

THORACOSCOPIC ANTERIOR INTRALESIONAL RESECTION IN METASTATIC VERTEBERAL TUMORS

Thesis

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Orthopedic Surgery*

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INTRODUCTION

Incidence of spinal metastases:

Cancer is the second leading cause of death in the United States, and roughly two-thirds of cancer patients develop metastases. Common sites of metastasis are lung and liver, with the skeletal system the third most common. Within the skeletal system, metastases favor the spine. Vertebral body metastases are found in over one third of cancer patients. Clinical evidence of spinal cord, cauda equina, or nerve root compromise is found in 5% of all cancer cases.

The thoracic region of the spine is most frequently involved in metastatic disease, followed by the lumbar regions (20%) and cervical (10%). Intramedullary metastases occur, but are much less common.

The most common cancers involving the spine are lung, breast, prostate, and renal cell. A recent review found metastatic spinal involvement in 90% of prostate, 75% of breast, 55% of melanoma, 45% of lung, and 30% of renal cell carcinoma patients. However, symptomatic spinal cord compression is less common and is found in 22% of breast, 15% of lung, and 10% of prostate cancer patients. Either lytic or
