

SKELETAL DYSPLASIA

- **Def.:** Generalized abnormalities

in bone growth & development.

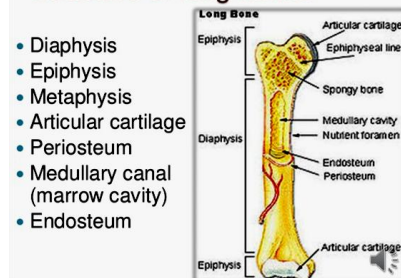
⇒ **Etiology :** - Hereditary - Gene Mutation

⇒ **Classification :** Large variable types of diseases,

These are most famous ,

⇒ **Disorders affecting:**

Structure of long bones

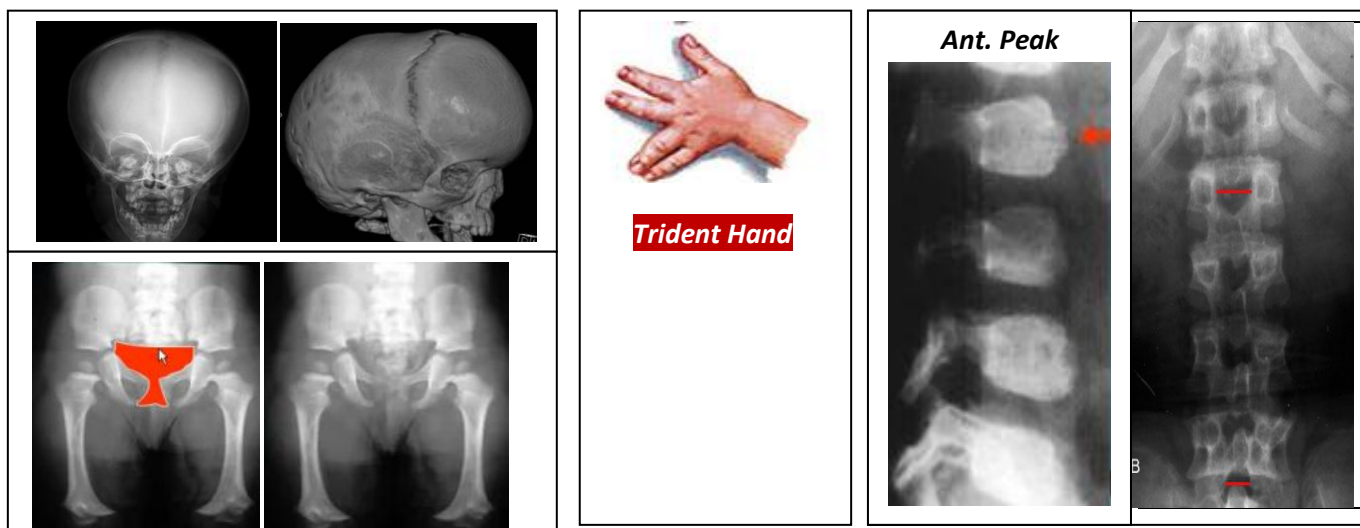


1-Growth plate	2-Epiphysis/Apophysis	3-Metaphysis	4-Diaphysis	5-Others
-A chondroplasia -Hypo Chondroplasia -Pseudo-A chondroplasia -Thanato phoric <i>dwarfism "rare, died IU"</i>	-Multiple Epiphyseal Dysp. -Spondylo " " -Punctate " " -Hemimelica " " <i>تحدث في نصف الجسم وتترك النصف الآخر</i> <i>- & Others</i>	-Chondrodysplasia -Osteopetrosis <i>"Marble Bone disease"</i> -Dystosis : =Cliedo-cranial D. =Pykno D.	-Diaphyseal Dys. -Pachy-dermo- perisoteosis -Infantile cortical Dysplasia -Hyperphosphatasia -	*Osteogenesis Imperfecta *

Achondroplasia "Dwarf"

