Teaching NeuroImages: Sciatric neuropathy after heroin abuse

A 38-year-old woman presented with acute onset of severe pain in the left calf and foot after inhaling heroin. On examination, she had distal left lower extremity weakness and absent ankle jerk. EMG at 8 weeks suggested an axonal left sciatic neuropathy. HIV test was negative. Creatine kinase, erythrocyte sedimentation rate, and C-reactive protein were normal. MRI revealed prominent edema and enlargement of the left sciatic nerve without contrast enhancement (figure). She received weekly infusions of IV methylprednisolone leading to improvement in her symptoms and MRI findings. Recognized neuromuscular complications of acute heroin usage include mononeuropathy, polyradiculoplexopathy, and rhabdomyolysis secondary to possible inflammatory or toxic mechanisms.1,2

Figure

Left sciatic nerve enlargement on MRI

MRI of the hips shows a significantly enlarged left sciatic nerve (arrow) with hyperintense signals and a normal-appearing right sciatic nerve on T2-weighted coronal image.

AUTHOR CONTRIBUTIONS
Harvinder Kumar: drafting/revising the manuscript, accepts responsibility for conduct of research and will give final approval, acquisition of data.
Yuebing Li: drafting/revising the manuscript, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and will give final approval, acquisition of data, study supervision.

STUDY FUNDING
No targeted funding reported.

DISCLOSURE
The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

REFERENCES
Teaching NeuroImages: Sciatic neuropathy after heroin abuse
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Neurology 2013;81:e51
DOI 10.1212/WNL.0b013e3182a1aad9

This information is current as of August 19, 2013

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