND RESULTS:** Limited diagnostic US performed in office of right knee revealed mild knee joint effusion and well circumscribed mass in the suprapatellar space with mixed echogenicity. MRI of the right knee demonstrated a lobulated planar heterogeneous fatty mass-like lesion, measuring approximately 4 cm x 5.5 cm x 1.4 cm, in the suprapatellar recess region.

**FINAL/WORKING DIAGNOSIS:** Exuberant Suprapatellar fat with lipoma arborescens v. lipoma with reactive/inflammatory changes v. malignancy (liposarcoma or lipofibrosarcoma)

**TREATMENT AND OUTCOMES:** Patient was recommended to pursue orthopedic evaluation for removal and biopsy for a definitive diagnosis. Final outcome is pending orthopedic evaluation.