Clinical details:
A 15 year old boy, football player presented with history of right buttock and groin region pain, following trauma few weeks ago. History of difficulty in walking was noted since then. MRI of the pelvis was performed.

Findings:
- Apophyseal avulsion injury of the right ischial tuberosity (Fig 1,2&4) noted at attachment of the hamstring tendons.
- The gap measures approximately 0.7cm in width. The hamstring tendons (T in Fig 3) are however intact.
- Fig 3 shows avulsion injury of the right ischial apophysis (yellow arrow) and intact left ischial apophysis (pink arrow).

Discussion:

Apophyseal avulsion injury of the ischial tuberosity is commonly noted in adolescents who are primarily engaged in strenuous athletic competition or physical activity. This is due to immaturity of the physis which is yet to undergo complete ossification. The bone-muscle-tendon unit of hamstrings when subjected to physical stress, the immature physis serves as the weakest area and is thus prone to avulsion injury.

This injury occurs with forceful flexion of the hip (usually with the knee extended). Symptoms of an acute avulsion fracture of the ischial tuberosity may include pain in the buttock localized to the site of the ischial tuberosity, difficulty in walking, standing, or squatting and decreased range of motion in the thigh and lower leg.

This injury is easily misdiagnosed due to similar presentation to other injuries involving the hamstrings. If several weeks have elapsed since the injury, atrophy and weakness of the hamstring muscles may be noted.

Sciatic nerve injury is reported in acute phases due to its close proximity to the site of injury or due to compression of the nerve by scar tissue formation that occurs chronically. Clinical evaluation of the sciatic nerve is thus needed.