

**PP-049****Atypical location of bizarre parosteal osteochondromatous proliferation**F. Fernández Serrano, **M.A. Godoy Montijano**, D.M. Pérez Romero*Hospital Virgen de las Nieves, Granada, Spain*

**Introduction:** Bizarre parosteal osteochondromatous proliferation (Nora's Disease) is considered a rare pathology. It occurs in adults in their 20's and 30's and males are slightly more affected. It is most common in the hands followed by feet, long bones (commonly of the upper extremity), skull, jaw, and others. Clinical symptoms are variable, it can be asymptomatic and showed up as an incidental finding, or it can be very painful. Mass sensation varies according to location. The classical treatment was wide resection, but, as it may recur locally in as many as 50% after surgery, at present the trend is "watch and wait" attitude and follow up, except in symptomatic cases. The diagnosis can be difficult, and sometimes it is required not only the imaging, but also biopsy and histopathological analysis. Differential diagnosis must include osteochondroma, periosteal chondroma, and even parosteal osteosarcoma.

**Methods:** We present some cases of Nora's disease in rare locations, different than the usual ones. Two of them had an initial diagnosis of parosteal osteosarcoma following simple radiology, CT and MRI. Histopathological analysis after biopsy led to the definitive diagnosis. We present the imaging studies and histopathological findings.

**Results:** CT guided biopsy was performed in the two cases with image diagnosis of osteosarcoma (distal radius and distal femur). Histological diagnosis was finally Bizarre parosteal osteochondromatous proliferation. Surgical treatment was performed in one of the cases (wide resection), and we report the outcome after one year of follow up. The one in the femoral location was asymptomatic, so we decided to watch and wait, and at the moment the patient is stable.

**Conclusion:** Bizarre parosteal osteochondromatous proliferation is a disease to keep in mind because in spite of its rarity it may show up in our daily practice. It is important to make an accurate diagnosis. Differential diagnosis may include parosteal osteosarcoma, so sometimes the biopsy must be performed. The current treatment is wide surgery in symptomatic patients and following up in the asymptomatic ones.