

INFORMATION SHEET

Patients at Risk of Spinal Cord Compression



This leaflet provides information for patients at risk of spinal cord compression. It will explain what spinal cord compression is and what treatment you may receive should you develop it. Contact telephone number and details of how to obtain further information are given at the end of the leaflet.

Some of the words used in this leaflet may be unfamiliar to you. We have included an explanation of these terms at the end of the leaflet.

What is spinal cord compression?

Spinal cord compression (SCC) occurs when there is pressure on the spinal cord from a cancerous tumour. For some people spinal cord compression is the first sign that they may have a tumour. However, for most people affected it occurs later in the course of their disease.

How does it happen?

The spinal cord is protected by the backbone. The backbone is a fairly common place for secondary bone cancer to occur. Sometimes these bone secondaries swell and squash the spinal cord or sometimes they can weaken the bone.

What symptoms will I have?

The spinal cord acts as a messenger for the brain, telling your arms and legs to move and sending messages back to the brain. In most people the symptoms occur in the lower half of the body but some people may also be affected in parts of the upper body including the neck and arms.

Symptoms vary but may include:

- Pain
- Tingling/numbness
- Heaviness/weakness/paralysis
- Difficulty in passing urine or a bowel motion

If you develop any of these symptoms, you must contact your GP or Hospice nurse immediately. Out of normal working hours phone the Hospice Inpatient Unit on 03 546 3950. You may be advised to present to the emergency department at the Hospital.

What treatment will I have?

If your doctor suspects that you have spinal cord compression you will probably be asked to stay in bed, lying as flat as possible. This is very important because this is the safest and most supportive position for your spine. You may also be asked to wear a supportive collar or brace. If your doctor considers your spine to be stable you will be able to sit up. If this causes pain, please tell your doctor or nurse immediately.

You may be given tablets to take called steroids. These will reduce swelling in the area of your spine that is affected.

You may be sent for a special scan called an MRI scan. This allows your doctor to have a clear picture of your spine and shows where the problem is. If the scan confirms cord compression it will help to plan your treatment, which may include radiotherapy.

What will happen if I need radiotherapy?

Radiotherapy is high energy x-rays which will be carefully planned to the area that needs treatment.

To be able to plan your treatment you will be asked to go for a planning CT scan. During the CT scan you will lie on your back. The CT scan will take about 20 minutes. It is important to stay very still, so you may need to take some painkillers to make sure you are comfortable.

Your radiotherapy can be given in 1 treatment to up to 10. Your doctor will tell you how many treatments you will need. When you have your treatment you lie in the same position as you were for your CT scan so you might need to take some painkillers beforehand. Treatment is painless and will take about 10 minutes per day.

During your course of radiotherapy you will see the doctors and possibly physiotherapists if required. They will decide when you can start to sit up.

Will I need surgery?

Surgery may be considered for some people as part of their treatment, for instance when this is the first sign of cancer or if they have already had radiotherapy. In this case you will need to be transferred to another hospital under the care of a specialist surgeon.

What can I expect after my treatment has finished?

SCC affects each person differently. Following treatment, some people with weak legs need to use a stick, walking frame or wheelchair to keep their independence. Other people are able to walk without any assistance. The physiotherapist and nurses will work with you to help you become as independent as possible.

Could SCC happen again?

Yes, unfortunately in some people SCC can happen again. Sometimes a different part of the spine can be affected. If the symptoms mentioned above come back or suddenly get worse, you will need to contact your GP immediately.

Glossary

- **Catheter** – A small thin flexible tube which drains urine away from the bladder into a plastic collection bag which can be emptied as required.
- **Metastasis** – This is when the cancer has spread from one part of the body to another. Cancer that has spread is sometimes called metastatic disease or secondaries.
- **MRI scan (Magnetic resonance imaging)** – this is a special type of scan that uses magnetism to build up a detailed picture of areas of the body.
- **Paralysis** – Loss of power or sensation in any part of the body.
- **Radiotherapy** – this is a treatment for cancer using high-energy x-rays.
- **Secondaries** – If cancer has spread to another part of the body then it is described as secondaries. See metastasis.

