Early Result In Managing Skeletal Metastasis In Budding Orthopedic Oncology Center In Malaysia.

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INTRODUCTION:
Skeletal metastasis is the commonest bone malignancy in patient aged 40 and above1. Appendicular skeletal metastasis is less common than axial metastasis. We review cases of appendicular skeletal metastasis at our institution.

METHODS:
17 patients with appendicular skeletal metastasis from January 2016 till January 2017 were reviewed at our institution. Patient data was trace from oncology registry to evaluate survival rate and complications. Kaplan Meier curve was used to review patient’s survival.

RESULTS:
Out of 17 patients, 5 were female and 12 were male. 47.1% (n=8) of the patients had visceral metastasis and 52.9% (n=9) had spine metastasis upon referral. 4 of the patients had isolated bone metastasis. Primary site and metastasis are shown in table 1. 58.8% (n=10) of the patient underwent surgery due to pathological fracture to appendicular skeleton. 75% of our patient survive more than 6 months since the date of orthopedic referral (Diagram 1).

DISCUSSIONS:
Aims of managing appendicular skeletal metastasis is to reduce pain, improve mobility and improve quality of life2. Skeletal metastasis presenting with pathological fracture should be treated operatively follow by radiotherapy whenever possible3. In selected cases where survival is predicted to be less than 3 months, conservative treatment is preferred. Due to small number of sample size, we were not able to correlate independent factors associated with surgical intervention.

CONCLUSION:
Patient with appendicular skeletal metastasis benefits from surgery regardless the intents of treatment being palliative nor curative.

REFERENCES:
3. Nakashima H, Katagiri H, Takahashi M, Sugiura H. Survival and ambulatory function after endoprosthetic replacement for metastatic