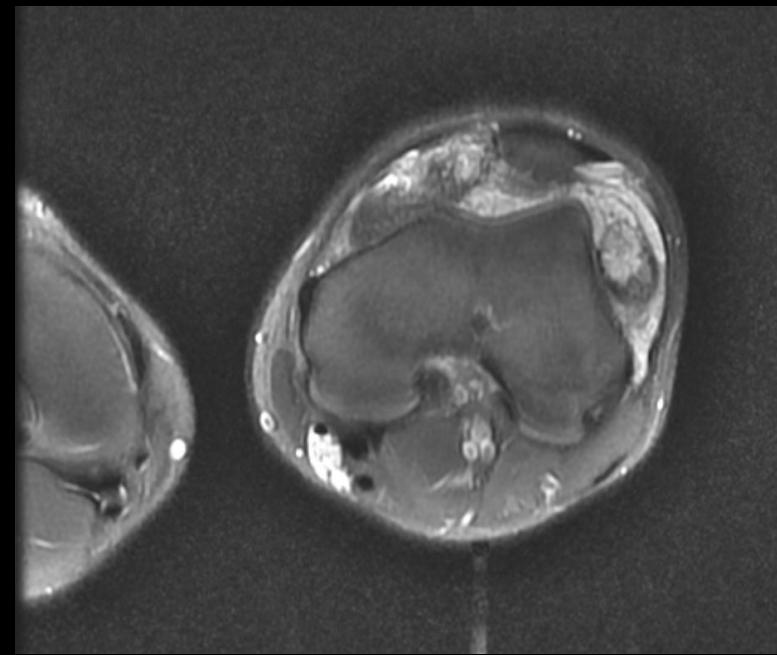
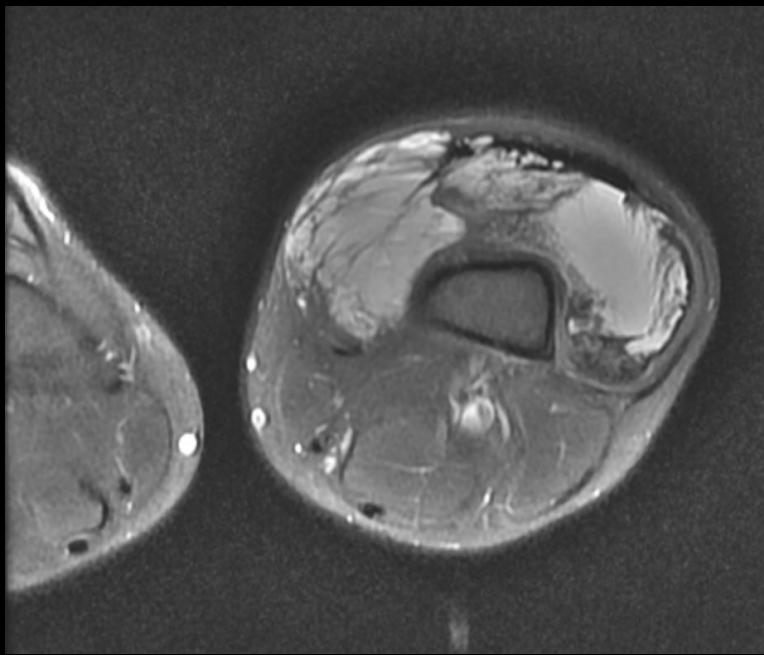
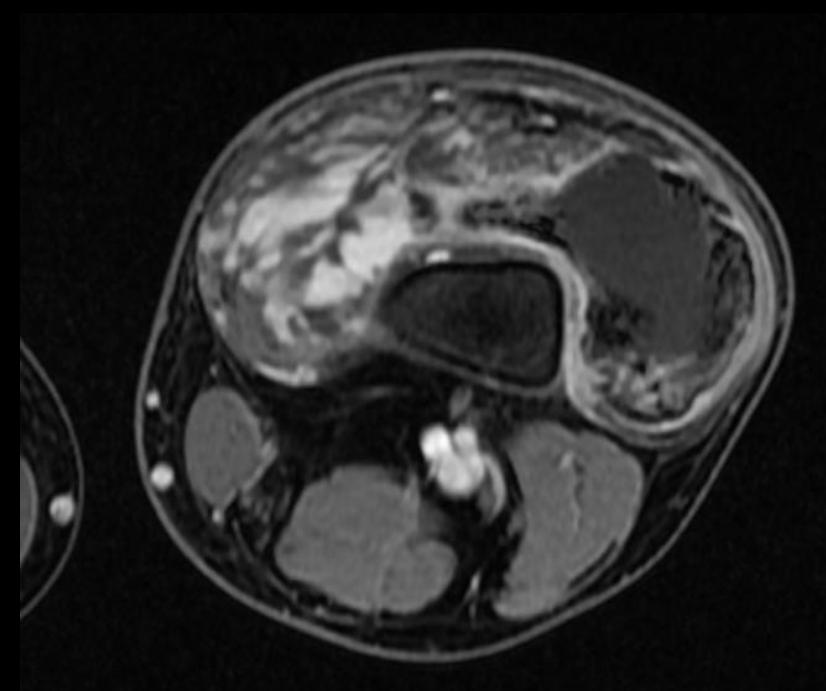
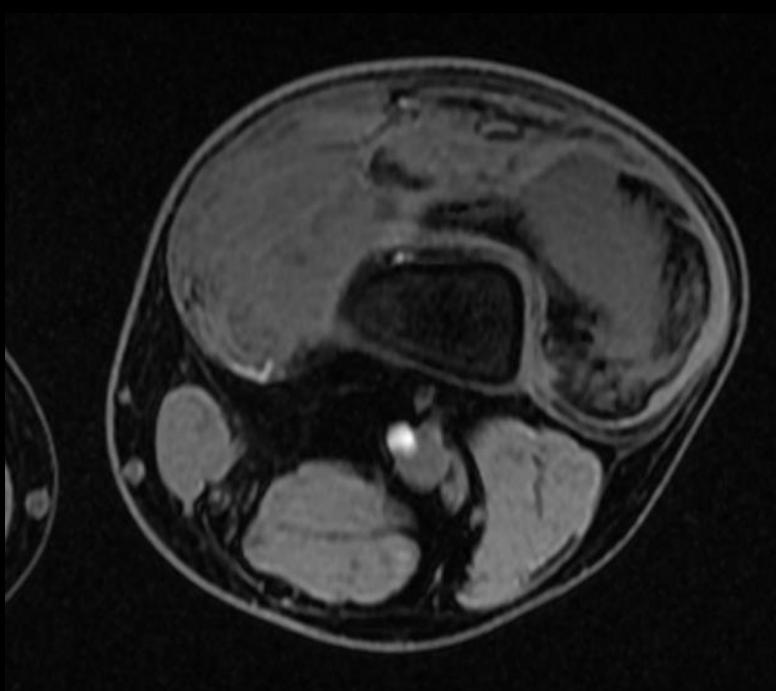




