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Sports Medicine **Sport & Exercise Physicians** Dr. Andrew Garnham Provider No. 0316937Y Dr. David Bolzonello Provider No. 038743AW Dr. Tanusha Cardoso Provider No. 423109GX Dr. Liam West Provider No. 502672CY Sport & Exercise **Medicine Registrars** Dr. Samantha May Provider No. 474384DW Dr. Michael Giummarra Provider No. 460615BH Dr. Hussain Khan Provider No. 511953JB Dr. Carlee Van Dvk Provider No. 434206GL Dr. Jacob Jewson Provider No. 504858MT

Orthopaedic Surgery Mr. Simon Holland Provider No. 203217QL

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Podiatry Mark Whiteside Emma Poynton Zoe Giacobbe

Occupational Hand Therapy Sarah Armanios Melita Ryan

Dietetics Kristen Djermanovic Rylie Ellis

Exercise Physiology Tom Bennett 16 February 2023

A/Prof Martin Richardson Level 7, Suite 7.5 32 Erin St Richmond VIC 3121 surgeons@orthovic.com.au

Dear A/Prof Richardson.

Jennifer Burgess DOB: 29/05/1956 45 Miles St

IVANHOE VIC 3079 M: 0412 317 700

Many thanks for seeing Jennifer, a 66 year old fit and well, right hand dominant Sustainability Australia employee with severe left sternoclavicular joint arthritis.

Jennifer has had significant pain and swelling of the left SC joint since early July last year. This started about 6 weeks after a COVID infection that was followed by shingles. She then noticed left SCJ pain which she thinks was associated with more heavy lifting at work. There was no obvious acute injury and she doesn't recall one in the past.

I saw Jennifer in early October this year where she had bloods and an MRI. Her blood tests were all unremarkable but her SC joint was quite degenerative at this stage. She saw another colleague for follow up and was referred for a corticosteroid injection into the joint which relieved her symptoms for about 6 weeks. Unfortunately, Jennifer's pain and swelling at the site returned, and she's also had intermittent neck soft tissue swelling in the supraclavicular/anterior triangle region, but this is not always present.

On examination Jennifer is very tender and swollen at the left SCJ. She has no carotid bruits and no swelling of the left arm.

I organised a repeat MRI for Jennifer which shows quite marked increase in joint remodelling/degeneration but no effusion. There was some concern for abutment of the left brachiocephalic vein due to the osteophytes but she doesn't have any upper limb symptoms and neck ultrasound was negative. Repeat bloods were again unremarkable.

I would greatly appreciate your opinion on the best course of management for Jennifer going forward, particularly due to the rapid acceleration of the degeneration and proximity to her brachiocephalic vein. If you have any questions please do not hesitate to contact me.

Yours sincerely,

Dr Jacob Jewson

Sport and exercise medicine registrar Alphington Sports Medicine Clinic

504858MT