Haigusjuht

Tallinn aprill 2021

Märt Raud

Anamnees septembri keskpaik

11 aastane terve tüdruk, ujub, liikunud normaalselt.

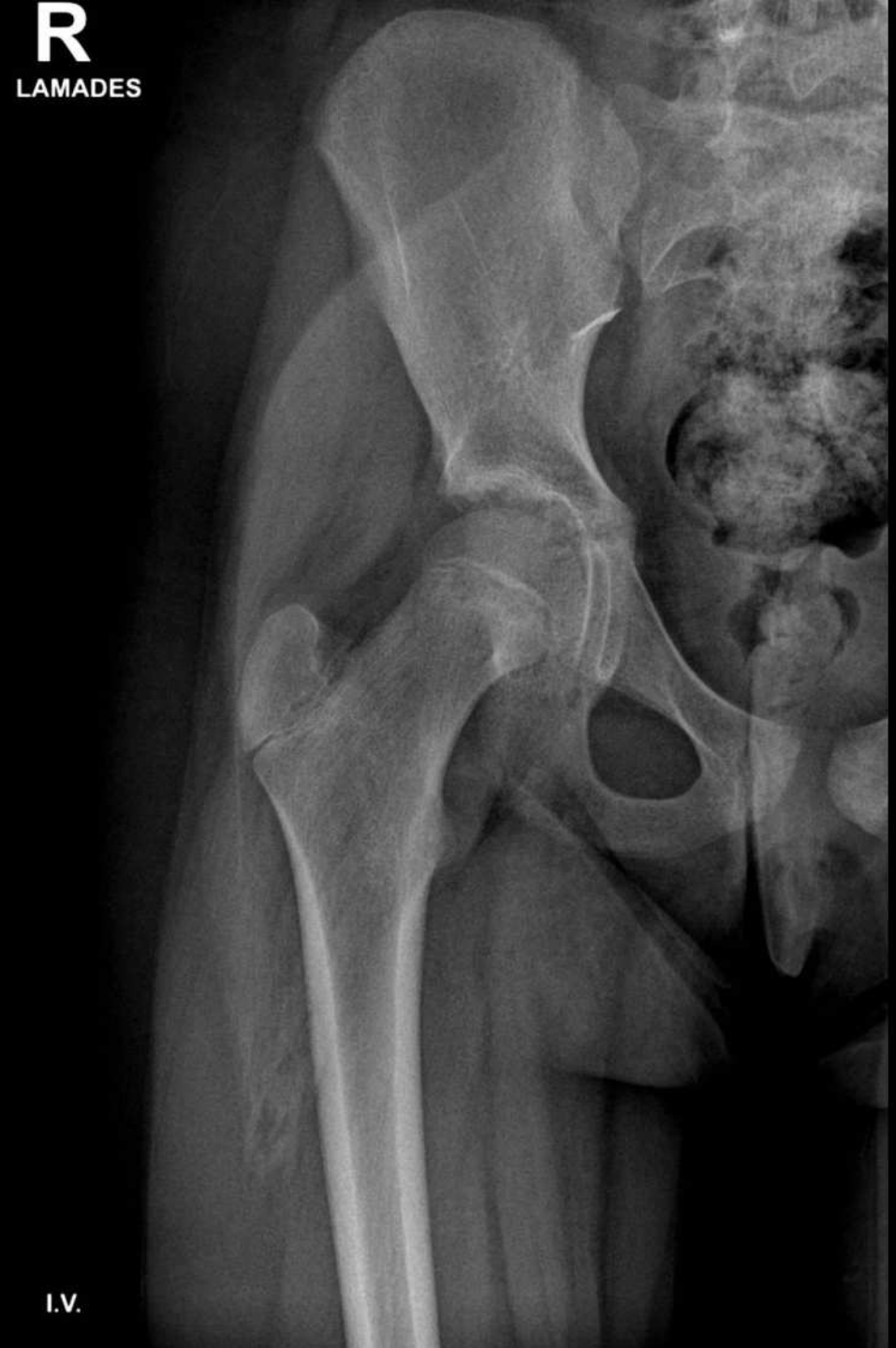
Esmakordselt talvel parempoolse puusa valuepisood ning lühiaegne kõnnakuhäire, suvel valud hootised ja sügisel vähehaaval süvenenud.

Valu koormusel, rahulolekuvalu pole, öösel saab magada, aga päeval lonkab.

Uuringud septembri keskpaik

Esmases vereanalüüsis kerge SR tõus, anti-CCP väärtus piiripealne, muu (sealhulgas põletikunäitajad) normis.

18.09.



Uuringud septembri keskpaik

Rö- ja UH puusast patoloogiata.

Ibuprofen 400 mg x 3 (7 päeva).
Füüsilisest koormusest vajalik vabastus.

Oktoobri lõpp

Viimase nädala jooksul valu oluliselt süvenenud.

Istudes valuvaba, magades valib asendit, vasakul küljel magab padi jalgade vahel. Hommikune kangus lühiajaline.

Koormusel jalg väga valulik, lonkab, raskuse kannab paremale jalale lühiajaliselt.

Laste puusavalu dif. diagnostika

- Legg-Calve-Perthes?
- Juveniilne idiopaatiline artriit?
- Reieluu pea epifüsiolüüs?
- Osteokondraalne lesioon?
- Sünoviit?
- Septiline artriit?
- Borrelioos?

Laste puusavalu dif. diagnostika

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- ~~Septiline artriit?~~ CRV ja leuk normis
- Borrelioos?

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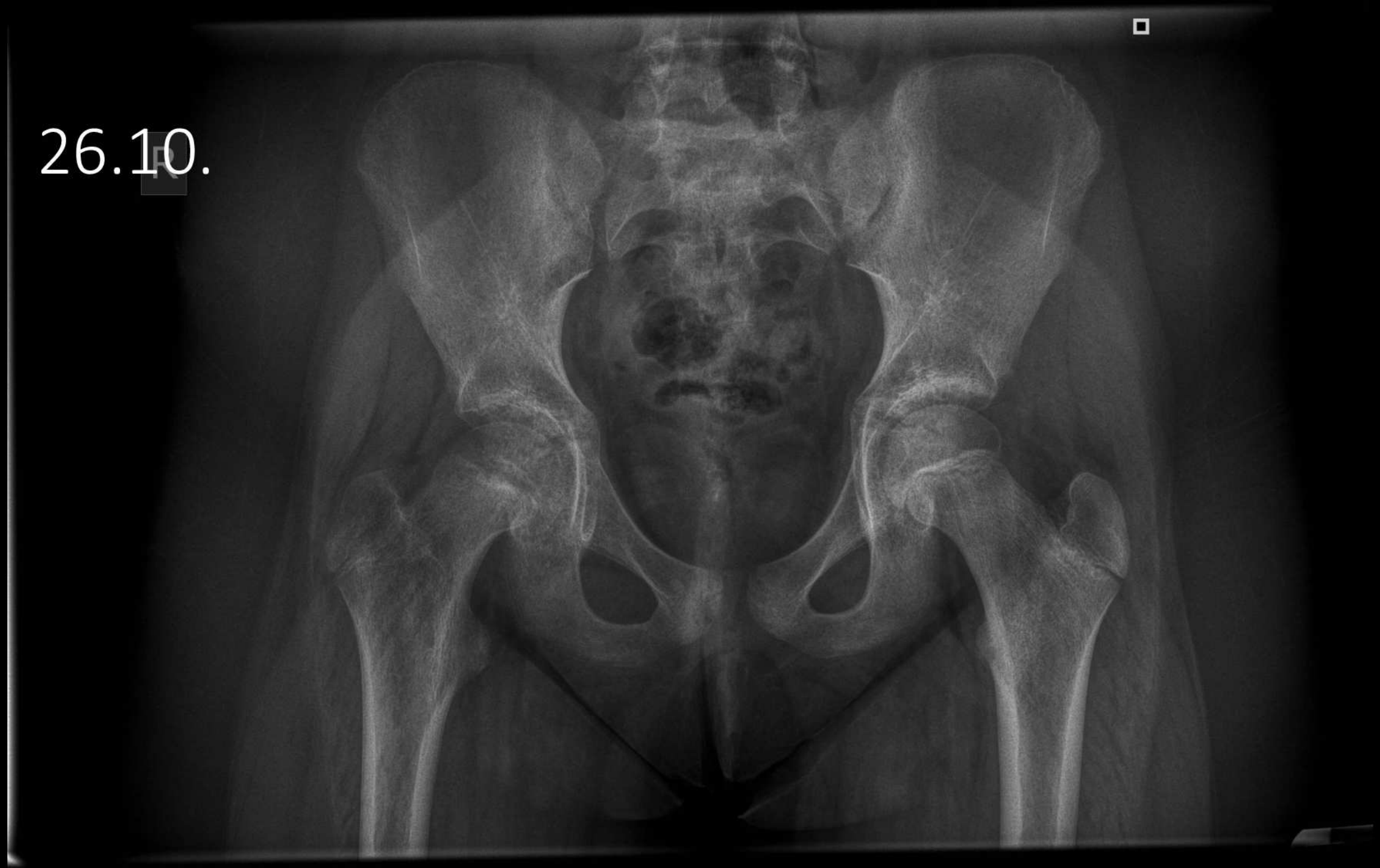
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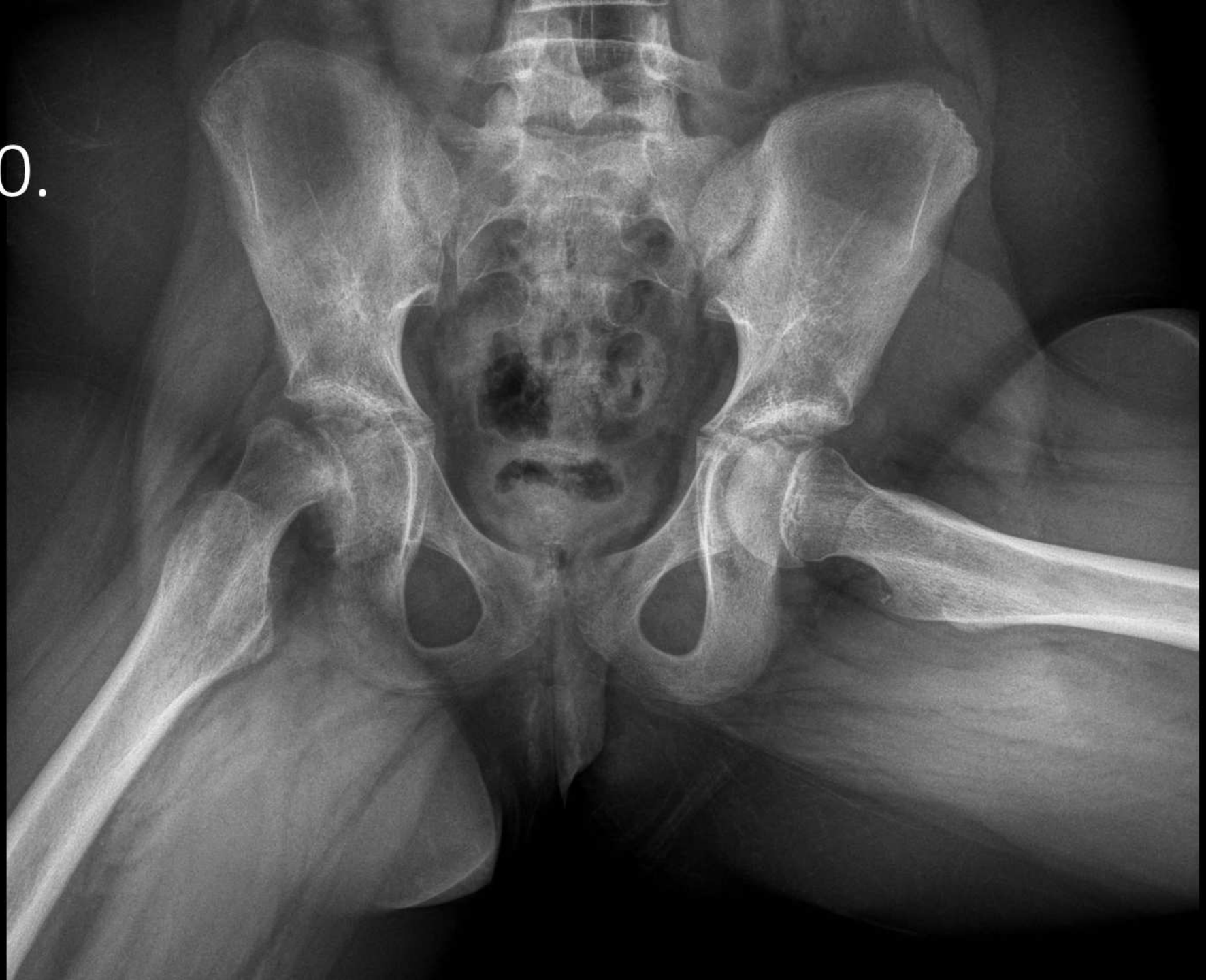