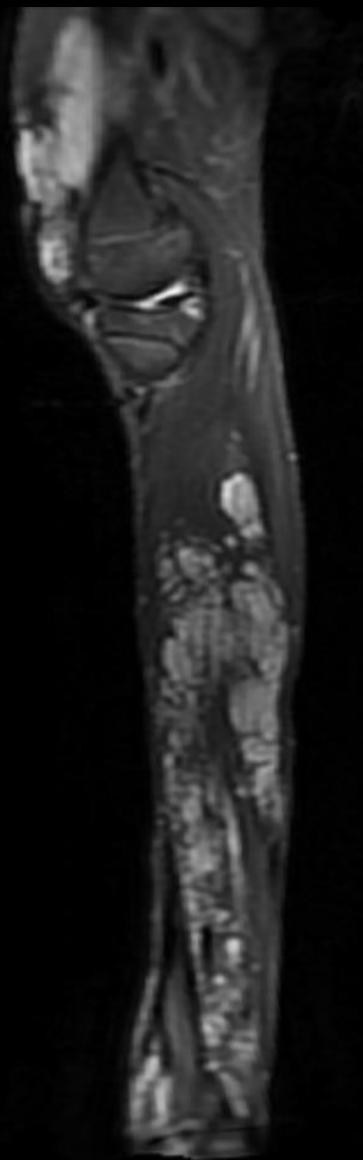
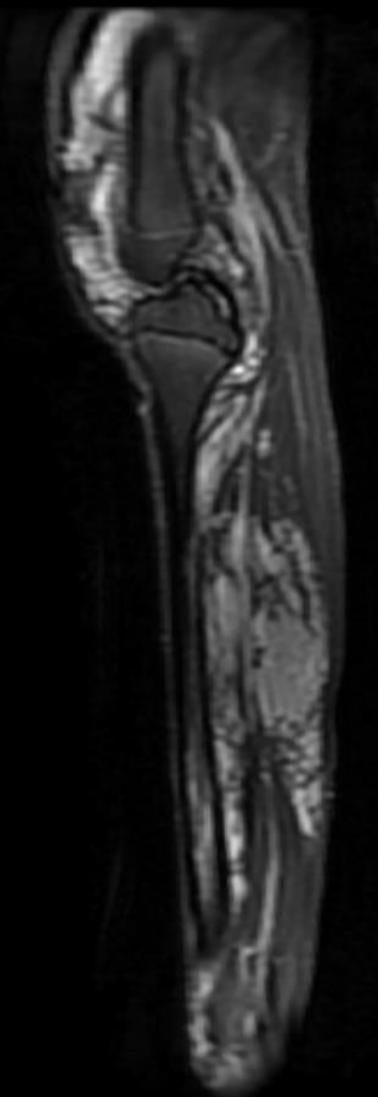
13 year old male presents with
pain and limited ROM

