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What was the patient's occupation?

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The CT scan shows characteristic but uncommon lesions, which are the results of almost 50 years of exposure.

A 55 year-old woman was suffering from pains in the feet. X-rays and the CT scan (saggital CT scan reconstruction of the left foot) showed a bilateral flatfoot and a localized degenerative lesion of the tarsometatarsal joint. The joint between the medial cuneiform and the first metatarsal bone was particularly affected, so was the joint between the intermediate cuneiform and the second metatarsal bone.

Forty-nine years of dancing including 34 years as a professional dancer then as a teacher potentially caused the unusual localized osteoarthritis of the tarsometatarsal joint (1), or at least it accelerated the degenerative process.(2;3) One may suppose that repetitive or neglected microtraumatisms, especially when dancing on points,(4) led directly to the disorder or to an acquired flatfoot which worsened these lesions.(5) Because of the pain, she stopped dancing.

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References:

- 1 . Andersson S , Nilsson B , Hessel T , Saraste M , Noren A , Stevens-Andersson A . Degenerative joint disease in ballet dancers . Clin Orthop Relat Res . 1989 ; (238) 233 236
- 2 . Huwyler J . Changes in the skeleton of the middle foot caused by professional classical dancing . Sportverletz Sportschaden . 1989 ; 3 : (1) 14 20
- 3 . Teitz CC , Kilcoyne RF . Premature osteoarthrosis in professional dancers . Clin J Sport Med . 1998 ; 8 : (4) 255 259
- 4 . Nilsson C , Leanderson J , Wykman A , Strender LE . The injury panorama in a Swedish professional ballet company . Knee Surg Sports Traumatol Arthrosc . 2001 ; 9 : (4) 242 246
- 5 . Chu IT , Myerson MS , Nyska M , Parks BG . Experimental flatfoot model: the contribution of dynamic loading . Foot Ankle Int . 2001 ; 22 : (3) 220 225

Figure 1

