

The exact cause is not known (idiopathic). Some researchers have speculated that multiple microtrauma to the anterior chest wall may cause the development of Tietze syndrome. Sometimes, the development of the disorder may be preceded by chronic, excessive coughing, vomiting, trauma or impact to the chest, viral or bacterial infections, or surgery to the thoracic area. Tietze syndrome usually affects older children and young adults. Most cases occur before the age of 40, most often during the second or third decade of life. Although rare, Tietze syndrome has been reported in infants, children or the elderly. Males and females are affected in equal numbers. The exact incidence or prevalence of the disorder is unknown. A diagnosis of Tietze syndrome is made based upon a thorough clinical evaluation, a detailed patient history, identification of characteristic symptoms, and exclusion of other causes of chest pain. A variety of tests including electrocardiogram, x-rays, and biopsies may be performed to rule out more serious causes of chest pain including cardiovascular disorders or malignant conditions. Magnetic resonance imaging (MRI) can show thickening and enlargement of affected cartilage.