⇒ **Etiology :** - Autosomal Dominant - 80% Gene Mutation

General	-Dwarf: short stature - Short Limbs -Usually Normal mentality
Skull	-Large Skull - Small (Face – Skull base –Sella) +/- Hydrpcephalus
Chest	-Short broad sternum & Limbs
Spine	↓Distal interpedicular distance - Ant. Peak -Post Scalloping
Pelvis	-Square iliac bones -Glass shape cavity - Sacral Jutting: displaced post.
Limbs	-Wide metaphysis - Ball & socet end - Rhizomelia → More short Proximal bones -Trident Hand: Equal Finger length "3 equal + other 2 equal in length"



Hypochondroplasia

..... As *Achondroplasia* +

*Normal Height or Slight Short

***NO SKULL AFFECTION**

- Over Growth of fibula “much longer than tibia distally”

“Remember Hypo.. Fibula more Hypo”



PseudAchondroplasia



..... As *Achondroplasia* +

***NO SKULL AFFECTION**

* Epiphyseal & Metaphyseal Abnormality

D.D.: *Metaphysis wide & irregular* Like Rickets,

But other manifestation + No skull affection = *PseudoAchond.*

Differential TERMS

- ⇒ Rhizomelia = Short Proximal bones → “as Humerus & femur”
- ⇒ Mesomelia = Short middle bones → “radius&ulna – Tibia&fibula”
- ⇒ Acromelia = Short distal bones → “Fingers”

SUMMARY OF SKELETAL DYSPLASIA IMAGING

Cleido-Cranial Dysplasia

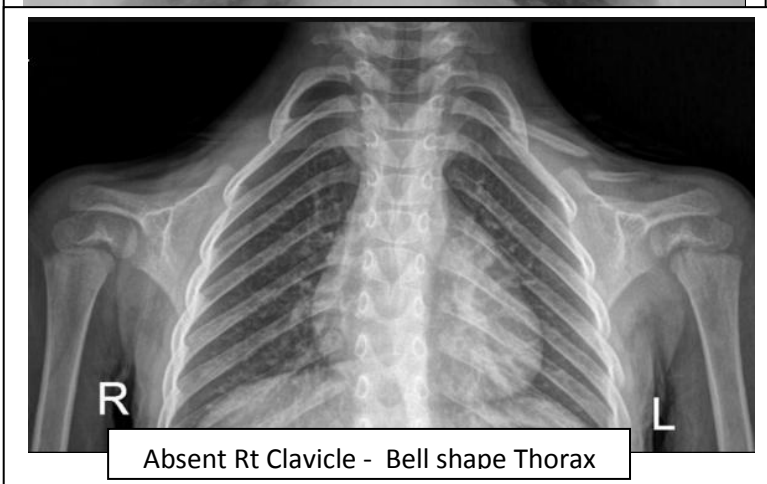
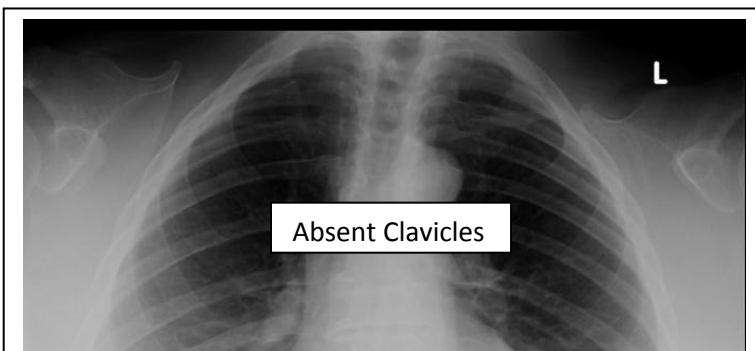
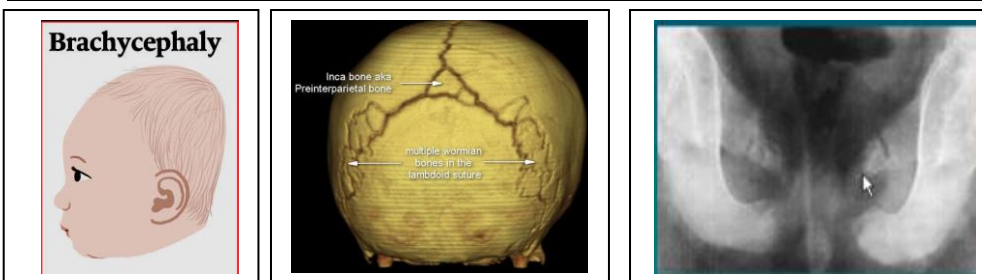
Cleido = Clavicle

