



## Orthopedics and Rheumatology

**Shabana Kouser Ali<sup>1</sup>\* Ph.D**

<sup>1</sup>Department of Bioinformatics, School of Biosciences and Technology, VIT University, Vellore, Tamil Nadu, India

\*Corresponding author: Shabana Kouser Ali, Department of Bioinformatics, School of Biosciences and Technology, VIT University, Vellore, Tamil Nadu, India.

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Journal of Orthopedics and Rheumatology of Volume 3 Issue 1 published, two case reports elaborating describing bilateral Tibiotalocalcaneal arthrodesis for severe hind foot and ankle deformities secondary to rheumatoid arthritis [1], and other case report on a very atypical exophytic glomus tumor on the pulp of a finger in a pregnant woman [2].

Tibiotalocalcaneal arthrodesis is a procedure used to treat disabling foot and ankle arthropathy and alternative to amputation for the treatment of non-brace able neuropathic, diabetic, degenerative or rheumatoid joints. Jesse F. Doty et al. [1], presented a case report describing bilateral Tibiotalocalcaneal arthrodesis for severe hind foot and ankle deformities secondary to rheumatoid arthritis. Fortunately, rheumatoid arthritis modifying anti-rheumatic drugs (DMARDS) has significantly improved treatment for

rheumatoid arthritis patients. However, with advances in treatment deformities of foot and ankle are still confronted. Management of these deformities is challenging for clinician and the patient, especially when the disease is bilateral. This case supports the effectiveness of bilateral Tibiotalocalcaneal arthrodesis in providing pain relief and restoring function in patients. From the findings by the authors it is indicative that the bilateral Tibiotalocalcaneal arthrodesis can improve the patient condition with satisfaction and believes that in some cases this may be considered as a successful alternative treatment.

Glomus tumor is a rare neoplasm arising from the glomus body and mainly found under the nail, fingertip, or in the foot. They account for less than 2% of all soft tissue tumors. This glomus tumor is rarely diagnosed, usual solitary, a deep blue to purple color causing a typical triad of pain, cold sensitivity and point tenderness. Maeckelbergh et al. [2], extended his work as a case report on a very atypical exophytic glomus tumor on the pulp of a finger in pregnant women. The treatment of choice for solitary glomus tumor is surgical excision and its local recurrences rates range from 12 to 33%. However, the first consultation glomus tumors are rarely diagnosed and this late diagnosis often results into delays of adequate treatment with holding chronic pain and incapacity. Therefore, alertness for a glomus tumor is significant.

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**Reference:**

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