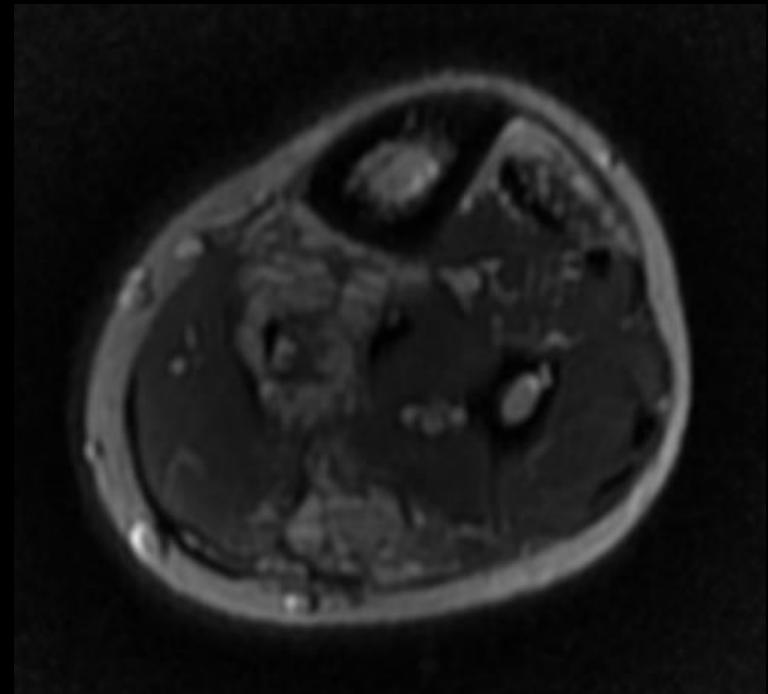
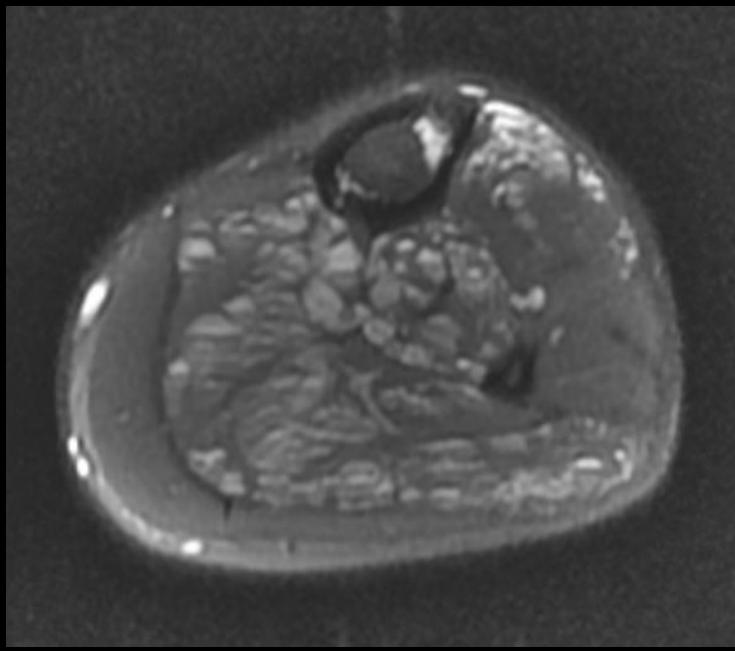