Cranial = Skull → manifestation mainly in skull & clavicle

<https://radiopaedia.org/articles/cleidocranial-dysostosis>

- **Rare**
- Autosomal Dominant
- 30% Gene Mutation “*CBFA1 gene*”

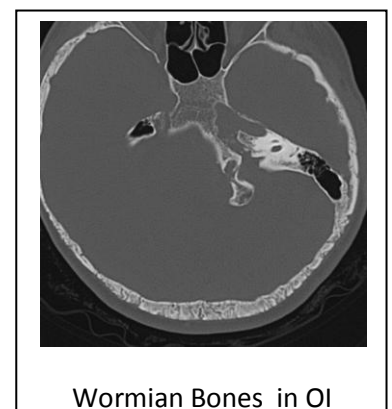
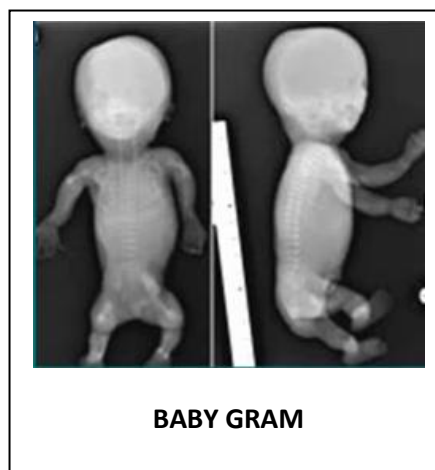
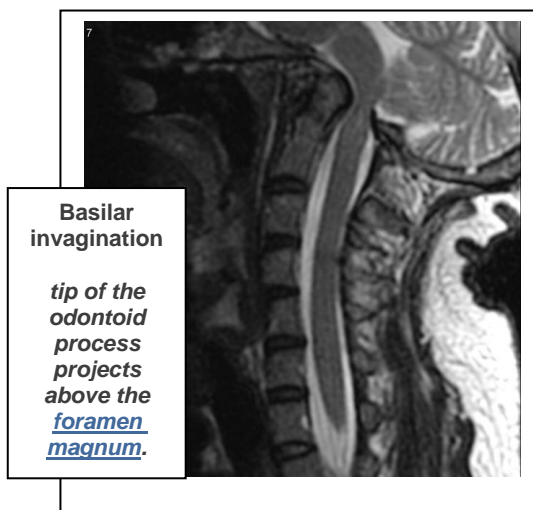
General	Ossification Abnormality “Delay appearance of ossification center eg. Pubic”
Skull	- Brachycephaly : premature fusion of the coronal suture → small A-P diameter - Wormian bones : multiple small bones in-between sutures
Clavicle	-Absent all or outer part → High scapula
Chest	-Narrow upper diameter → Bell shape Thorax -over number ribs “ <i>Supernumerary</i> → Cervical or Lumbar ribs”
Spine	-Biconvex vertebral
Tooth	Abnormal “count & direction”



Osteogenesis Imperfecta

- Rare 1 / 15000
- Genetic disorders of **collagen type I** production
→ Osteoporosis & Fragile Bones
- **Types:** -Tarda “Mild” -Sever “died early”
& as regarding bone shape: -Gracile “thin bones” -Broad
- 5 main Manifestations:

