

## Fabella in a Pediatric Patient: A Rare Anatomical Variant with Clinical Relevance

### Fabela num Doente Pediátrico: Uma Variante Anatômica Rara com Importância Clínica

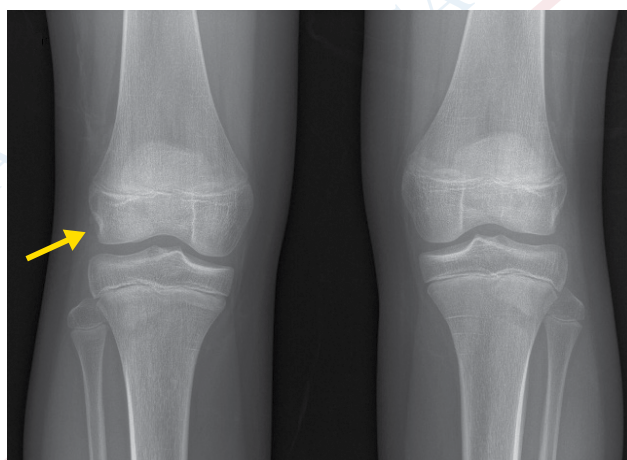
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**Palavras-chave:** Artralgia/etiologia; Criança; Articulação do Joelho; Ossos Sesamoides/anomalias congénitas; Variação Anatômica



**Figure 1** – Anteroposterior view of bilateral knee x-ray. A fabella is visible lateral to the lateral femoral condyle (arrow).



**Figure 2** – Lateral view of right knee x-ray. A fabella is visible in the posterior aspect of the knee (arrow).

A 12-year-old female patient, followed in Pediatric Rheumatology for oral aphthosis, reported mild-to-moderate lateral right knee mechanical pain for several months, initially triggered by sports activities, symptoms later appeared—albeit more mildly—during routine tasks. No history of trauma or neurologic symptoms were present. Physical examination was unremarkable, including knee-specific tests, and no tenderness was present. A knee X-ray revealed an ossified fabella posterior to the lateral femoral condyle. (Figs. 1 and 2). At the five-month follow-up, the patient reported marked improvement despite mild residual symptoms, and magnetic resonance imaging evaluation was postponed.

The fabella is a sesamoid bone in the posterolateral knee space, typically ossifying by puberty.<sup>1,2</sup> While often asymptomatic, it can cause fabella pain syndrome (posterolateral knee pain aggravated by extension).<sup>2-4</sup> Management includes physical therapy, local injections with local anesthetics/steroids, or surgical excision in refractory cases.<sup>2-4</sup> This case highlights an uncommon cause of knee pain in pediatric patients.

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#### AUTHOR CONTRIBUTIONS

TF: Writing of the manuscript.

CT, JN: Critical review of the manuscript.

All authors approved the final version to be published.

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## PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in October 2024.

## DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

## PARENTAL CONSENT

Obtained.

## COMPETING INTERESTS

The authors have declared that no competing interests exist.

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