

## Clinical Image

# Tabetic Arthropathy

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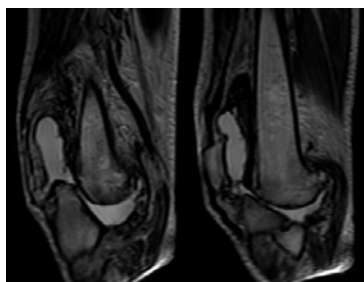
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## Keywords

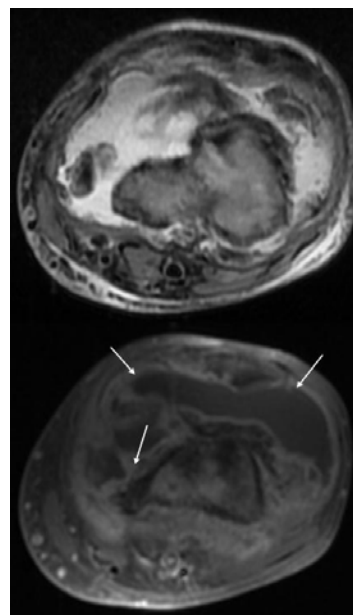
Syphilis; Tabetic arthropathy; Knee joint

## Clinical Image

Tabetic Arthropathy (TA) defines bone- and joint-destructive processes associated with neurosensory deficits due to syphilis infection. It occurs at the late stages of the disease, and affects 10% of patients with Tabes Dorsalis. The mean age at diagnosis is 60 years with a predilection for male patients. TA became less common thanks to the early diagnosis of syphilis infection, but its management remains complicated given the severity of injuries and the lack of specific treatment. TA can affect every joint, mainly the knees. Patients usually present with a single painless and swollen joint. Deformities are seen in advanced stages.



**Figure 1:** Sagittal T2-W MRI images of the knee joint showing intra articular effusion with the destruction of the articular surfaces and the joint ligaments causing dislocation.



**Figure 2:** Axial T2-W and T1-W post contrast FAT SAT MRI images of the knee joint showing effusion with synovium thickening that enhances on post contrast images (synovitis) (white arrows).

Plain radiographs and CT findings include subchondral sclerosis, osteophytosis, subluxation, and soft tissue swelling. MRI shows articular destruction with irregularities of articular surfaces, deformation, and intraarticular effusion. It also helps differentiate neuropathic osteoarthropathy from other articular diseases as infection, osteonecrosis, and psoriatic arthritis (Figure 1 and 2).