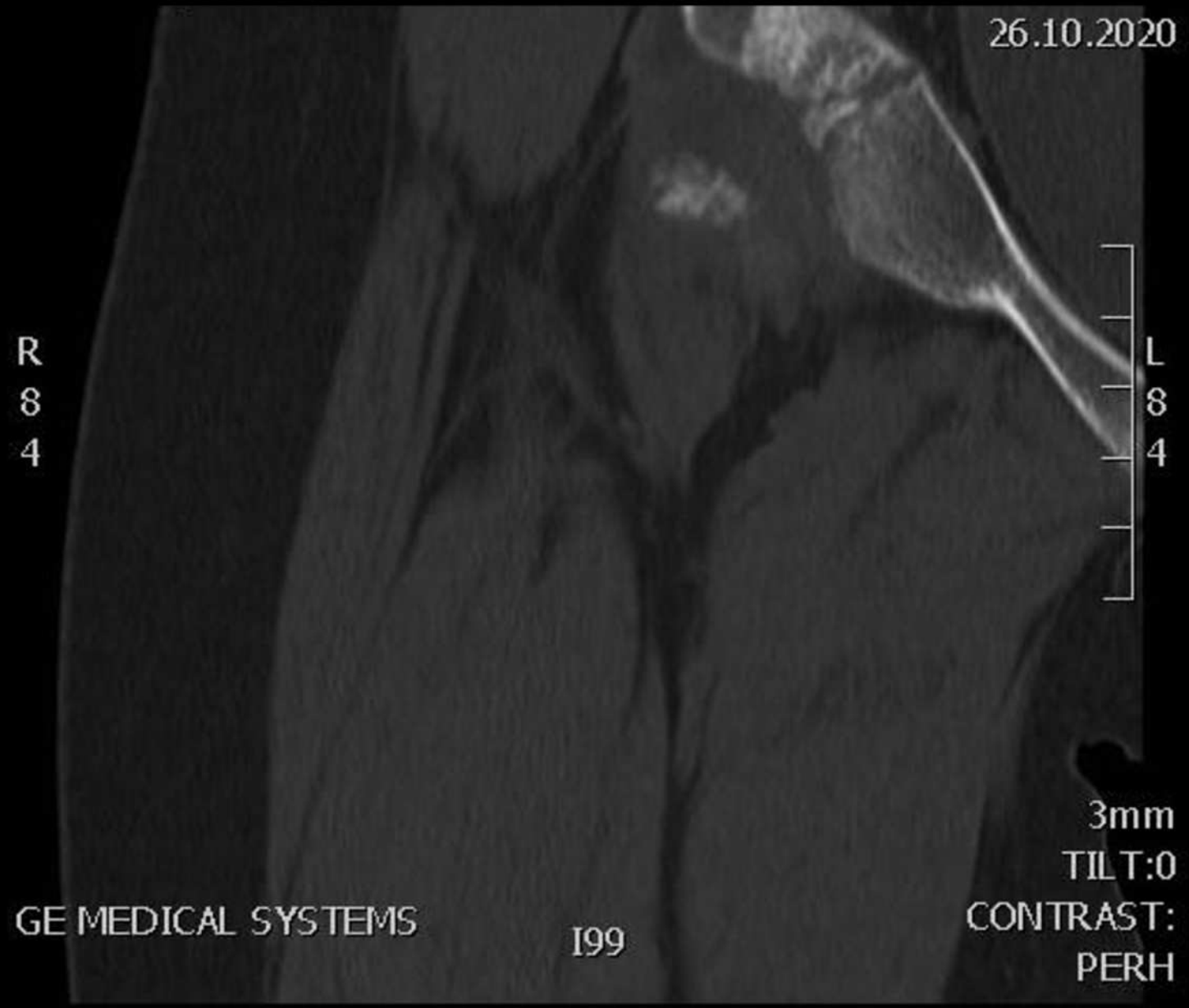
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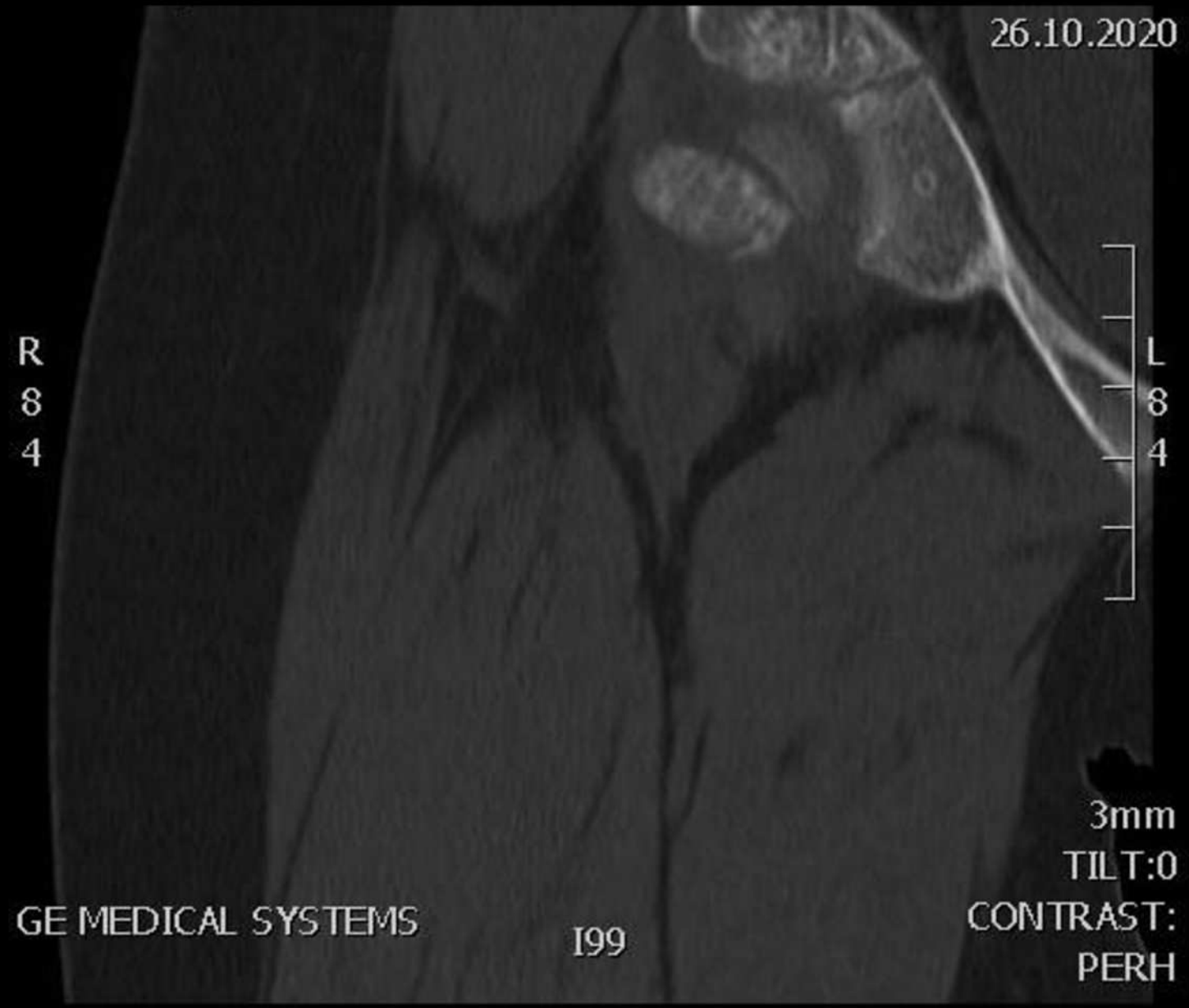
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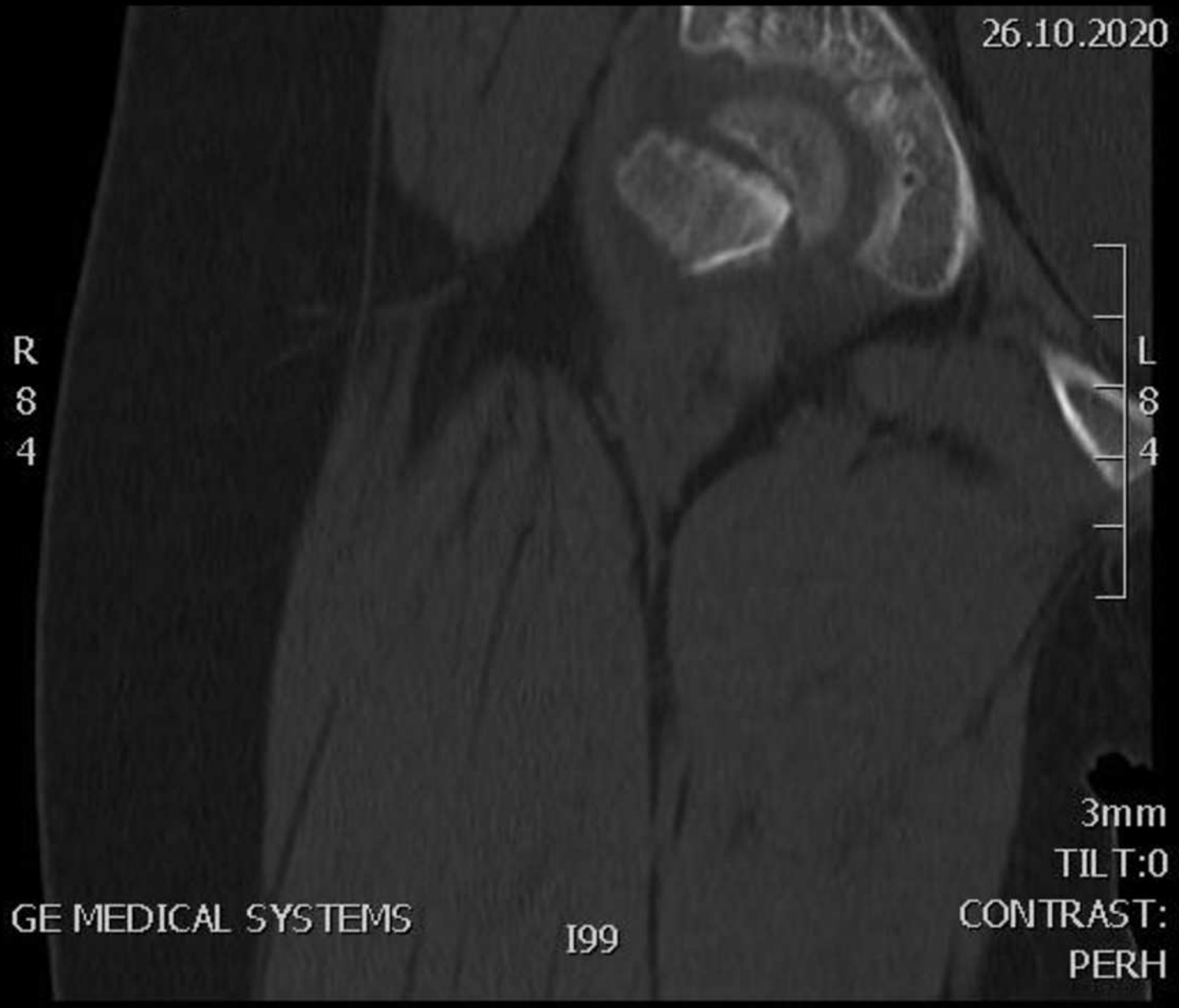
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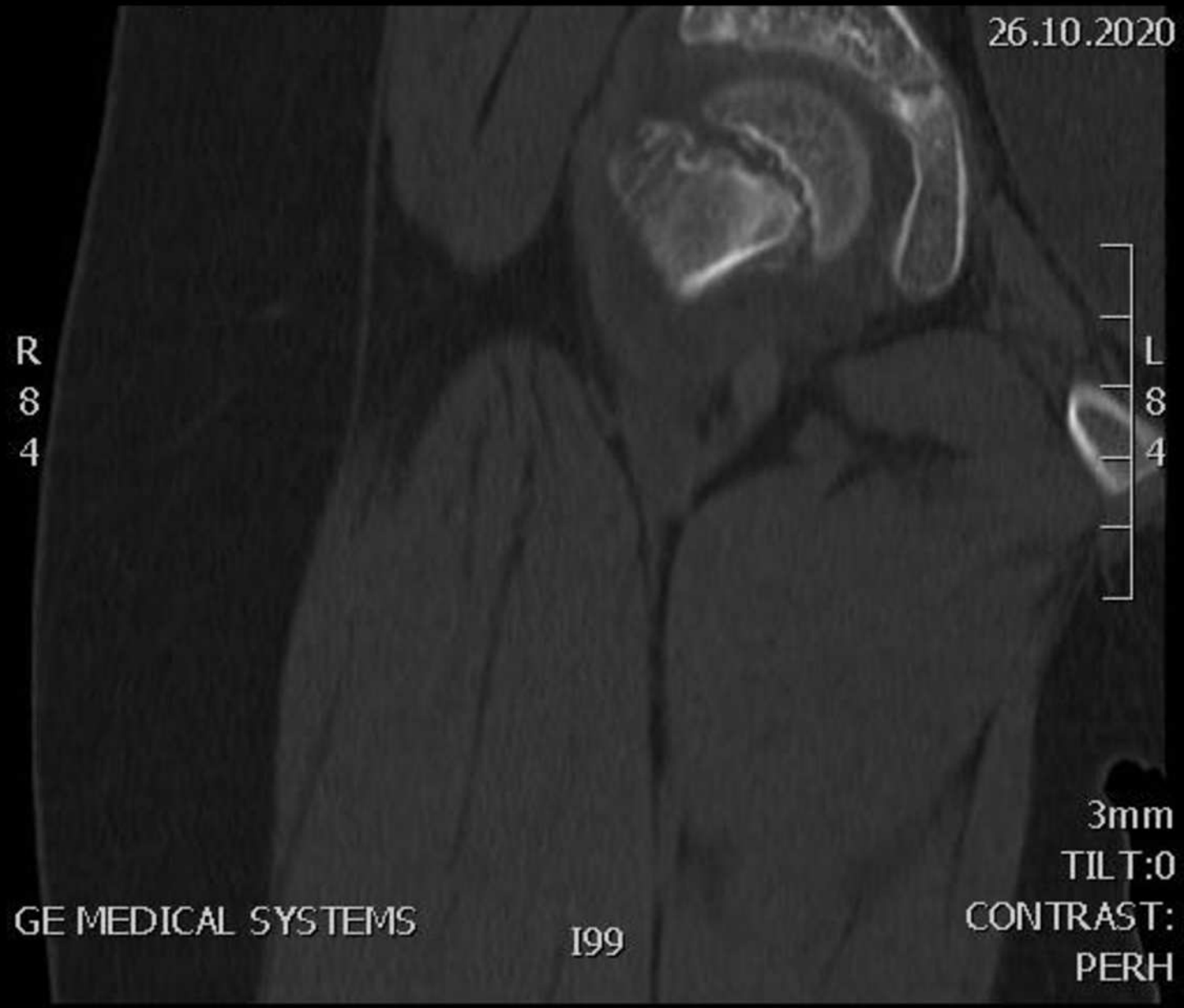
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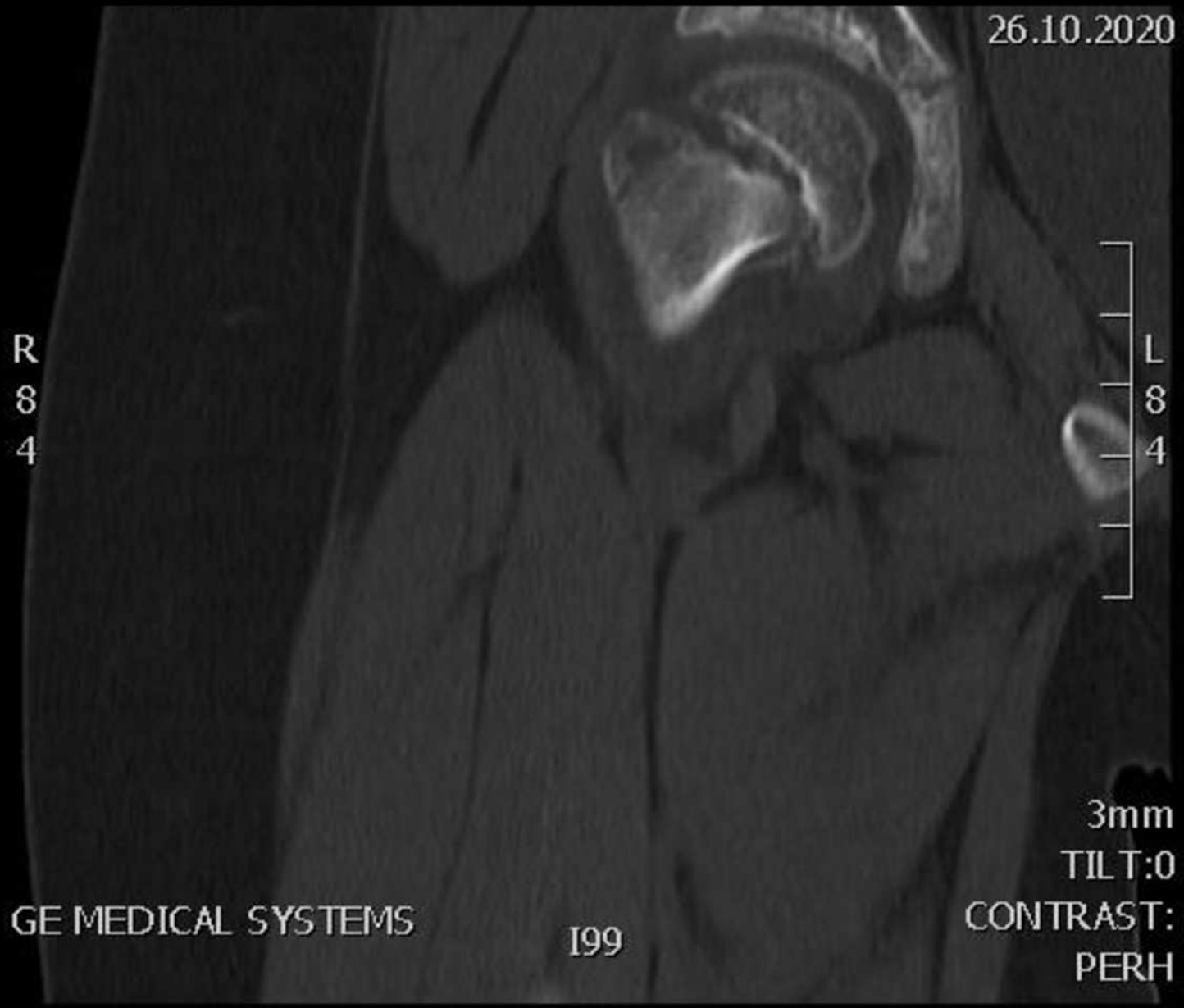
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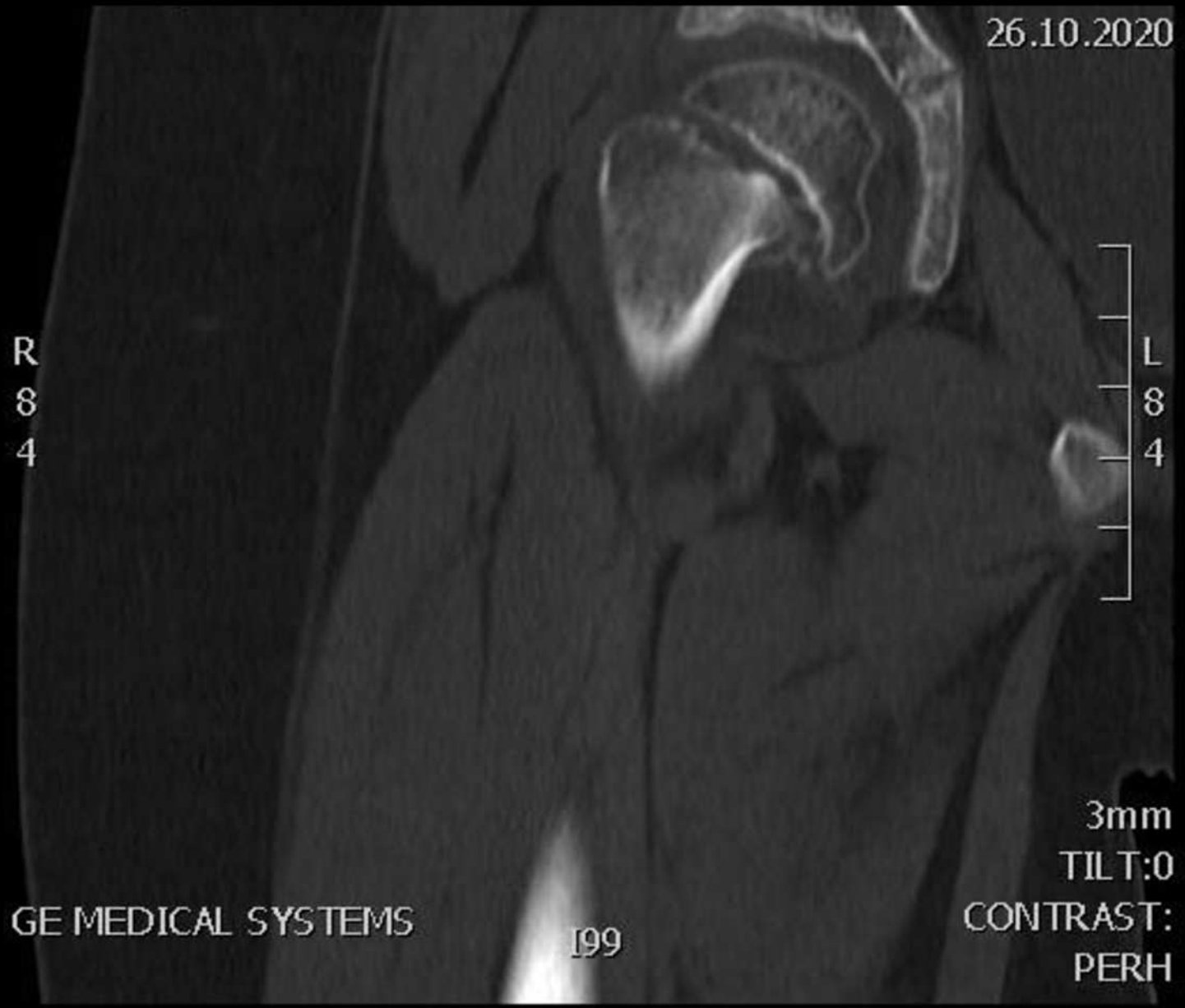
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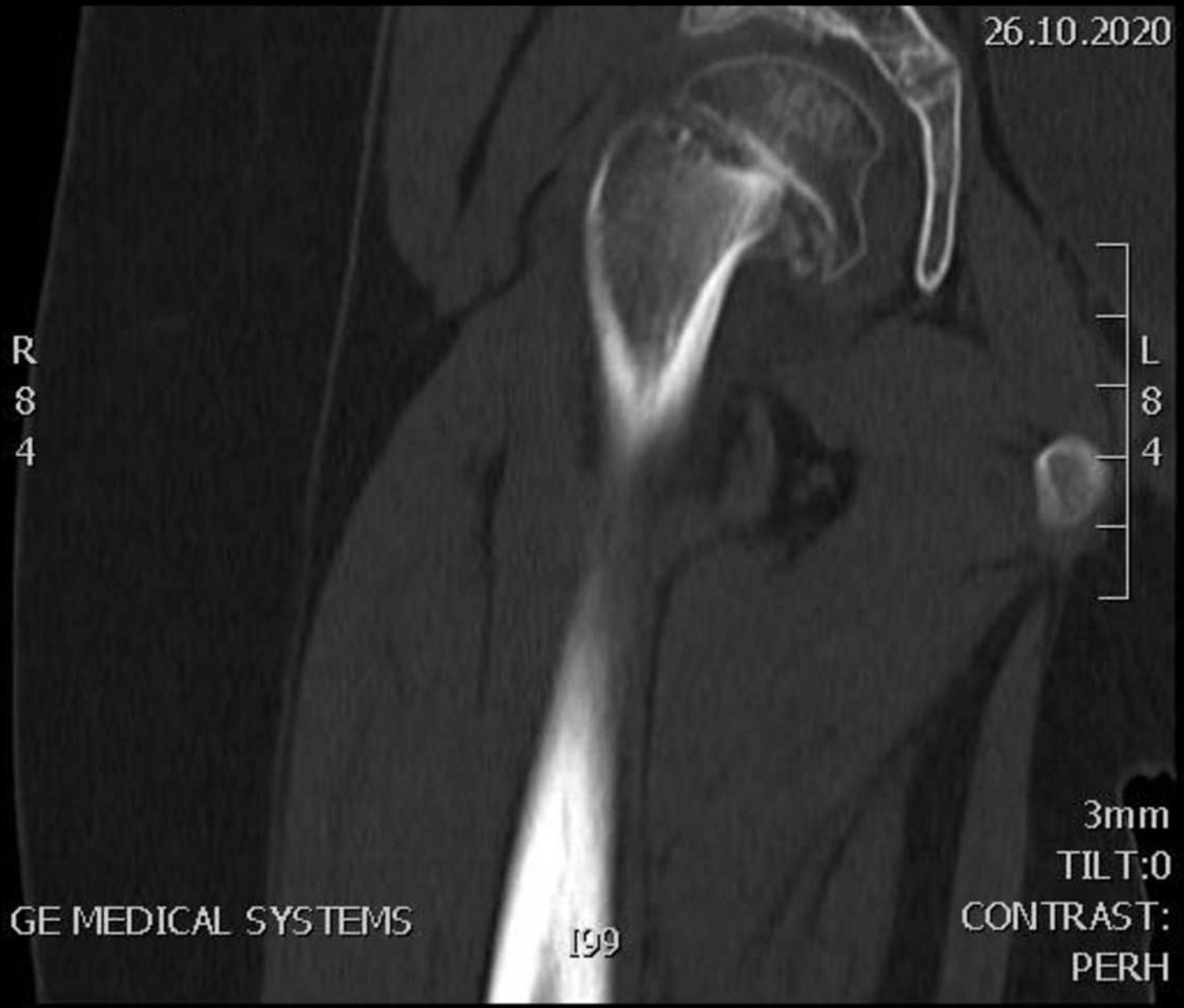
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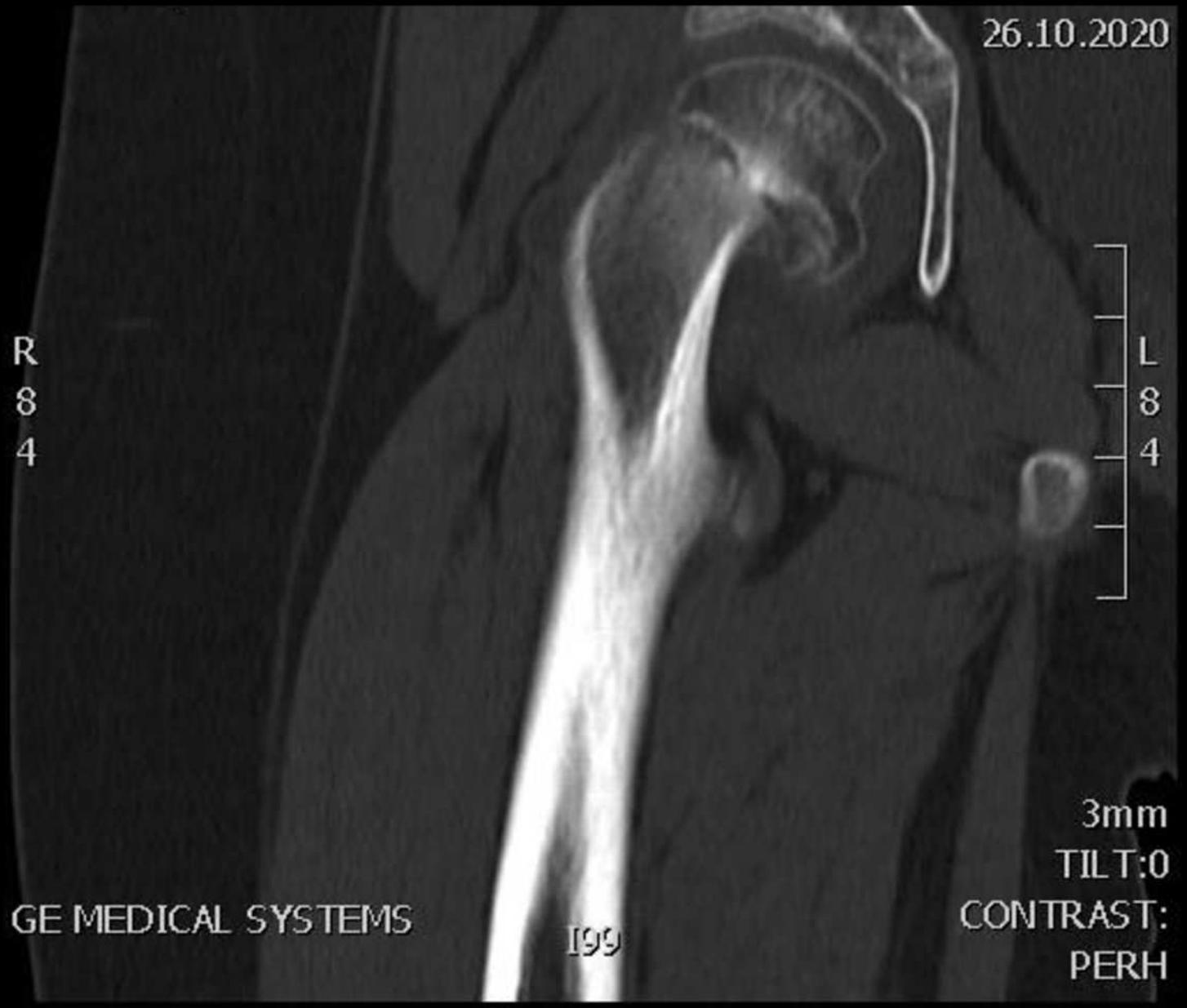
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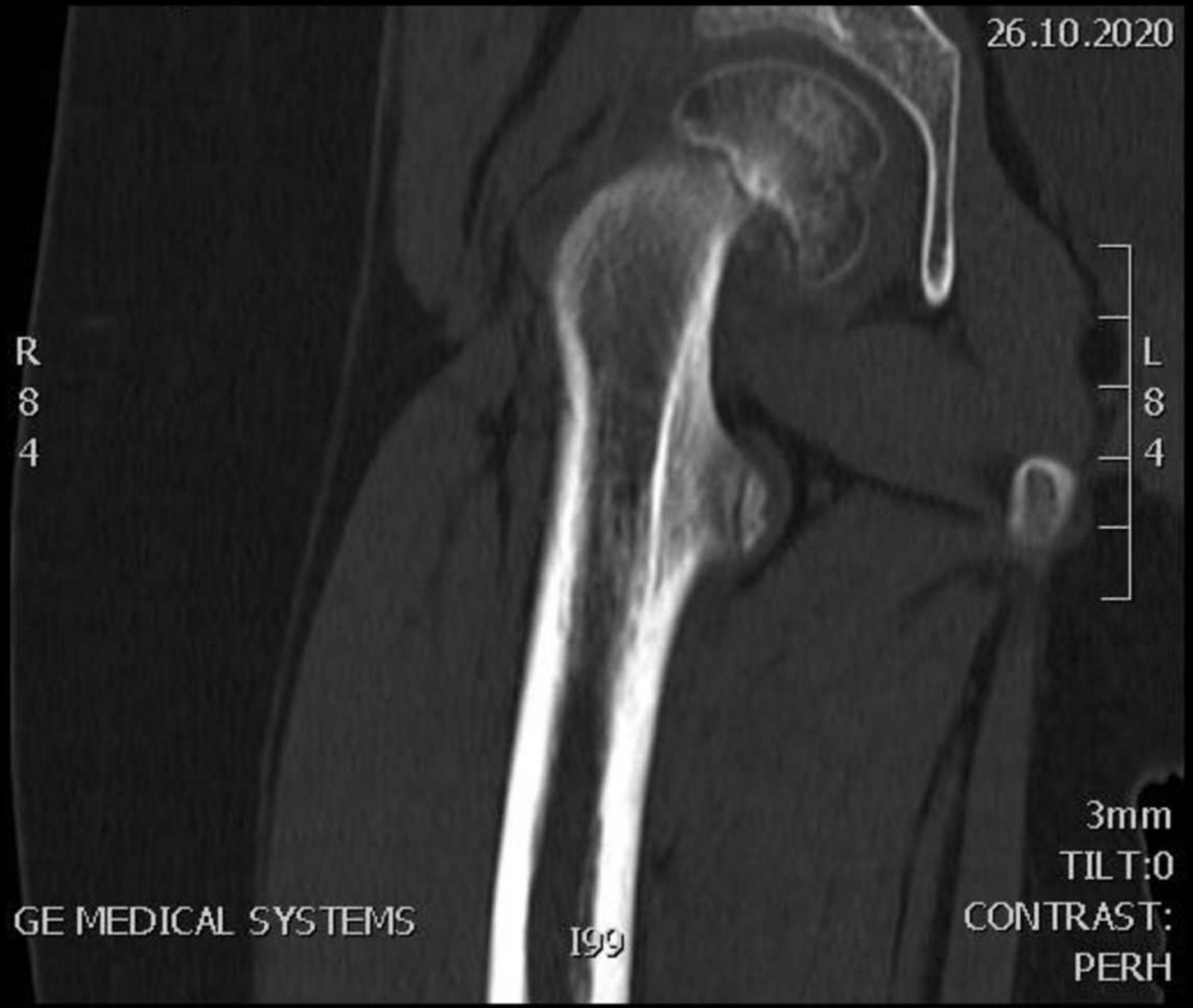
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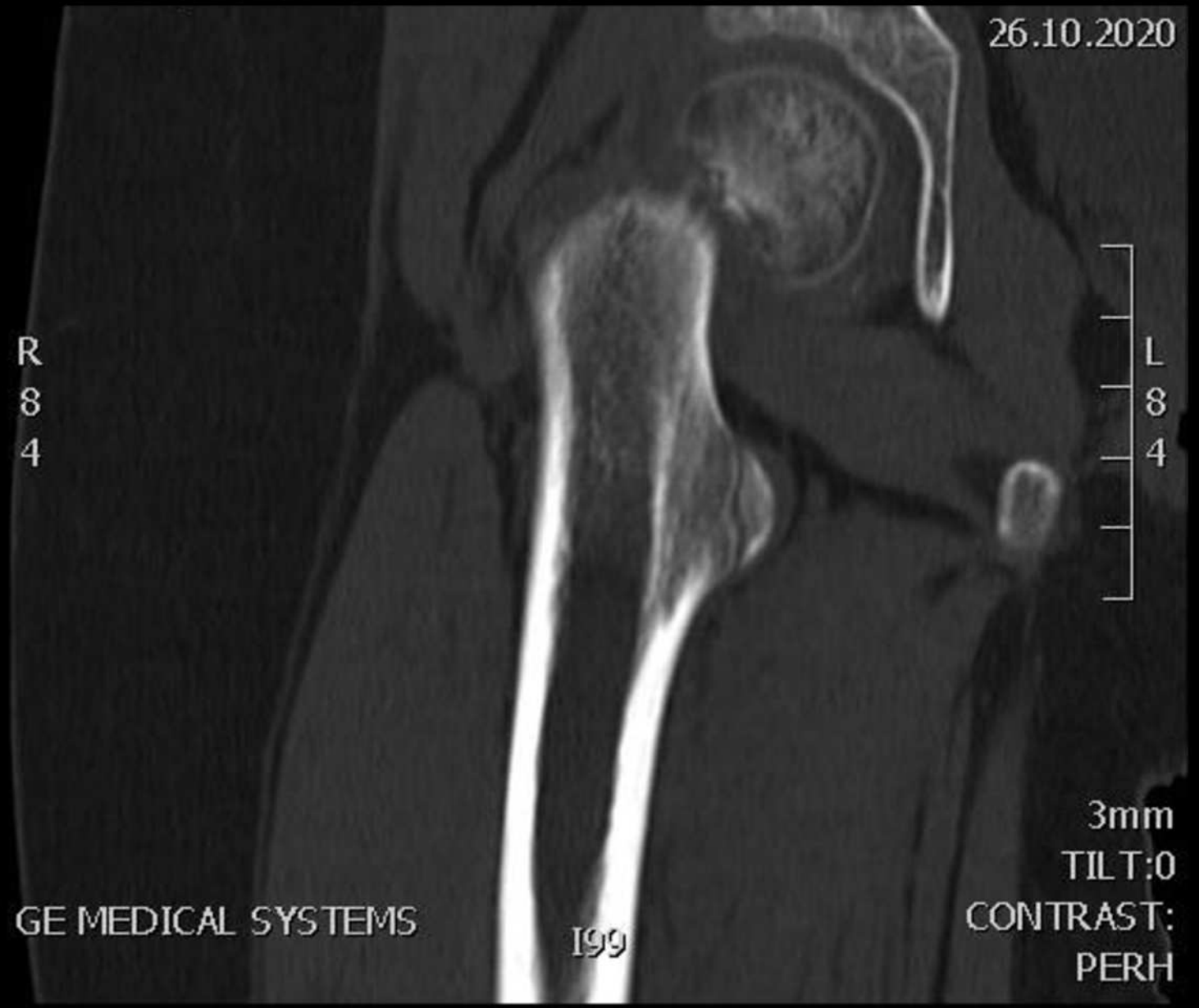
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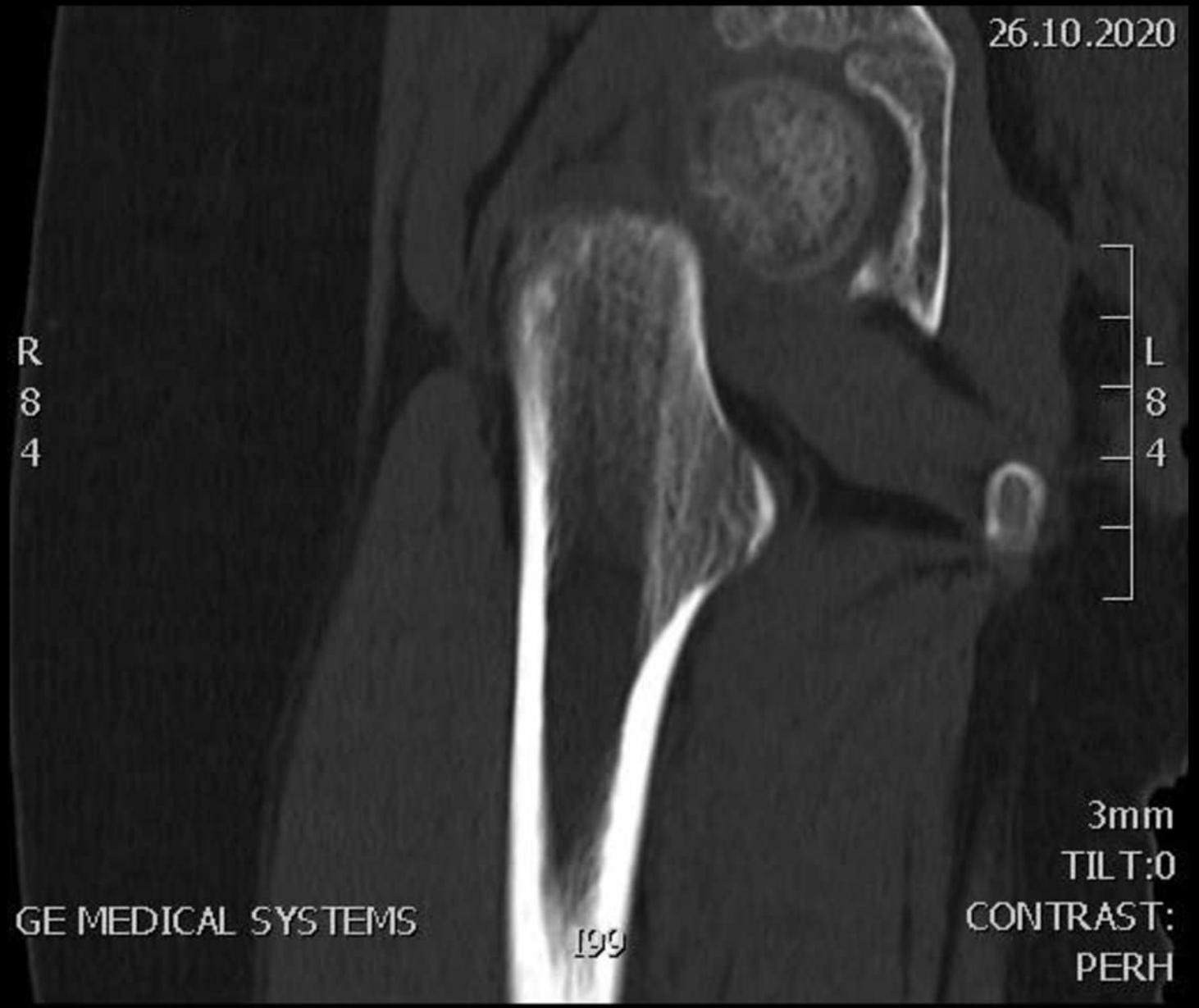
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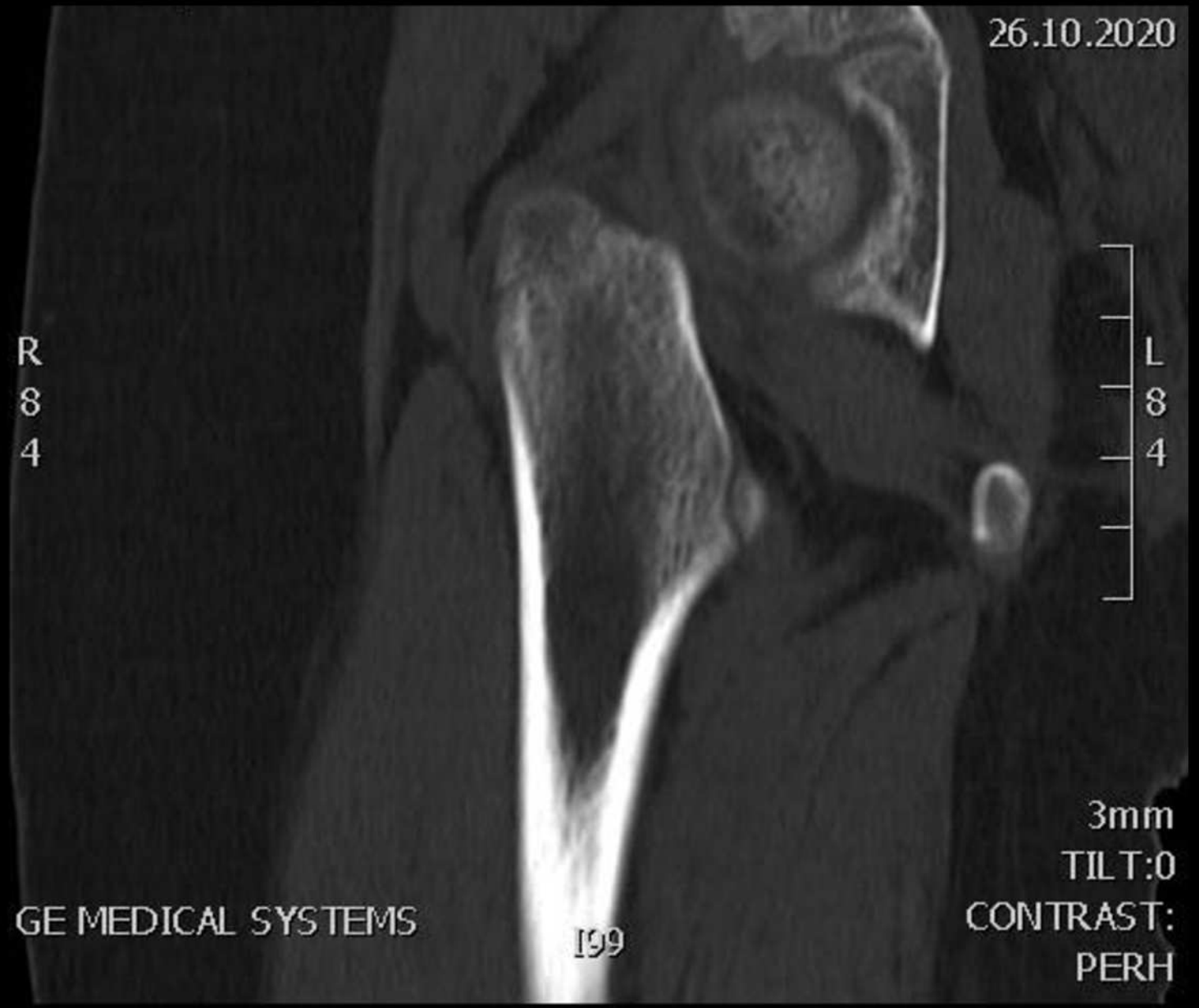
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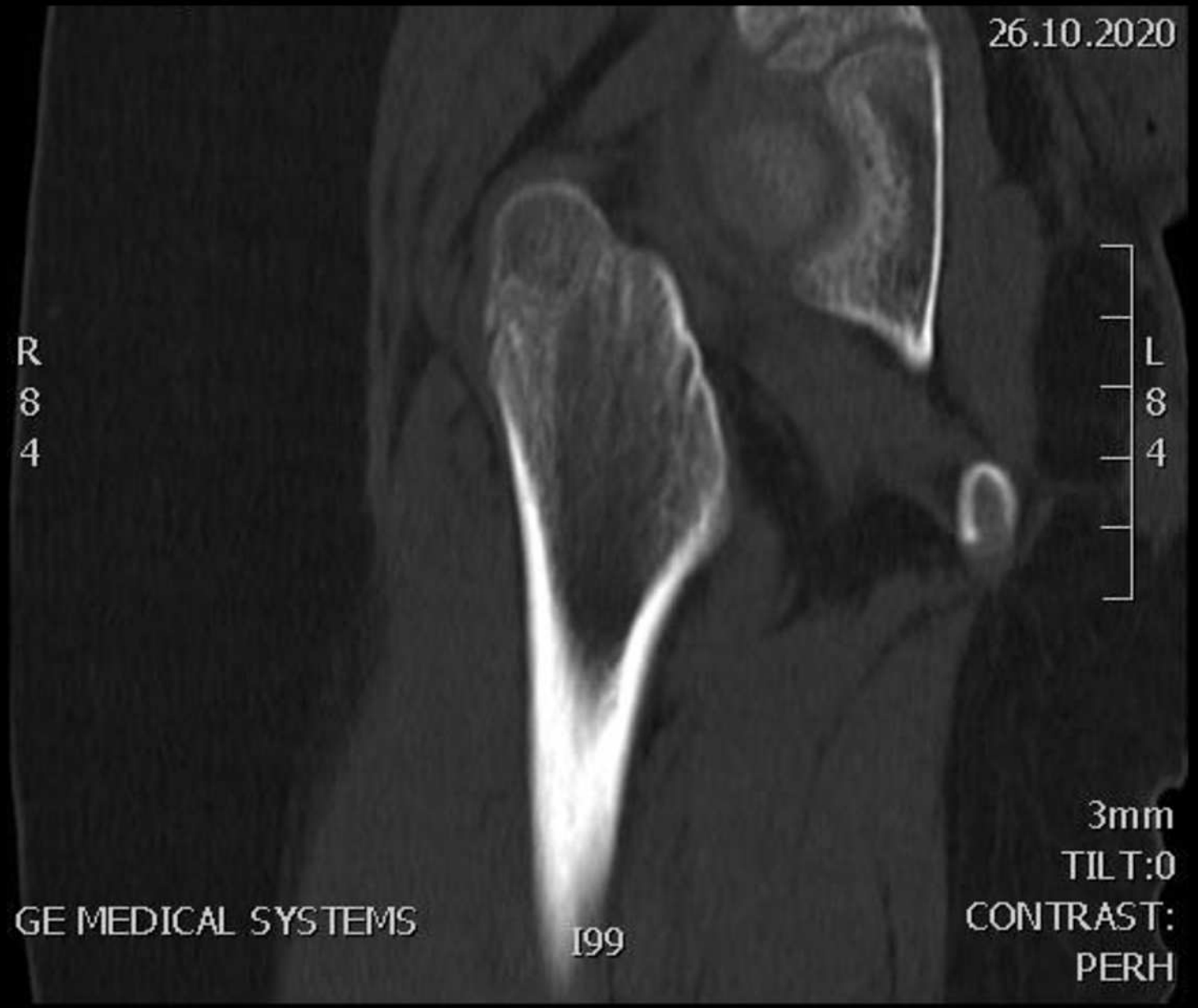
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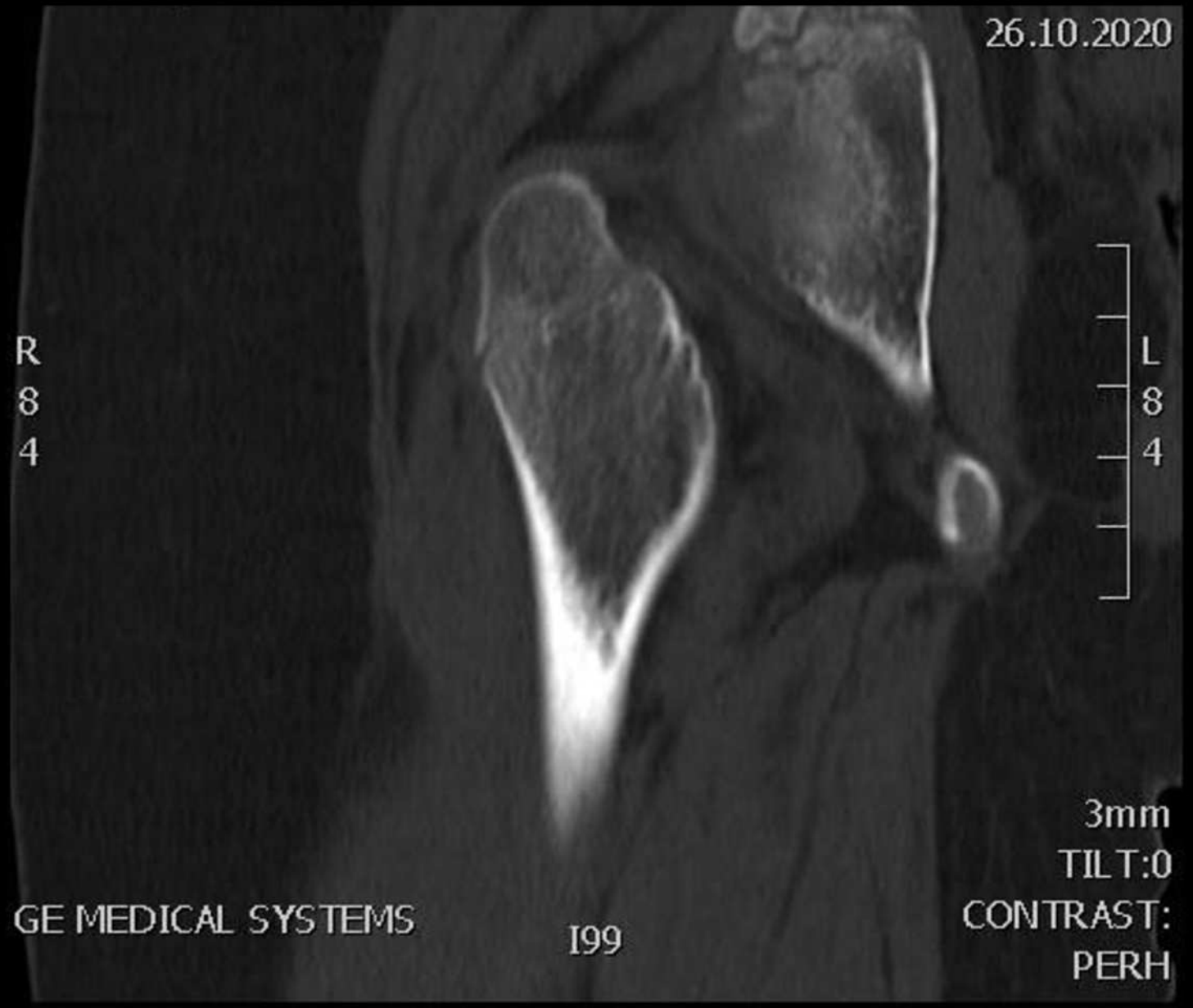
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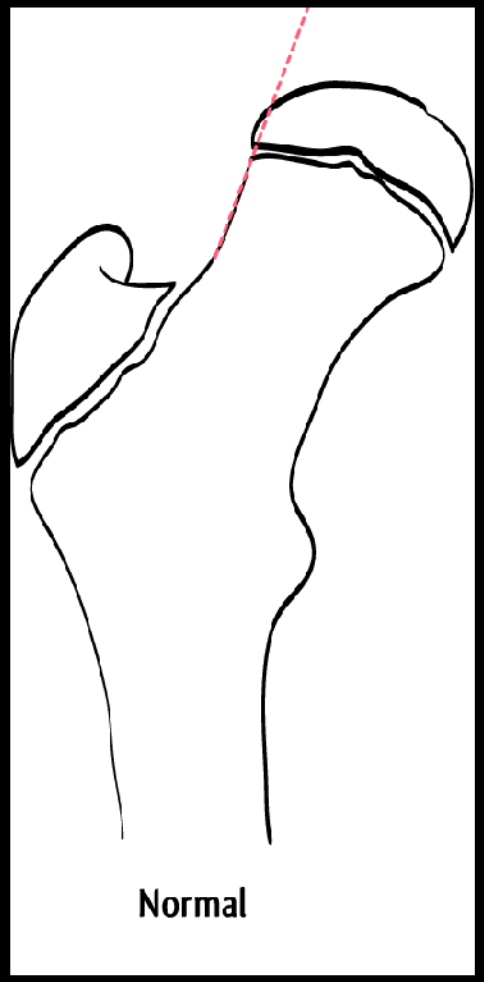
REIELUUPEA EPIFÜSIOLÜÜS

