

Crystal-related

Gouty Arthritis

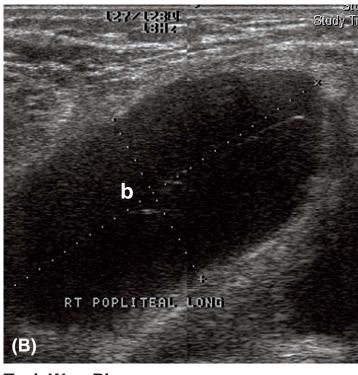
Right knee(A), popliteal fossa(B)

Longitudinal scan

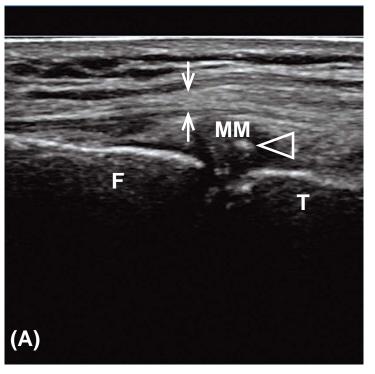
Marked synovial proliferation (#) within distended suprapatella pouch; Baker's cyst(b) formation

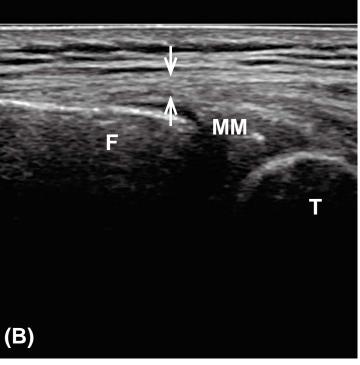
FR = femur

* = effusion



Tsai, Wen-Pin Aloka 5500





Crystal-related

Chondrocalcinosis

Longitudinal scan of medial aspect of extended (A) and mild-flexed tibiaferoral joint (B).

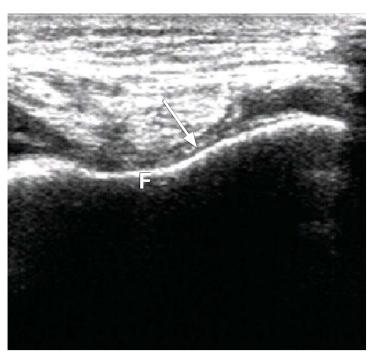
- (A) Note a tiny hyperechoic lesion (open arrow-head) without acoustic shadow within the triangular anterior horn of medial meniscus (MM).
- (B) The echogenecity of medial longitudinal ligment (arrows) increased while the mildly flexed.

F = femur

T = tibia

Chen, Hsin-Hua

Grey scale US using a Philip iU22 with a volumetric probe (4D, 5-13MHz)

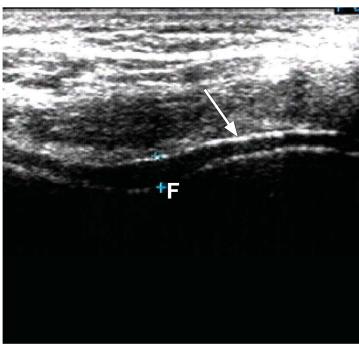


CPPD Tranverse scan of suprapatella

Crystal-related

calcium pyrophosphate crystals are layered in the centre of articular cartilage(arrow) F = femur

Chang, Chi-Ching Grey scale US using a Taitan 180



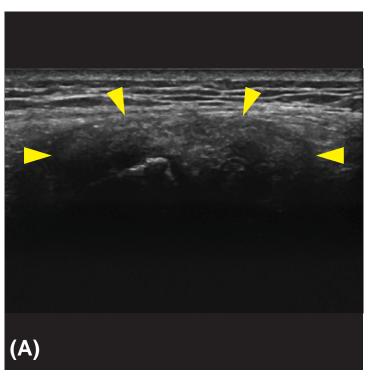
Crystal-related Gout

Tranverse scan of suprapatella

monosodium urate crystals on the surface of articular cartilage (arrow), double contur sigh F = femur

Chang, Chi-Ching

Grey scale US using a Envisor (Philips, the Netherland) with a multi-frequency linear transducer (7~12 MHz)



Crystal-related **Tophi**

Longitudinal scan of left knee lateral side

Tophi. (A) Longitudinal US scan showed an echoic mass (arrowheads) with acoustic shadow at lateral femoral condyle (B) MRI (T1 weighted image) showed a hyposignal mass (*) with invading to lateral femoral condyle.



Lai, Kuo-Lung Gray scale US using a GE E9 (General Electrics) with a linear probe (15MHz)