



LETTERS TO THE EDITOR

Is magnetic resonance imaging really necessary for evaluating poor patellar alignment? The Peruvian experience[☆]



¿Es la resonancia magnética realmente necesaria para la evaluación del mal alineamiento patelar? La experiencia peruana

Dear Sir,

In relation to the article entitled "Usefulness of magnetic resonance imaging for evaluating patellar malalignment" (*Utilidad de la resonancia magnética en la evaluación del mal alineamiento patelar*), published by Figueroa et al. in REVISTA ESPAÑOLA DE CIRUGÍA ORTOPÉDICA Y TRAUMATOLOGÍA in January 2014,¹ we consider that, although magnetic resonance is an ideal method for the diagnosis of this type of disease, in Latin American countries it is not yet available for the majority of the population due to its high cost. Based on our experience at Hospital Edgardo Rebagliati Martins in Lima, Peru, where we belong to the knee unit attending the highest number of patients with this disease at a national level, we still believe that physical examination based on an adequate knowledge of knee biomechanics and radiographic studies in frontal, lateral and axial planes of the patella, along with multi-section spiral tomography, as in other locations,² will enable us to adopt the most adequate therapeutic decisions, which will be reflected in a positive result for many of our patients.

Cost is a key variable in the selection of diagnostic and treatment methods. Therefore, we must compare the relative cost of each of them in an environment like ours. A magnetic resonance imaging scan in Lima is 17 times more costly than a radiograph and nearly 3 times than a

computed tomography. Thus, deferring its use in specific cases will enable us to optimize our resources.

Although it is true that without magnetic resonance we cannot specify the presence of osteochondral lesions which are usually present in these patients and require surgical treatment, we can establish a diagnosis of patellofemoral malalignment and provide an initial non-surgical treatment as recommended by Rhee et al.² and Tscoll et al.³ This treatment continues to be indicated for acute and recurrent cases, so the overall cost of treatment of this disease will tend to decrease, making the use of resources more efficient. This will be especially true if said resources are already scarce in the various healthcare systems, particularly the public.

References

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