

## Carpal Tunnel Syndrome Caused By Peculiar Rice Body Tenosynovitis

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### INTRODUCTION:

Rice body tenosynovitis is an uncommon disorder<sup>1</sup>, first described in 1895 and is frequently associated with rheumatoid arthritis, and inflammatory arthritis caused by tuberculosis and atypical mycobacterium<sup>2</sup>. Rare cases of unknown aetiology have been reported as well.

### CASE REPORT:

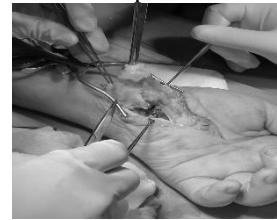
A septuagenarian presented on December 2017, complaining of left volar and dorsal wrist enlarging diffuse swellings over the past 4 years. He has had no significant history in terms of trauma, constitutional symptoms, joint pains, early morning stiffness, contact with tuberculosis or family history of cancer. The swellings measure 12cm by 8 cm over the dorsum of the wrist as well as 8cm by 5 cm across the volar aspect of the wrist joint. They were soft, mobile and neither warm nor tender. He also had swellings over the volar aspect of the proximal phalanges of the thumb, index and little fingers. He also complained of numbness over the median nerve distribution of the volar aspect of the hand. Initial Mantoux test and inflammatory markers were unremarkable. MRI revealed chronic tenosynovitis involving the superficial flexor tendons. He underwent carpal tunnel release and synovectomy on 25<sup>th</sup> Jan 2018 which revealed shiny rice bodies encased in tendon sheaths and extensive synovial proliferation. The tissue was sent for histopathological examination and a repeat Mantoux test was done in the ward. The Mantoux test repeated on 29/1/17 was 19mm, indicating a possibility of a TB infection. Cultures were negative. TB PCR was negative.



Left to Right :

A : Dorsal aspect of the swelling

B: Volar aspect



Rice body being excised

### DISCUSSIONS:

Tuberculous tenosynovitis with rice bodies of the hand and wrist is a rare form of extrapulmonary manifestation of tuberculosis<sup>3</sup>. Rice bodies in MRI usually demonstrates intermediate to low signal intensity on T1-weighted images and predominantly high signal intensity on T2 weighted images.<sup>4</sup>



From left to right

1. X ray indicating radioscapheoid erosion
2. T1 images rice bodies are hypointense
3. T2 images rice bodies are hyperintense

### CONCLUSION:

Although rare, rice body tenosynovitis of the wrist has to raise the suspicion of a tuberculous infection<sup>5</sup>, so that early synovectomy and anti-tuberculosis treatment can be initiated.

### REFERENCES :

1. Muirhead DE, Johnson EH, Luis C. A light and ultrastructural study of rice bodies recovered

ABSTRACT TRUNCATED