

Peripheral neuropathy and the role of nerve biopsy: A revisit

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Background: Nerve biopsy has been widely used to investigate patients with peripheral neuropathy and in many centres it is still a part of the diagnostic armamentarium. In this study the histopathological spectrum of the nerve biopsies received is being revisited to analyze the various clinical and pathologic features and, also, to assess their relevance.

Materials and Methods: Retrospective analysis of the data retrieved was done for 74 cases of nerve biopsies.

Results: On the basis of the data and histopathological features, broad diagnoses were obtained in 52 cases; further categorized into: biopsies being supportive for patient management (including acute and chronic axonopathies, demyelinating neuropathies) and biopsies considered essential for patient management (including

vasculitic neuropathies, leprous neuropathies, hereditary neuropathies and chronic inflammatory demyelinating neuropathies). Nine nerve biopsies did not show any abnormal histopathological features while thirteen nerve biopsies were found to be inadequate for diagnosis, both these groups were categorized as non-contributory.

Conclusion: With advanced nerve conduction studies available, nerve biopsy is losing its relevance. However, in our experience, nerve biopsy did complement the clinical findings and nerve conduction studies, with which, a close correlation is required to make the histopathology of nerve biopsy more relevant in terms of guiding further specific work up and management.

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