Clinical outcome study of primary intra-spinal tumour at Yangon Orthopaedic Hospital

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Background

- Intraspinal tumours are rare central nervous system neoplasms.
- There is no reported clinical outcomes of intra-spinal tumours in Myanmar.
- We present here the cases 27 patients with intra-spinal tumours treated surgically in our hospital and their short term clinical outcomes.

Methods

- We conducted a retrospective review of 27 patients with intraspinal tumours who underwent surgical treatment in our institution between June 2020 and December 2021.
- Their age, sex, initial presentation, tumour location, level of affected vertebral column, histological diagnosis and clinical outcomes were reviewed and analyzed up-to 6months.

Results

- Of these 27patients,15 (67%) were men and12 (33%) were women.
- The mean age was 56.3 years (range 13 to 72 years).
- All of these were primary tumours, we excluded metastatic tumours.
- The histological diagnosis of the primary tumour included 15 (55.55%) neurofibromas,7(25.92%) schwannomas, 4(14.81%) meningiomas, 1(3.7%) ependymomas.

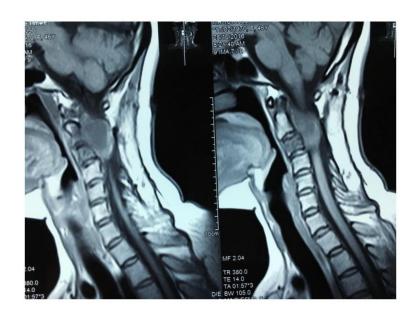
- The most common site of the tumour is thoracic.
- The most common clinical presentation of the primary spinal tumours was pain (92.5%).
- Most of the patients with nerve sheath cell tumours (schwannomas and neurofibromas) had symptoms of sensory disturbance and pain.
- All of the patients with meningiomas had symptoms associated with cord compression.
- Mean VAS score of back pain were reduced after operation and successively reduce to nearly 0 at 3 months follow up.

- Mean MRC grading of radiculopathy was also increased by one grading at 3months follow up and nearly normal function at 6months follow up.
- In myelopathy cases most of the cases were not significantly improved at 3 months follow up, but at 6 months follow up most of the cases regained to useful functional scale (ie; Frankel D, E).

Case example



MRI cervical spine



Tumour removal and fixation was done (Biopsy is neurofibroma)



Conclusion

- Back pain and roots compression symptoms were the most common presentations in patients with intraspinal tumours.
- Surgery is the "gold standard" in the treatment of spinal cord tumours.
- Complete removal of the lesion is the first goal. Postoperative results are dependent on the surgeon's experience, but also on the preoperative neurological status and histology types.