Intramuscular Hemangioma of Flexor Digitorum Brevis Muscle

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An 8-yr-old girl was referred to the authors’ outpatient clinic with a palpable painful mass in the medial plantar surface of her right foot. The pain had started 1 yr before and was not associated with any major trauma. Initially, the patient had no swelling, but there later developed a painful mass. Her pain and swelling increased with standing and walking and were relieved by rest. She went to several different specialists who had suggested a variety of different treatments such as nonsteroidal anti-inflammatory drugs, insoles, and ankle support for diagnoses such as plantar fasciitis, pes planus, and tendinitis. Upon admission into our clinic, there was a prominent painful mass on her right sole; the mass was soft, tender on palpation, and nonmobile. No other pathological finding was noticed. No bony abnormalities were present in the patient’s existing x-rays of the foot and ankle. A magnetic resonance imaging of the foot was therefore performed, which demonstrated a 4.1 × 1.7 × 1.1 cm intramuscular hemangioma of the flexor digitorum brevis muscle (Fig. 1). The lesion was removed surgically, and postoperative histological examination of the lesion confirmed the diagnosis.

Intramuscular hemangiomas are benign soft-tissue tumors which represent less than 1% of all hemangiomas. Although intramuscular hemangiomas are commonly found in the lower limbs, especially in the thigh, foot involvement is extremely rare, and only a few cases have been reported.1-3 They are mostly seen in young adults and are usually present with pain and/or swelling.1,2 Direct radiography may not give any evidence, and the correct diagnosis may be delayed until the patient presents with soft-tissue swelling. The diagnosis is mainly based on clinical examination and magnetic resonance imaging and confirmed through histological examination.1,2 Even though intramuscular hemangiomas are very rare in the foot, they may need to be considered in a differential diagnosis.

REFERENCES