A 20-year-old, 33-week-pregnant woman presented with 2 days of backache and left leg weakness. She denied sphincter or sensory disturbance. Examination revealed proximal left leg weakness, bilateral hyperreflexia, and extensor plantars. A cesarean section was performed 5 days later. Two days postpartum, neurologic examination results returned to normal. Spine/abdomen MRIs before (figure, A–C) and after (figure, D–F) are presented.

Increased blood flow to the epidural venous plexus occurs due to compression on the inferior vena cava (IVC) by the pregnant uterus or by increased abdominal pressure.¹ This may present as acute spastic paraparesis, but may also be asymptomatic,² which can be explained by the severity of IVC compression. MRI is helpful in excluding cord pathology, assuring favorable outcome.

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