Traumatic Dislocation of the Posterior Tibialis Tendon: A Case Report

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Abstract

- 19-year-old male; Division 1 football player; during practice was hit on the medial side of his knee, but foot stayed planted and was forced into dorsiflexion and evasion; a pop was heard; reported to sideline and was in obvious pain
- Diagnosis and Treatment
  - Treatment options were discussed with surgical reconstruction strongly encouraged.
- Reference to surgical reconstruction to relocate the tibialis posterior tendon, repair the torn flexor retinaculum, and to deepen the posterior tibial groove.

Background

- Differential Diagnosis includes: medial ankle sprain, or high ankle sprain, tendinosis, and subtalar fracture.
- Treatment: The athlete was placed in a walking cam-boot with crutches and non-weight bearing (NWB) status.
- Outcome: 1-week post-repair: athlete in cam-boot and NWB; PROM DF/PF

Differential Diagnosis

- Syndromic Ankle Sprain
- Tendinosis
- Subtalar dislocation

Uniqueness

- Dislocations of the tibialis posterior tendon are extremely rare and have few documented/reported cases
- Maritius described the first case in the year 1874.
- There have only been 32 other cases reported in the literature since 1874-2006.
- Up until the year 2011 there were fewer than 40 reported cases in the English literature.
- Tendon dislocations on the medial side of the ankle are very rare when compared to the dislocation of the peroneal tendons on the lateral aspect of the ankle.
- Surgical reconstruction treatment is the best plan of action for the athlete to fully return to activity.

Clinical Significance

- Thorough evaluation is important when evaluating an injury to the medial side of the ankle so proper diagnosis and care can be administered.
- This case study shows the importance of surgical reconstruction should be the chosen treatment method. Also, shows the positive outcome from surgical treatment.

References