- Osteoporosis → Fractures
- Dental Apnormality
- Fragile bones → Thin or wide
- Deafness ← *Otosclerosis*
- Lax Joints
- Blue Sclera



OsteoPetrosis (*Marble Bone Disease*)

- Uncommon hereditary disorder ← defective [osteoclasts](#)
- → **Bones** : Sclerotic & Thick *but* Weak & Brittle
- Manifestations:
 - General increased bone density
 - Fractures
 - Flask shaped long bones
 - Bone within bone
 - **“Rugger Jersey”** Spine : *sclerotic end plates*



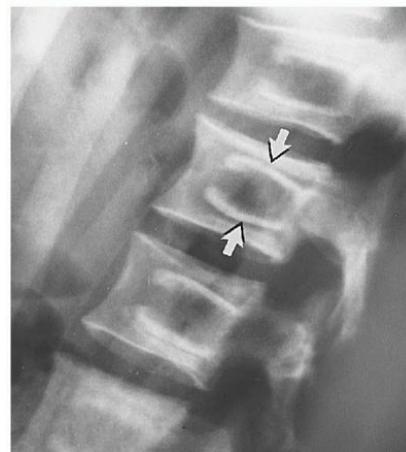
C.P. -Hepatosplenomegally -Enlarged LN
-Anemia -Deafness -Optic Atrophy

D.D. of O.I.:

- heavy metal poisoning (e.g. lead)
- [melorheostosis](#)
- [hypervitaminosis D](#)
- [pyknodysostosis](#)
- [fibrous dysplasia](#) of skull or face



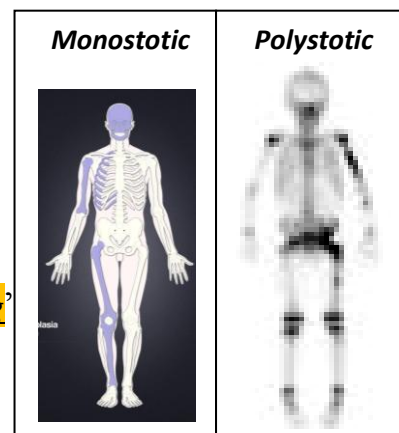
Bone with in Bone



FIBROUS DYSPLASIA

<https://radiopaedia.org/articles/fibrous-dysplasia>

- Non-neoplastic tumour-like congenital process,
- **Presentation Age:** Young Adult (*Peak 3 : 15 y*)
- **Etiology :** Unknown
- **Pathology:** Medullary bone replaced by **fibrous tissue**
→ Metaphyseal cystic lesion with “**ground glass veiling**”
+ Bone deformity



• Types:

- **Monostotic** “*single Bone*” 70:80% → Ribs > Proximal Femur > Tibia >
- **Polystotic** “*Multiple Bones*” 20:30% → Femur 91% > Tibia 81% > Pelvis > least spine.

⇒ C.P.:

- Incidental +/- Endocrine Abnormality
- Painless bone remodeling
- Adjacent structures compression

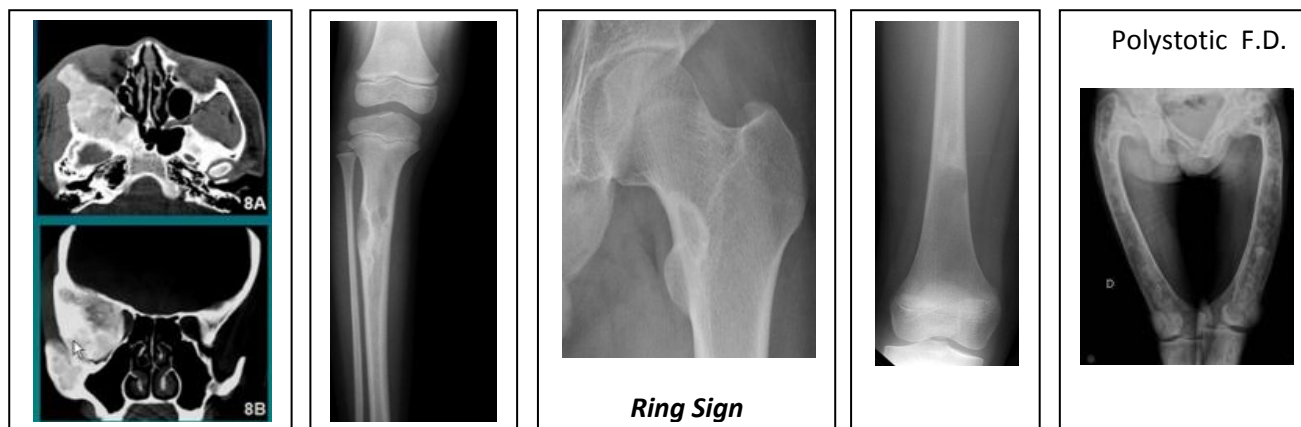
N.B. Monostotic Never progress to Polystotic

