# More than "Just a Calf Strain"

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Nadeem Albadawi, D.O., PGY-2 Jay Shah, D.O. Jesse Cheung, M.D. Pomona Valley Hospital Family Medicine Residency Program

## **Case Presentation**

#### Chief Complaint: Right Calf Pain

#### History of Presenting Illness:

- 11 y/o male presents for lateral right calf pain while transitioning from three-point shot to defense
- Persisting pain and limited activity for 2 weeks
- Intermittent and achy
- Near lateral gastrocnemius muscle
- Repetitive jumping with weighted bands

#### **Pertinent Physical Exam**

- Swelling and tenderness along lateral proximal gastrocnemius
- Abnormal muscle strength with resisted plantar flexion
- Unable to perform single-leg hop and duck walk

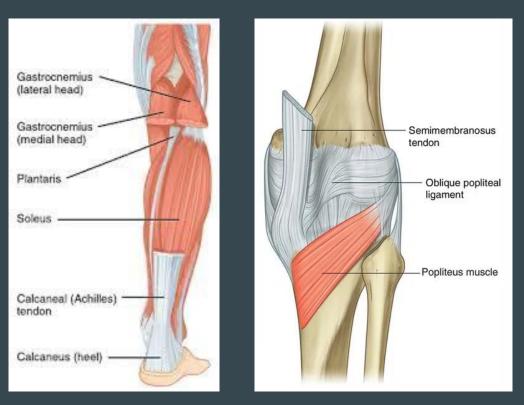
#### Right Tib-Fib 4-View XR 2 weeks s/p injury





# **Differential Diagnoses**

- Gastrocnemius lateral head strain
- Soleus strain
- Popliteus muscle tendinopathy
- Atypical fibular fracture



#### Right Tib-Fib 4-View XR 2 weeks s/p injury

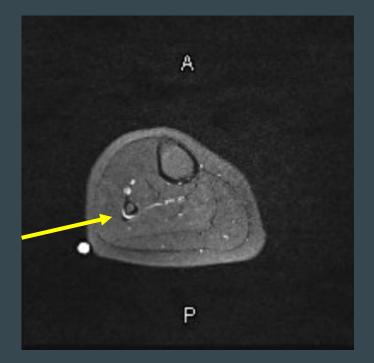
• Subtle periosteal reaction of proximal fibular metaphysis, raising concern for occult fracture





#### **Right LE MRI w/o contrast 1 month s/p injury**

• No acute fracture, dislocation, or bone marrow edema



## Right Tib-Fib 4-View XR 1 month s/p injury

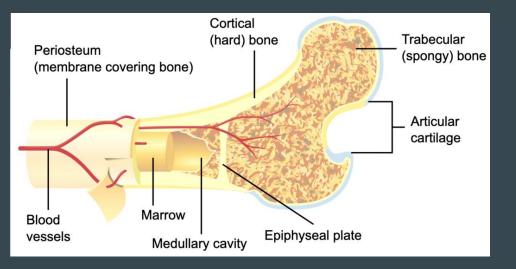
- Stable periosteal new bone formation involving proximal fibular shaft
- No acute bony abnormality





#### **Final Diagnosis and Discussion**

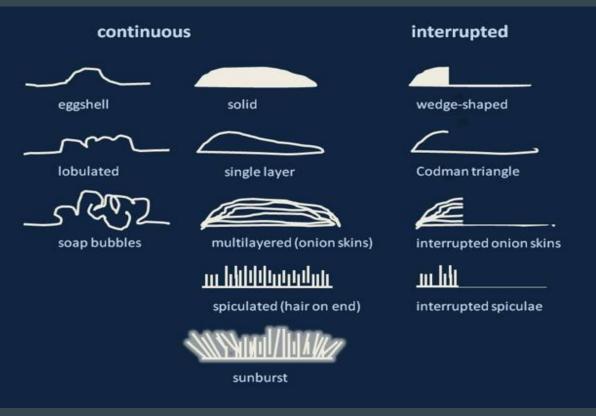
- Diagnosis: Periosteal Reaction of Right Proximal Fibular Shaft
- Definition: New bone formation in reaction to abnormal stimulants
- Etiologies: tumor, infection, trauma, arthritis conditions
- Appearance of periosteal reaction is determined by the type of insult



## **Final Diagnosis and Discussion**

- Periosteum more active in children
- Many various subtypes of periosteal reactions
- Major goal is to recognize presence rather than identifying subtype

#### **Periosteal Reaction: Subtypes**



#### **Treatment and Outcomes**

- 1. Immobilization with right lower extremity splint with transition to tall walking boot over 6 weeks
- 2. Started PT 3 weeks into immobilization
- 3. Gradual progression from range of motion to strengthening
- 4. After 6 weeks, layup drills 2-3 times per week totaling 10-15 minutes
- 5. After 8 weeks, running 5-10 minutes twice a week
- 6. Gradual return to play with initial limitation on jump shots
- 7. Advance as tolerated

#### References

- Periosteal reaction. UW Radiology. (2017, April 18). https://rad.washington.edu/about-us/academic-sections/musculoskeletalradiology/teaching-materials/online-musculoskeletal-radiology-book/periostealreaction/
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