Malignant spinal cord compression (SCC) is an oncologic emergency. SCC can be caused by direct extension of a tumor into the spinal cord or metastasis to the vertebral column, resulting in increased pressure on the spine (Huff, 2005; Prasad & Schiff, 2005; Purdue, 2004). Approximately 10%–15% of patients with cancer may develop SCC. See Figure 1 for a radiology image of SCC.

SCC is seen most often in metastatic cancer of the (Flounders & Ott, 2003; Held-Warmkessel, 2005; Huff, 2005; Prasad & Schiff, 2005)
- Breast
- Lung
- Prostate.

SCC also may be seen with
- Non-Hodgkin lymphoma
- Multiple myeloma
- Renal carcinoma
- Colorectal cancer
- Pancreatic cancer
- Sarcoma
- Cancer of unknown primary origin.

Nonmalignant causes of SCC include (Flounders & Ott, 2003)
- Herniated disc
- Fractures of the vertebrae as a result of osteoporosis
- Abscess in the spinal column
- Herpes zoster.

Symptoms

Symptoms of SCC vary depending on the area of spinal cord involvement and the extent of compression. See Table 1 for distribution of spinal levels affected by SCC. The amount of impairment and loss of function with which patients present for treatment are predictive for the expected outcome. Loss of function rarely

### Table 1. Area of Occurrence With Malignant Spinal Cord Compression

<table>
<thead>
<tr>
<th>AREA OF SPINE AFFECTED</th>
<th>CASES (%)</th>
<th>CANCERS ASSOCIATED WITH SITE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thoracic</td>
<td>70</td>
<td>Lung, prostate, or breast</td>
</tr>
<tr>
<td>Lumbar</td>
<td>20</td>
<td>Gastrointestinal or prostate</td>
</tr>
<tr>
<td>Cervical</td>
<td>10</td>
<td>Breast</td>
</tr>
<tr>
<td>Multiple levels affected</td>
<td>30</td>
<td></td>
</tr>
</tbody>
</table>

Note. Based on information from Flounders & Ott, 2003; Huff, 2005; Prasad & Schiff, 2005; Purdue, 2004.