PP-03 A Case of Femoral Nerve Palsy after Hip Arthroscopy for FAI

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Aim

Many good results of hip arthroscopic surgery for Femoroacetabular Impimgement (FAI) have been reported, on the other hand, there are some reports of complications.

We report a case of femoral nerve palsy after hip arthroscopic surgery.

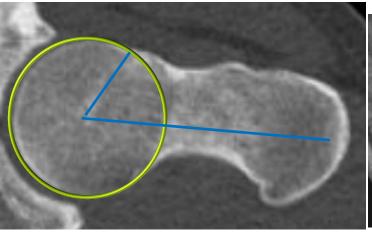
Case

- 17 years old male
- Soccer player (goal keeper) who plays at a high level of high school soccer.
- Chief complaint : Left coxalgia when he kicked the ball
- History of present illness :Few months ago, when he kicked a soccer ball, he became aware of left coxalgia and consulted a nearby physician.

 Diagnosed as FAI, he was referred to our hospital.
- General status
 - Height 181cm Weight 59kg (Body Mass Index 18.18)
 - Range of motion : No limit of range of motion except for the left hip flexion of 100 degrees.
 Anterior impingement test(+)
 - Carter's sign 4/5→General joint laxity (+)

Preoperative Image findings







Xp

Right Left (Affected side)

- Sharp angle 43° 39°
- CE angle 31.5° 32°
- Osteoarthritic change(-)
- Bil. bump deformity (+)

radial CT
□ α-angle 61°

radial MR-arthrography

Anterior labral tear



Cam type FAI

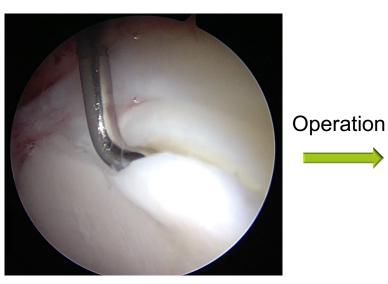
Treatment

Spinal + Epidural anesthesia

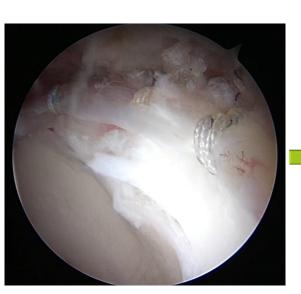
Operation time : 209min

Traction time: 120min

Hip arthroscopic treatment

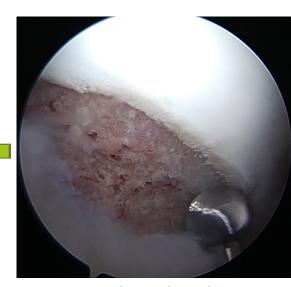


Anterior labral tear



Traction operating table
(Hip Positioning System Smith & Nephew)

Labral repair



osteochondroplasty

Postoperative course

POD 1: Lt. iliopsoas MMT 1
 Lt. Quadriceps MMT 1
 Inability to extend left knee joint
 The front of the left thigh sensory loss

Femoral nerve palsy

- MRI→No hematoma
- POD 2 11 : hyperbaric oxygen therapy
- lacktriangle POD 10 \sim : Loss of sensation recovers
- lacktriangle POM 1 \sim : Motor paralysis gradually improved
- \blacksquare POM 2 \sim : **Complete recovery**No limitation of left hip range
- \blacksquare POY 1 \sim : Return to the team with pre-injury performance

Discussion

Complications Associated with Hip Arthroscopy

(Thomas Byrd J Operative Hip Arthroscopy. 2005)

- 1.34~15%/all cases
 - Pudendal nerve neuropraxia
 - Sciatic nerve neuropraxia
 - Lateral femoral cutaneous nerve neuropraxia
 - Intraabdominal fluid extravasation
 - Scrotal skin necrosis
 - Instrument breakage
 - Heterotopic ossification
 - ◆ Femoral nerve palsy(1 case) → Portal near the femoral nerve

Discussion

Causes of femoral nerve palsy

Hematoma or tumor in the iliopsoas

No hematoma

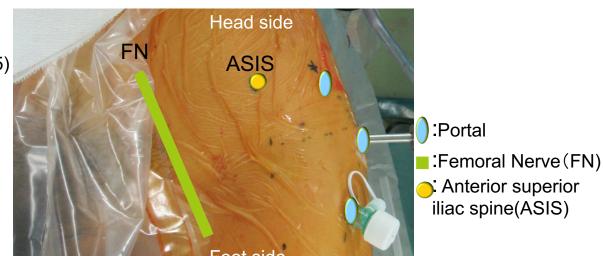
(Robinson KP et al, J Bone Joint Surg Br 2007) (Dogramaci Y et al J Med Case Rep 2009)

- Surgical damage
- Compression by muscle hook (Fleischman AN et al J Arthroplasty 2018)
- Portal location

(Thomas Byrd J Operative Hip Arthroscopy. 2005)

<This case>
No compression
proper portal placement

<This case>



Discussion

Causes of femoral nerve palsy

- Traction injury
 - Trauma
 (Nagano et al Orthopedic surgery 1976)
 - Hyperextension under anesthesia
 (Kokubun et al Orthopedic surgery 1975)
 - In cases with general joint laxity, palsy is likely to occur when the femoral nerve is stretched.

(Edward H.Miller et al, J Bone Joint Surg 1985) (Thomas Byrd J Operative Hip Arthroscopy. 2005) Under anesthesia

<This case>

Under traction
General joint laxity



Palsy caused by extension of femoral nerve.

Conclusion

• We experienced a case of femoral nerve palsy after hip arthroscopic surgery for FAI.

It should be kept in mind that complications of hip arthroscopic surgery might result in femoral nerve palsy in cases with general joint laxity.