

### **Disclosures**

- · Consultant: Bioclinica
- Contractor: POCUS PRO
- · Book Royalties: Elsevier
- · I now follow Nicki Minaj's cousin's friend in Trinidad on Twitter

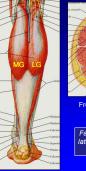
#### Reporting

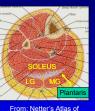
- How is a tear described?
  - Given complex muscle anatomy
  - -Tendon, aponeurosis, musculotendinous, etc.
  - -Return to play
- Strain?
  - Unclear imaging definition
  - -Clinical definition: non-specific term
  - Term should be avoided (use "tear" instead)

#### 3

#### Gastrocnemius

- Medial and lateral heads
- Origin: femur
- · Insertion: calcaneus combined with soleus as Achilles tendon (triceps surae)
- Broad anterior or deep distal aponeurosis
- Fast twitch Type 2 fibers
  crossing 2 joints: injury prone

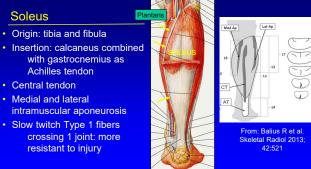




Fabella: 10 – 30% of lateral gastrocnemius tendons

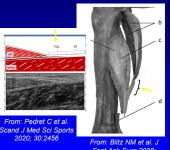
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#### Gastrocnemius

- Aponeurosis of gastrocnemius in contact with aponeurosis of soleus but not connected proximally
- Note "free gastrocnemius aponeurosis" (FGA) (yellow arrow) between gastrocnemius muscle and junction with soleus aponeurosis forming Achilles tendon (AT)



Foot Ank Surg 47:533

## Soleus

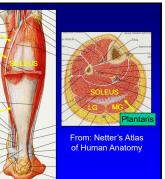
- with gastrocnemius as
- Central tendon

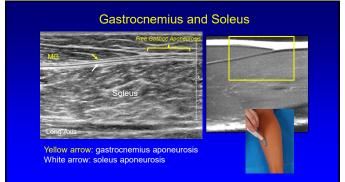


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#### Plantaris

- Origin: lateral femur
- Insertion: calcaneus
- Absent: 6 8% of population
- Small proximal muscle belly
- Tendon: between medial head of gastrocnemius and soleus muscle bellies
- Medial and anterior border of Achilles tendon





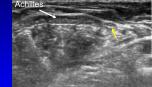
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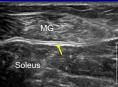




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# Plantaris





Short Axis

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## Calf: injury

- Medial head of gastrocnemius: "tennis leg"
  Most common in general population
- Lateral gastrocnemius: less common
- Soleus: common in Australian rules footballers<sup>1</sup>
  Especially proximal medial aponeurosis (56%)<sup>2</sup>
- Plantaris:
  - Isolated tear or combined with medial gastrocnemius
  - May be thickened with Achilles tendinosis<sup>3</sup>

<sup>1</sup>Waterworth G et al. Skeletal Radiol 2017; 46:343 <sup>2</sup>Balius R et al. Skeletal Radiol 2013; 42:521 <sup>3</sup>Alfredson H. Br J Sports Med 45:1023

#### Imaging: soleus muscle

- Ultrasound evaluation of soleus is limited
  Deeper structure
- MRI more sensitive than ultrasound for minor injuries and early detection<sup>1</sup>
  - Edema: subjective subtle increased echogenicity on ultrasound
  - MRI may detect asymptomatic findings<sup>2</sup>
  - Intramuscular injury: more likely to miss play<sup>3</sup>

<sup>1</sup>Balius R et al. Skeletal Radiol 2014; 43:805 <sup>2</sup>Brennan JH et al. Skeletal Radiol 2020; 49:563 <sup>3</sup>Waterworth G et al. Skeletal Radiol 2017; 46:343



#### Ultrasound: gastrocnemius injury

- Type 1: myoaponeurotic injury (no intermuscular hematoma)
- Type 2: aponeurotic injury (most common) - 2A: <50% width; 2B: >50% width
- Type 3: free gastrocnemius aponeurosis injury Longest return to play
- Type 4: mixed type 2 and 3
- Worse prognosis: intermuscular hematoma and asynchronous gastrocnemius-soleus movement (with plantar flexion)

Pedret C et al. Scand J Med Sci Sports 2020; 30:2456

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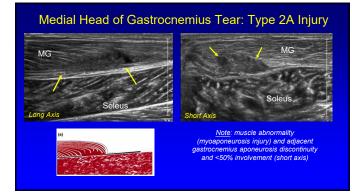
## Medial Head of Gastrocnemius Tear: Type 1 Injury

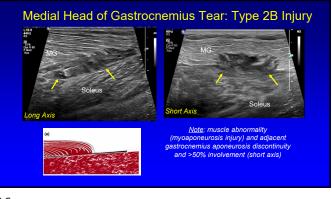




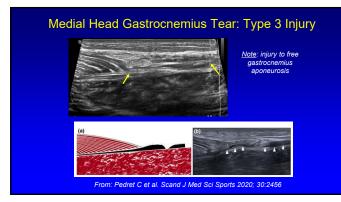
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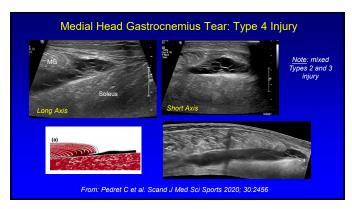
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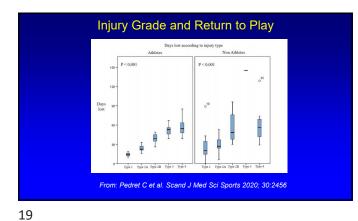


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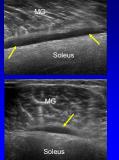


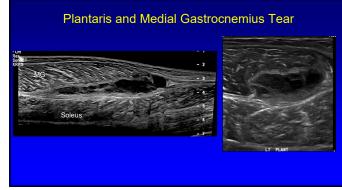


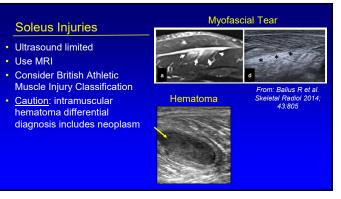


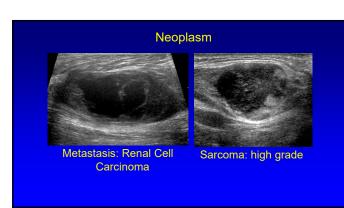
 Normal gastrocnemius muscle and aponeurosis

Leekam RN et al. AJR 1999; 172:185



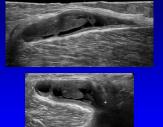






### Baker cyst: rupture

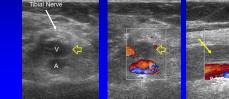
- Calf symptoms
- Superficial to medial gastrocnemius
- Rarely intramuscular
- May extend to Achilles
- Look for communicating "neck"



## Deep Venous Thrombosis

- Hypoechoic thrombus
- Not compressible





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## Take Home Points

- Gastrocnemius:
  - -5 injury types
  - Poor prognosis: intermuscular hematoma with asynchronous motion between soleus and gastrocnemius
- Plantaris: proximal tubular fluid collection
- Soleus injury: need MRI

