

## **Title of Presentation:**

### *Identification of Acetabular Paralabral Cyst in Asymptomatic Volunteers Using Optimized Noncontrast MRI*

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## **Learning Objectives (After attending this session, the attendee should be able to):**

- discuss the prevalence of acetabular paralabral cysts in asymptomatic patients as detected with optimized non contrast magnetic resonance imaging and its relation to underlying labral abnormalities

## **OBJECTIVES:**

The objective of this study was to Use an optimized non contrast MRI protocol to Identify intraarticular hip pathology in young asymptomatic volunteers.

## **METHODS:**

In this prospective prevalence study, 42 hips In asymptomatic patients With an average of 34 years Old (range 27-43) were imaged With optimized noncontrast MRI scans. Two fellowship trained musculoskeletal radiologists interpreted the scans at two different points in time and commented on the presence of labral Pathology, including paralabral cysts. The results were analyzed for both interobserver and intraobserver reliability.

## **RESULTS:**

Paralabral cysts were Identified in 10/42 (24%) and 9/42 (21%) hips by the two respective radiologists with an interobserver reliability of 95% and intraobserver reliability of 100%.

## **CONCLUSION:**

Acetabular labral tears, as a potential source of hip pain, have received a great deal of attention in recent literature. The gold standard for identifying acetabular labral tears is hip arthroscopy, but recent advances in optimized noncontrast MRI have proven effectiveness in identifying intraarticular hip pathology without the invasive nature of hip arthroscopy or gadolinium enhanced arthrography. Acetabular paralabral cysts have also been shown to be associated with underlying labral tears, similar to meniscal cysts In the knee or labral cysts in the shoulder. We report the previously undescribed prevalence of acetabular paralabral cysts in a young asymptomatic population. This emphasizes the importance of correlating patient symptoms and using diagnostic, and potentially therapeutic, intraarticular injections when evaluating patients with hip pain and radiographic abnormalities as defined by MRI criteria.