

Paralysis of Nervus Hypoglossus Following a Surgery of a Lumbar Disc Hernia

Murat IZGI*, Adem HALIS*, Sennur UZUN*

* Hacettepe University School of Medicine Department of Anesthesiology and Reanimation – Ankara (Turkey)

Background: Nervus hypoglossus (NH) is sensitive to the pressure of airway devices' during it's crossing through the stylohyoid ligament and the big horn of hyoid bone on the level of the mandibular corner (1). Isolated NH paralysis (INHP) is a complication that can occur after airway management, accompanied by ipsilateral deviation of tongue, dysarthria, dysphagia and even dyspnea (2). In this case report, the hypoglossal nerve palsy seen in the patient who underwent lumbar disc surgery in prone position was discussed.

Case Report: A 50-year-old, male patient who was scheduled for lumbar disc herniation surgery was evaluated as ASA-I and mallampatia III. The patient intubated with 8.5-mm spiral endotracheal tube in the first trial without any complications. The patient positioned to knee-elbow position for the surgery. Surgery lasts for 160 min without any complications. After 2 hours of the patient's transference to the clinic, complaining of drowsiness, limitation of movement and speech disorder started. He diagnosed as INHP. It was thought that it could be attributed to airway management due to the fact that any other etiologic cause could not be detected, and the incident occurred postoperatively, methylprednisolone recommended for 1 week. The patient healed without any seckel in 1 month.

Discussion: INHP is a rare complication related to neuropraxia following an endotracheal intubation, bronchoscopy or usage of laryngeal mask airway (LMA). Laryngoscopy, endotracheal intubation, endotracheal tube malposition, overinflation of the cuff and poor patient position can be in the etiology (1). In generally a short time steroid treatment is curative and it heals without any sequels in 2-4 months (2).

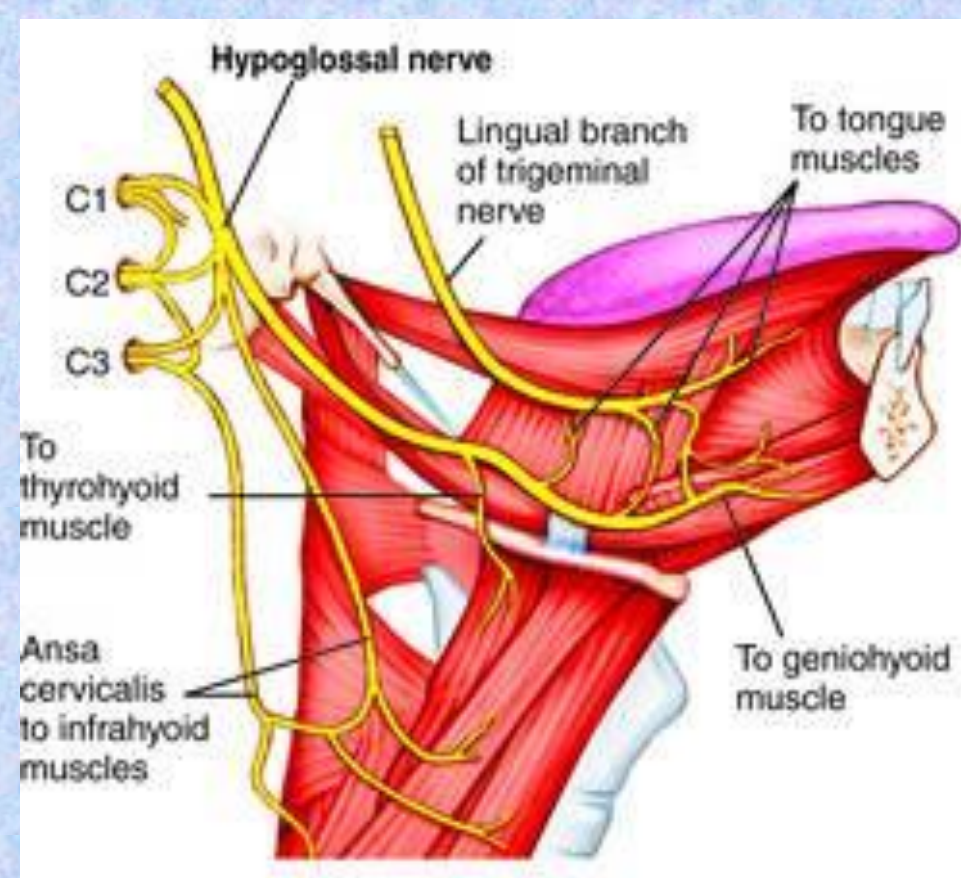


Figure 1: Schema of Nervus Hypoglossus (3)



Figure 2: Deviation of the tongue due to the paralysis of nervus hypoglossus

References:

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2. Ulusoy H et al. Braz J Anesth 2014; 64 (2): 124-7.
3. <http://neuroloblog.blogspot.com.tr/2011/01/sindrome-cuello-lengua.html>