A 50 year old generally healthy man presented with swelling of his left thigh. He reported sustaining minor trauma to the left knee that caused swelling of the knee joint one month earlier. Treatment consisted of repeated arthrocentesis and a steroid injection to the joint. After initial relief, the swelling returned, followed by gradual limitation of knee movement, which was suddenly relieved after unintentional forceful flexion of the knee one week before admission. He described feeling a “warm current” through the thigh immediately afterwards. On examination, the thigh and knee joint were swollen and tender, with mild erythema. Aspiration of the joint yielded turbid fluid containing gram-positive cocci (Staphylococcus aureus). Knee and thigh computerized tomography [Figures 1-3] demonstrated giant abscesses: fluid surrounding the femur and extending to the lesser trochanter, continuous with the suprapatellar pouch of the joint. Surgical drainage was performed through the patellar pouch with thorough irrigation of the patellar joint. Complete evacuation of the infected fluid from the thigh was seen on a postoperative CT scan.

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Giant Femoral Abscesses due to Suprapatellar Pouch Perforation

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Figures 1 and 2. Coronal view showing infected myositis with lobulated abscesses in quadriceps muscle.

Figure 3. Sagittal view showing patellar bone erosion and fluid in the femoro-patellar joint.

Hatred – the anger of the weak
Alphonse Daudet (1840-97), French novelist and rabidly right-wing journalist