

Chondroblastoma

- Benign chondrogenic bone neoplasms characteristically arising in the **epiphysis** or apophysis of a long bone in young patients.
- Despite being rare, they are one of the most frequently encountered benign epiphyseal neoplasms in skeletally immature patient
- Most frequently affects those 10-25 years old
- M > F (nearly 2:1)
- Surgical treatment: curettage and bone graft
- Radiofrequency ablation may be considered in small lesions (mean diameter of 1.4 cm in one report)

Image

- Location
 - > 75% in long bones
 - Epiphyseal origin, often extends into metaphysis
 - Proximal humerus > proximal tibia > proximal and distal femur
- Geographic lytic lesion; majority with thin sclerotic margin
- 1/3-1/2 contain some chondroid matrix (may be minimal)
- Eccentrically located within epiphysis
- Larger and more longstanding lesions develop smooth thick periosteal reaction (50%)
- May have associated aneurysmal bone cyst-like changes with fluid-fluid levels
- MR: intermediate signal on T1; inhomogeneously high signal intensity on fluid-sensitive sequences
 - Surrounding edema/inflammation in adjacent cortex, marrow, and soft tissue in majority of (such as histoplasmosis)

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