

Images in clinical medicine

A rare case of malignancy of giant cell tumor of distal end radius: a clinical image

 Yukti Jobanputtra,  Deepali Patil

Corresponding author: Yukti Jobanputtra, Department of Physiotherapy, Ravi Nair Physiotherapy College, Datta Meghe Institute of Medical Sciences Sawangi, Wardha, Maharashtra, India. jobanputtrayukti@gmail.com

Received: 29 Nov 2022 - **Accepted:** 17 Feb 2023 - **Published:** 02 Mar 2023

Keywords: Giant cell tumor, X-ray, physiotherapy

Copyright: Yukti Jobanputtra et al. Pan African Medical Journal (ISSN: 1937-8688). This is an Open Access article distributed under the terms of the Creative Commons Attribution International 4.0 License (<https://creativecommons.org/licenses/by/4.0/>), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Cite this article: Yukti Jobanputtra et al. A rare case of malignancy of giant cell tumor of distal end radius: a clinical image. Pan African Medical Journal. 2023;44(116). 10.11604/pamj.2023.44.116.38365

Available online at: <https://www.panafrican-med-journal.com//content/article/44/116/full>

A rare case of malignancy of giant cell tumor of distal end radius: a clinical image

Yukti Jobanputtra^{1,&}, Deepali Patil²

¹Department of Physiotherapy, Ravi Nair Physiotherapy College, Datta Meghe Institute of Medical Sciences Sawangi, Wardha, Maharashtra, India, ²Department of Musculoskeletal Physiotherapy, Ravi Nair Physiotherapy College, Datta Meghe Institute of Medical Sciences Sawangi, Wardha, Maharashtra, India

&Corresponding author

Yukti Jobanputtra, Department of Physiotherapy, Ravi Nair Physiotherapy College, Datta Meghe Institute of Medical Sciences Sawangi, Wardha, Maharashtra, India

Image in medicine

A 56-year-old male patient reported to the orthopaedic department with complaints of swelling and pain in the wrist associated with discharge that makes it difficult for him to perform activities. On examination, he gave a history of aggressive growth of swelling on the wrist for 6 months along with weight loss. On inspection, it revealed a single diffuse swelling over the right wrist of size 46x47 cm circumferentially, extending from mid-forearm to the distal end of the forearm that was globular in shape with ill-defined margins proximally and an ulcer of size 6x4 cm over the swelling. The discharge was purulent, yellow-colored with a foul smell. Over the swelling tortuous veins were visible. On palpation, firm and

cystic areas with increased local temperature and enlarged right, axillary lymph nodes were noted. He had an addiction to tobacco chewing for the past 12 years. Various investigations were performed: fine needle aspiration cytology, magnetic resonance imaging, X-ray of the wrist that suggested a giant cell tumor (A,B). After clinico-radiological and histopathological findings, it was found that it was a malignant type tumor hence limb salvage surgery

could not be considered. Therefore, surgery was planned and stitches are shown (C) for below elbow amputation as shown in the X-ray (D). Post-surgery revealed no complications and was further referred to the physiotherapy department. The primary goal of physiotherapy was to prevent secondary complications, improve and maintain the ranges and strength of the shoulder and elbow along with improvising his quality of life.



Figure 1: X-ray of right wrist showing giant cell tumor: A) anteroposterior view, B) lateral view; C) post-operative X-ray of elbow amputation; D) amputated limb with sutures