Case Report

Challenges in intradural disc herniation diagnosis and surgery: A case report



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https://doi.org/10.1016/j.amsu.2020.08.022

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# Highlights

- Intradural disc herniation (IDH) is a rare complication and comprises 0.27% of all herniated disc.
- Radiological findings mimicking for intradural extra-axial spine tumors.
- Challenge in dissecting the duramater of the anterolateral segments is a common problem.
- A median or paramedian dural incision accompanied by a microsurgical technique.
- Better visibility of hernia after a dural incision, avoiding damage to the nervous rootlets.

## **Abstract**

## Introduction

Intradural disc herniation (IDH) is a rare complication which comprises 0.27% of all herniated intervertebral discs. We are reporting a case of lumbar intradural disc herniation at the L4-L5 levels highlighting challenges in establishing clinical diagnosis and surgical approach involving a transdural microsurgery approach.

#### Presentation of case

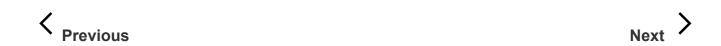
A 38-year-old gentleman was presented with left radicular low back pain without motoric and autonomic involvement admitted to our neurosurgical service. Spine MRI showed an intradural, extra-axial spinal mass.

#### Discussion

Lumbar IDH is a rare pathology thus often initially diagnosed as other more common conditions. In our case, the IDH diagnosis was confirmed during surgery as the radiological examination results mimic intradural extra-axial tumor. During surgery, a hard irregular white mass was found shortly after dural incision. Histopathological results showed chondrocytes, fibrotic and necrotic appearances consistent with the diagnosis of disc herniation. Postoperatively, the patient showed improvement and pain alleviation.

#### Conclusion

We observed the beak sign which is one of the important features of IDH imaging. Surgery-wise, the challenge of dissecting the anterolateral part of the duramater from the annulus fibrosus of the intervertebral disc should be noted by the performing surgeon.



# Keywords

Intradural herniationLumbar herniated discMicrosurgery