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P427 -Iliohypogastric Nerve Injury Following Percutaneous Native Renal Biopsy

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Background: Percutaneous native renal biopsy is a commonly performed and safe procedure. We describe a case of left sided lower abdominal swelling and impaired sensation over the left gluteal region following percutaneous native renal biopsy.

Case Presentation: A 29 year old gentleman was referred by his General Practitioner to Nephrology clinic with a history of haemato-proteinuria and impaired renal function. Outpatient percutaneous left sided native renal biopsy was subsequently performed. During the second pass of the biopsy needle the patient reported a severe, sharp shooting pain in the ipsilateral gluteal region. Post procedure, he developed numbness of his left gluteal region and left lower quadrant abdominal swelling. He underwent extensive investigations including ultrasound and magnetic resonance imaging of the abdomen and pelvis, which revealed no abnormality in the anterior abdominal wall or muscles, and no evidence of hernia. He then underwent electromyography which was consistent with injury to the iliohypogastric nerve.

Conclusions: We believe that this is the first described case of iliohypogastric nerve injury following percutaneous native kidney biopsy. The course of the iliohypogastric nerve posterior to the kidney is such that injury to this nerve is possible during percutaneous native renal biopsy through direct injury from the biopsy needle or peri-nephric haematoma causing compression of the nerve. It can result in lower abdominal swelling, pain and impaired sensation over the gluteal region. Awareness of the anatomical course of the nerve may be important in minimising nerve injury, and clinicians should consider consenting patients undergoing native kidney biopsy for this complication.