

of testicular germ cell tumours (Ferguson and Agoulnik, 2013). Subfertility may be an issue for these patients and thus semen analysis and/or sperm banking should be performed before orchidectomy (Ferguson and Agoulnik, 2013). **BJHM**

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LEARNING POINTS

- Cryptorchid testis is a rare finding in adults, which may cause infertility.
- A scrotal examination should be conducted in patients presenting with an inguinal lump to investigate for cryptorchidism.
- Orchidopexy should be performed in patients with cryptorchid testis owing to the elevated risk of testicular germ cell tumours.
- Orchidopexy for cryptorchid testis should ideally be performed in children to reduce the risk of testicular germ cell tumours.

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Images in Medicine

Isolated distal rectus femoris rupture

The quadriceps muscle consists of the rectus femoris, vastus lateralis, intermedius and medialis. The main function of the quadriceps is knee extension. Isolated tendon rupture of a single component of the quadriceps is rarely seen or reported in the literature (Kannus and Józsa, 1991; Yepes et al, 2008).

This article presents the magnetic resonance imaging of an isolated distal rectus femoris tendon rupture in a 72-year-old fit and well avid walking-footballer who presented with a lump in the anterior aspect of the proximal thigh following a fall 4 weeks earlier. His extensor mechanism was intact. Magnetic resonance imaging with contrast (*Figure 1*) confirmed a full-thickness tear of the distal rectus femoris tendon with retraction into the

upper thigh and a 14 cm gap where it had retracted from the superior pole of the patella. There was also some peripheral enhancement of surrounding haematoma.

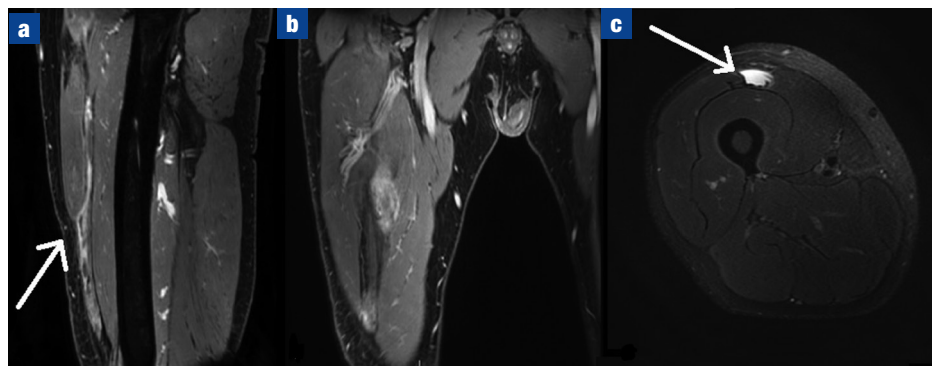
The patient was managed expectantly as his extensor mechanism was intact and he subsequently returned to walking-football. Isolated distal rectus femoris rupture is very rare and can be managed conservatively if the extensor mechanism is intact (Ilan et al, 2003). **BJHM**

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Figure 1. Magnetic resonance imaging of the right thigh demonstrating distal rectus femoris tendon rupture. a. Sagittal image with contrast demonstrating proximal retraction of the rectus muscle to the proximal thigh. b. Coronal image with high signal in the muscle and peripheral haematoma enhancement. c. Axial image with high signal indicating the site of rupture (arrow) with intact remaining muscle components of the quadriceps.



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