⇒ Treatment :

- Usually No ttt
- Surgical decompression ← Mass effect

D.D. -Pagets disease - NF 1 - NOF - Adamantinoma - Enchondromas

X ray CT	<ul style="list-style-type: none"> • Ground-glass matrix * May be completely lucent (cystic) or sclerotic • well circumscribed lesions * No periosteal reaction • <u>ring sign</u>
MRI	Marked variability in the appearance
Bone scan	increased tracer uptake on <u>Tc⁹⁹ bone scans</u>



Multiple Epiphyseal DYSPLASIA

- Autosomal Dominant - Dwarfism
- Diffuse **epiphyseal** changes in long bones :
 - Delayed
 - Smaller
 - Irregular
 - Fragmented
- This lead to → Premature O.A.
- **Double Layered Patella**



Spondylo Epiphyseal DYSPLASIA

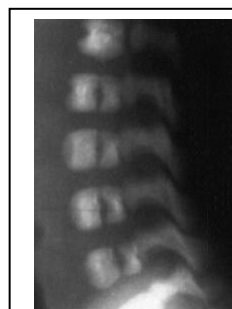


As Multiple Epiphyseal Dysplasia

+ **Platysponyly** = *Redced Hight + irregular endplate*

Punctate Epiphyseal DYSPLASIA

- **Stippled Epiphysis** → replaced by multiple Ca dots
- **Rhizomilia** → Short Proximal bones
- Cartilage calcification eg. *Trachea , Bronchi*
- **Coronal Spine Cleft** ← PATHOGNOMONIC

