

## Spinal Cord Compression

### About emergencies fact sheet

#### **Spinal Cord Compression**

Spinal Cord Compression is a rare complication of cancer which has spread to the bones of the spine.

It is classified as a palliative care emergency because it can cause damage to the spinal cord and result in paraplegia or quadriplegia.

Early diagnosis and treatment is essential to reverse or halt symptoms and prevent further damage.

All messages to and from the brain and body run through the large bundle of nerves known as the spinal cord. Nerves from the spinal cord send and receive messages between the body and the brain. The spinal cord passes through a channel in the spine's protective bones called vertebrae.

The most common cause of Spinal Cord Compression is secondary cancer that has spread to the bones of the spine causing swelling, fracture or collapse of the vertebra, putting pressure on the nerves of the spinal cord or its blood supply.

This can cause damage or death of the nerve cells, and lead to a loss of movement and feeling below the level at which the spinal cord is damaged. The area of the spine most often affected is the upper back.

People with cancer of the lung, breast, prostate, kidney; multiple myeloma and non Hodgkin's lymphoma are most at risk.

Unlike other cells in the body, if nerve cells die or are damaged they can't usually repair themselves or be replaced.

Spinal Cord Compression can develop quickly or slowly and the early signs and symptoms are often overlooked.

#### **Signs and symptoms**

If you or your doctor think you are at risk of developing Spinal Cord Compression, it is extremely important that any of the following signs and symptoms are reported and investigated:

#### **New back pain**

- tenderness over the bones of the spine, especially in the upper back;
- pain that is worse with movement;
- pain that feels like a band around the body;
- pain made worse by coughing or straining; or
- pain which radiates across the lower back, buttocks and/or down the legs.

## New stiffness or weakness:

- changes in the strength of fingers, hands, feet, or legs; or
- feeling unsteady or loss of coordination.

## Changes to feeling

- pins and needles or tingling; or
- numbness or loss of feeling in any part of the body and limbs.

## Changes to bladder and bowel function (late symptoms)

- difficulty passing urine, or controlling your bladder; or
- difficulty using or controlling your bowels.

These symptoms could be caused by other conditions, but it is very important to rule out the possibility of Spinal Cord Compression.

If any of these symptoms develop suddenly it is vital that **regardless of the time of day** you inform a health care professional. Don't put it off till the next day.

The sooner it is diagnosed, the more likely it is that treatment will be successful in preventing damage.

## Management and treatment

Investigations the doctor may use to assist in diagnosis are an X-Ray of the spine and an MRI scan, and sometimes a CT scan.

## Initial management

If spinal cord compression is suspected or proven:

- **Bed rest**, to lessen the chance of movement damaging your spine
- **High dose steroids**, usually dexamethasone, to reduce any swelling

and inflammation which may be putting pressure on the spinal cord.

## Definitive Management

If Spinal cord compression is diagnosed, management and treatment includes radiation therapy, surgery, and sometimes chemotherapy. These treatments may often be combined.

The treatment you are prescribed will depend on:

- If you are well enough to have the treatment
- How much radiotherapy the area of the spine has had in the past
- If the spine needs strengthening supporting to remain stable
- The type of cancer

Sometimes, despite every effort, the effects of spinal cord compression are not reversible.

If this is the case you will have adjustments to make.

Your health care team will work with you and your carers, providing support, equipment and services to help you manage the new circumstances and maintain mobility and independence.

## Related Fact Sheets

### Emergencies in Palliative Care

#### CONTACT DETAILS

Palliative Care South

Ph: 03 6224 2515 or [palliativecare.south@dhhs.tas.gov.au](mailto:palliativecare.south@dhhs.tas.gov.au)

Palliative Care North

Ph: 03 6336 5544 or [palliativecare.north@dhhs.tas.gov.au](mailto:palliativecare.north@dhhs.tas.gov.au)

Palliative Care North West

Ph: 03 6440 7111 or [palliativecareservicenw@dhhs.tas.gov.au](mailto:palliativecareservicenw@dhhs.tas.gov.au)