Excision of big lipoma in poplitial fossa which mimics to Backers cyst-

Clinical images

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Abstract:
No abstract is required as this is clinical images

Introduction:

Lipoma is one kind of benign tumour which is obviously diagnosed having location at abdomen, back, supra scapular region and nape of neck. Lipomas are usually present as soft, fluctuant, painless, subcutaneous lumps measuring from 2 to 20 cm in diameter. [1] Apart from these common locations this universal benign tumour can be observed at some rare location is planter aspect of foot. [2] This benign tumour (i.e. lipoma) never converts in malignant so patients ignore it and lastly presented with big cystic swelling. In this case report a 52 years old female patient visited OPD of Shalya tantra with complaints of big cystic swelling at poplitial fossa of right leg (Fig-1, 3). On the basis of clinical findings and location of swelling it mimic to Bakers cyst. Bakers cyst is termed as MB cyst a British surgeon (1839-1896) Morrant Baker (MB) who described this condition first time. This cyst is also termed as poipliteal cyst due to its location at popliteal fossa when an excess fluid from knee joint is collected in sac due to osteoarthritis or rheumatoid arthritis.[3-4]

Key words: Backers cyst, Lipoma, popliletal fossa.
Case Presentation: On the basis of history, clinical local findings and X-ray report (Fig-2), diagnosis was made as lipoma a rare location. It was planned to excision under spinal anesthesia (5% lignocaine hydrochloride heavy in L₃-L₄ space). After excision it was observed that there was 15 cm x11 cm encapsulated lipoma which was unexpected to the operating orthopedic surgeon (Fig-4 -8). The lipoma was enucleated completely and patient shifted to ward in stable condition. The post operative wound was exposed to see any collection in dead space but stitches were found normal (Fig-9). The patient recovered completely after removal of stitches on post operative 10 days (Fig-10). No post operative complications were found in this case and patient was recovered uneventfully. Hence this case highlighted that lipoma can occurs at rare place like popliteal fossa which mimic to Morrant Bakers cyst (MB cyst).

Figure-1: Location of lipoma in popliteal fossa of right knee joint mimic to Baker’s cyst

Figure-2: X-ray Right knee joint (AP & lateral) showed the cystic lesion posterior side of knee joint
Figure-3: Drapping of linen during procedure

Figure-4: Encluision of big lipoma under spinal anesthesia

Figure-5: length of excised lipoma-15 cm

Figure-6: width of excised lipoma-11 cm
Figure 7: After removal of lipoma

Figure 8: Suturing of the wound after wash with NS and Betadine.

Figure 9: Post operative 3rd day

Figure 10: Post-operative 10th day after stitches removal.
References:


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