

Fig. 1. Lateral view of the left knee X-ray: showing a large, calcified lesion in the joint under the patella.

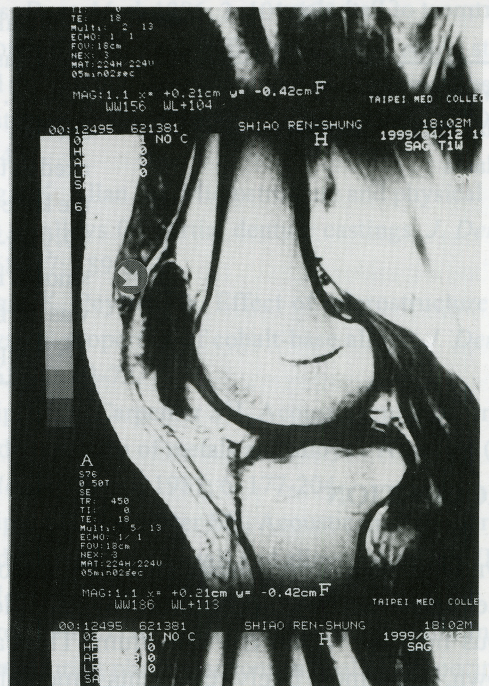
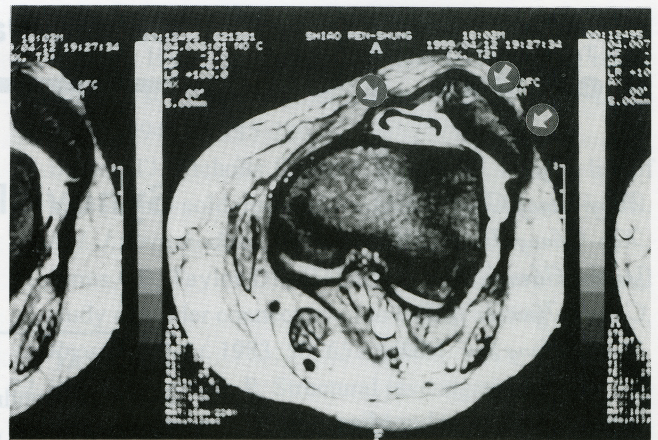


Fig. 2. T1-weighted MR image showing a hypointense-signal tumor in the patellofemoral joint. The signal intensity of the tumor surface and joint cartilage are similar. Note that the patella is located in a lateral position. Fig. 2a. Axial view. Fig. 2b. Sagittal view.  
Single arrow: tumor. Double arrows: patella.

fied lesion in the knee joint under the patella (Fig. 1). Magnetic Resonance imaging (MRI) showed hypointense-signal tumor on T1-weighted images (Fig. 2).

Arthrotomy, tumor excision, and lateral release were performed. A whitish mass surrounded by a cartilaginous surface about  $4.0 \times 2.5 \times 0.8$  cm in size was removed. Some small fragments were also removed. Chondromalacia of the patellar cartilage, about grade IV, was found, and drilling was done (Fig. 3). Lateral release of the retinaculum was made due to patellar subluxation. Pathologic report showed islands of cartilage with ossification buried and coated by a layer of synovium (Figs. 4, 5).

After 1 year of follow-up, no recurrence was found. No discomfort was noted about his left knee, but the patella was still located in lateral subluxation. We suggested that he increase the strength of the quadriceps femoralis to prevent degenerative change.

## DISCUSSION

Synovial chondromatosis is a monoarticular syn-

ovial proliferative disease in which cartilaginous or osteocartilaginous metaplasia occurs within the synovial membrane of joints, bursae, or tendon sheaths.<sup>6,7</sup>

Milgram has classified the disease into 3 phases: (1) early, with synovial chondrometaplasia but no loose bodies, (2) transitional, with active synovial disease and loose bodies, and (3) late, with loose bodies