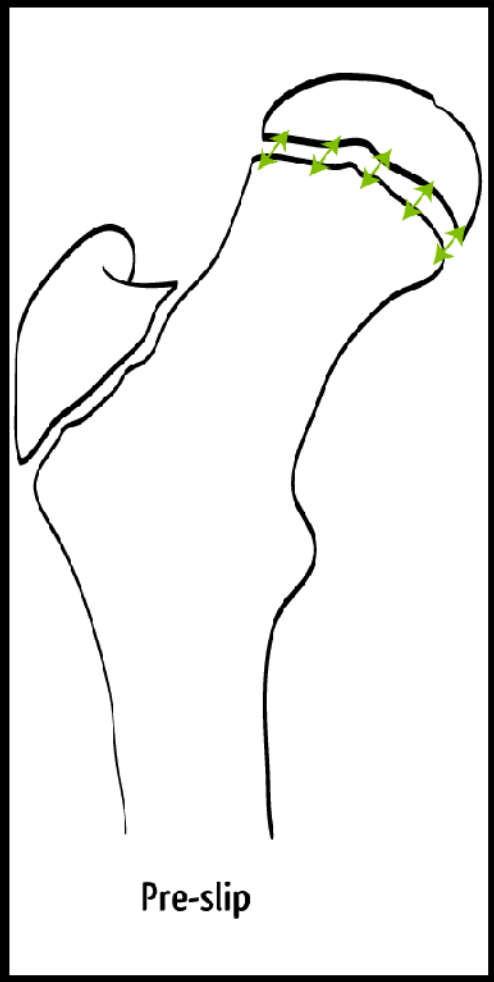
Varases puberteedieas!

