The Role Of Kyphoplasty And Vertebroplasty In The Treatment Of Cancer Patients With Pathologic Vertebral Fractures: Casuistry In A Oncological Hospital In Portugal In The Last 5 Years

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Purpose

Cancer is a disease with a high prevalence in all societies. Vertebral fracture is a common associated co-morbidity, which augments pain and suffering. Percutaneous vertebral cementoplasty is a simple surgical procedure that can significantly improve patients' quality of life, even in palliative cases. In spite of this, controversy still exits regarding selection of patients, procedures and to which vertebral fractures the procedures are indicated.

To analyze casuistry of cementplasty procedures performed in the Neurosurgery Department over a period of 5 years.

To share the experience in an Oncological Institute, with a large number of cancer patients submitted to percutaneous vertebral intervention.

To discuss controversy issues, including pitfalls and tricks.

Metherial and Methods

Retrospective analysis of our experience with a large number of palliative patients submitted to percutaneous vertebral cementoplasty in vertebral fractures over a period of 5 years.

The surgical decision towards percutaneous vertebral cementoplasty was obtained during multidisciplinary meetings based on clinic criteria. The Tokuashi Prognostic Scale, MRI epidural compression scale published by Bilsky / Yamada (2010) and SINS vertebral instability Scale were the most used to support decisions.