Ultrasonography may be more valuable for the diagnosis of meralgia paresthetica with normal electrodiagnostic study

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Meralgia paresthetica (MP) refers to the entrapment of the lateral femoral cutaneous nerve at the level of the inguinal ligament. The lateral femoral cutaneous nerve (LFCN), which is a pure sensory nerve, arises from the L2 and L3 spinal nerve roots and innervates the lateral thigh. There are many variations in the course of the LFCN. Meralgia paresthetica usually causes the following symptoms: paresthesia, numbness, burning sensation, dysesthesia, and pain over the anterolateral aspects of the thigh. Although there are several reports on the confirmatory role of electrodiagnostic studies in the diagnosis of MP, a clinician would usually prefer not to perform nerve conduction studies in daily clinical practice. In recent years, ultrasonography has been shown to be a powerful tool for the visualization of very small peripheral nerves. A 51-year-old man presented with pain and tingling sensations on the anterolateral aspect of her left thigh. Physical examination revealed hypoesthesia of the proximal anterolateral thigh on the left side. Electrodiagnostic study showed the symmetric amplitude of sensory nerve action potential of LFCN on both sides. Ultrasonography revealed an increase in the cross-sectional area of left LFCN comparing to the right LFCN. This case indicates ultrasonography may be an alternative diagnostic method in MP with the normal electrodiagnostic study.