PÕHJUSED:

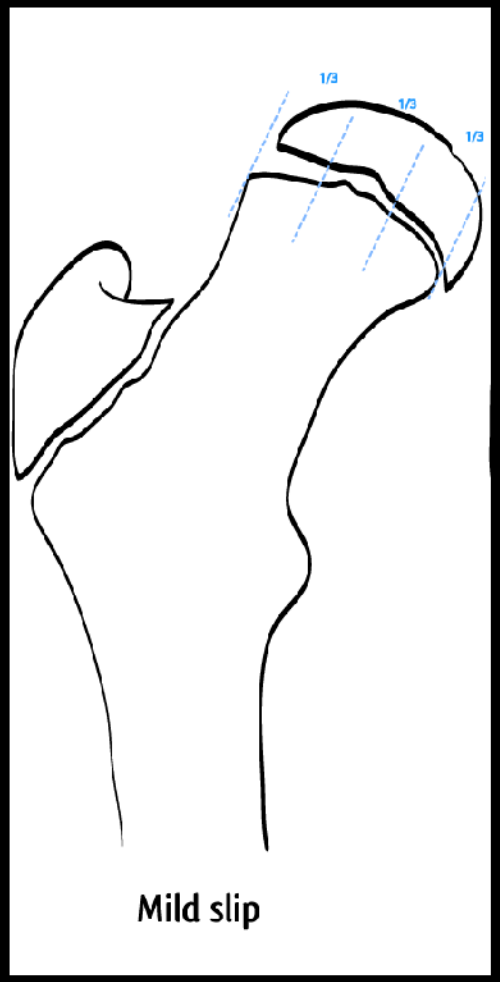
- Hormonaalne düsbalanss (hüpotüreoidism, hüperparatüreoidism, hüpopituarism)
- Hilinenud sooline küpsemine
- Liigne koormus, korduv trauma
- Ülekaal
- Geneetiline eelsoodumus



Normal

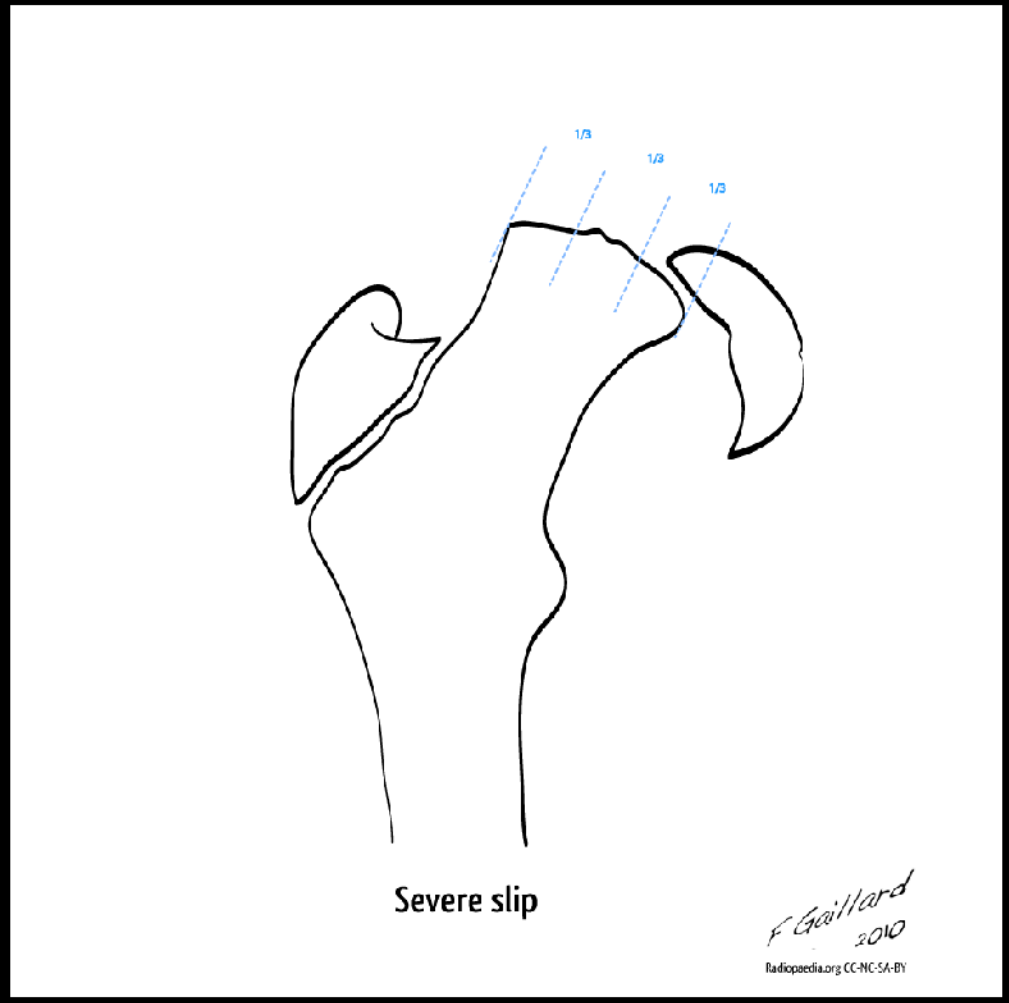


Pre-slip



Mild slip

Moderate slip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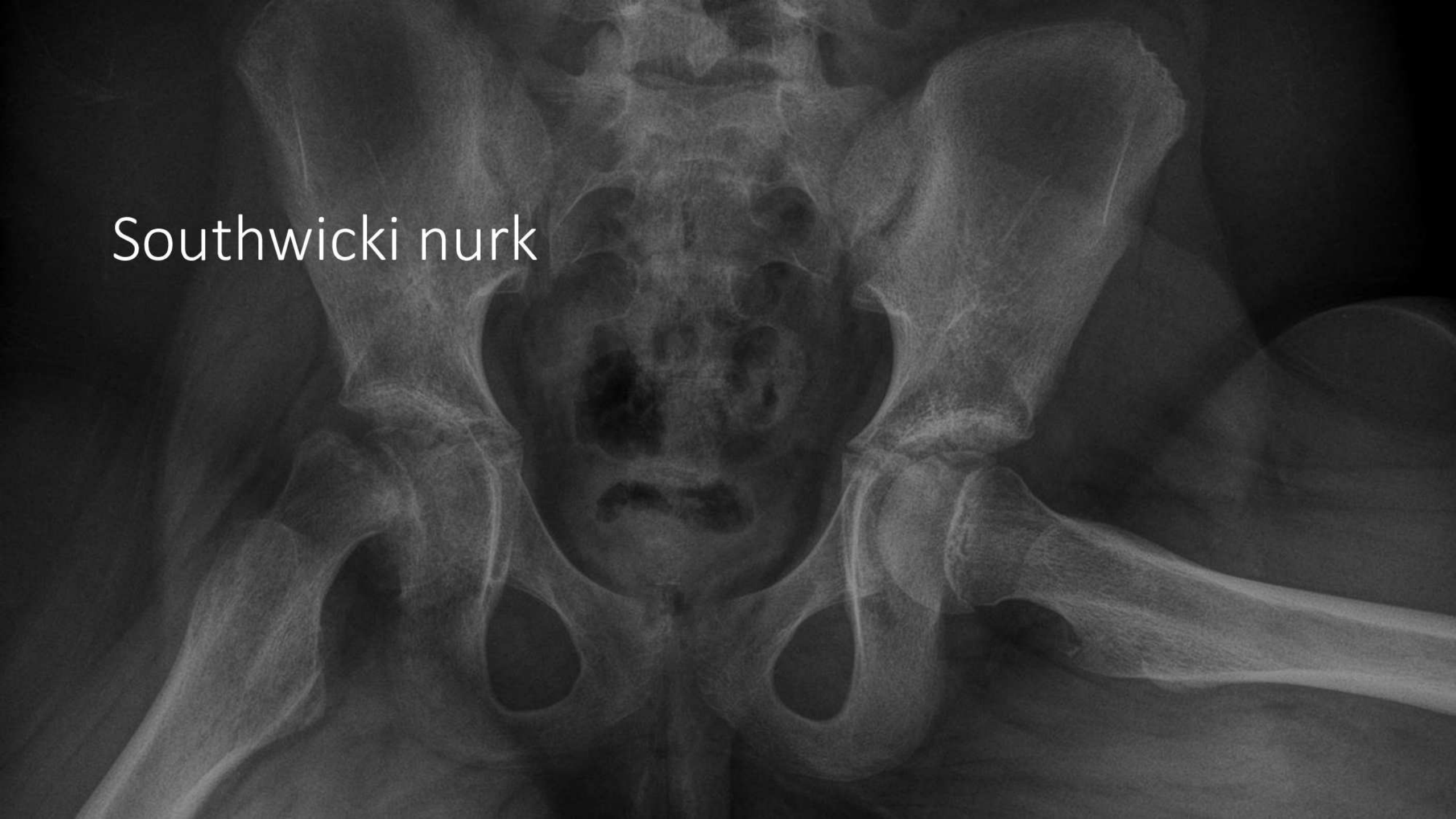
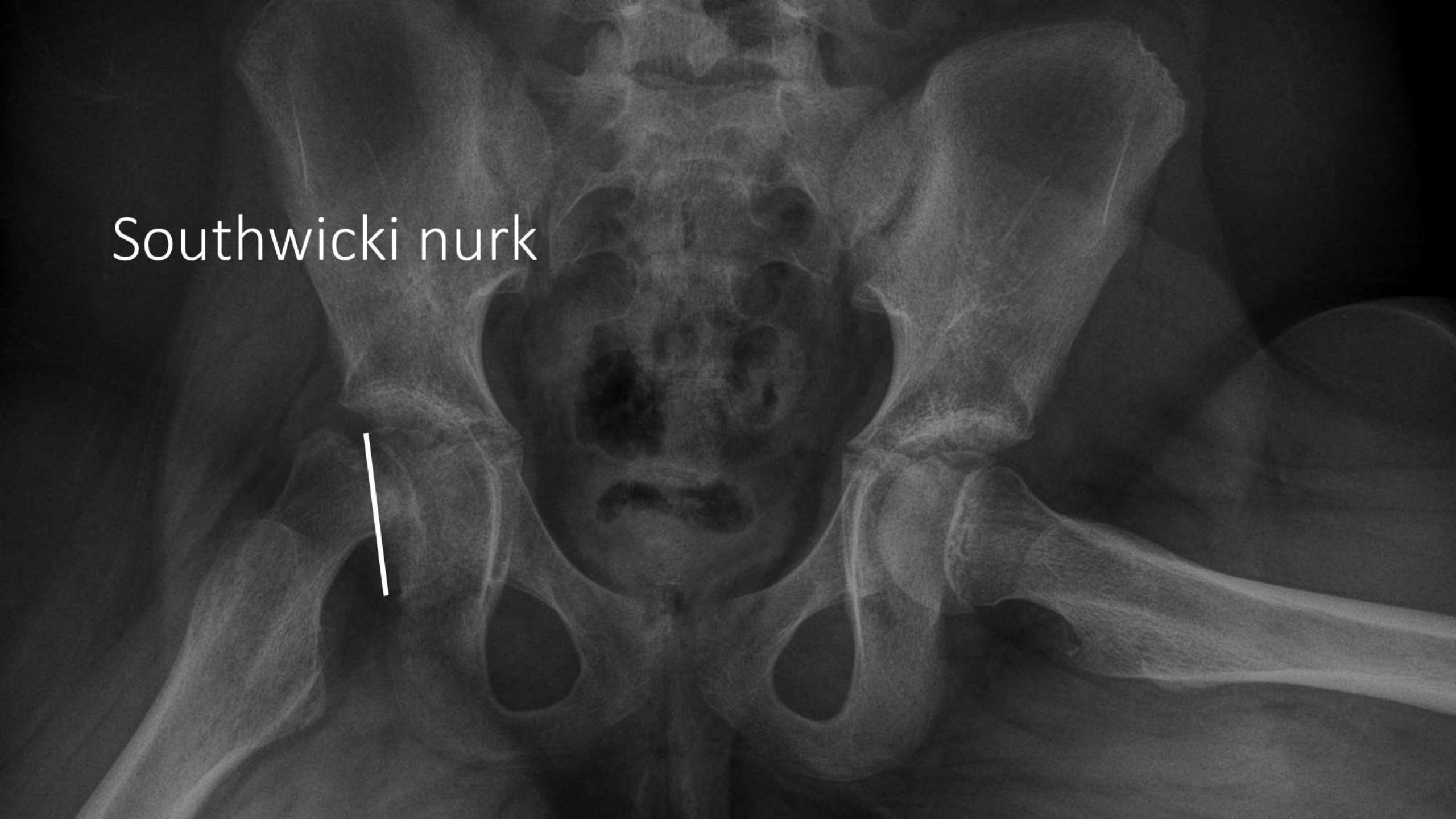
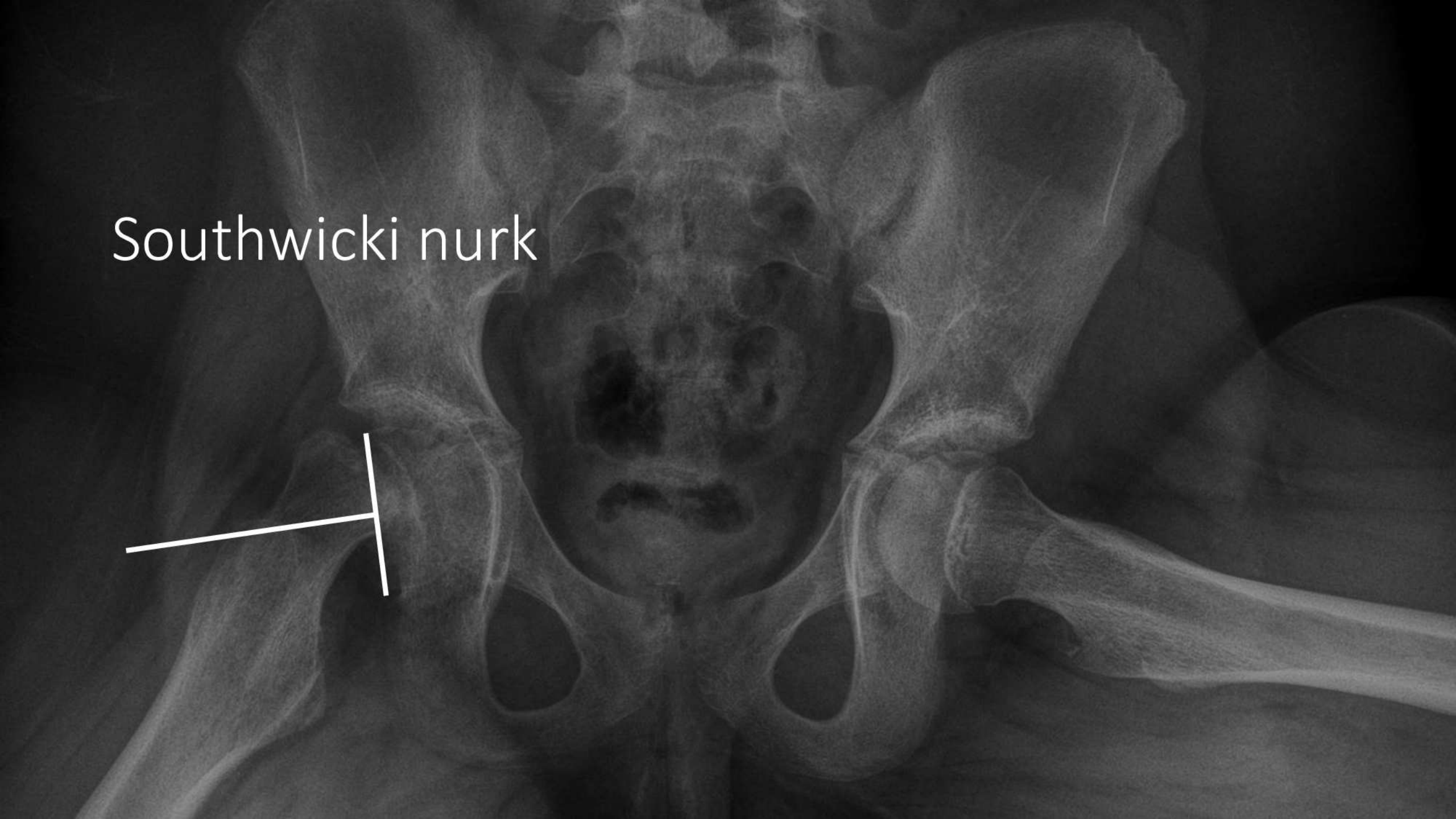
Severe slip
F Gaillard
2010
Radiopaedia.org CC-NC-SA-BY


Southwicki nurk


Southwicki nurk

Southwicki nurk



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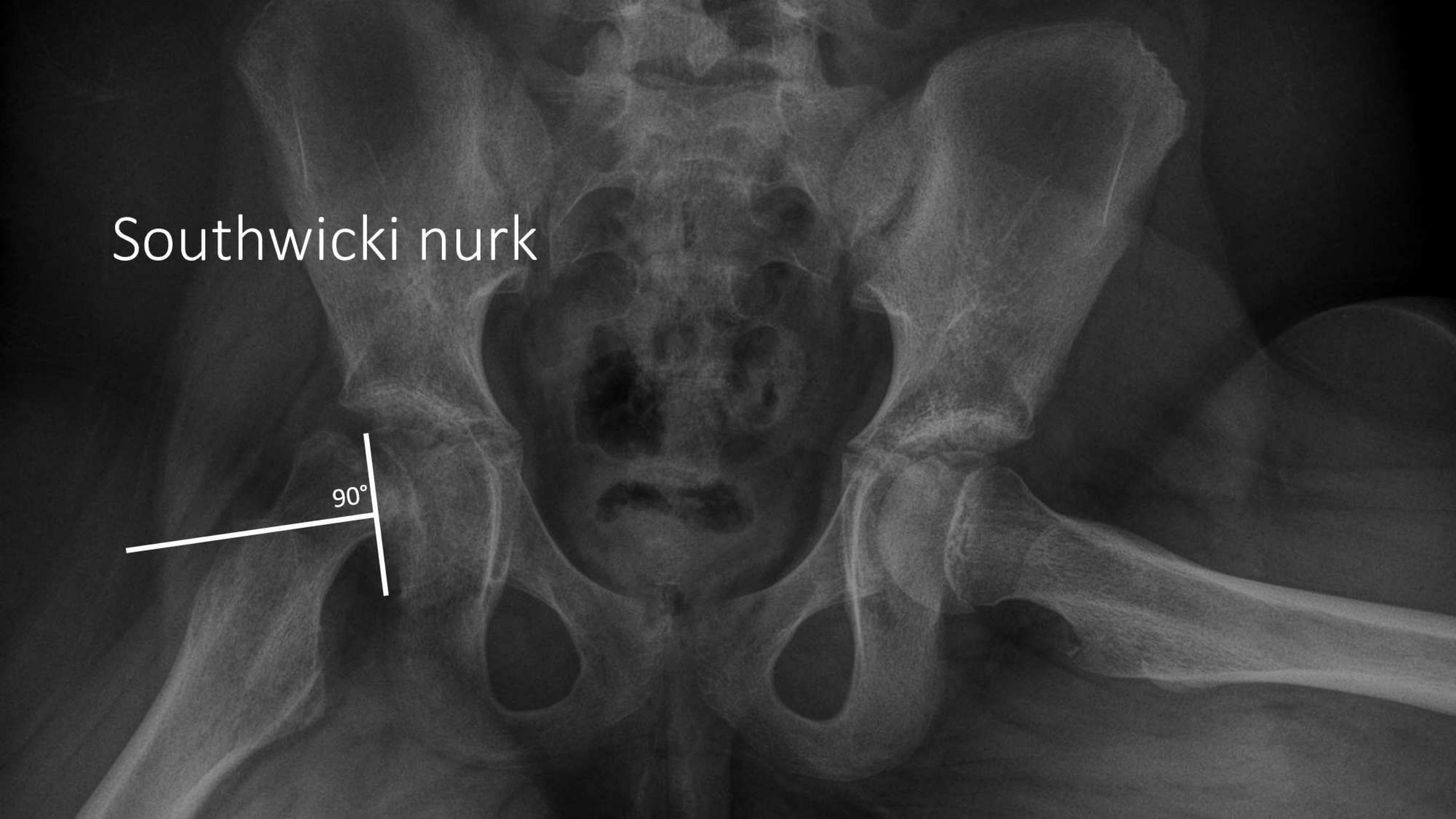

