

Stingray Injury - Isolated Post-traumatic Sciatic Nerve Contusion with Foot Drop

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INTRODUCTION:

Stingray stings is an extremely rare mechanism of sciatic nerve contusion. The stingray has a sharp spine that can easily penetrate the skin. This case report will look at a man presented with a unilateral foot drop following stingray stings which are not uncommon among local fishermen at Lundu district in Southern Sarawak.

CASE REPORT:

A 47 years old man was brought to emergency department presented with intense pain and bleeding over his right thigh. There was a sudden onset of weakness and numbness over his right leg and foot after a deep stabbing injury caused by a stingray. A laceration wound noted over posterolateral aspect of right thigh without any retained foreign body. There was a loss sensation of lateral leg and dorsal foot, 0/5 strength with ankle and great toe dorsiflexion and ankle eversion. Tetanus toxoid, intravenous ciprofloxacin and augmentin was administered. Subsequently proceeded with wound debridement, wound exploration, and evacuation of hematoma of right posterior thigh. Intraoperatively, sciatic nerve in continuity with 3 cm contusion adjacent to the wound tract. Hematoma noted anteromedial to and compressing the sciatic nerve. At 1 month postoperatively, strength was graded 5/5 in the ankle dorsiflexion and the sensation was spontaneously recovered.

CONCLUSION:

Isolated sciatic nerve contusion has been previously reported subsequent to blunt trauma or falls, hip surgery, penetrating gunshot or knife wounds, fracture and/or dislocation of hip or acetabulum, intramuscular injection and neoplasm. Meanwhile, this patient had been resulting from stingray injury which is an unusual presentation. Because the stingray barbs are serrated, it can produce more extensive tissue damage as it penetrates through the skin, which may lead to hematoma formation and

nerve compression. Prompt surgical intervention and hematoma evacuation may prevent permanent neurological damage.

Figure 1: Laceration wound over posterolateral aspect of right thigh.



Figure 2: Intraoperatively showing sciatic nerve contusion.



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