The Edematous Toe

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Class of 2006
NYCPM
Case Presentation

53 y/o male presented to Metropolitan Hospital for c/c of painful and swollen 1\textsuperscript{st} and 4\textsuperscript{th} toe R foot.

Pt. states h/o dropping a metal object on foot ~ 5 months ago.

Pt. did not seek medical treatment at that time.

Pt. is concerned with the appearance of the toe nail and the size of the toes.
PMH

- Hep C
- HIV +
Physical Exam

Vascular status intact:
- DP: 2/4 B/L
- PT: 2/4 B/L
- CFT: 1 sec x 10 digits x 10
- TG: WNL B/L
Physical Exam

**Neuro**

- Vibratory intact B/L
- Protective Sensation with SWM 5.07:
  - 9/10 R
  - 6/10 L
Physical Exam

- **Ortho**
  - Pain on palpation of hallux and 4th digit R foot
Physical Exam

Derm:

- + moderate soft tissue swelling to hallux and 4th digit
- + erythema
- No drainage or open lesion
- Nails to affected toes are dystrophic, thickened and discolored
Plan

- Fluoroscopy ordered
- X-rays ordered
- CBC ordered
- Comprehensive metabolic profile ordered
- CRP ordered
- Daily Coban wrapping
- Biopsy of hallux and 4th digit R foot scheduled
Fluoroscopy R foot

- No fx./dislocation of the R foot noted
- + soft tissue swelling noted
Fluoroscope
C-Reactive Protein

- Negative
  - To r/o infectious process
Comprehensive Metabolic Panel

- AST: 133 (11 - 39)
- ALT: 70 (11 - 35)
- Alk P: 87 (25 - 100)
- T Bil: 1.8 (0.2 - 1.3)
- Prot: 8.5 (6.3 - 8.2)
- Alb: 4.4 (3.7 – 5.1)
- Na: 135 (137 - 147)
- K: 4.0 (3.6 – 5.2)
- Cl: 96 (99 – 112)
- CO2: 33 (23 – 32)
- BUN: 12 (1 – 22)
- Creat: 0.7 (0.1 – 1.4)
- Glu: 74 (70 – 118)
- Ca: 9.1 (8.8 – 10.5)
- Calc Osmo: 268
Radiographs
Radiographs
Radiographs
Radiographs
Diagnosis

Problem!!!

- Pt. was never cleared for surgical biopsy therefore the Dx. Remains a mystery
Differential Diagnosis

Possibilities

Boney:

- Benign tumors
  - Enchondroma
  - Osteochondroma
  - Giant Cell Tumor
  - Glomus Tumors
  - Osteoid Osteoma
  - Osteoblastoma

Malignant tumors

- Ewing’s Sarcoma
- Osteosarcoma
Differential Diagnosis

Possibilities

- Soft Tissue
  - Synovial Sarcoma
  - Kaposi Sarcoma
  - Non-Hodgkin lymphoma
Differential Diagnosis

Possibilities

- Mimics soft tissue tumors
  - Gout
  - Pigmented villonodular synovitis (PVNS)
Conclusion

- There is no definitive diagnosis
- Road blocks that you will encounter while in the clinic
- Lose patients to follow-up
- Ultimately fail to help treat patient
Thank You

- Dr. Thomas DeLauro, DPM
- Dr. Mark Mandato, DPM