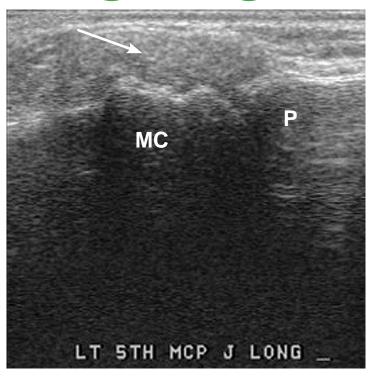
# Hand



# Crystal-related

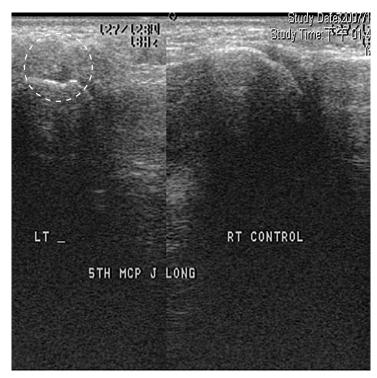
### **Tophaceous Gout**

Dorsal longitudinal scan of Left 5<sup>th</sup> MCP joint

Tophi(arrow) deposition adjacent to MCP joint.

MC = metacarpal

P = phalange



Tsai, Wen-Pin Aloka 5500

Tophi deposition adjacent to MCP joint.

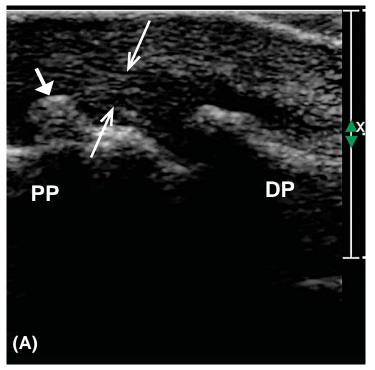
MC = metacarpal

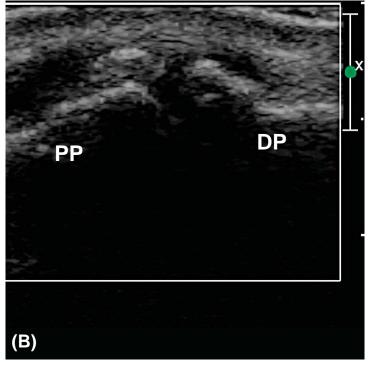
P = phalange

LT = abnormal

RT = normal

# Shoulder Elbow Wrist Hand Hip Knee Ankle Foot Others





## Crystal-related

### **Limited PSS**

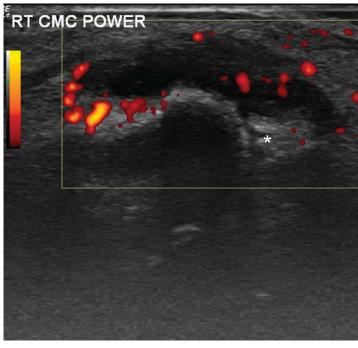
Dorsal longitudinal scan of distended PIP joint (A) and **Power Doppler US of mild** flexed PIP joint (B).

- (A) Note a hyperechoic lesion with acoustic shadow in the deep part of extensor tendon (arrows).
- (B) Note the hyperechoic lesion moves with the tendon when the PIP mild flexed. PDUS shows no Doppler signals in the tendon and joint cavity. The above findings suggest a calcified lesion in the extensor tendon, which might be related to PSS.

PP = proximal phalanx DP = distal phalanx

Chen, Hsin-Hua

Grey scale and power Doppler US using a Philip iU22 with a umetric probe (4D, 5-13MHz)



### Crystal-related **Gouty Arthritis**

### Transverse dorsal scan of **Carpometocarpal joint**

Gouty arthritis, CMC joint. Extensive fluid collection with high vascularity. Some hyperechoic spots(\*) were suspected to be tophi. Fluid analysis revealed MSU crystals.

Kuo, Chang-Fu

Grey scale US using a Logiq 9 (General Electrics Medical Systems, Milwaukee, WI) with a volumetric probe (4D16L), with power doppler