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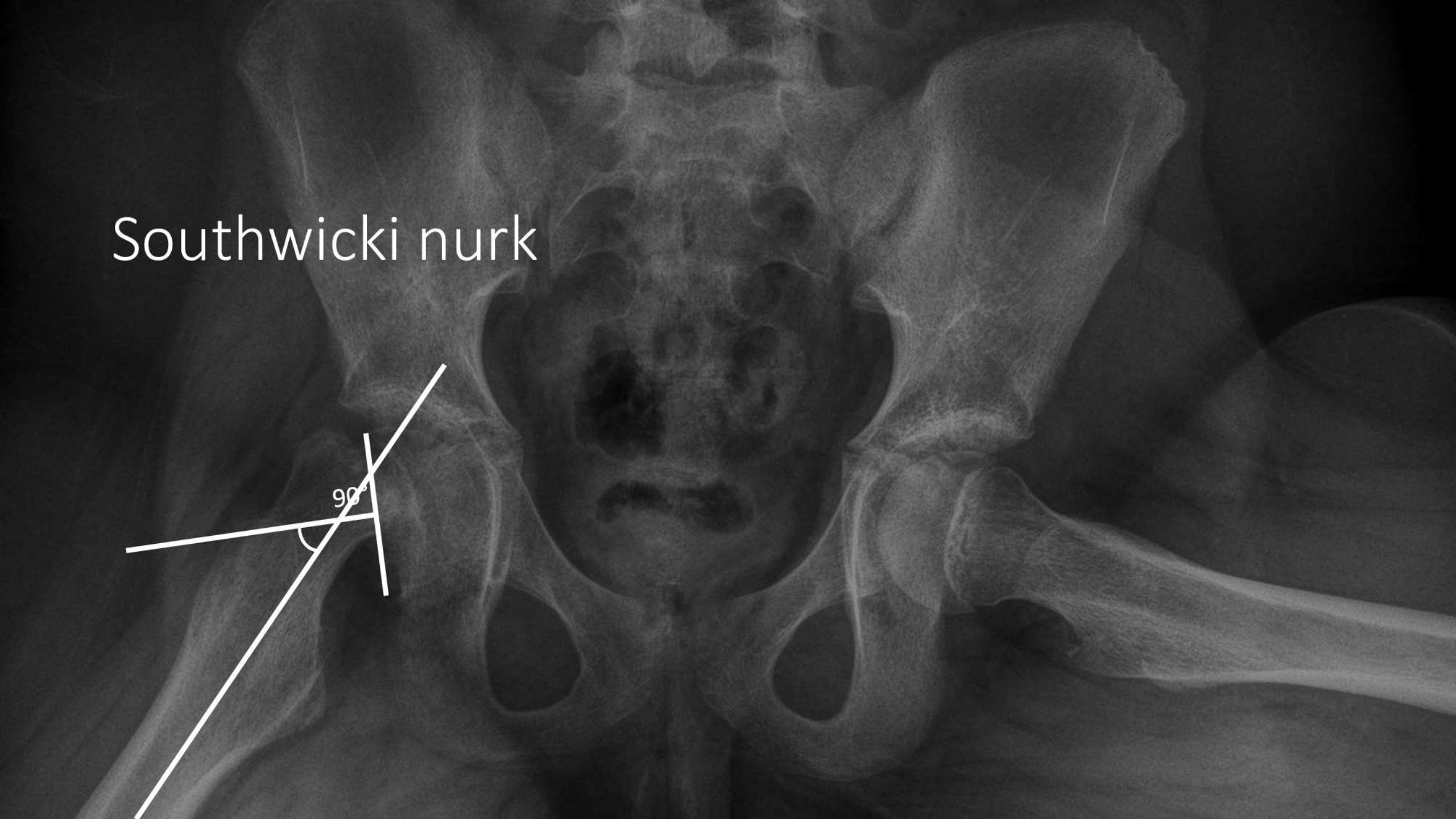
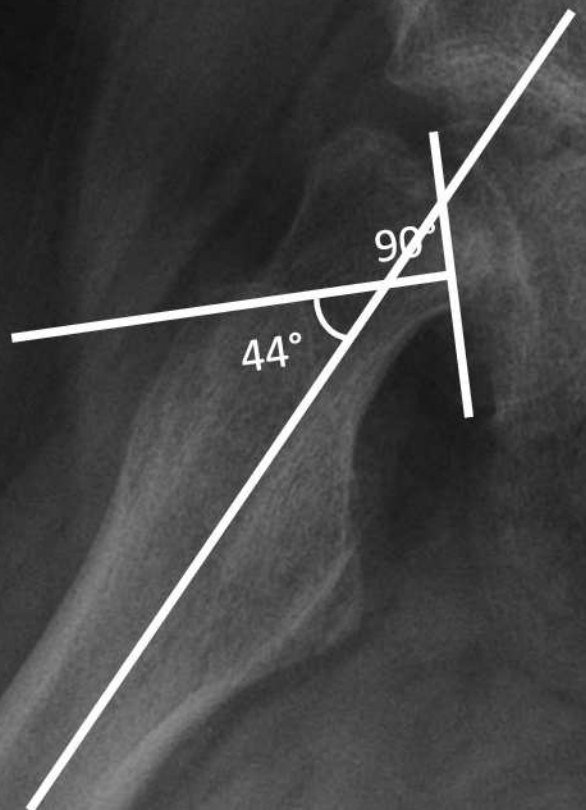
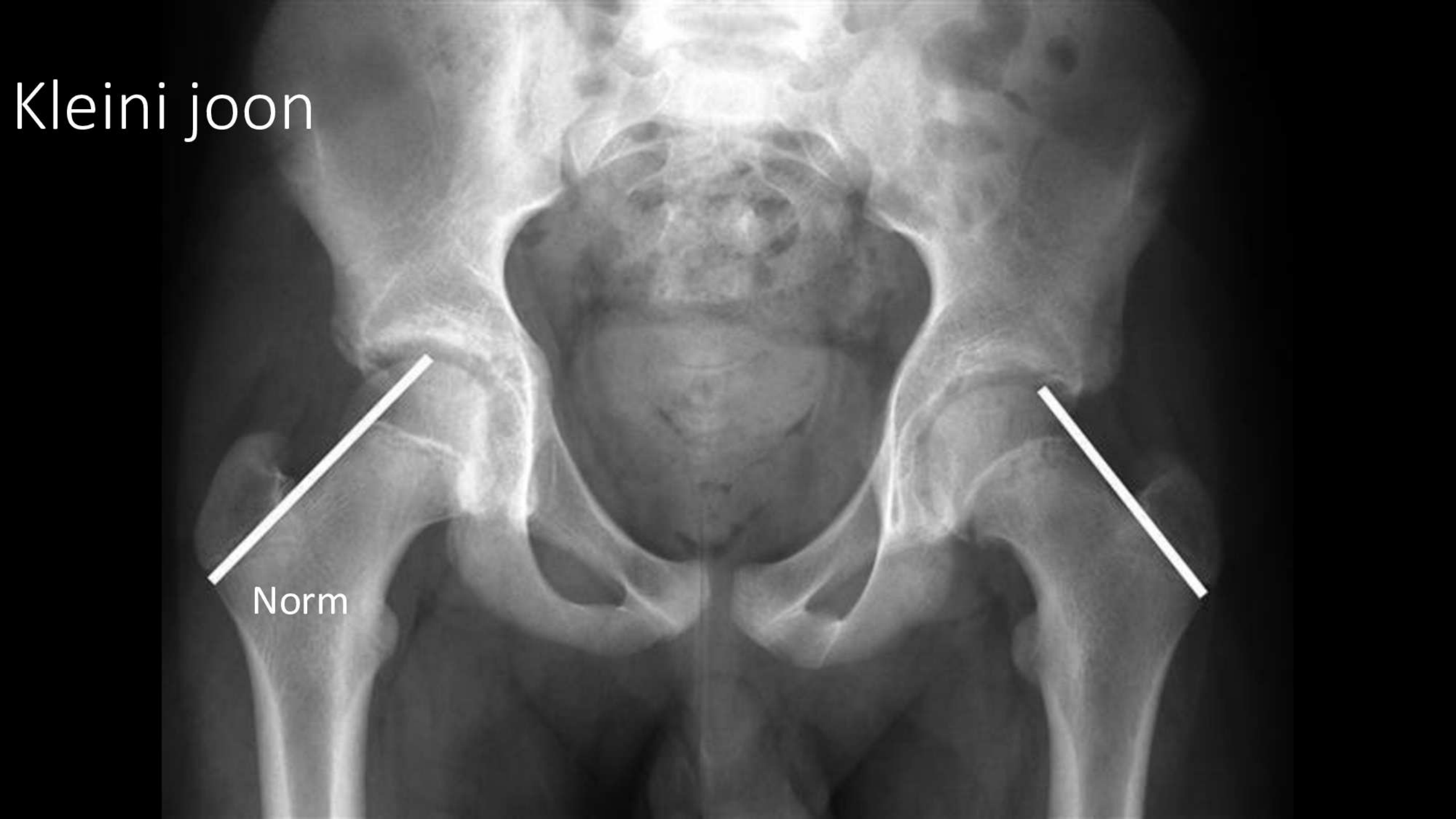


Southwicki nurk

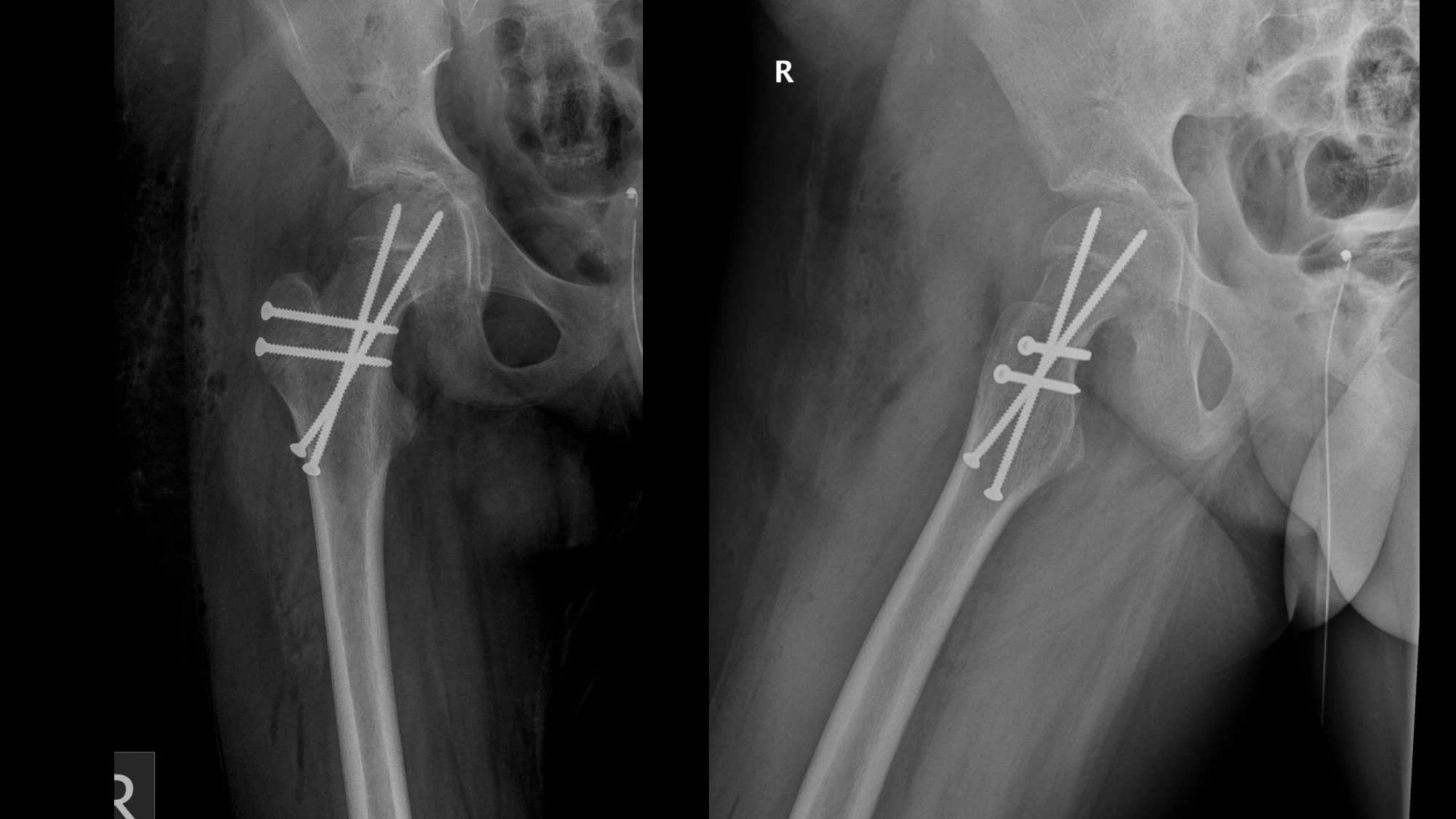


Mild <30 °
Moderate 30-50 °
Severe >50 °

Kleini joon



Ravi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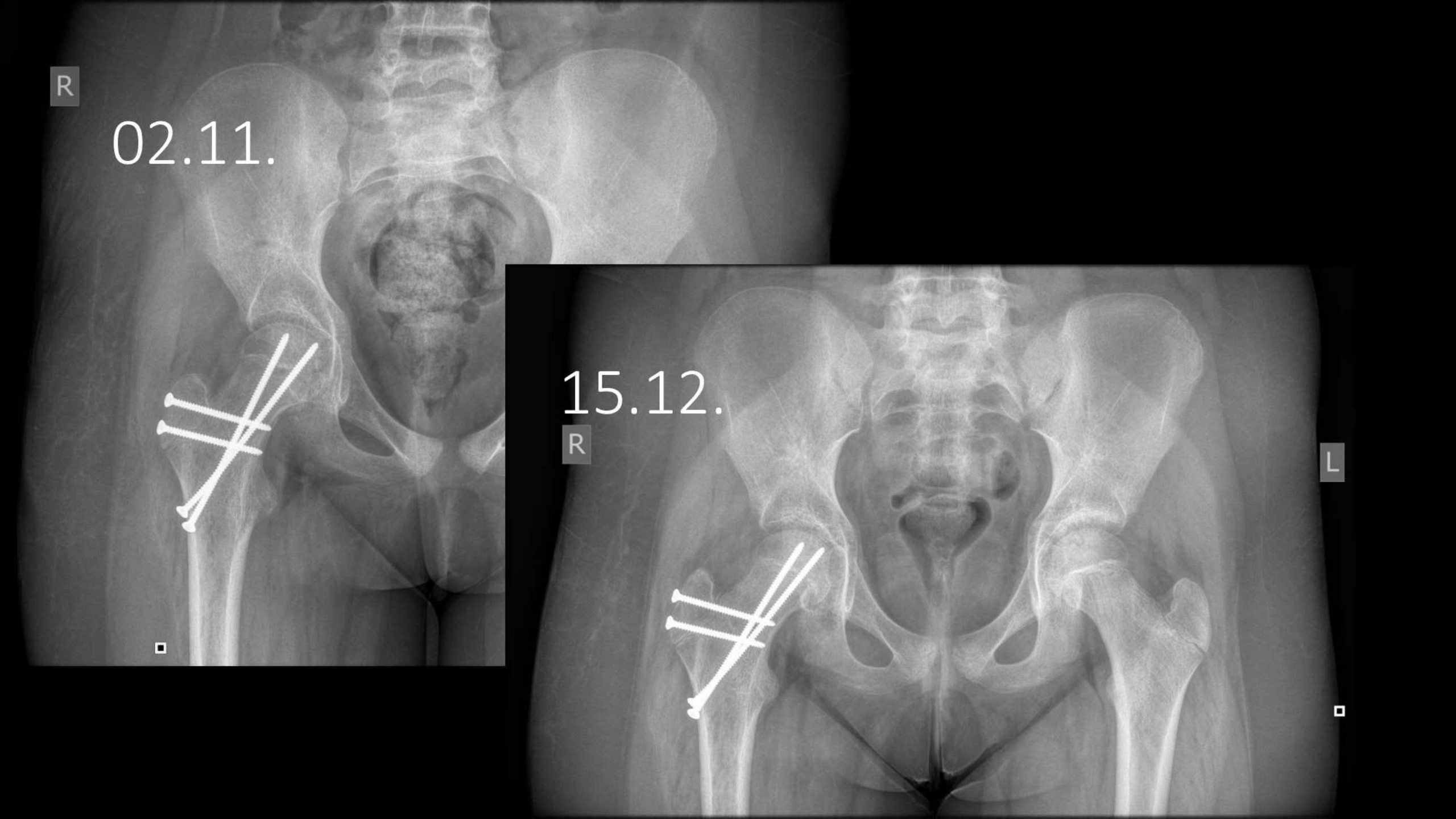
Tüsistused

- Osteoartroos 90%
- Avaskulaarne nekroos ~15%.
- Kondrolüüs ~10%
- FAI
- Alajäsemed pikkuse erinevused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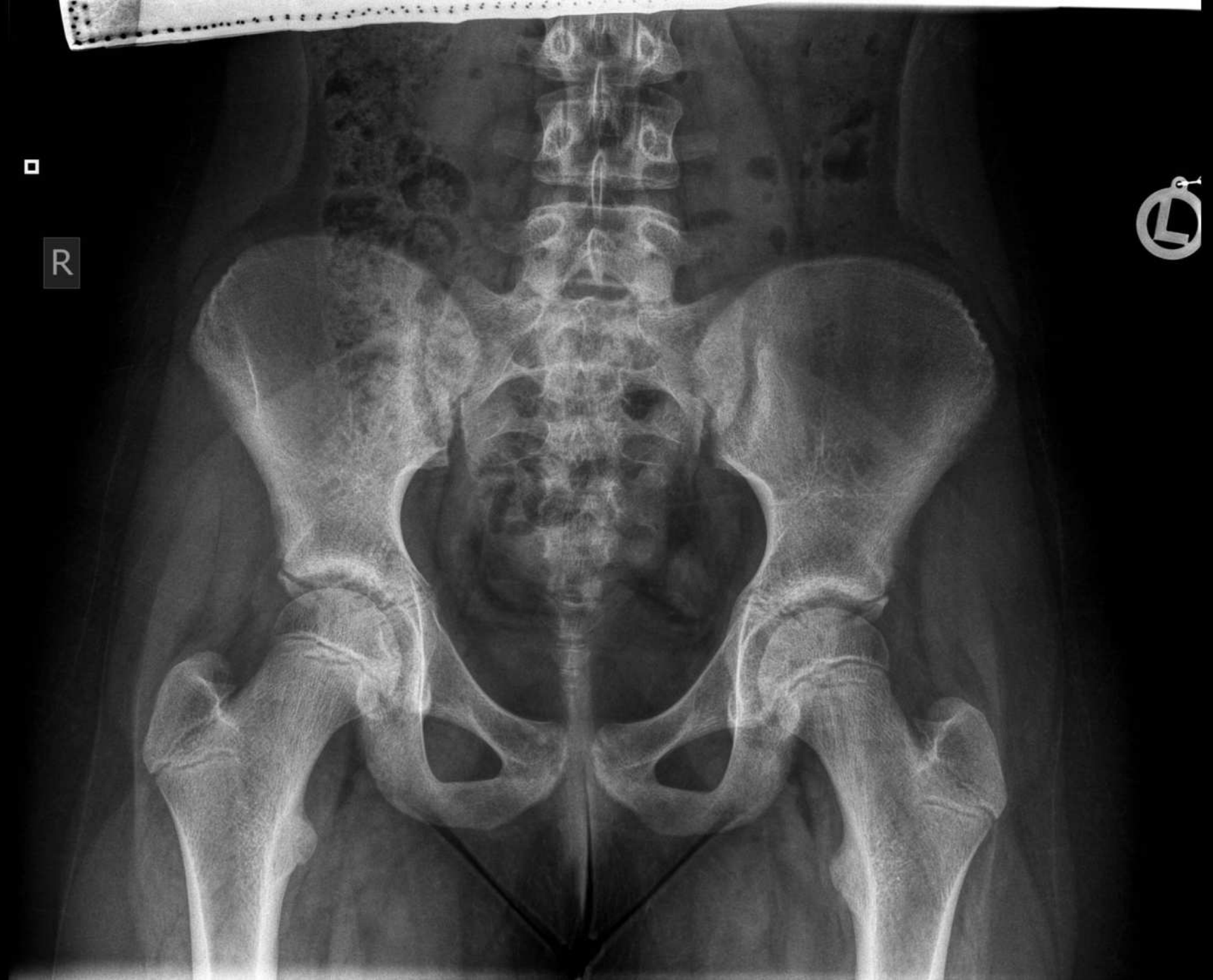
Juhtum nr 2.

