



Palliative Care Emergencies: Malignant Spinal Cord Compression

Malignant Spinal Cord Compression (MSSC) is considered a medical emergency!

Early detection and treatment are essential to prevent permanent loss of function.

Signs and Symptoms

- Back pain at level of compression is the **most common** presenting symptom: can be localized at first and progress to radiating band-like pain
 - worse when lying flat, sneezing or coughing
 - improved with sitting or standing
- sense of weakness, heaviness or stiffness of extremities below compression and/or falls
- numbness, tingling of affected limbs
- urinary and/or bowel function changes

Intervention & Treatment

- The patients' condition, goals for care, and the potential for therapy success will define both the urgency and nature of the interventions undertaken.
- Immediate treatments may include: surgery, high doses of corticosteroids, and/or palliative radiation to decrease pain and preserve function

Management

- Identify patients at risk
- Know the signs and symptoms
- Contact physician **immediately** if you suspect MSSC
- Provide emotional support

MSSC:

- Compression of the thecal sac at the level of the spinal cord or the cauda equine (lumbar and sacral roots which descend below the distal tip of the vertebral column)
- Occurs in 5 to 10% of all cancer presentations, with over 85% of cases result from a tumor directly compressing the spinal cord
- May occur as a result of the tumor interrupting the cords' vascular supply or due to vertebral collapse or compression which leads to entrapment of nerves
- More commonly associated with metastatic disease from tumors of the breast, lungs, prostate, kidney and lymphoma