SLIPPING RIB SYNDROME - CASE REPORT

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Background

Slipping rib syndrome (SRS) is an underdiagnosed condition caused by hypermobility of costal cartilages of false ribs, allowing the 8th to 10th ribs to slip under the rib above causing impingement of the intercostal nerve. It was first described by Cyriax in 1919, as an anterior rib subluxation causing intermittent pain in the lower rib arch (LRA) radiating to the side and the upper abdomen. SRS is likely related to overuse and sudden core movements, but it also could be a congenital or related to trauma. SRS is most often unilateral, left sided and affects females.

Case report

The case report presents a 29-year-old woman who came to physiatrist clinic because of the pain in the left LRA, which started in the second trimester of pregnancy and continuously lasted two months after delivery. The pain appeared as stabbing, increased with inhalation, severe intensity, mixed character, predominantly neuropathic, spreading mainly along the anterior part of the 10th rib. A "hooking" maneuver was performed, which confirmed the diagnosis of SRS. Patient performed 3 cycles of 10 times of physical therapy (breathing exercises and specific core stabilization exercises with passive procedures), also infiltration of dexamethasone (3x) and triamcinolone acetonide (3x) with 0.2% bupivacaine (6x) in the trigger points along the lower edge of the 10th rib. After 4 months of therapy, there was significant improvement.

Conclusion

SRS is a rare cause of pain in the chest area. It limits persons' ability in performing daily living activities and has a strong psychological impact. Differential diagnosis includes osteochondritis, intercostal neuralgia, chest trauma or Tietze syndrome. Initial treatment is conservative which includes symptomatic therapy, intercostal nerve block or botulinum toxin injection. Definitive treatment is surgical resection of the affected rib. Failure to recognize this syndrome can expose patient to unnecessary diagnostic procedures and lead to significant delays in treatment.

Keywords: chest pain, costal cartilage, rib