

### SOFT-TISSUE IMAGES. ABDOMINAL AORTIC ANEURYSM CAUSING LUMBAR PLEXUS NEUROPRAXIS

A 71-year-old man, a smoker who had no history of peripheral vascular or cardiac disease experienced sudden excruciating pain in the left anterolateral thigh and numbness radiating to the lateral aspect of his knee. The pain was intensified by minimal movement of the hip and knee. Examination revealed a large expansile epigastric mass. Left femoral and popliteal pulses were absent. Sensation to his left anterolateral thigh was decreased as was quadriceps strength and the knee jerk reflex. Infusion abdominal computed

tomography (Fig. 1) showed a large infrarenal abdominal aortic aneurysm, 11 cm in anteroposterior and transverse dimensions, with expansion to the left iliac fossa, lateral deviation of the psoas muscle and erosion of the fourth lumbar vertebral body. At operation, an inflammatory aneurysm was resected and reconstituted with a bifurcated Dacron

graft. Extensive thrombus was removed from the left iliac fossa, and chronic erosion of the lumbar vertebrae was confirmed. Eight weeks after discharge, the patient was hospitalized briefly with new-onset atrial fibrillation. His thigh pain and numbness had improved markedly and he was walking with only minor difficulty.

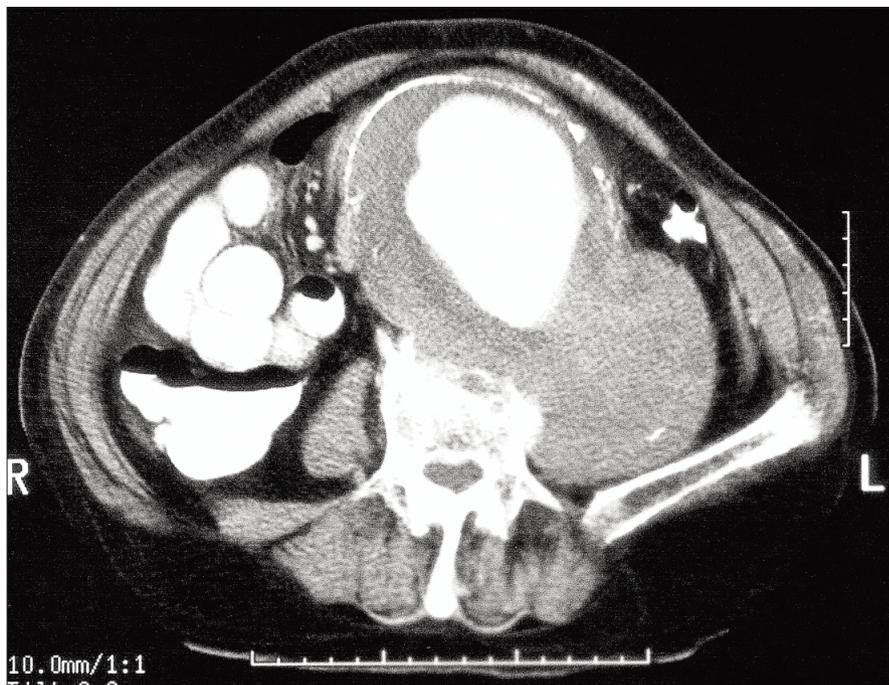


FIG. 1

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