

## Chronic Left Sciatic Nerve Injury and Subsequent Complications Following Delayed Hip Dislocation Treatment in a 34-Year Old Male: A Case Report

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**Abstract :** A 34-year-old male with no prior health issues presented with a wound in his left leg exhibiting active pus discharge, intense inflammation, pain radiating from the buttocks to the knee, foot drop, and skin darkening. Four years prior, he sustained an untreated dislocation of the hip joint and acetabulum from a road traffic accident. Initial nerve conduction studies (NCS) and electromyography (EMG) revealed severe axonotmesis of the left sciatic nerve and reduced compound muscle action potential in the left common peroneal nerve. Despite normal venous flow, edema and cellulitis were noted. Follow-up NCS/EMG in 2022 showed improvement, but in 2023, the patient experienced recurrent infection and underwent surgical intervention with tissue culture. Postoperative care included antibiotics and pain management. NCS/EMG in 2024 indicated decreased nerve amplitudes and conduction velocities, consistent with moderate axonotmesis and ongoing recovery, alongside incidental right S1 radiculopathy. General lab tests and abdominal imaging were normal. The patient was treated with Pregabalin and Neurobion for neuropathic pain and nerve support and is currently under observation by a tertiary sector hospital for treatment. This case underscores the critical importance of prompt treatment for hip dislocations to prevent long-term complications such as neuropathy and avascular necrosis. Delays in treatment significantly increase the risk of severe outcomes, highlighting the need for timely intervention. Overall, the case illustrates the challenges of managing complex nerve injuries and the importance of comprehensive care for optimal recovery.

**Keywords :** sciatic nerve neuropathy, hip dislocation, acetabular fracture, radiculopathy

**Conference Title :** ICTTP 2025 : International Conference on Trauma: Theory and Practice

**Conference Location :** Karachi, Pakistan

**Conference Dates :** December 30-31, 2025