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## Osteochondroma originating from sacroiliac joint: a rare localization

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**Introduction:** Osteochondroma is the most common primary benign bone tumor and it usually develops at the metaphysis of long bones. Pelvic and vertebral bones are very rare locations for osteochondroma .To our knowledge, en bloc excision of a solitary osteochondroma of the iliac bone has not been previously reported. We planned to present a case of osteochondroma located in right sacroiliac joint who was treated surgically.

**Case:** 16-year-old female patient refered to our clinic with the complaints of pain and tenderness in her right sacroiliac region. Her complaints started 6 months ago and increased during the last 2 months. MRI and BT imaging showed a right sacroiliac mass protruding into sacroiliac joint from the right iliac bone at the level of S2 vertebra: osteochondroma? Excisional biopsy is planned for diagnostic puposes, pain relief and the local tumor control.

Under general anesthesia, the patient placed in prone position. By using an incision parallel to the posterior margin of iliac spine, the posterior border of the iliac bone adjacent to S2 vertebra was exposed. Right iliac bone drilized to create multiple holes to make a safe osteotomy. A portion of right iliac crest was removed to improve the visulation and also to resect the lesion from the inner side of the bone. The tumor was removed en bloc through the use of osteotomes and roungeurs. The degenerative region of the sacrum is also currated. The iliac bone was repositioned and fixed by 2 cannulated screws. There were no intraoperative and postoperative complications. Microscopic evaluation of tumor confirmed the diagnosis of an osteochondroma. There was no evidence of malignancy. The patient's pain, tenderness and disability complaints resolved following the surgery. 14 months later she remained asymptomatic without evidence of sacroiliac instability or limitation in her lower extremity function.

**Conclusion:** Güner et al.<sup>[1]</sup> reported an video assisted endoscopic anterior sacroiliac fusion case due to the osteochondroma lesion. To the best of our knowledge this is the second case of sacroiliac joint lesion diagnosed osteochondroma and the first case which the lesion was en bloc resected using a posterior exposure by a safe osteotomy technique.

## **References:**

<sup>1</sup> Güner G, Gürer S, Elmali N, Ertem K. Anterior sacroiliac fusion: a new video-assisted endoscopic technique. Surg Laparosc Endosc. 1998 Jun;8(3):233-6.