11- aastane tüdruk

Paar päeva tagasi pärast spordimänge hakkas tunda andma vasak puusaliiges, mis on ka varem aeg-ajalt valutanud 0,5 aasta jooksul. Uuringutel pole käinud. Lapse vanemal õel on opereeritud SCFE *(slipped capital femoral epiphysis)*

Sünonüüm SUFE *(slipped upper femoral epiphysis)*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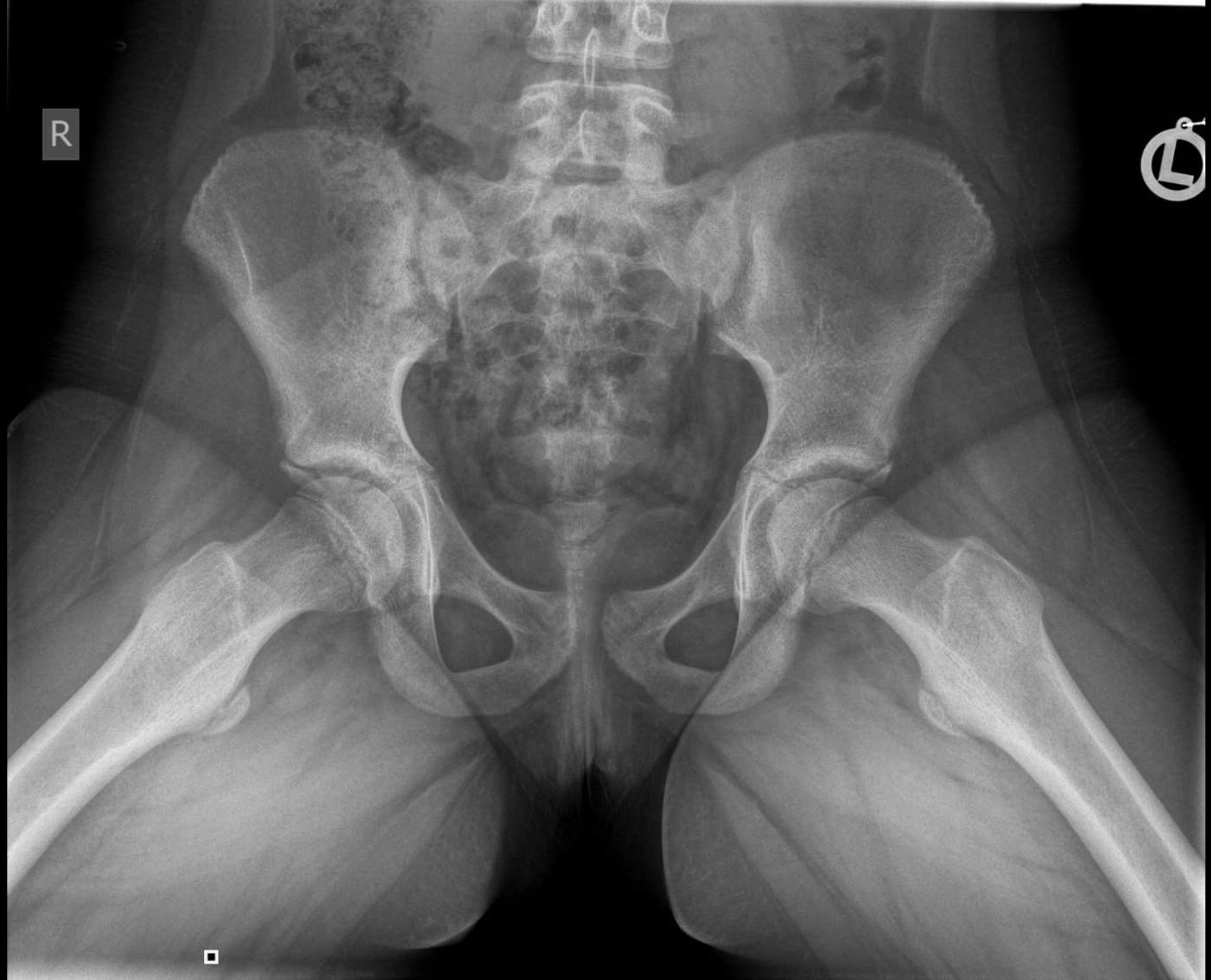
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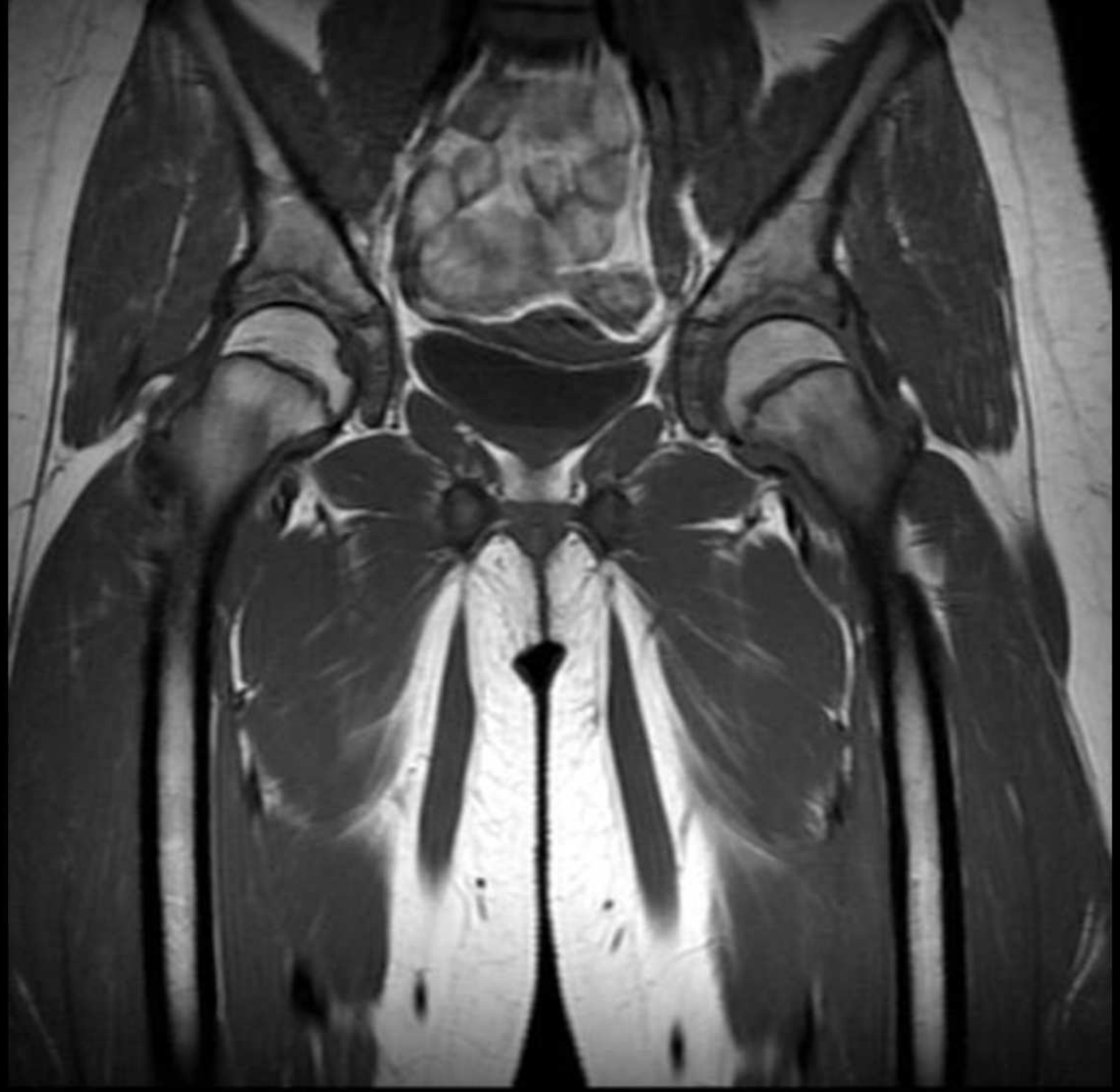

