E-Poster

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Differential Diagnosis of Compartment Syndrome of the Leg

Topic: Diagnosis

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BACKGROUND

Soleus injury in runners with clinical symptoms of compartment syndrome of the leg.

CASE DESCRIPTION

Myotendinous lesions are feared for their relapse rates. This case concerns a 39-year-old man, a regular amateur long-distance runner who in the course of training debuts with sudden pain, inability to continue the race during a training session at 8 kilometers. His symptoms are reproduced in the race in subsequent weeks, incapacitating him over increasingly shorter distances. Anodyne physical examination. Complementary tests, including ultrasound, doppler ultrasound, and MRI, with no findings. It is labeled as a compartment syndrome in relation to sport. His rehabilitation doctor reviews the tests, finding in the MRI a myotendinous injury in the central soleus tendon, and establishes an individualized plan for the return to their sports activity, managing to tolerate loads similar to those previous after 15 weeks from the onset of symptoms.

DISCUSSION

The difficulty in reaching a clinical and imaging diagnosis is a challenge in our daily clinical practice. In the soleus, it is important to know the location and extent of the lesion, with the location being of greater importance from the point of view of risk of lesion recurrence.

CONCLUSION

The correct diagnosis of soleus lesions is essential to be able to make decisions, know the prognosis and execute an appropriate treatment in each case. These lesions can generate symptoms of a compartment syndrome of the superficial posterior compartment of the leg.

Statement of Disclosures

None

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