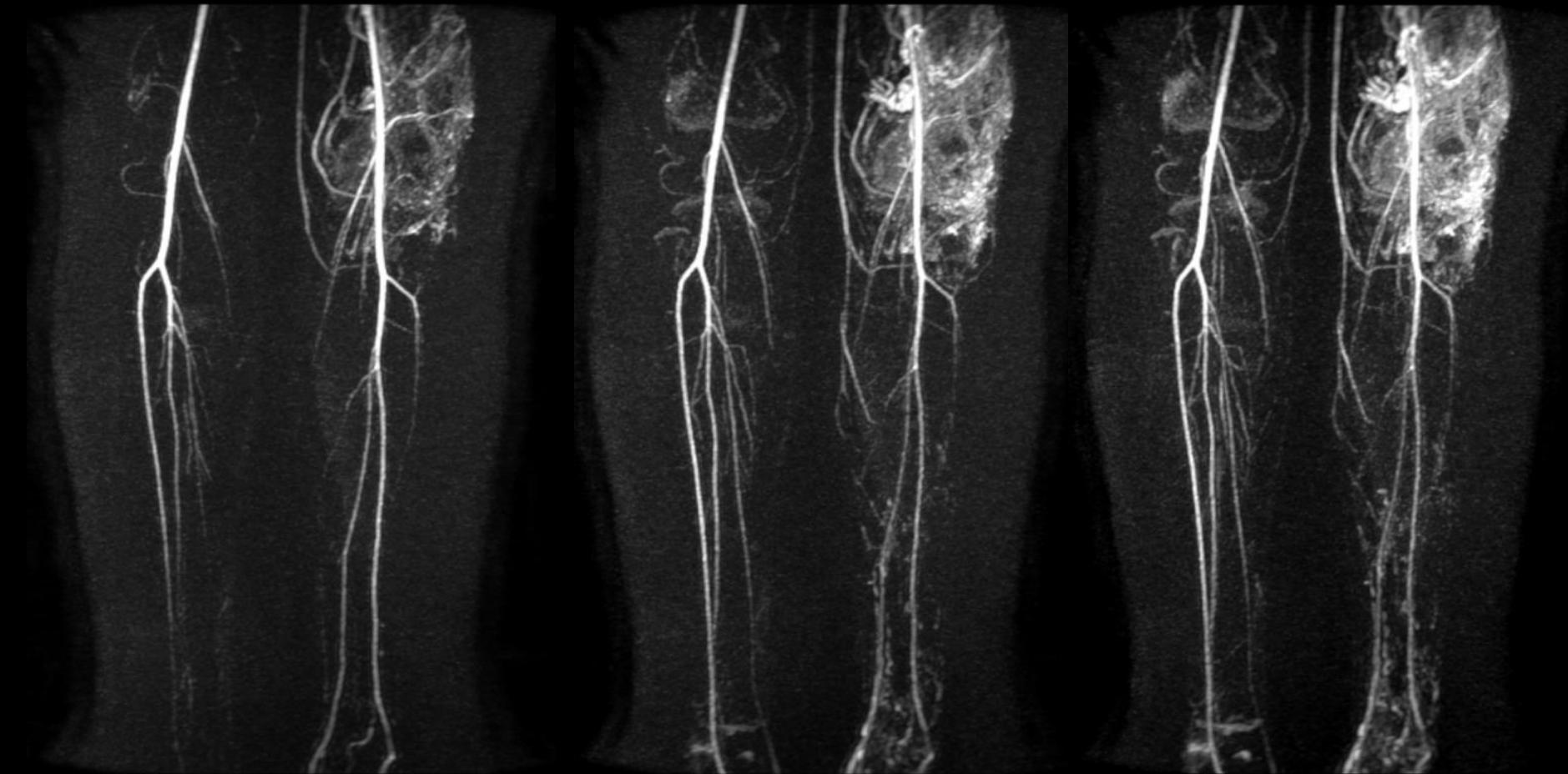


DDX

- PVNS
- Hemophilia
- Septic arthritis
- Inflammatory arthritis
- Intra-articular venous malformation (synovial hemangioma)