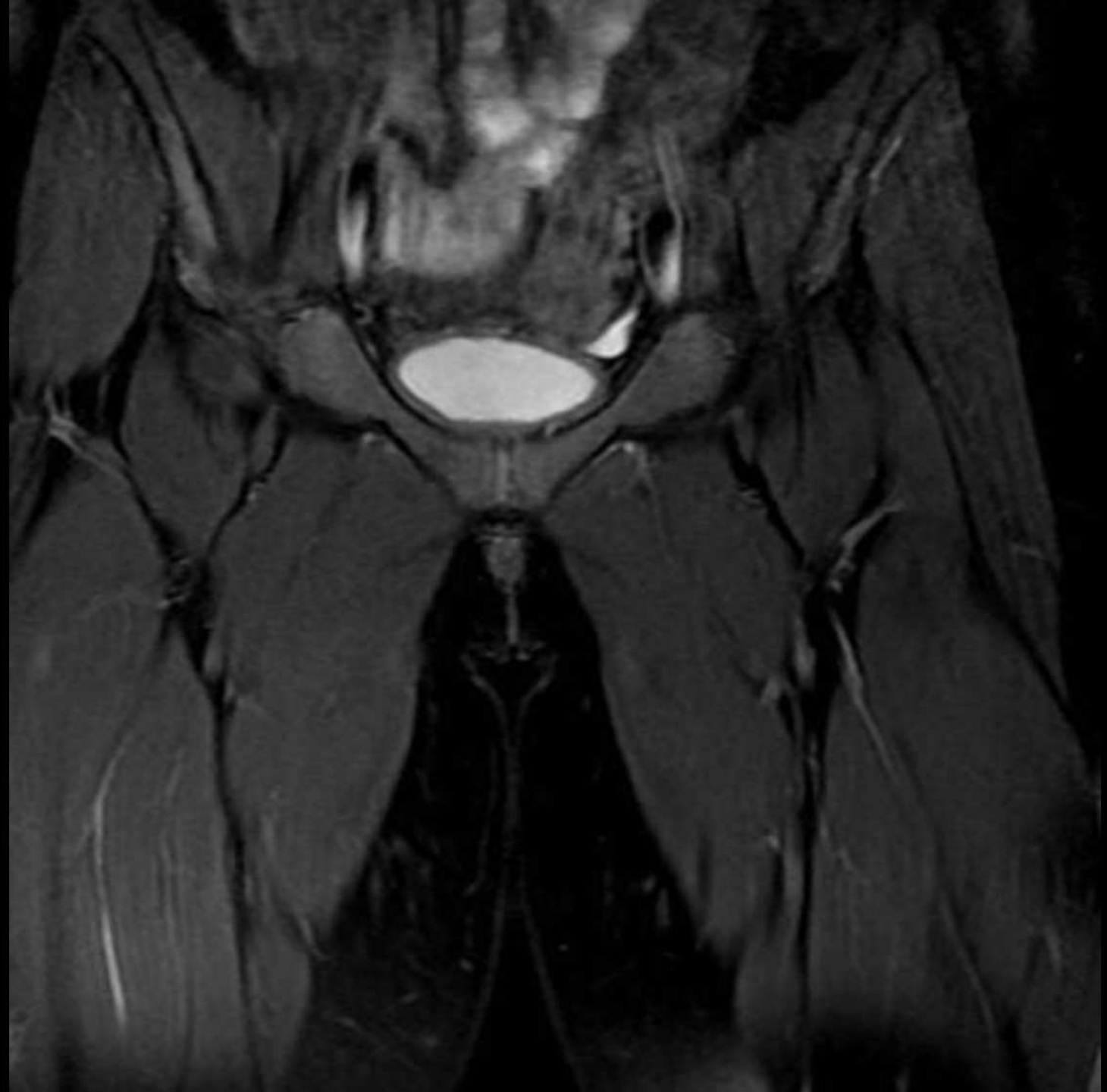

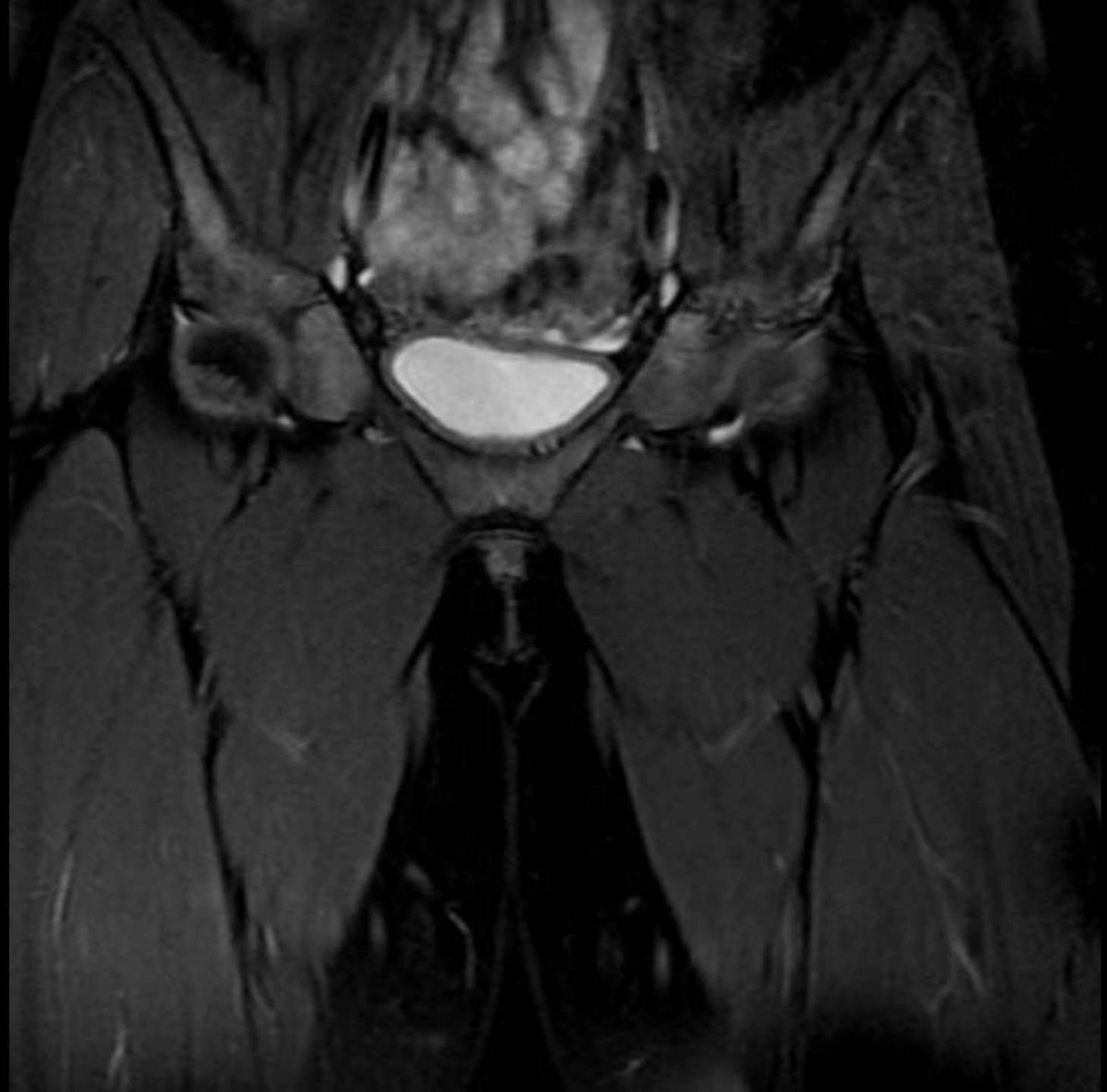

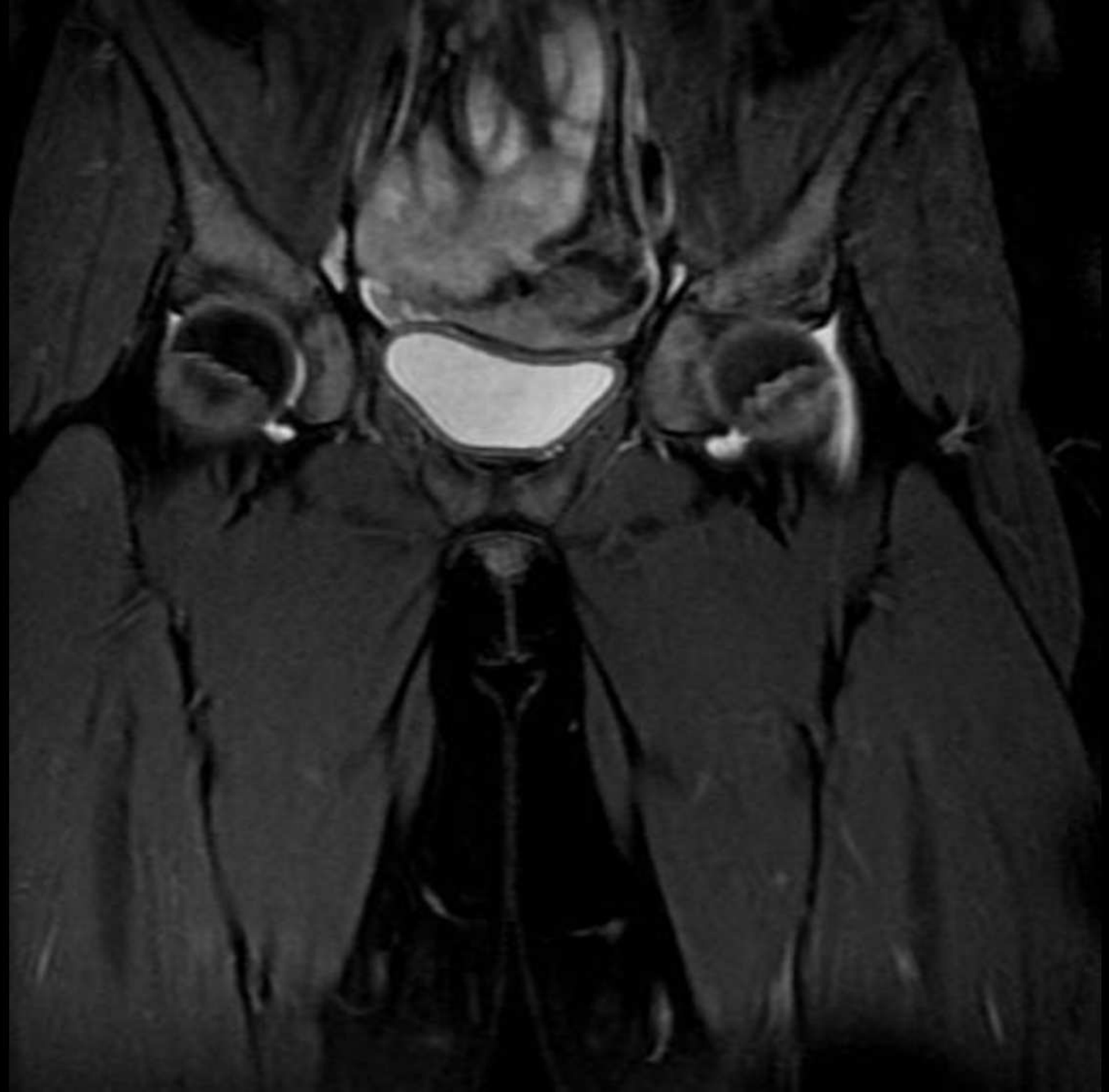

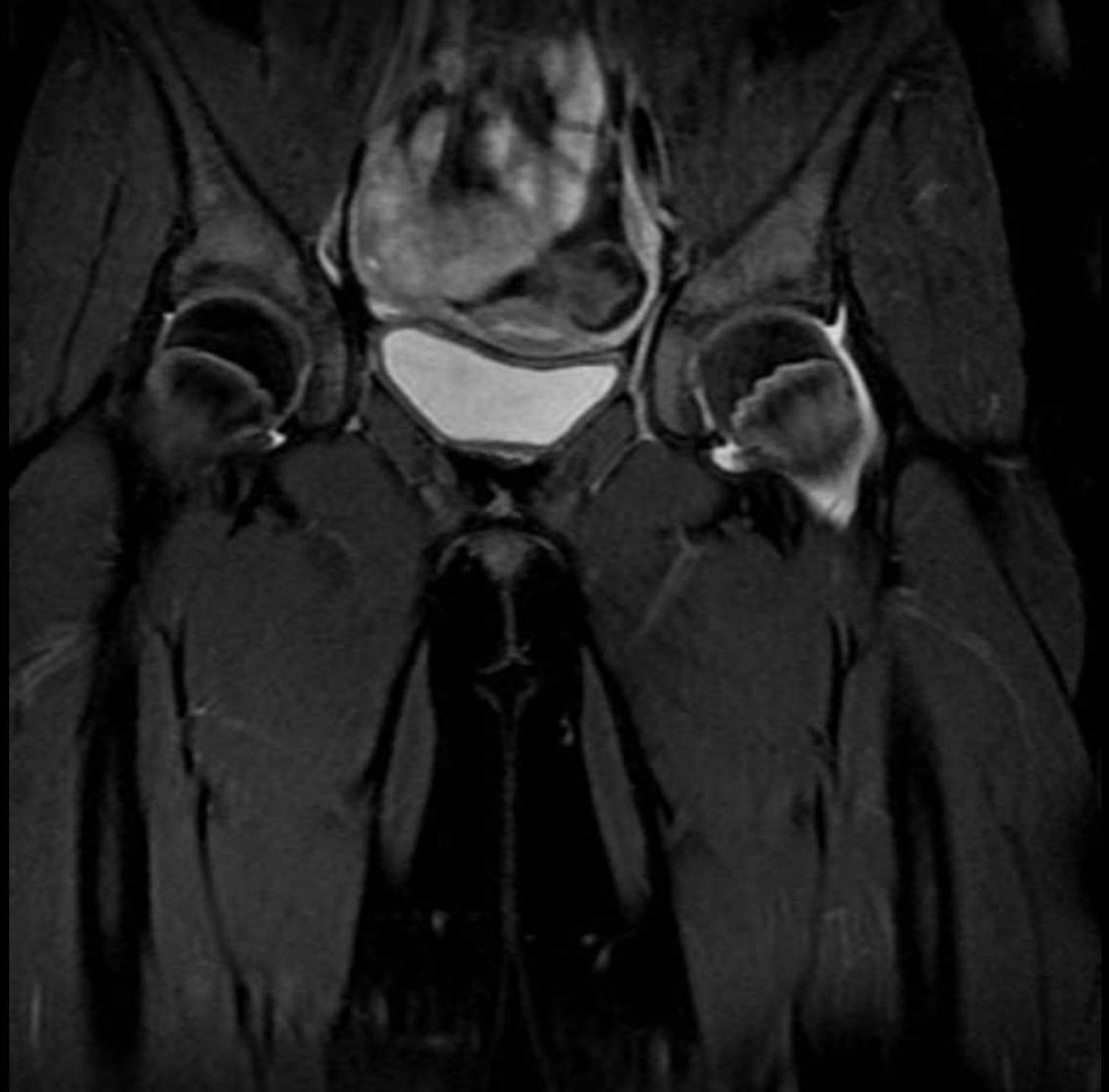

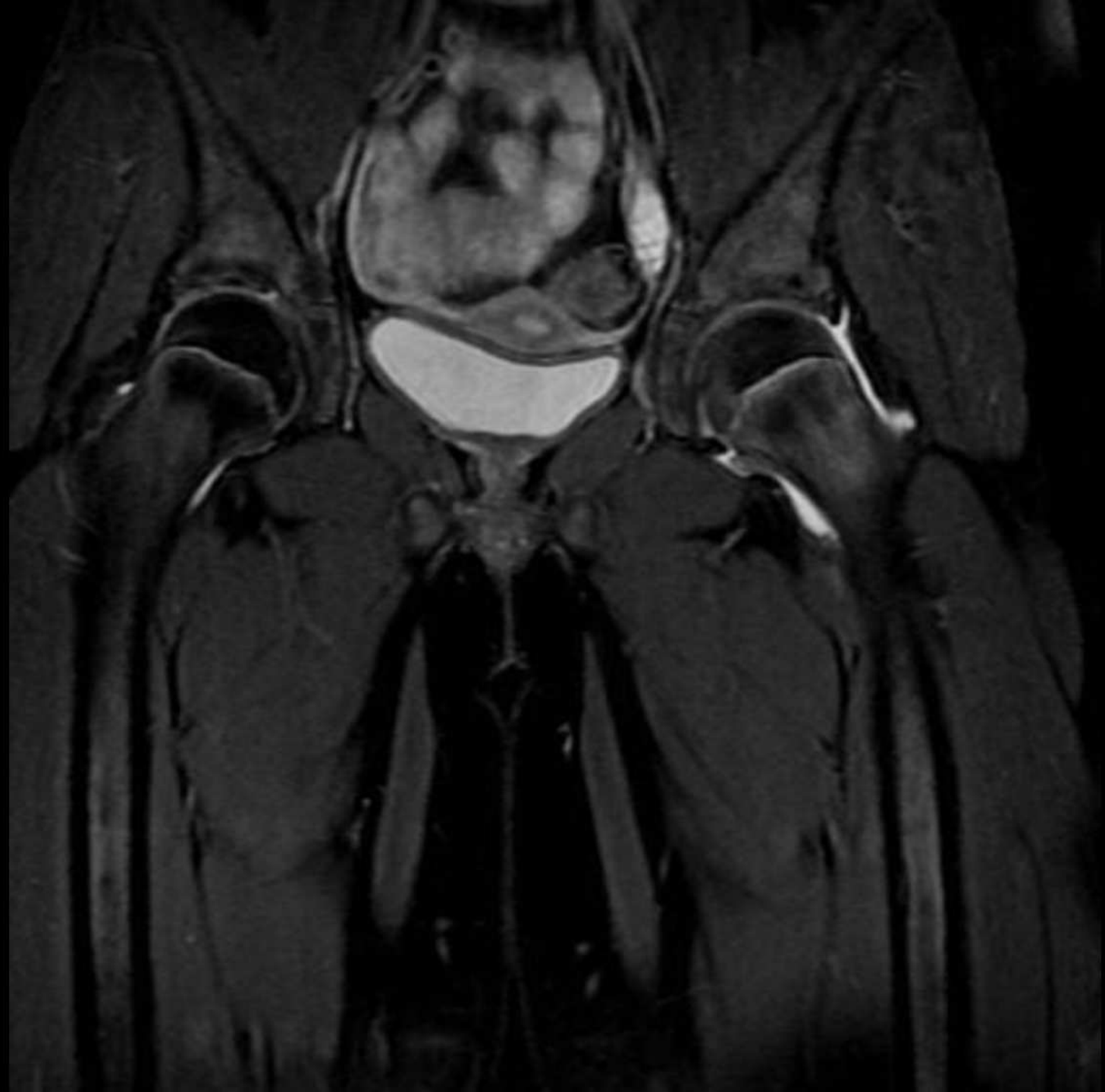

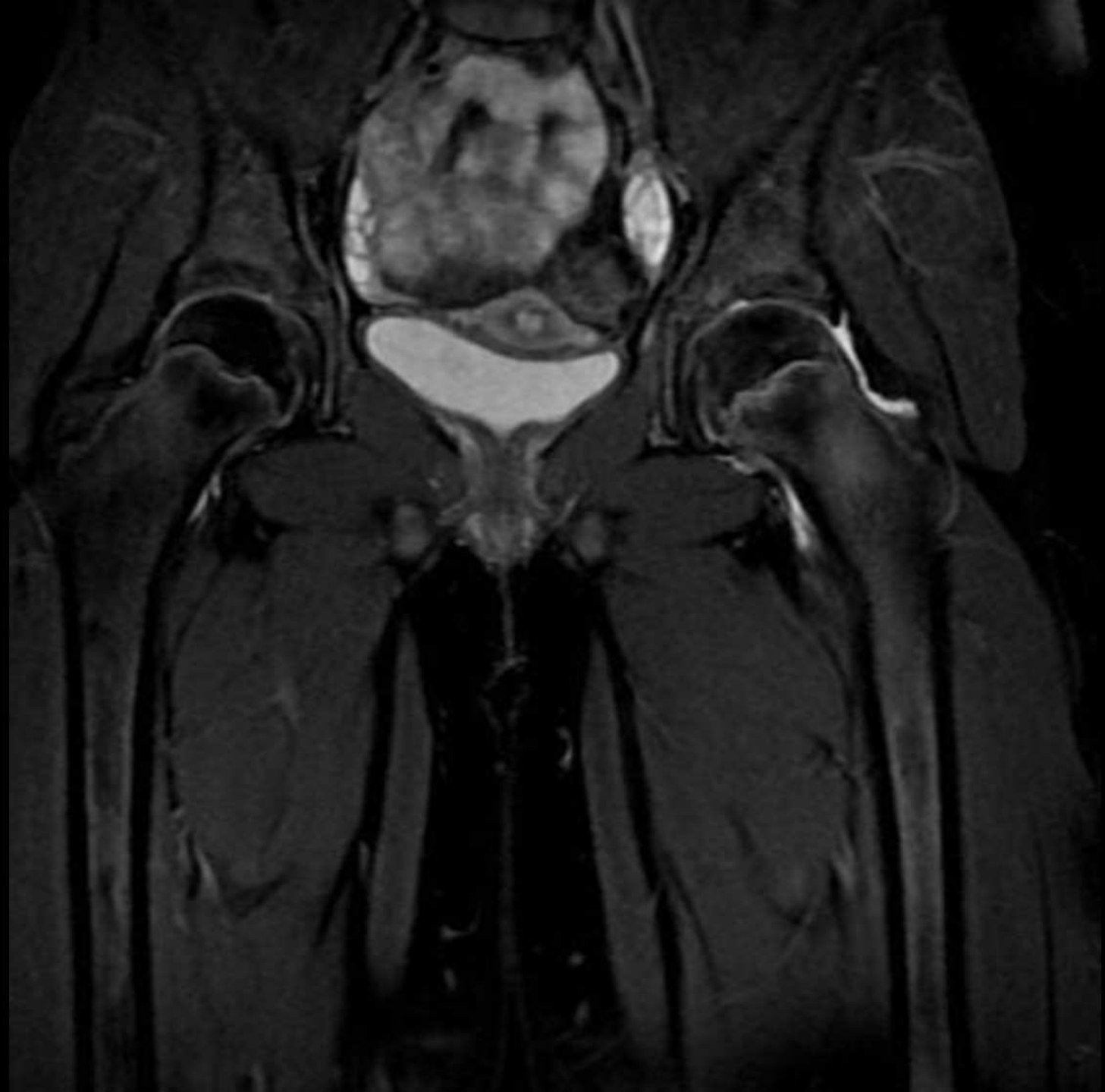

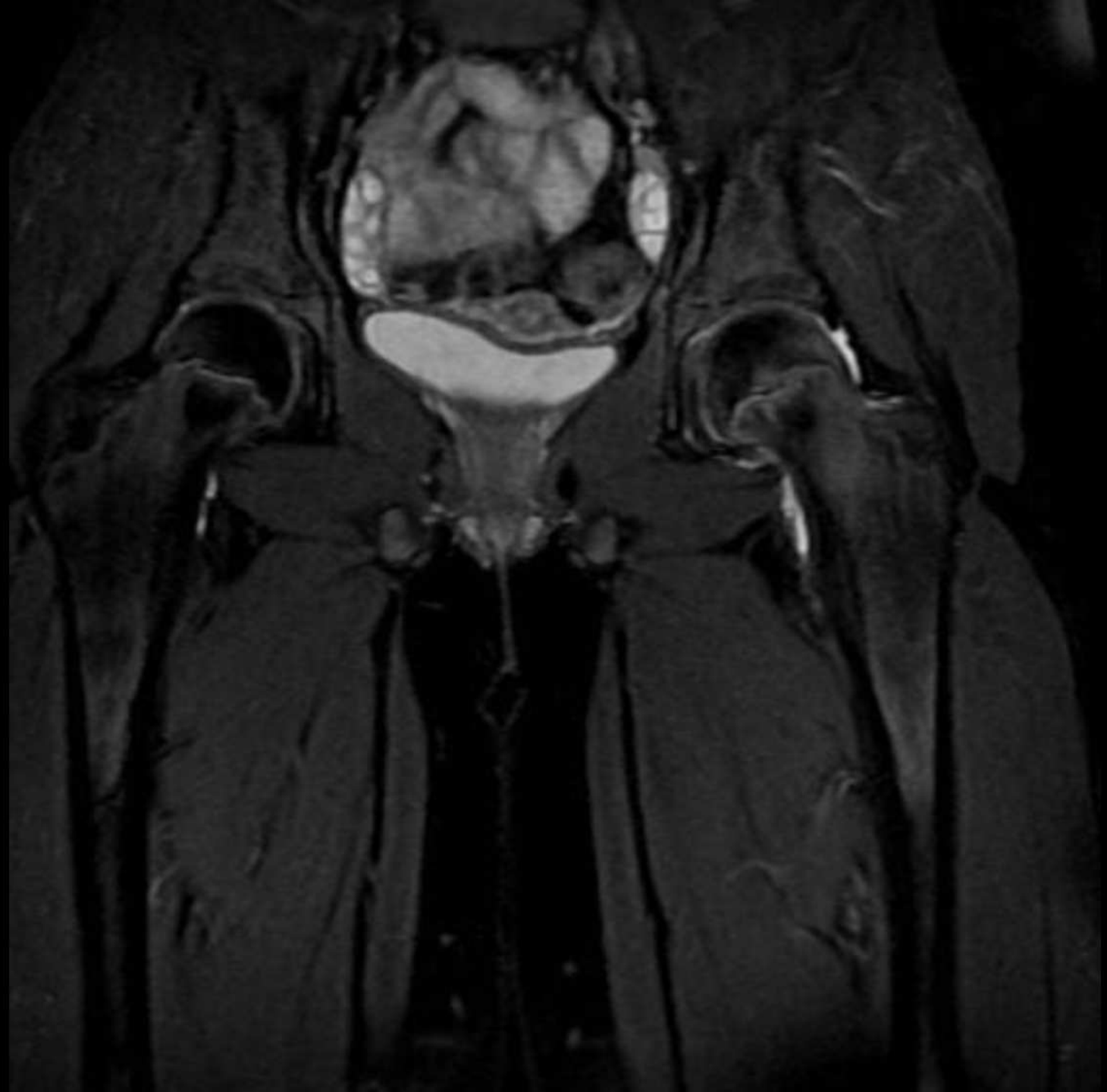

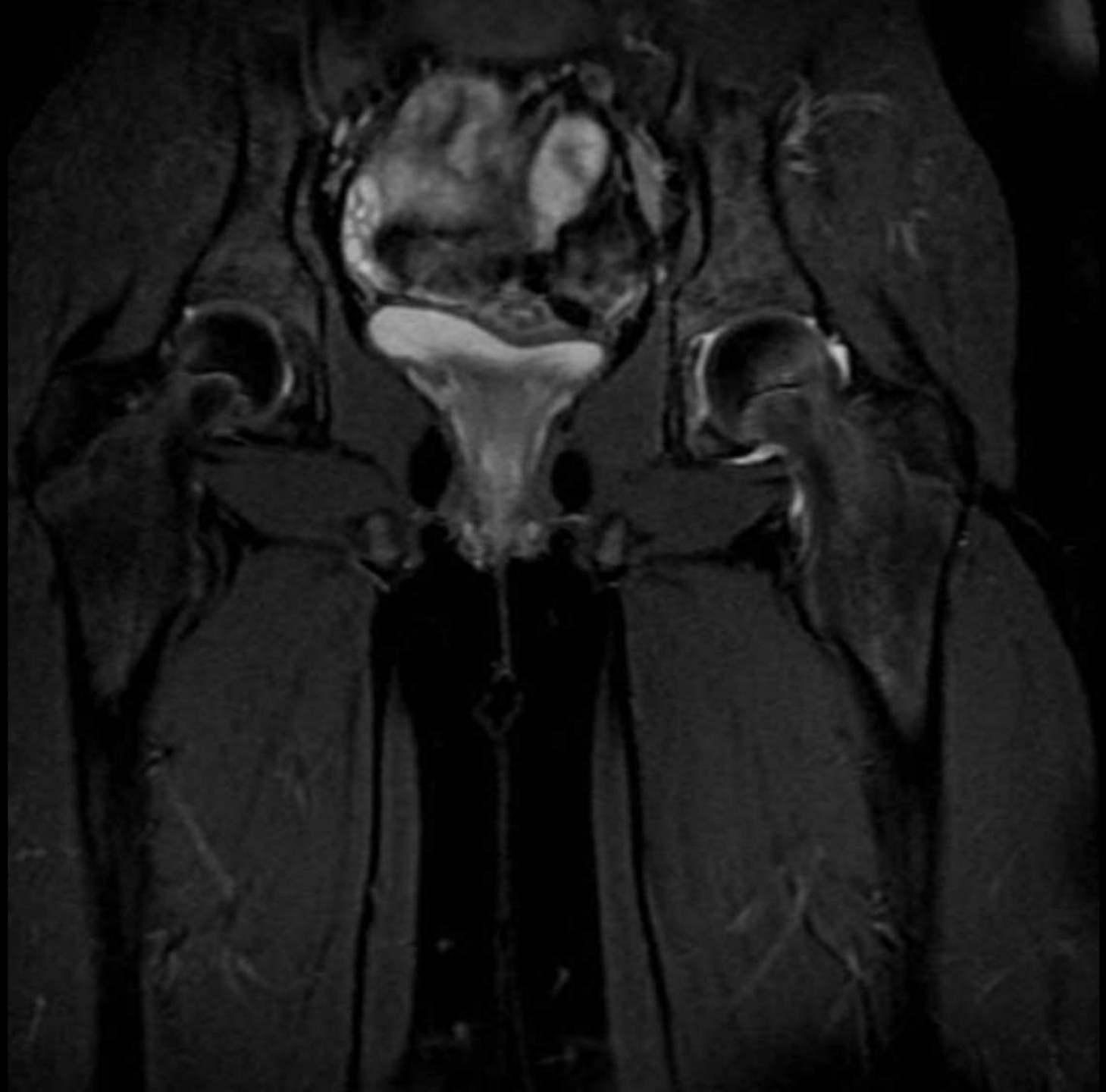

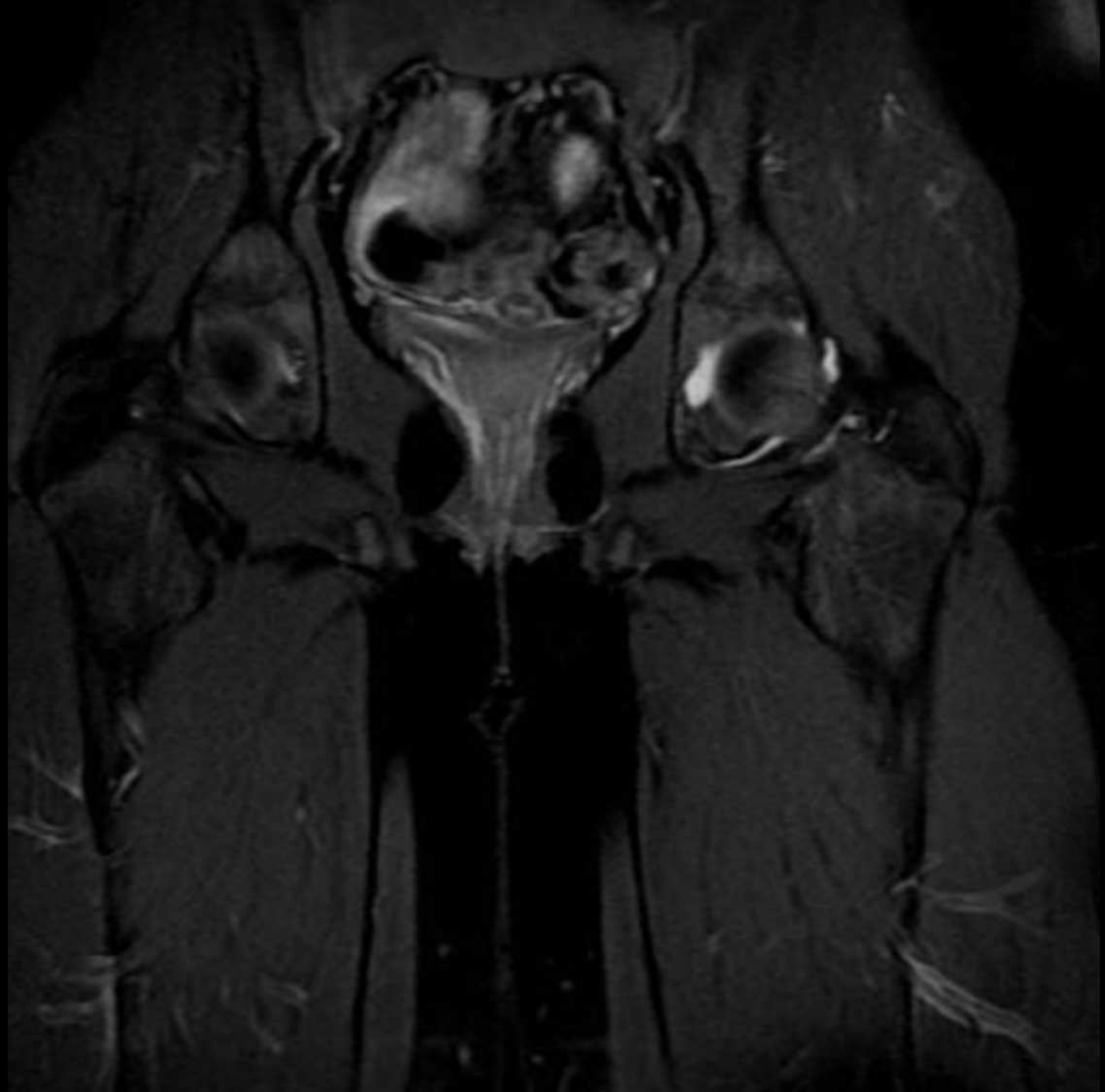

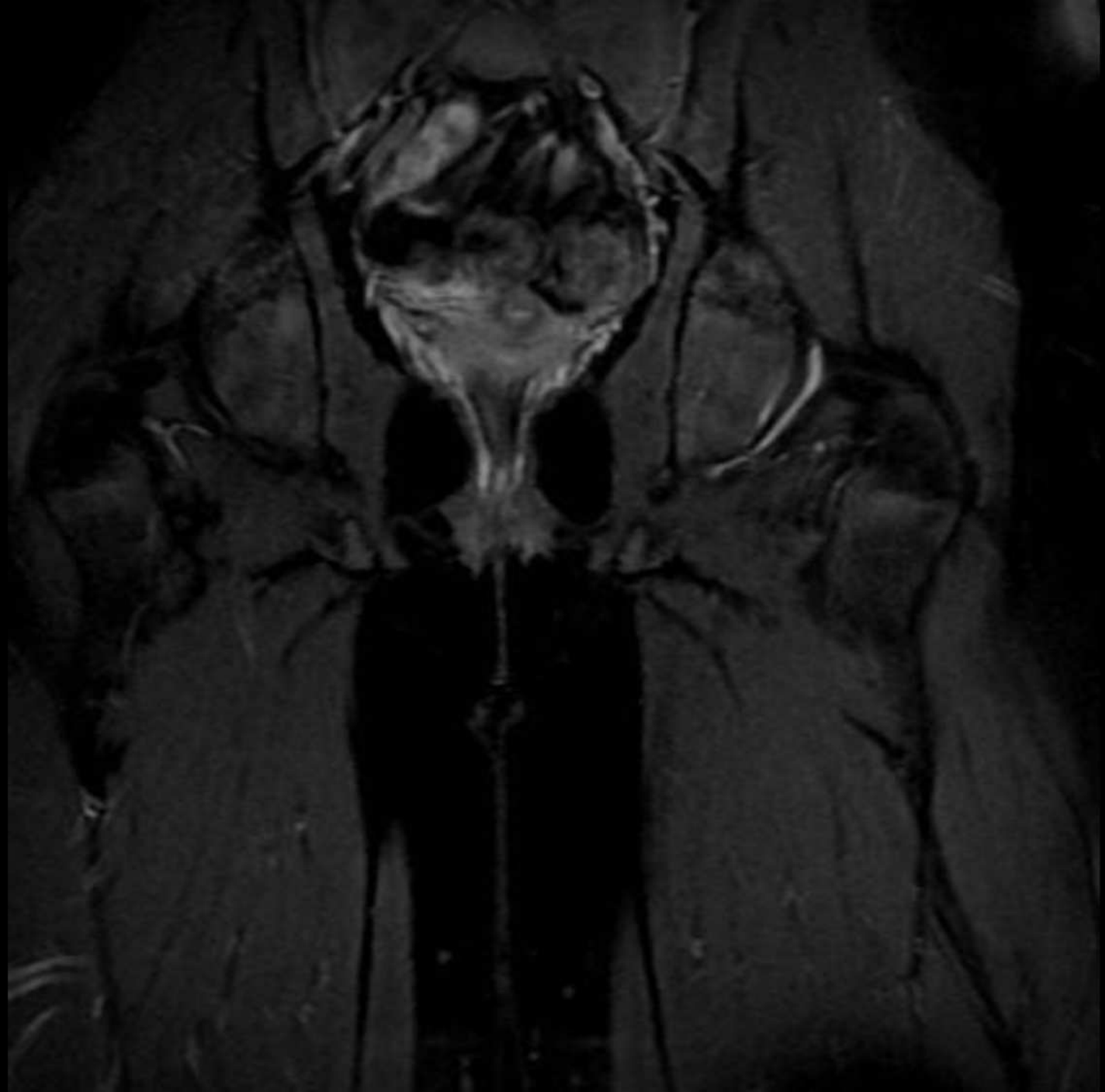

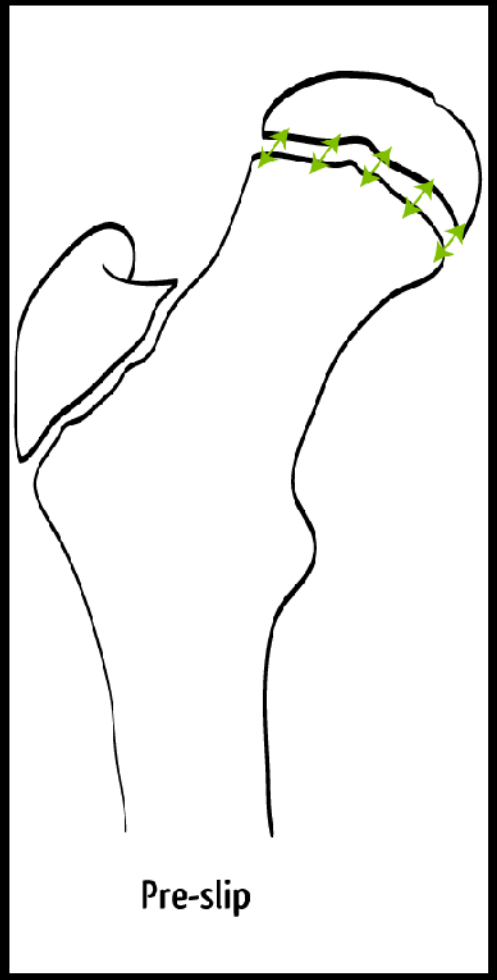
