





Osteoarticular changes in Wilson's Disease

Dr Sameer Desai

Paediatric Orthopaedic Surgeon MS. DNB, MRCS (UK) Fellowship (Australia. Korea) Consultant Orthopaedic Surgeon-KEM Hospital

Clinical presentation

- Neurological-25-69%
- Hepatic-14-50%
- Psychiatric-2%
- Osseomuscular-2-25%

Causes of changes in bone

- Copper overloading
- Renal tubular dysfunction
- Chronic spasticity and tremor
- Liver failure
- Osteoporosis due to calcium and phosphorus loss
- Penicillamine induced joint pains and myasthenia

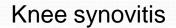
Symptoms

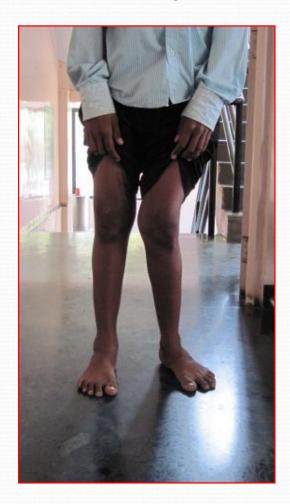
Incidence-2-25%

- Bone pain
- Joint swelling
- Rickets (calcium deficiency) like features
- Bow legs or knock knees

