

Congenital Genu Recurvatum

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The Case

A term baby girl with a weight of 2.8 kg was born to G2P1L1 mother by normal delivery with an Apgar score of 1/3/3. Baby was diagnosed antenatally as case of left sided diaphragmatic hernia with stomach, gut and liver herniated into the chest with mediastinal shift. Chest X-ray showed severe lung hypoplasia with herniated abdominal contents. At birth baby was diagnosed to have genu recurvatum of left knee joint (Fig 1, 2). The other lower limb was normal. There was no other malformation. Baby succumbed to death with four hours of birth due to severe lung hypoplasia.

Discussion

Congenital dislocation of the knee (CDK) is a rare circumstance with an incidence rate of about 1 per 100,000 live births. It is characterized by congenital hyperextension of the knee and marked restriction of flexion. This deformity is more common in females¹. This condition cause knee instability, pain and be associated with shortening of the limbs^{2,3}. It can be either a congenital or acquired condition. Three cases have been described: an osseous proximal tibial deformity, soft tissues involving capsule-ligamentous structures and events where a combination of the two exists^{4,5}. Early manipulation, combined with splinting and casting is the mainstay of treatment in dislocation. Surgical release of the anterior structures of the knee may be required in patients who present later in life⁶.



Fig 1: Showing left knee joint genu recurvatum. Note the angulation of knee joint in comparison to right knee joint.

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Fig 2: Showing left knee joint genu recurvatum. Note the angulation of knee joint in comparison to right knee joint and fold of skin on the knee joint.

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