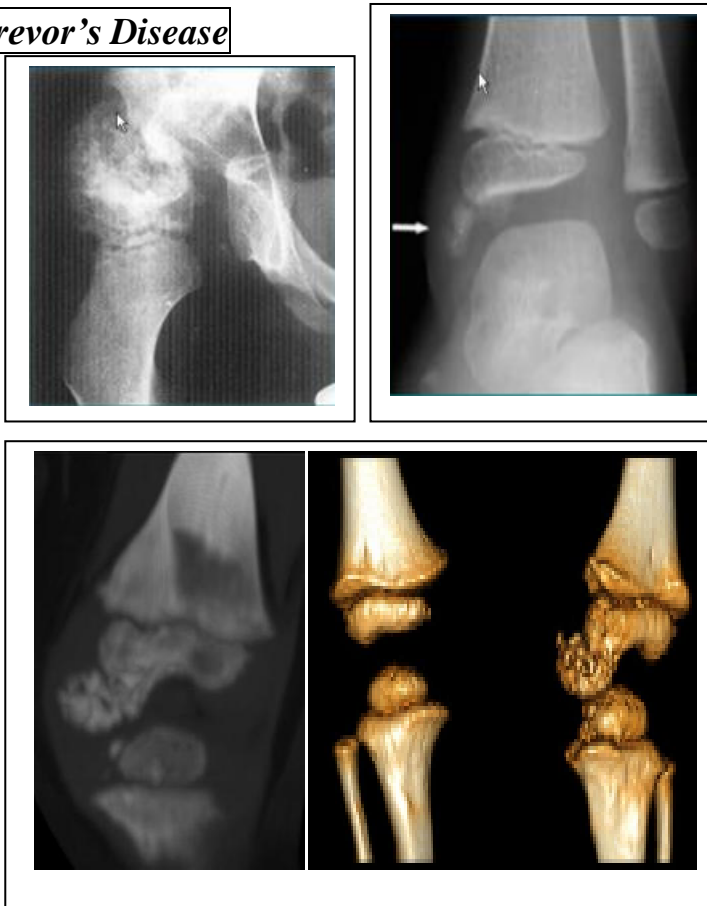


*Stippled
Epiphysis*

HEMIMELICA Epiphyseal DYSPLASIA

Or Trevor's Disease

- Irregular **over growth** of epiphysis or apophysis
At one limb **on One side.**
- Occurs in L.L. > U.L.
- **D.D. : Osteochondroma**
← arise from metaphysis



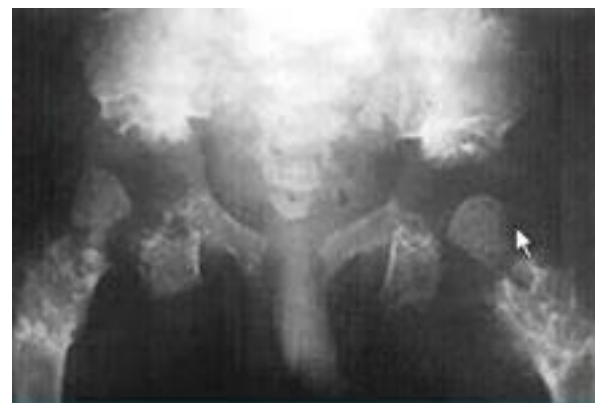
“Special Character”		
<i>Epiphyseal Dysplasia</i>	Multiple	Double Layered Patella
	Spondylo	Multiple + Platysponyly
	Punctate	Stippled Epiphysis * Coronal Spine Cleft
	Hemimelica	Epiphyseal overgrowth of one limb at one side

METAPHYSEAL CHONDRODYSPLASIA

- Wide group with short limb dwarfism
- Abnormal metaphyses with variable ossification and tubulation
- *Schmid type*, commonest and mild form, cupped irregular metaphyses D.D. Rickets



RICKETS



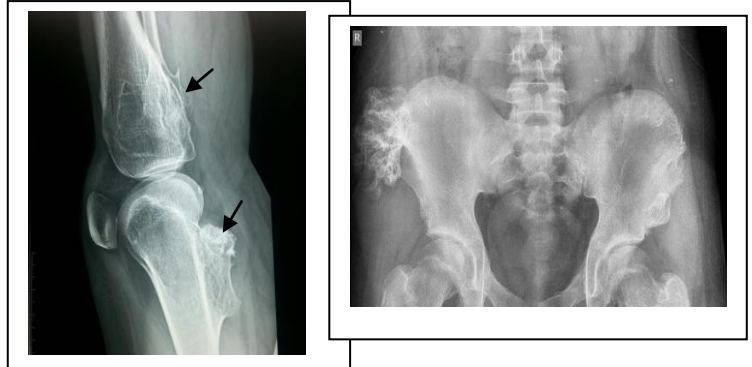
Sever Form of Metaphyseal Chondroplasia

DIAPHYSEAL ACLASIS

“Hereditary Multiple Exostoses”