ISSVA Classification of Vascular Anomalies

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Vascular Anomalies

Vascular anomalies				
Vascular tumors	Vascular malformations			
	Simple	Combined °	of major named vessels	associated with other anomalies
<u>Benign</u>	Capillary malformations Lymphatic malformations Venous malformations Arteriovenous malformations* Arteriovenous fistula*	CVM, CLM LVM, CLVM CAVM* CLAVM* others	See details	See list
<u>Locally aggressive or borderline</u>				
<u>Malignant</u>				

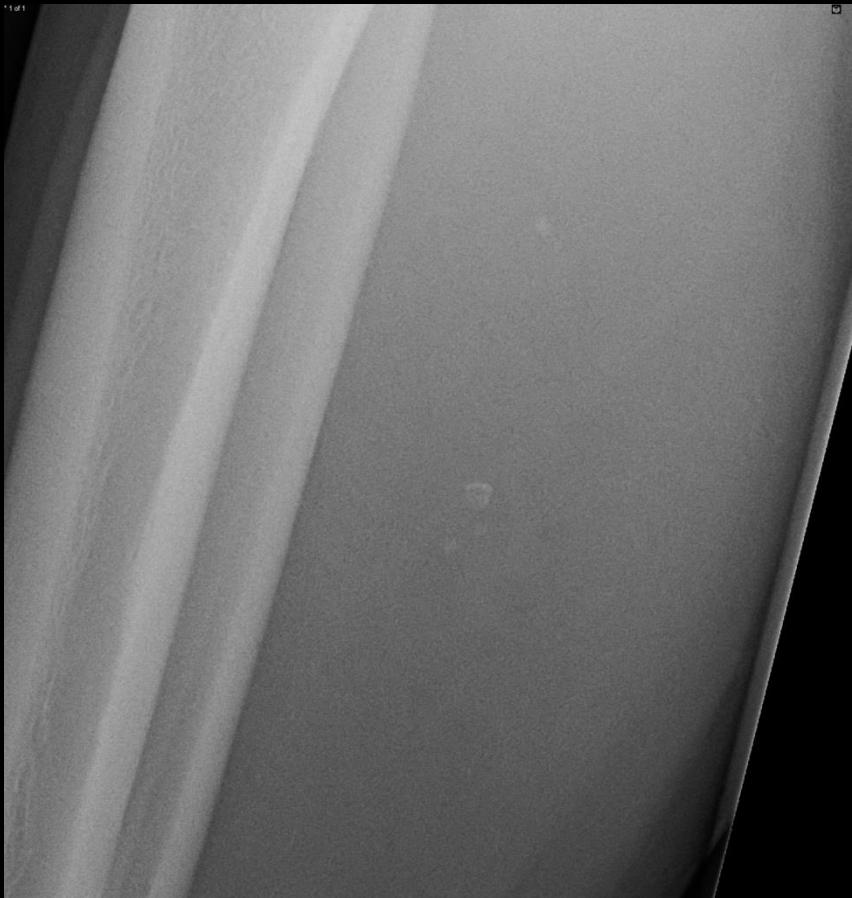
° defined as two or more vascular malformations found in one lesion
* high-flow lesions

