Management of Patients Presenting Late with Metastatic Spinal Cord Compression in Resource Poor Country- A Challenge



Dr Shalini Saini, Dr Kalpajit Dutta, Dr Deepti Ahuja, Dr Seema Mishra, Dr Rakesh Garg, Dr Nishkarsh Gupta, Dr Sachidanand Jee Bharti, Dr Vinod Kumar, Dr Sushma Bhatnagar BRA, IRCH, All India Institute of Medical Sciences, New Delhi



Objective

- To identify and judiciously use resources in patients presenting late with Metastatic Spinal Cord Compression (MSCC) in developing country
- To increase awareness among health care professionals and patients for early recognition of symptoms and prompt treatment

Background

- MSCC is a major cause of morbidity in cancer patients
- Incidence unknown
- Time of presentation is an independent factor affecting outcome
- MSCC requires early intervention as an clinical emergency
- Present knowledge about MSCC presentation and treatment is poor among health care providers

Study design

Retrospective observational study

Methodology

- Conducted over 6 months (July-December 2015)
- Place- Tertiary care cancer centre in India
- Patients admitted for severe back pain were observed
- Patients who were found to have MSCC were included
- Analgesic titration was achieved with intravenous Morphine infusion and adjunctive analgesics
- Patients were treated on the lines of MSCC management (Dexamethasone, Radiation therapy, Surgical intervention)

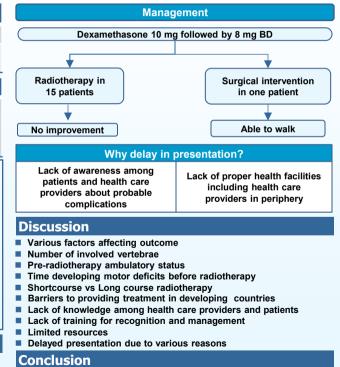
Results

- Average Numerical rating score on admission: 8.5/10
- One patient presented within 3 days of onset of weakness

		Average Time		
Symptom onset & presentation		50.7 days		
Presentation in OPD & treatment initiation		1.5 hr		
	Average po	wer lower lim	ıb	p value
Before intervention	2.5			0.5
After intervention		2.8		0.0
			Loss	of bowel bladder
		1.1	Weak	ness in Lower limb
			 Radiating pain Patients with MSCC 	
		•		
0 5 10	15 20	25 30	Obse	rved cases

References

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- S. L'Espérance et al. Treatment of metastatic spinal cord compression: CEPO review and clinical recommendations. Current Oncology. Vol 19, No 6 (2012)
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Judicious utilization of resources in developing country and the need to balance for treatment between patients with MSCC with poor vs better prognosis