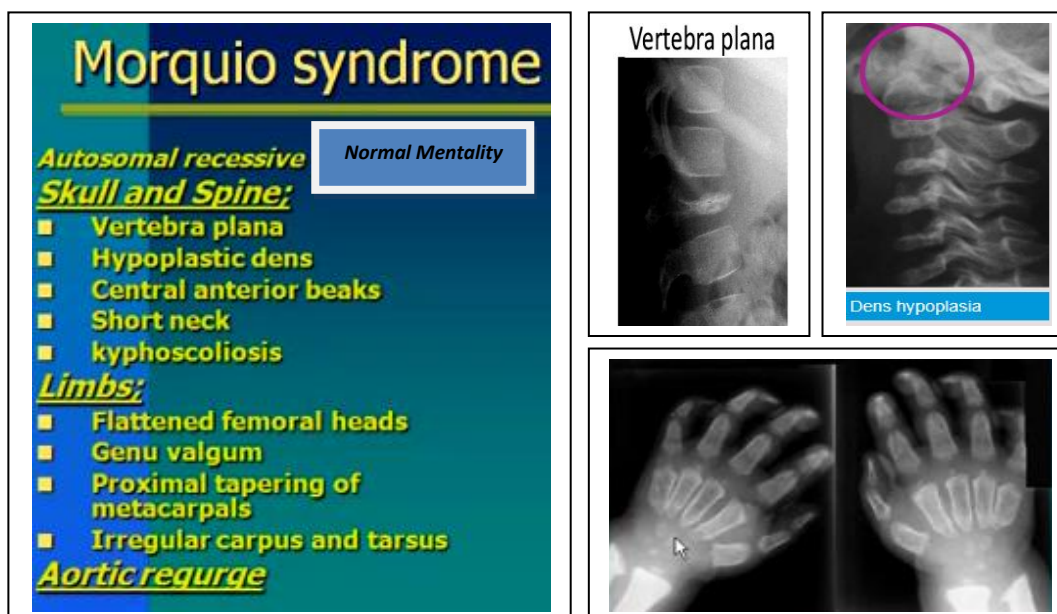
<https://radiopaedia.org/articles/hereditary-multiple-exostoses>

- Familial or 40 % Mutation
- Multiple Osteochondromas
- Arise in Metaphysis of, progress to diaphysis on growth
So←”Diaphyseal Misnomer”
- **Long bone**
- Can involve **Pelvis , Vertebra & Scapula**
- Sessile or pedunculated , Directed away from joint
- **10 %** malignant transform→*Chondrosarcoma*



MUCOPOLYSACCHARIDOSIS

- Abnormal deposition of *Mucopolysaccharides* in skeleton & soft tissue.
 - **C.P.:** -Mental Retardation - Corneal Clouding - Skeletal Changes
-Organomegally
 - **Subtypes** : many subtypes , main 3 types
- 1- Morquio syndrome “Mild form” 2-Hurler Syndrome 3-Hunter Syndrome**



Hurler syndrome

Autosomal recessive

Skull and Spine:

M.R

- Macrocephaly
- J-shaped sella
- Hydrocephalus
- leukodystrophy
- Oval vertebra with anteroinferior beaks
- Posterior scalloping
- Wide interpedicular distance
- Short neck
- kyphoscoliosis

Limbs:

- Slanted distal radius and ulna
- Coxa and Genu valgum
- Proximal tapering of metacarpals
- Trident hands

Coronary and valvular heart Dse

What are the Symptoms of Hunter Syndrome?

1. Development delays
2. Thickened lips or nostrils
3. Broad nose
4. Claw-like hands
5. Protruding tongue
6. Skeletal deformities
7. Hepatomegaly
8. Splenomegaly
9. Sleep apnea
10. Persistent hypertension
11. Vision impairment
12. Progressive hearing loss
13. Behavioral disorder
14. Joint stiffness
15. Diarrhea

Claw-like hand



For More Information:
Visit: www.epainassist.com

ePainAssist.com

MARFAN SYNDROME

Autosomal dominant, 15% mutations

Limbs:

- Tall stature
- Long slim limbs
- Arachnodactyly = Long Fingers
- Joint laxity
- Protrusio acetabulae

