Straight Leg Raising Test Mimicking The Buerger's Test. Acute Limb Ischaemia

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INTRODUCTION:

A positive SLR test is pathogmonic of Herniated Nuclues Pulposus Disease. Buerger's test positive is seen in ischaemic limbs.

CASE REPORT:

A 46 year-old healthy man presented with left sided backpain and sciatica for 4 weeks. He developed the pain after lifting heavy objects at the workplace. Pain partially subsided with analgesia but became worse after 3 weeks. Examination at the clinic showed tender lower back with left sided SLR positive at 30degrees.Other examination findings were normal. MRI showed small disc protrusion at L5/S1 on the left side and fracture of left pars interarticularis L5 with ligamentum flavum and facet hypertrophy. Patient was advised for a transforaminal steroid injection to relieve the sciatica. Upon admission and in-ward progress we had examined him. Much to our amazement, during elevation of the leg to perform SLR test, the foot had turned pale at 30degrees. An SLR test had turned into A positive Buergess Test. there was no difference in warmth of the lower limb. Pulses were almost similar in character and volume. A bedside doppler showed a monophasic signal on the affected limb

CT angiogram showed long segment of acute thrombosis involving distal aspect of left superficial femoral artery and popliteal artery..

DISCUSSIONS:

Patient presented with sciatica pain need to do Buerger's test despite having straight leg raising test positive to rule out other diagnosis such as acute limb ischemia.



Figure 1: MRI lumbosacral (T2 view)



Figure 2: CT angiogram lower limb



Figure 3: CT angiogram lower limb

CONCLUSION:

This case emphasizes clinical examination as a vital tool in the clinical setting.

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