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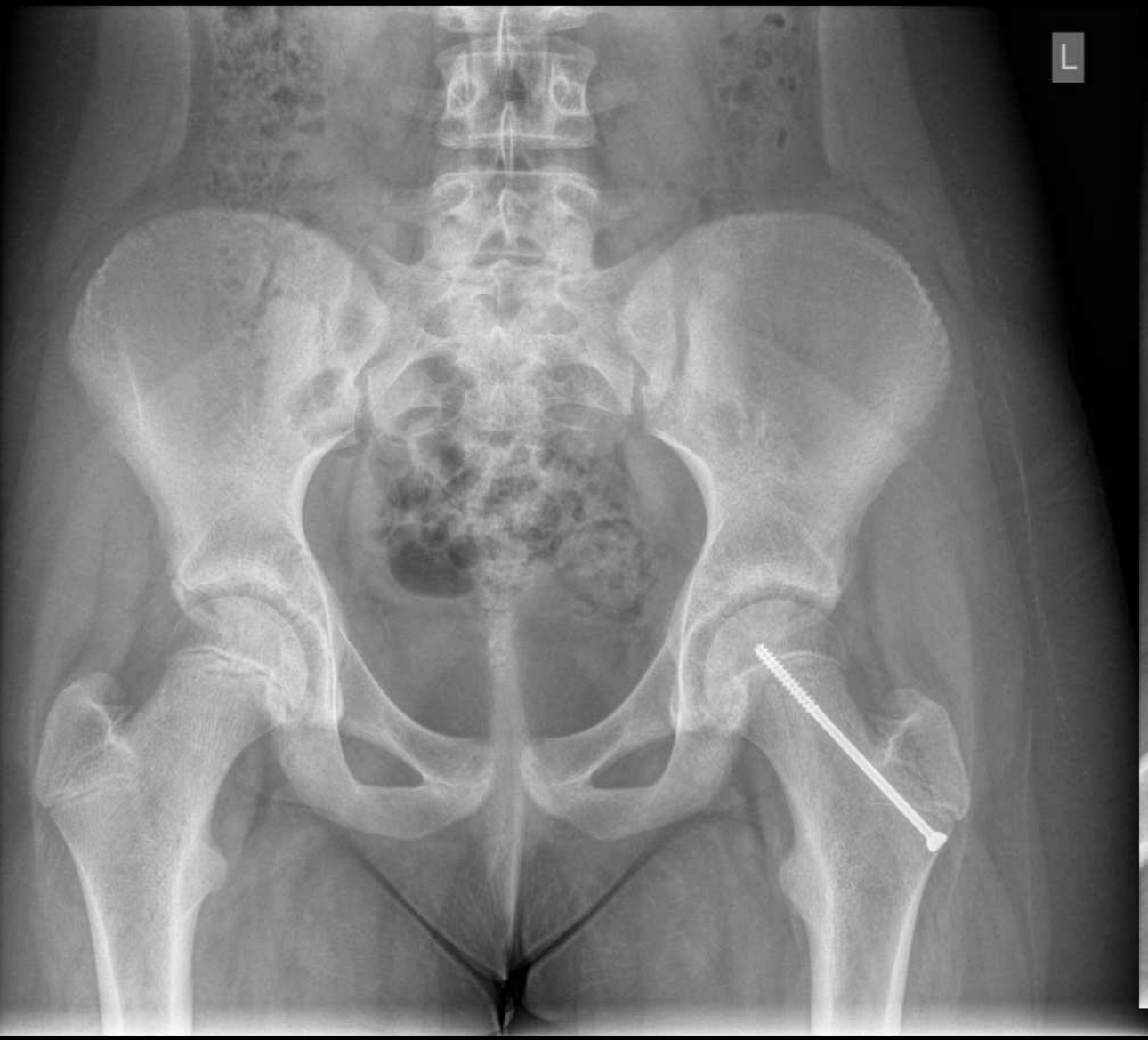
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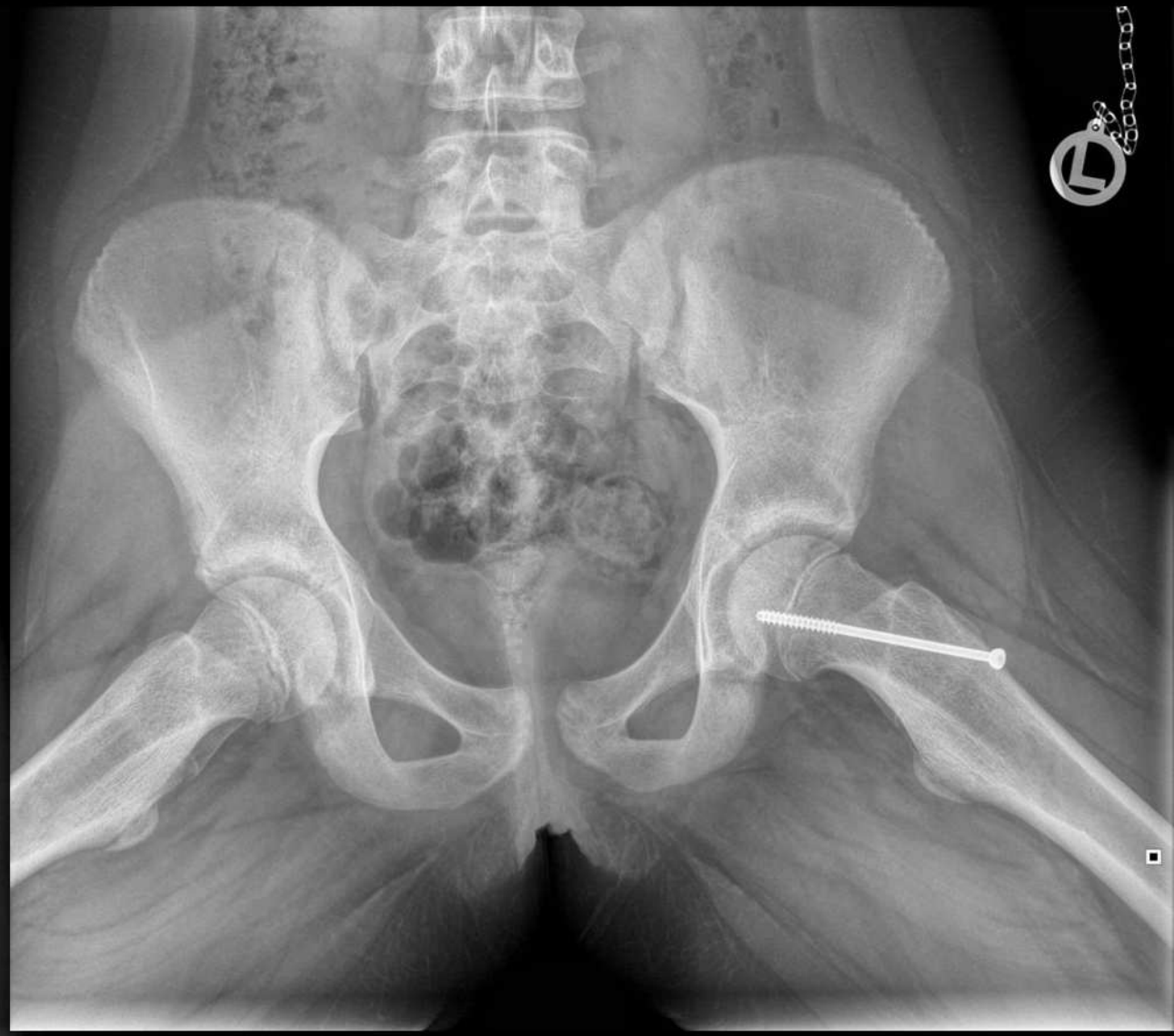

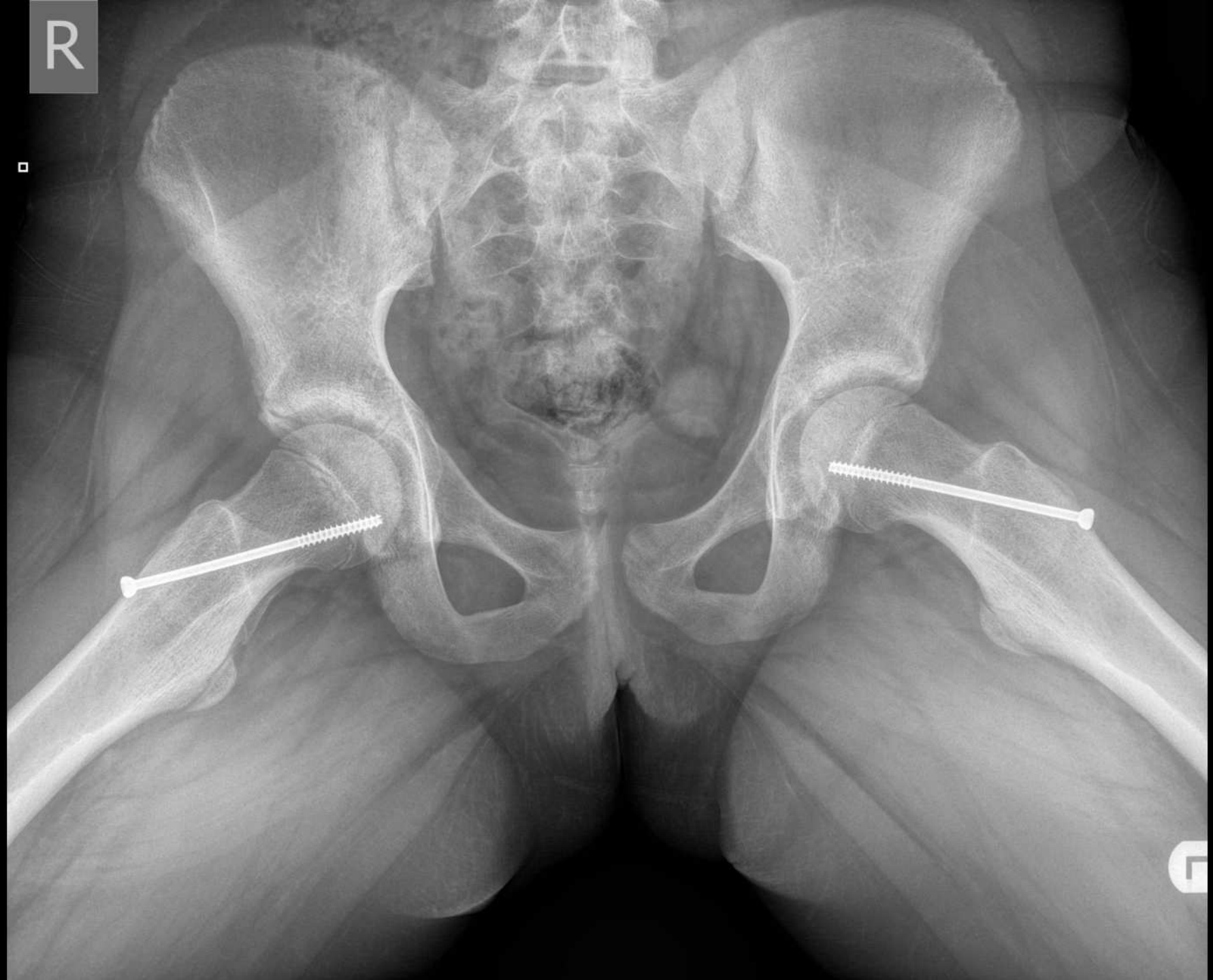
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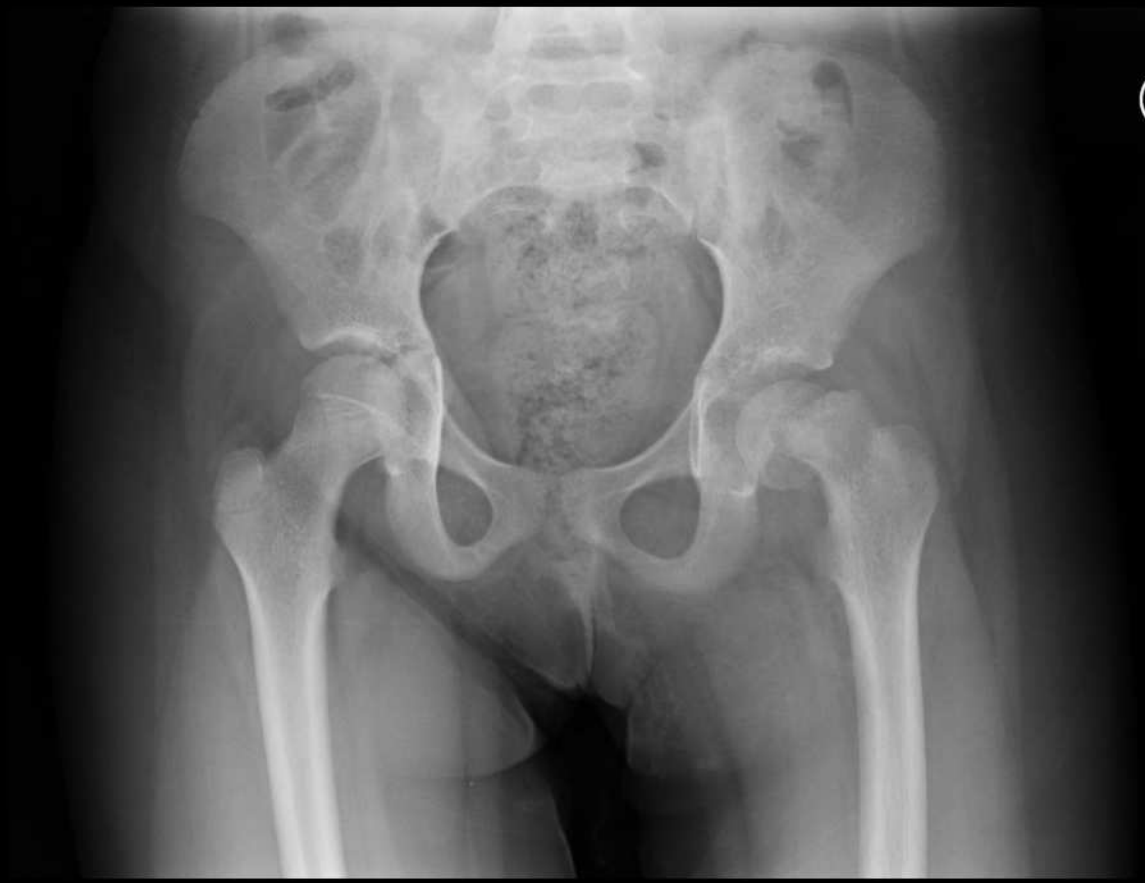
SALTER HARRIS?



I

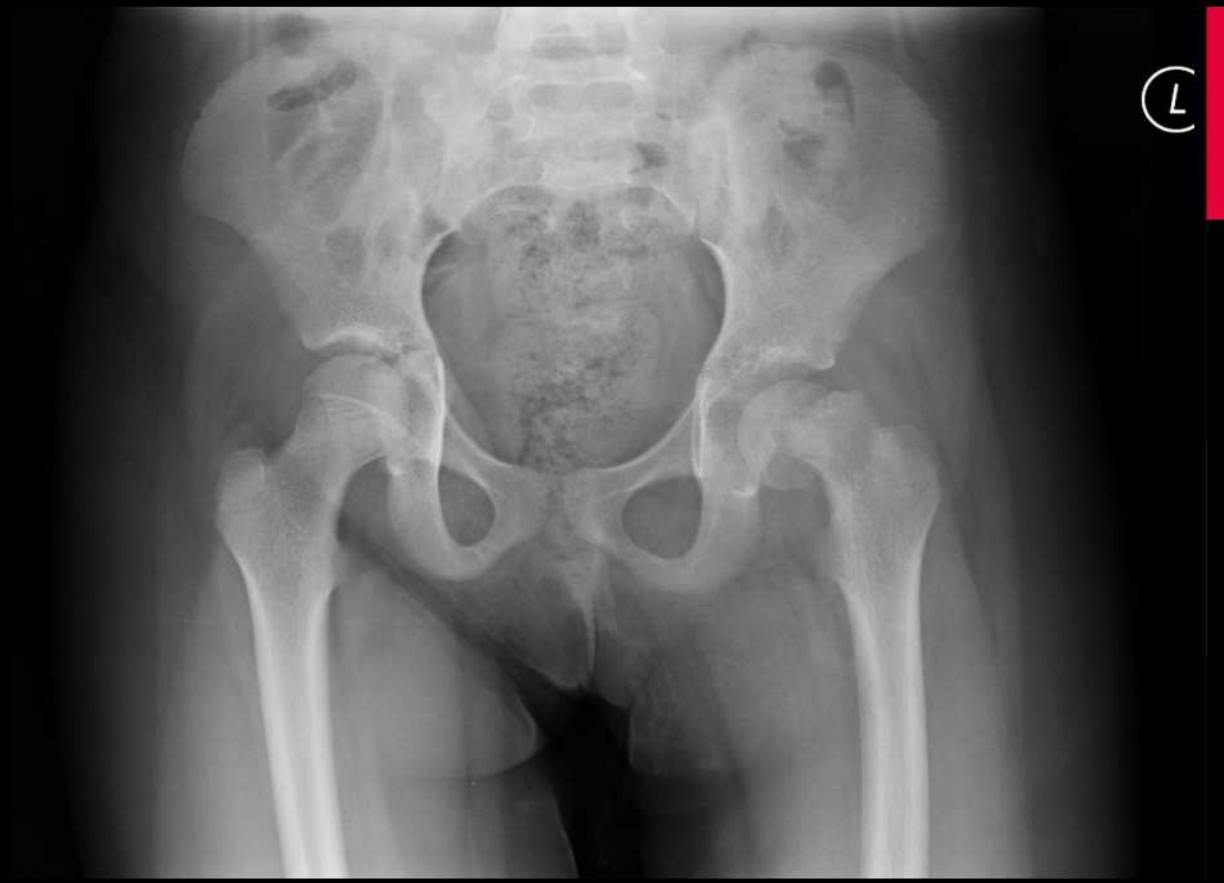
II

III

IV

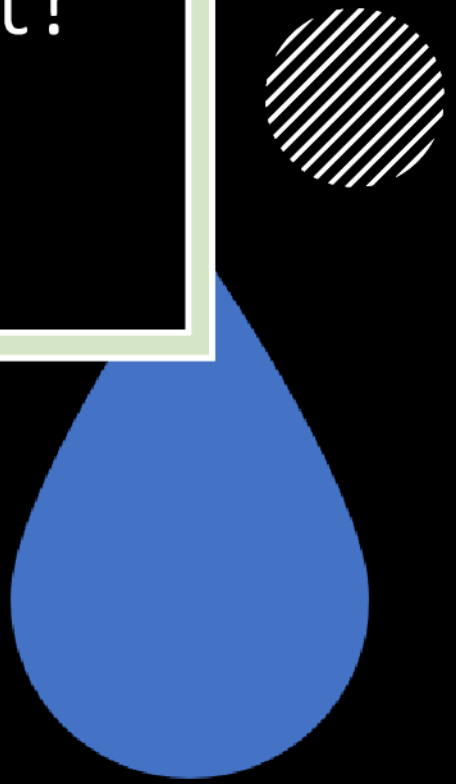
V

SALTER HARRIS



I

Aitäh kuulamast!



Tänusõnad:

Dr. Tatjana Vask

Dr. Annika Sisko