

Pellegrini-Stieda Syndrome: A Physical Medicine and Rehabilitation Approach

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Abstract : Introduction: The Pellegrini-Stieda lesion is the result of post-traumatic calcification and/or ossification on the medial collateral ligament (MCL) of the knee. When this calcification is accompanied by gonalgia and limitation of knee flexion, it is called Pellegrini-Stieda syndrome. The pathogenesis is probably the calcification of a post-traumatic hematoma at least three weeks after the initial trauma or secondary to repetitive microtrauma. On anteroposterior radiographs, a Pellegrini-Stieda lesion is a linear vertical ossification or calcification of the proximal portion of the MCL and usually near the medial femoral condyle. Patients with Pellegrini-Stieda syndrome present knee pain associated with loss of range of motion. The treatment is usually conservative with analgesic and anti-inflammatory drugs, either systemic or intra-articular. Physical medicine and rehabilitation techniques associated with shock wave therapy can be a way of reduction of pain/inflammation. Patients who maintain instability with significant limitation of knee mobility may require surgical excision. Methods: Research was done using PubMed central using the terms Pellegrini-Stieda syndrome. Discussion/conclusion: Medical treatment is the rule, with initial rest, anti-inflammatory, and physiotherapy. If left untreated, this ossification can potentially form a significant bone mass, which can compromise the range of motion of the knee. Physical medicine and rehabilitation techniques associated with shock wave therapy are a way of reduction of pain/inflammation.

Keywords : knee, Pellegrini-Stieda syndrome, rehabilitation, shock waves therapy

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