Joints involved-Knee

Genu valgus







'8' Plate for hemi-epiphsiodesis

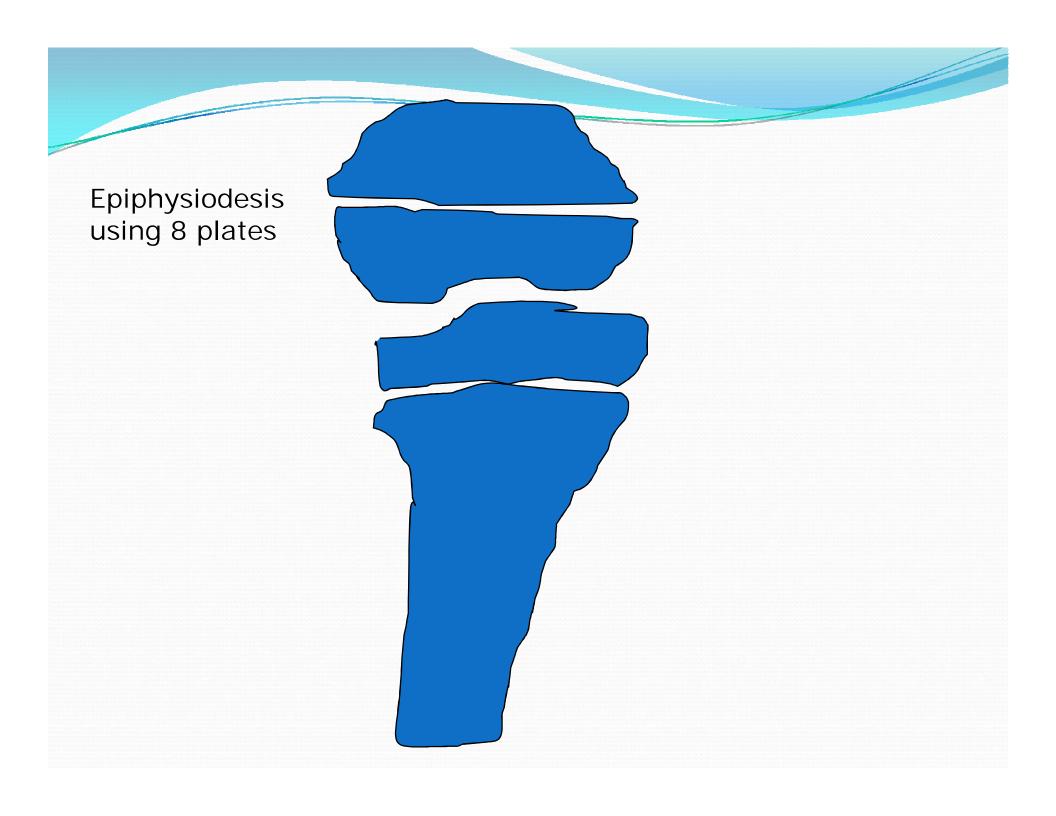
Pre operative

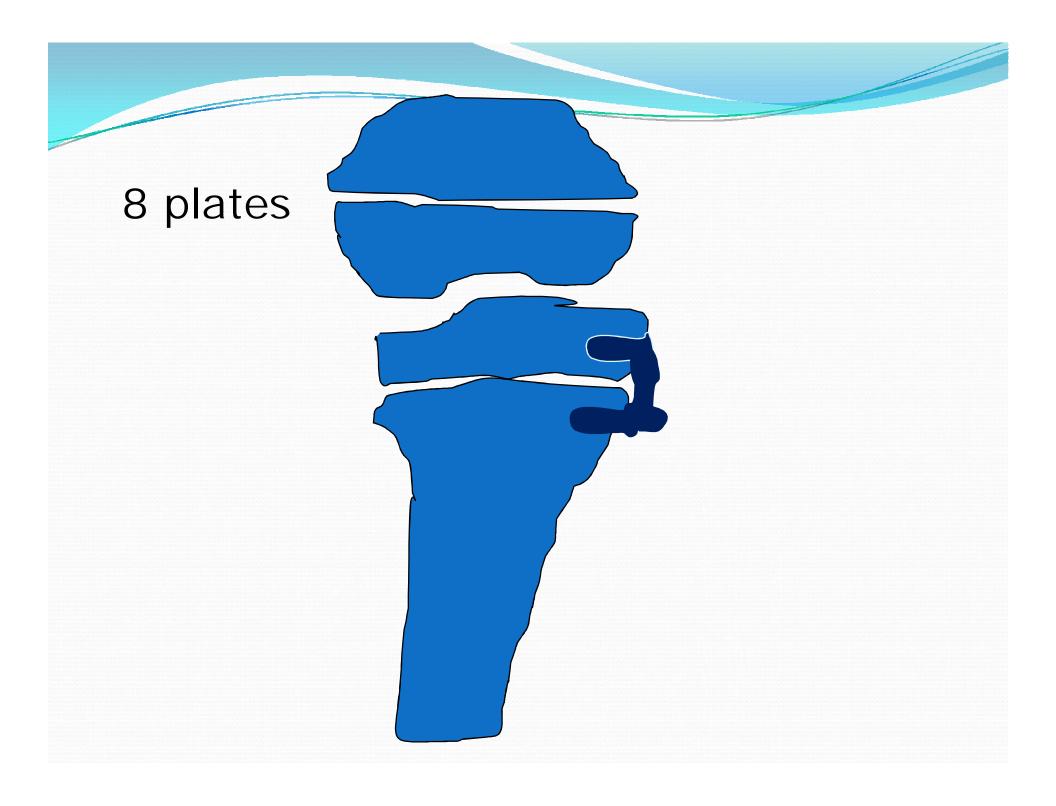


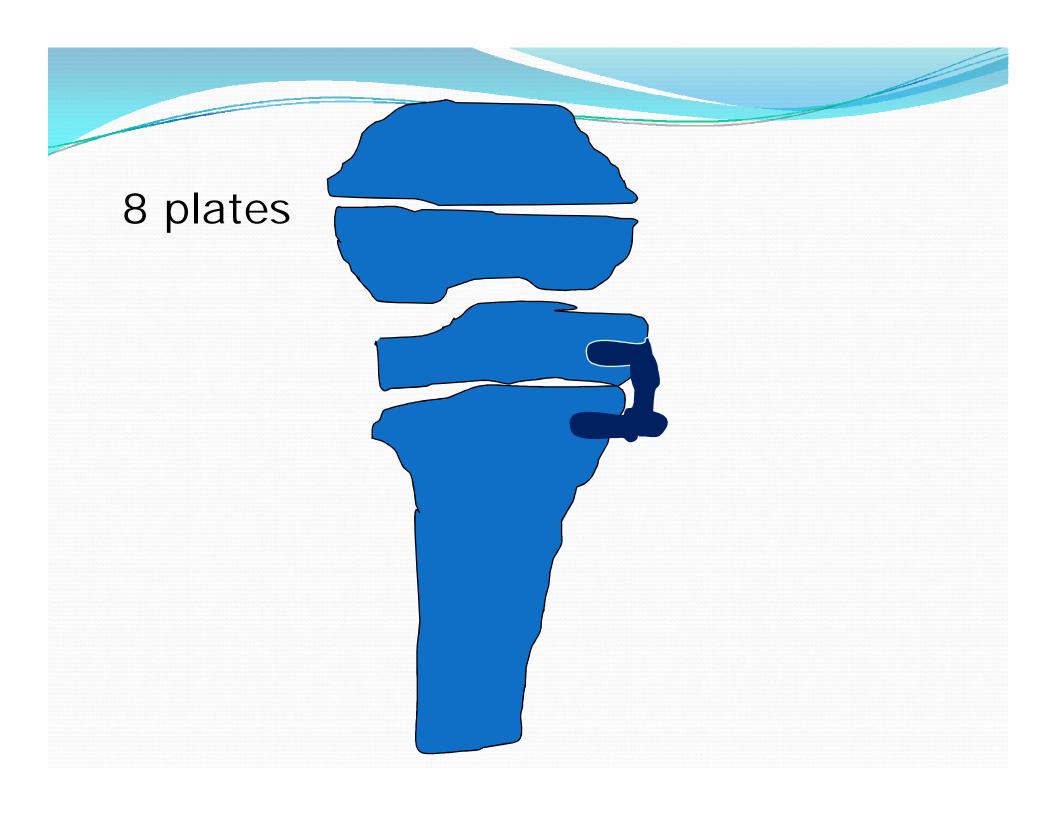


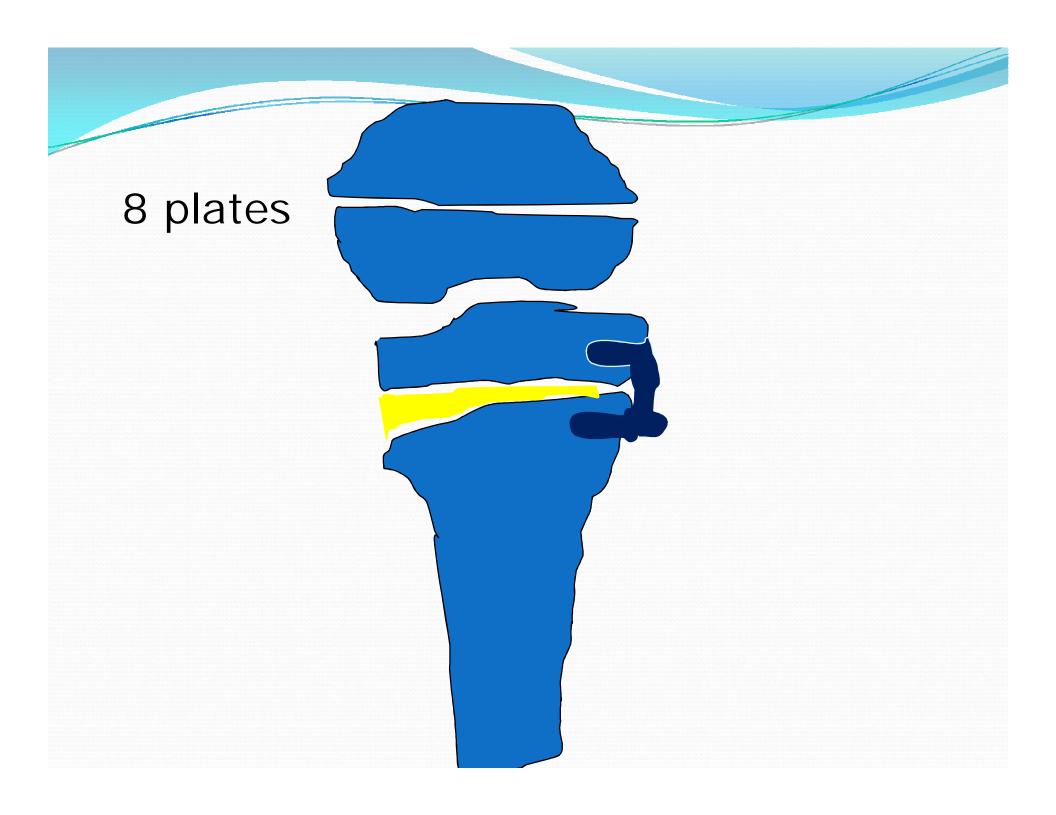
Post Operative





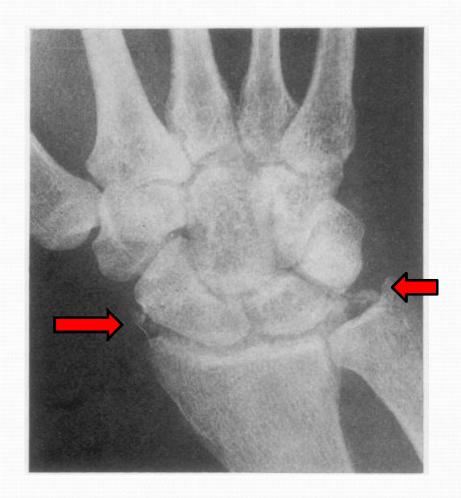




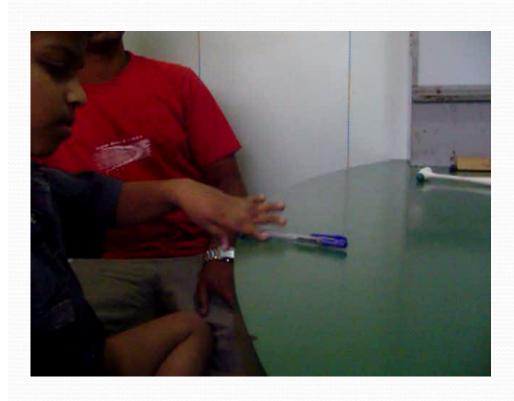


Hand





Tendon transfer or Botox





Radiology

- Osteoporosis
- Bone fragmentation
- Osteoarthritis
- Chondromalacia patellae
- Subchondral bone fragments
- Fractures

Bone Density

23% had osteopenia

67% had osteoporosis

Prevention

- Early diagnosis
- Maintaining good control
- Preventing liver and kidney failure
- Watching for features of rickets(calcium deficiency)
- Prophylactic Vit D and Calcium

Questions

