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A Rare Case of Bilateral Cervical Rib- Clinical Image

Rashmi Yadav¹, Yogesh Meghani², Tukaram Dudhamal³

¹2nd Year MS Scholar, ²Lecturer, ³Professor and Head of Department, Dept. of Shalya Tantra, Institute of Teaching and Research in Ayurveda (INI) Jamnagar, Gujarat, India.

ABSTRACT:

During the routine investigations for surgical fitness many patients undergo for routine radiological investigations like X-ray and USG. In some of cases congenital anomalies can be detected during this those are symptomless. In our teaching and research Hospital ITRA Jamnagar A case of bilateral extra cervical rib as diagnosed during x-ray chest. The case was treated for haemorrhoid surgery successfully without any issue with the extra rib as patient was symptom less.

KEYWORDS: Cervical rib, Neck rib, Supernumerary rib.

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*Corresponding Author:

Dr. Rashmi Yadav

2nd Year MS Scholar,

Dept. of Shalya Tantra, Institute of Teaching and Research in Ayurveda (INI) Jamnagar.

E-mail: yadavrashmi15041995@gmail.com

CASE DETAILS:

A cervical rib, also known as a "neck rib or "supernumerary rib in the cervical region," is a congenital overdevelopment of the transverse process of a cervical spine vertebra(C7) more than 2.5 cm (Normal). They are commonly attached to the seventh cervical vertebra. They vary in size, shape, attachment sites, and can occur unilaterally or bilaterally. [1] Cervical ribs tend to occur in approximately 0.5 to 1% of the population. [2] In more than 1/2 cases the cervical rib is unilateral and it is commoner on the right side. [3] Almost 90% of the cases of cervical rib are asymptomatic and do not require any treatment. [4] In fact well-formed cervical ribs (complete) on X-ray examination are usually

without symptoms. [3] However, in some cases, they can cause localized pain and compress surrounding structures, leading to necessary intervention. In such cases it can be differentiated with Cervical spondylosis, Carpal tunnel syndrome, Tumours or swellings compressing over the vessel or nerves in the neck, Thoracic outlet syndrome, Scalenus anticus syndrome, other causes of gangrene like Raynaud's, digital atherosclerosis, diabetes, collagen diseases, embolism, Syringomyelia, motor neuron disease. [1] A 23year old male patient came to department outpatient (OPD) complaints of Constipation, Protrusion of mass after defecation which is manually reducible and dropwise bleeding after

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defecation since 1month. Patient had no history of any other medical or surgical illness. On examination the patient was diagnosed as a case of Haemorrhoids. Patient was advised to undergo surgery for haemorrhoids after routine investigations (chest X-ray PA view, ECG, USG-abdomen and pelvis and blood test-haematological and biochemical). Chest X- ray PA view done suggestive of Bilateral Cervical Rib (Fig-1). So, the patient was diagnosed as the case of Bilateral Cervical rib. Neurological features like tingling and numbness in the little finger, medial aspect of hand and forearm is absent, there was no wasting of thenar, hypothenar eminences and forearm muscles and to rule

out vascular manifestation due to cervical rib Roose test, EAST- Elevated Arm Stress Test (Modified Roose test), Adson's test and modified Adson's test done which are negative^[1]So, Nerve conduction studies and arterial doppler of subclavian artery and of the upper limb are not done.^[1] Patient was operated for Haemorrhoids under spinal anaesthesia and cured completely enjoying his normal life after surgery. This patient was a normal healthy male with no history of any medical illness during investigation for the medical fitness he was diagnosed with bilateral cervical rib. This case aimed at presenting a very rare condition with the clinical images.

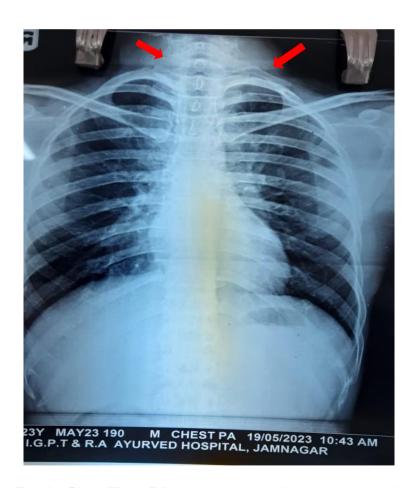


Fig. 1 - Chest X-ray PA view showing bilateral cervical rib

Consent of patient: Consent was taken from the patient before starting the treatment protocol as well as prior to publication of the case details and pictures.

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