# COMMON PERONEAL ENTRAPMENT

## 1. What is it?

The most common compressive neuropathy of the lower limb. The common peroneal nerve wraps around the fibular head and is prone to compression or excessive stretch injuries against this bony protuberance.

### 2. Clinical symptoms

- Burning/tingling/numbness/pain in the cutaneous distribution of the CPN
- Weakness of dorsiflexion and foot eversion
- May have a slapping gait / foot drop



### **3. Additional Characteristics**

- No associated low back symptoms
- Normal reflexes
- +ve SLR with peroneal nerve bias
- +ve tinels at fibula head

#### 4. Risk factors

- Prolonged sitting with legs crossed
- Repetitive or prolonged deep squat/kneeling
- Knee trauma: dislocation, fib fracture, direct blow
- Surgery

#### 5. Management

- Physiotherapy management initially (consider nerve glides)
- Consider AFO if foot drop causing trips
- Consider neuropathic pain medication review with GP
- Avoid compressive positions (deep flexion, legs crossed etc)

