

Osteochondritis Dissecans

Osteochondritis Dissecans is a disorder where an area of subchondral bone loses its blood supply (possibly due to an embolus or thrombus), and along with the cartilage that covers it, may slowly separate from the surrounding bone to form a loose body. The main symptom of loose bodies within the knee is sudden and recurrent locking of the joint, which is accompanied by severe pain.

Osteochondritis Dissecans often has an insidious or “unknown” onset, usually affecting males between 12-20 years old (there may also be a hereditary link to this condition). The person will suffer discomfort and an ache in the knee during and after exercise. Once the bone fragment separates, locking of the knee is the predominant symptom with associated swelling of the joint, and quadriceps muscle wasting may be observed.

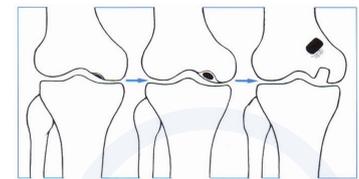
Treatment of Osteochondritis Dissecans

It is important to establish the extent or stage of the condition as repeated jamming of a loose body between the two joint surfaces will predispose the person to osteoarthritis. The severity, therefore, may need to be determined by diagnostic imaging or an orthopaedic surgeon.

Throughout all stages of Osteochondritis Dissecans, application of soft tissue therapies via a myotherapist will help re-establish the tone and function of the quadriceps muscle group which have been inhibited and atrophied because of the condition.

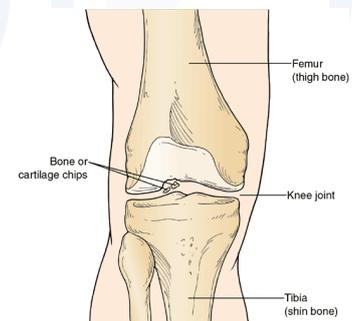
In a child with an undetached bony fragment (where the cartilage is still intact), rest (the limb may need to be supported and immobilised) and avoidance of impact activities for 6-12 months may, in some cases, allow the condition to heal and resolve itself spontaneously (if the fragment is small).

In conditions where the fragment has separated and is causing recurrent locking of the knee joint, removal or reattachment of the loose body is required.



stages of seperation

Dandy DJ, Edwards DJ. Essential Orthopaedics and Trauma (4th ed).



osteochondritis of the knee



deep water running is an example of relative rest.

what you can do

Consult your myotherapist for advice to reduce complications of the condition, and soft tissue treatment to improve the functional environment of the knee.

- Relative Rest – avoid any high impact activities
- Support – it may be of benefit for a child who is not skeletally mature (bones have not formed into the adult stage) to immobilise and protect the knee
- Advice – it may be necessary to be referred for appropriate diagnostic imaging of the knee and to an orthopaedic surgeon for removal or reattachment of the loose body