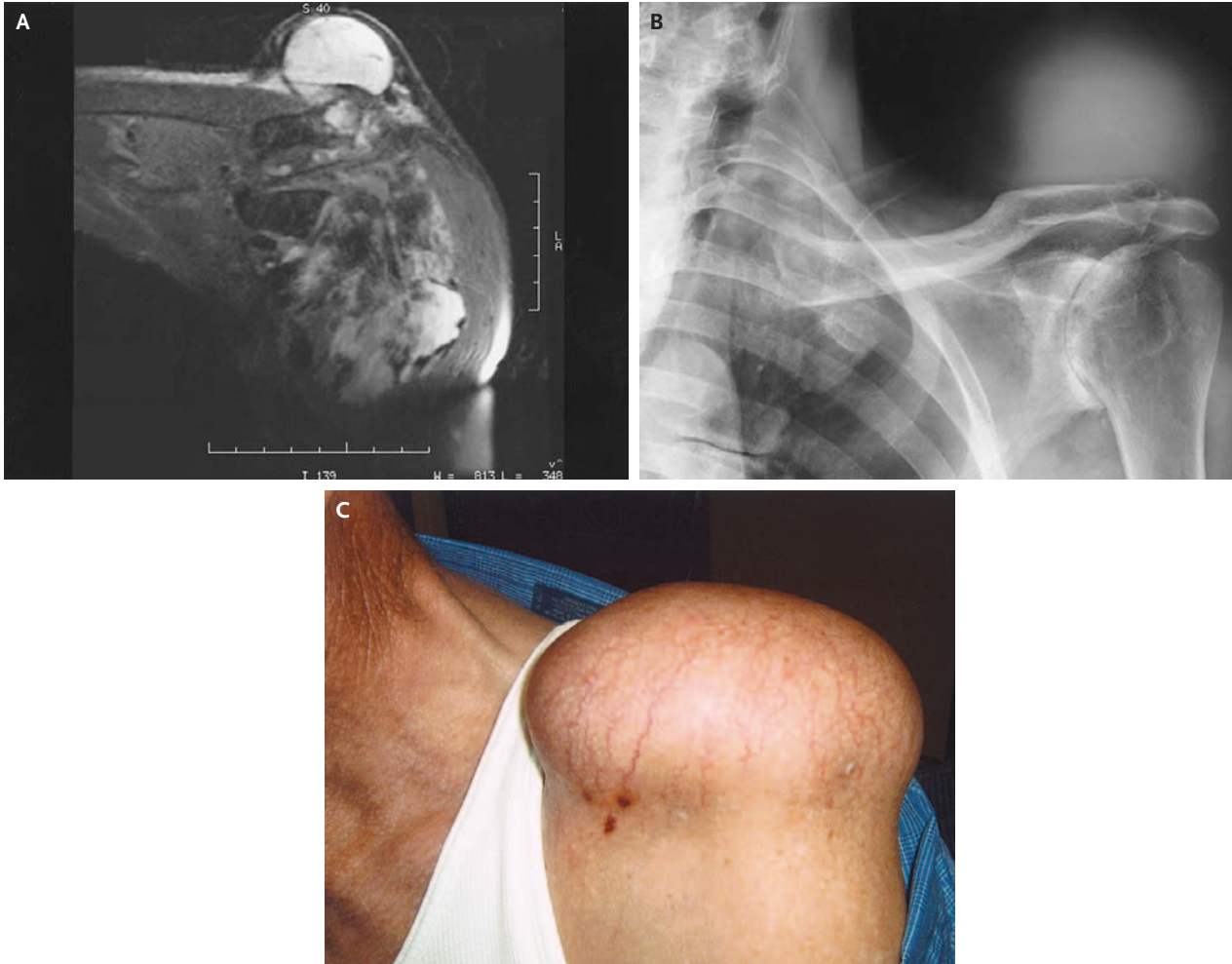


## IMAGES IN CLINICAL MEDICINE

## Rotator-Cuff Tear



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**A** 72-YEAR-OLD MAN WITH ADVANCED GLENOHUMERAL AND ACROMIOCLAVICULAR arthritis presented with a painless mass over his left shoulder that had become progressively larger over a period of about a year (Panel A). His history was significant for childhood poliomyelitis, and he had been using crutches for more than 50 years. The initial radiograph of his left shoulder revealed advanced osteoarthritis of the glenohumeral and acromioclavicular joint (Panel B). Magnetic resonance imaging revealed a large synovial cyst over his left shoulder (Panel C). The cyst was aspirated and injected with methylprednisolone. The fluid culture was negative for aerobic bacteria. Examination by polarized light microscopy was negative for crystals. The cyst re-grew within a week. At follow-up one year later, the cyst was unchanged. Since the patient had no pain or restriction of the movement of his left shoulder, no further therapy was given. This cyst over the left shoulder was due to joint fluid that tracked from the glenohumeral joint, through a rotator-cuff tear, and into the acromioclavicular joint, where it formed a cyst above the joint.

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