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Exploring agreement between ultrasound and nerve conduction studies for screening axonal degeneration associated in carpal tunnel syndrome

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Aim: To explore the agreement between ultrasound and Nerve Conduction Studies (NCS) for screening Carpal Tunnel Syndrome (CTS) associated with axonal degeneration.

Method: Seventy-eight (78) subjects (13 men, 65 women, mean age 61.02 ± 9.0 years), with 87 CTS hands enrolled and assigned into Group-1 (Demyelinated CTS, $n_1=46$) and Group-2 (CTS associated with axonal degeneration, $n_2=41$) based on the NCS performance. Previous identified cut-off values of ultrasound parameters were respectively used for group classification. Correlation and agreement between ultrasound and NCS measurements were examined. Cohen's kappa, concordance, sensitivity and specificity were tested.

Results: Pearson's r test revealed mild to moderate correlation (r=-0.242-0.338) while Spearman's rho test indicated mild to moderate agreement between NCS and each ultrasound parameter (r=0.213-0.408) for screening axonal degeneration associated in CTS, with overall satisfactory Cohen's Kappa (0.182-0.396), concordance (56.82%-76.25%), sensitivity (78.9%-86.8%) and specificity (46%-79.5%) among ultrasound parameters.

Conclusion: There is acceptable agreement between ultrasound and NCS for screening axonal degeneration associated in CTS. A combinative use of ultrasound and NCS has the potential to reflect the pathological stage in CTS. It can be a promising assessment protocol to provide complementary diagnostic information for better treatment regime planning.

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