Features of low-flow vascular malformations

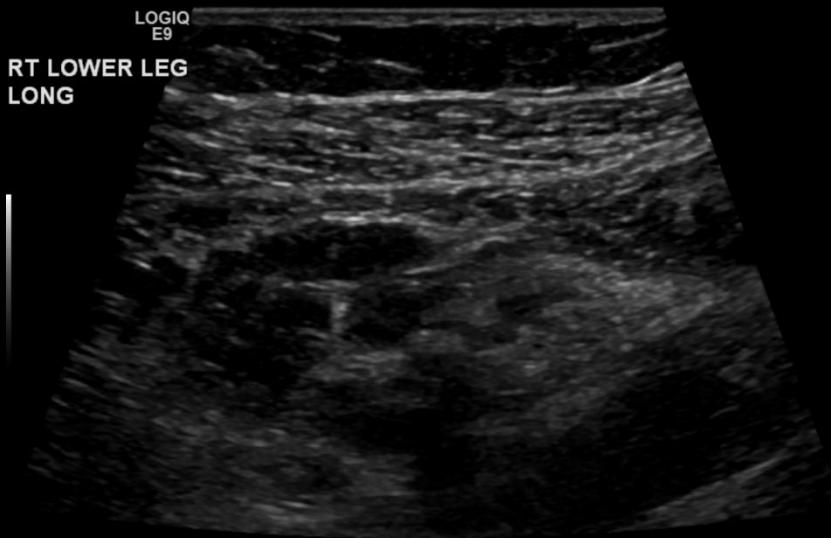
TABLE 2: Key Ultrasound and MRI Features of the Most Common Pediatric Vascular Anomalies

Anomaly	Gray-Scale Ultrasound	Doppler Ultrasound	MRI
Vascular tumors Infantile and congenital hemangiomas	Well-defined, solid; variable echotexture	Intralesional arterial and venous waveforms	T1-weighted intermediate intensity; T2-weighted hyperintense; vigorously enhancing; intralesional flow voids
Vascular malformations—slow flow Venous	Multispatial, solid; echogenic; phleboliths	Intralesional venous waveforms or pattern of no flow	T1-weighted heterogeneous, intermediate intensity; T2-weighted hyperintense, enhancing solid areas
Lymphatic	Multispatial, multicystic, with or without fluid-fluid levels	No vascular flow except in septa	T1-weighted intermediate intensity; T2-weighted hyperintense; nonenhancing except septa, with or without fluid levels
Venolymphatic	Combined venolymphatic features		
Vascular malformations—fast flow Arteriovenous malformation	Cluster of vessels with no solid intervening mass	Intralesional arterial and venous waveforms with arterialization of venous waveforms	T1-weighted and T2-weighted sequences show serpiginous flow voids without intervening solid tissue
Arteriovenous fistulas			

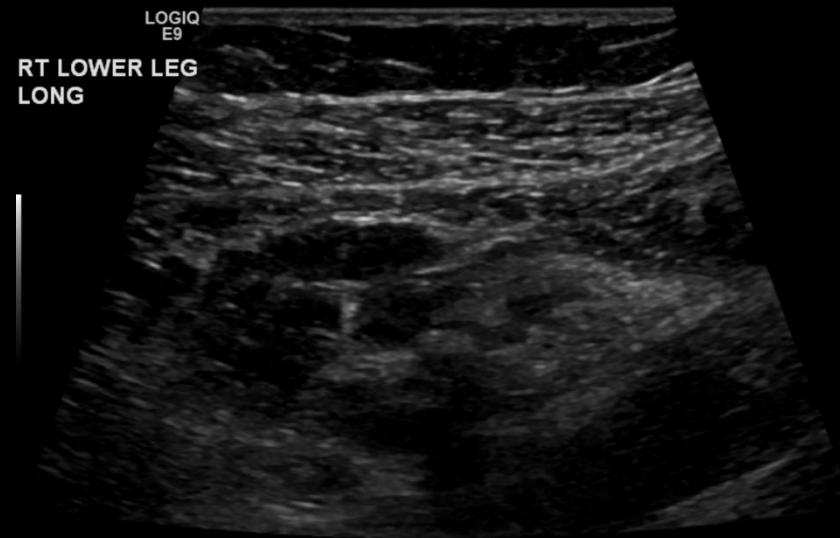
Corollary case: 17 year old F with calf pain x1 month



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Treatment

- Small lesions may be managed conservatively.
- Treatment is indicated if symptomatic or if their location may lead to morbidity.
- Sclerotherapy is the initial therapy for slow-flow malformations.
- Surgical excision for solid or incompletely sclerosed lesions.

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