

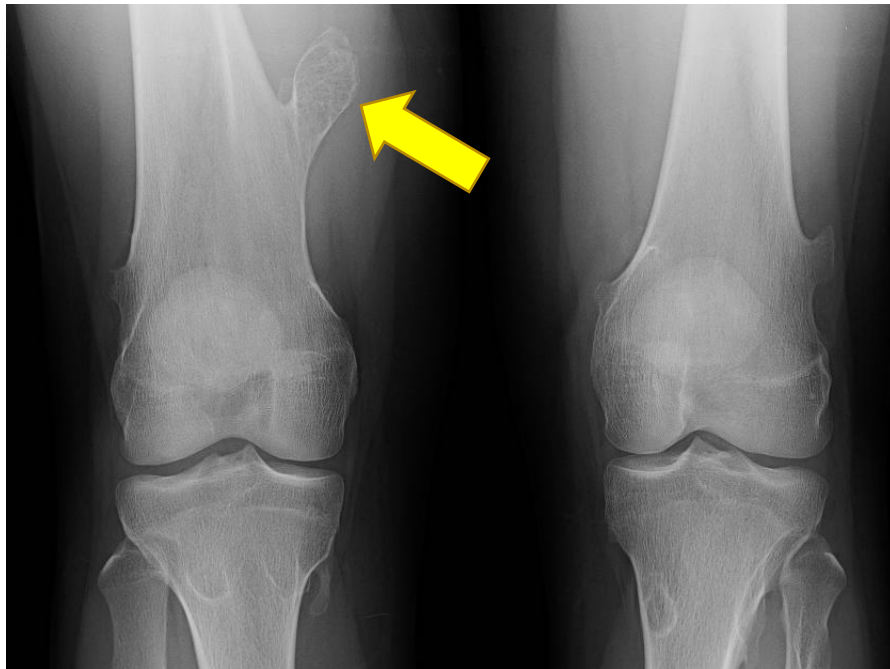
**STEVEN CHUDIK MD**  

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**SHOULDER, KNEE & SPORTS MEDICINE**

## **Osteochondroma of the Knee and Leg**

An osteochondroma is a formation of extra bone and cartilage that can develop in various parts of the body. In the knee/leg, it most commonly occurs around the femur, but can develop in any metaphysis of long bones. This non-cancerous tumor is often asymptomatic, or it may cause pain and discomfort as the surrounding muscle and soft tissue may catch or rub during activity.



X-ray of multiple osteochondromas with most significant originating from the medial femur

### **Frequent Signs and Symptoms**

Often there is no pain with this condition and it is detected when x-rays are taken for other reasons. Other times, symptoms can include the following:

- Tenderness over the osteochondroma
- Knee pain with motion
- Visible or palpable lump under the skin
- Occasionally numbness and tingling
- “Snapping” sensation as muscle tendons move over the osteochondroma
- Pain with swelling if the Osteochondroma has fractured



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### Etiology (Causes)

The osteochondroma tends to form near growth plates in the younger population and can grow as the patient's bones grow.

### Risk Factors

- Genetic inheritance

### Outcomes

Many osteochondromas do not cause pain or functional problems and do not require treatment. In the forearm and lower leg where there are two bones adjacent (next) to each other, growth of an osteochondroma can push the bones apart causing deformity and negatively impacting the articulation and function of joints near the ends of the bones. In these cases, the patients can be monitored with interval x-rays to track growth and prophylactic surgical removal of the osteochondroma can be performed to prevent deformity. Symptomatic or problematic osteochondromas can be surgically removed with a simple outpatient procedure.

### Potential Risks and Complications

- Osteochondromas occurring in other locations
- Damage to nerves, vessels, or muscle tissues due to pressure or impingement from the benign growth
- Risks of surgery include infection, bleeding, injury to nerves and joint stiffness
- In rare cases, the growth can convert to a chondrosarcoma
- Growth of the osteochondroma can push on adjacent structures or bones and cause painful deformity

### Treatment Considerations

Initial treatment consists of medications and ice to relieve pain and discomfort. Patients can also avoid aggravating activities. However, for patients that are at risk for nerve or vascular damage, distortion of bone position, or have symptoms due to the growth's prominence, surgery is indicated to remove the osteochondroma.

### Possible Medications

- Nonsteroidal anti-inflammatory medications, such as aspirin and ibuprofen (DO NOT take within seven days before surgery), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed by your physician. Contact your physician immediately if any bleeding, stomach upset, or signs of an allergic reaction occur.
- Pain relievers are usually not prescribed for this condition, although your physician may prescribe these following surgeries. Use only as directed and only as much as you need.



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- Cortisone injections into the bursa may be administered to reduce inflammation, although this is not usually recommended

**Modalities (Cold Therapy)**

Cold is used to relieve pain and reduce inflammation. Cold should be applied for 10 to 15 minutes every two to three hours for inflammation and pain and immediately after any activity that aggravates your symptoms. Use ice packs or an ice massage with a cloth between the ice and your skin to prevent burning /freezing your skin.

**Notify My Office If Symptoms Worsen**



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