Teaching NeuroImages: Ulnar neuropathy related to a contraceptive subdermal implant

A 51-year-old woman experienced intermittent left hand numbness and weakness over 2 years, with a claw-hand deformity and weakness of finger abduction, adduction, and distal interphalangeal joint flexion of the medial 2 fingers. Wrist flexion produced hand radial deviation. Palmar and dorsal aspects of digits IV (medially) and V, including medial forearm, had decreased pinprick sensation. Nerve conduction studies showed a conduction block at a site approximately 14 cm above the medial epicondyle.

Motor conduction segmental studies reveal a conduction block at a site approximately 14 cm above the medial epicondyle.

Sonography over the site of the ulnar conduction block reveals a hyperechogenic structure corresponding to the contraceptive implant (I) lying above and distorting the ulnar nerve (U). H = humerus.

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conduction block 14 cm above the medial epicondyle (figure 1), where Tinel sign was positive. Sonography (figure 2) revealed a hyperechogenic structure distorting the ulnar nerve. The patient had a surgically implanted subdermal contraceptive 10 years prior, causing a rare occurrence of neuropathy.1,2

AUTHOR CONTRIBUTIONS
J.Y. Ong: drafting/revising the manuscript, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and final approval. A.K. Therimadasamy: study concept or design, accepts responsibility for conduct of research and final approval, acquisition of data. Dr. Wilder-Smith: drafting/revising the manuscript, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, study supervision.

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