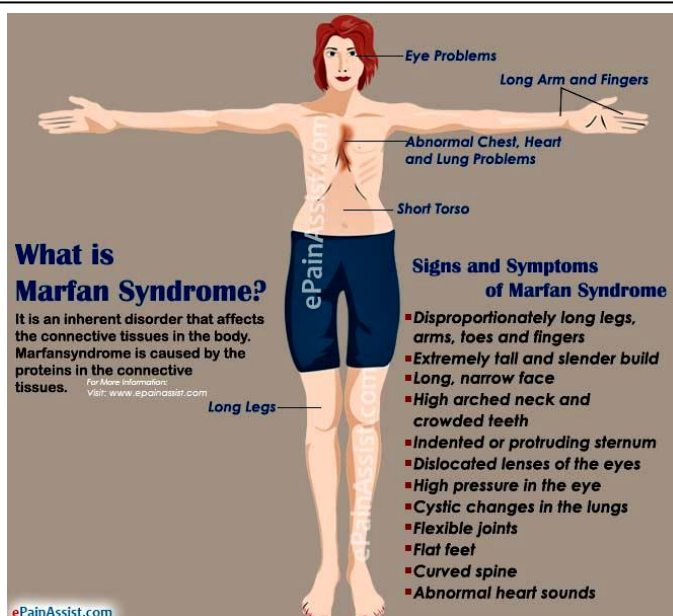
Spine:

- Kyphoscoliosis
- Posterior scalloping

Aortic aneurysm and valvular heart Dse

Rib notching

Lungs: emphysema & bullae

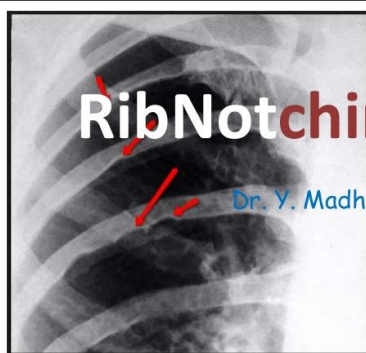


<https://radiopaedia.org/articles/marfan-syndrome>

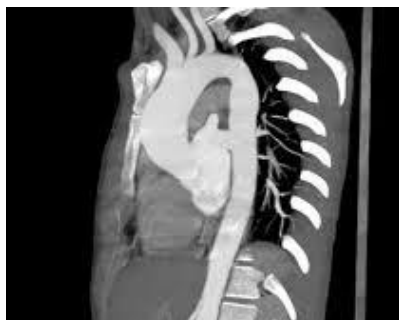


Protrusio Acetabulae :

Femur head bulging inward



Wide Aortic Base



SUMMARY OF SKELETAL DYSPLASIA IMAGING

NB	DYSPLASIA	DYSTOSTOSIS
	Diffuse abnormal growth of bones – either cartilaginous or osseous components	Specific bones abnormal ossification of individually or in combination
	Modeling usually affecting all bones in a similar fashion	Remodeling usually affecting some bones & may be unilateral or peripheral
	e.g:- <input type="checkbox"/> Osteogenesis imperfecta. <input type="checkbox"/> Multiple epiphyseal dysplasia. <input type="checkbox"/> Achondroplasia	e.g:- <input type="checkbox"/> cleidocranial dysostosis. <input type="checkbox"/> craniofacial dysostosis. <input type="checkbox"/> Dysostosis multiplex

OTHERs Mimicking Dysplasias

Melorheostosis

- Very rare
- "Melting wax running down the side of a burning candle"
- Unilateral or bilateral and asymmetrical



Osteopoikilylosis

- Incidental (familial)
- Multiple bone islands
- Around joints and along axes of long bones



Exclude Sclerotic Mets By Bone scan

Osteopathia

Striata

- Rare
- Asymptomatic
- Longitudinal striation
- Long bones esp Lower Limb



SOURCES

- Lecture of Prof. Ahmed Wafee <https://www.youtube.com/watch?v=MLSX98vuqNg&t=309s>
- Lecture of Prof. Hassan Elkiki <https://www.youtube.com/watch?v=x-tRdBcVKaw>
- www.Radiopaedia.org

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