## Pictorial CME

## **Pes Anserine Bursitis**

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S eventy-five years old gentleman, known case of osteo-arthritis presented to rehab department with swelling on medial aspect of proximal tibia (Fig 1) adjacent to left knee joint for the past two weeks. There was associated increased pain and difficulty in walking. There was no history of fever. On examination the swelling measured 3cm by 2.1cm and was fluctuant and tender. The knee joint had crepitus mild varus deformity but no effusion or joint tenderness. He was admitted on the suspicion of pes anserine bursitis (Fig 2). His baseline investigations revealed a raised TLC of 12.0 per cmm, blood sugar random was normal and x-ray left knee revealed advanced osteo-arthritis. His musculoskeletal ultrasound revealed synovial swelling with infective element. His bursa was drained and 25ml of turbid fluid



Fig 1- Swelling Medical Aspect of Proximal Tibia (Left)

was aspirated and fluid sent for RE and C/S. Synovial fluid RE revealed increased neutrophil count. He was given IV antibiotics for 7 days and his swelling and pain improved. He was subsequently discharged.



Fig 2- Pes Anserine Bursitis

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