Treatment Algorithm for Metastatic Spinal Cord Compression (MSCC)

1. Symptoms suggestive of spinal metastases (with neurological symptoms) or signs suggestive of MSCC (Refer to MSCC Standard Operating Procedure)

2. Contact your local Acute Oncology Service (AOS)

3. Comprehensive assessment of current neurology and detailed medical history (including whether the patient has already had radiotherapy to the affected area)

4. Urgent MRI (or CT scan if not possible) <24 hours (sooner if paralysis imminent and emergency surgery proposed).

5. Start Dexamethasone 16mg (2 x 8mg doses IV/O daily) with PPI cover as soon as possible after assessment unless contraindicated – if there is clinical or radiological suspicion of lymphoma or myeloma this must be discussed immediately with an Oncologist prior to commencing steroids. Nurse the patient using spinal precautions for an unstable spine (as per Trust policy) until the stability of the spine is confirmed by the MSCC Co-ordinator following review of the scan by the Spinal Surgeon on call.

6. If the decision is that the patient should have surgery then the patient will be transferred to St George’s as a priority admission – this will be organised by the MSCC Co-ordinator.

7. If the decision is that the patient should not have surgery it is then the referrer’s responsibility to contact the Clinical Oncology Registrar on call again at the Cancer Centre (with advice from the MSCC Co-ordinator) to initiate urgent radiotherapy and transfer.

8. All cases referred through this pathway will be discussed retrospectively within the Neuro/Spinal Oncology MDT Meeting at St George’s Hospital on Friday morning at 08.30hrs. The outcome of this meeting will be fed back to the original referrer, the AOS Service from the referring Trust (via the Cancer Centre) and the patient’s GP.

9. Contact MSCC Co-ordinator on Bleep 6027 during office hours and Bleep 7242 out of hours and weekends via switchboard (020 8672 1255) for advice. Complete the MSCC referral form at http://www.stgeorges.nhs.uk/docs/hcp/neo_msc.doc.

10. Email MSCC Referral Form to MSCC Centre to stgh-tr.MSCC@nhs.net. Fax return – 020 8725 4613 (if no nhs.net account) ALSO E-mail or fax a copy of the form to the patient’s Cancer Centre (Royal Marsden Hospital) rmh-tr.MSCC@nhs.net (Fax: 020 7808 2306) or (Royal Surrey County Hospital) rsc-tr.MSCC@nhs.net (Fax: 01483 464876).

11. Transfer MRI/CT images to MSCC Centre via IEP urgently for review if patient not at St George’s.

12. Transfer MRI/CT images to the Cancer Centre via IEP urgently at the same time as sending them to St George’s Hospital.

13. Contact the Clinical Oncology Registrar on call at the Cancer Centre via the switchboard at either the Royal Marsden (SWLCN) or the Royal Surrey County (SWSHCN) and warn them that the patient may require urgent radiotherapy if surgery is not appropriate.