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**Erdheim-Chester Disease Revealed by Synovial Hypertrophy of the Knee**

**Introduction**
Erdheim-Chester disease is a rare form of non-Langerhans-cells histiocytosis in adults. It’s characterized by xanthomatous infiltration of tissues by CD68-positive, CD1a-/S100-negative foamy histiocytes and can present heterogeneous systemic manifestations.
Here, we report the case of a patient affected by this condition.

**Case Report**
Mrs. S.N., a 46-year-old woman with a history of hypothyroidism, consulted for mechanical knee pain evolving over the course of a year and a half. Clinical examination revealed moderate swelling of the right knee without local inflammatory signs, accompanied by limited flexion. Biological tests were normal. Right knee X-rays showed no abnormalities, but MRI revealed aggressive bone lesions in the inferior patella and lateral femoral condyle, associated with diffuse articular synovitis.
Synovial biopsy revealed a diffuse infiltrate of globular cells with vacuolated, foamy cytoplasm, strong CD68 expression, and absence of CD1a expression. Extension workup (CT and MRI) showed pathological retroperitoneal lymph node and tissue involvement associated with hepatic and periaortic abnormalities. Bone scintigraphy revealed highly suspicious craniofacial osteolytic lesions along with progressive arthropathy of the right knee.
The diagnosis of Erdheim-Chester disease was confirmed based on these clinical, radiological, and histopathological findings.

**Conclusion**
Erdheim-Chester disease is a rare multisystemic condition. Bone involvement is common and can sometimes affect the synovium. The diagnosis is based on histology, which in this case enabled us to confirm the diagnosis and investigate other systemic localizations.

