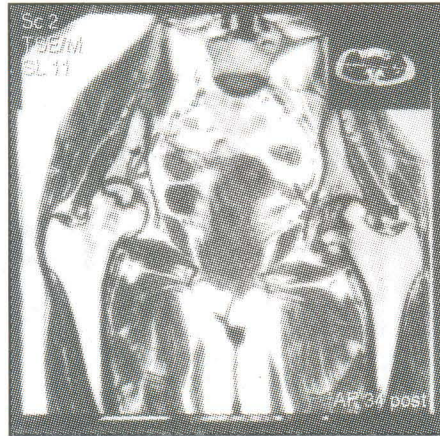


Bilateral Avascular Necrosis of Head of Femur

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**T₂ weight image showing bilateral femoral head necrosis
(Grade III left hip joint and Grade II right hip joint)**

This is a MRI-scan of the hip joints of a 38 year old female diagnosed as SLE 10 years back and has been on steroids. She suffered from avascular necrosis of both hip joints 2 years back for which bilateral core decompression was done. She presented to us with arthralgias, photosensitivity, pain and limitation of movements of left hip joint. Bilateral avascular necrosis could be due to disease process, associated antiphospholipid antibody syndrome or due to addition of steroids, as it has been seen that probability of having bilateral necrosis of hip joint is 34% when steroids are taken in a daily dose of 10-20 mg. Test for antiphospholipid antibodies was negative. Keeping in view this consideration, steroids were tapered & stopped and patient was started on antimalarial (Hydroquine), NSAID's and alendronate and was advised a regular follow up. With a follow up of 6 months, she is free of arthralgias, photosensitivity and there is no pain in the hip joints, however, limitation of movements of left hip joint is persisting. In addition to core decompression and medical therapy, other modalities offered for the management of avascular necrosis of head of femur are partial and total hip replacement.

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