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PAIN AND SYMPTOM MANAGEMENT IN PATIENTS WITH MALIGNANT SPINAL CORD COMPRESSION (MSCC) IN PALLIATIVE CARE SETUP AT A TERTIARY CARE CENTRE: A RETROSPECTIVE STUDY

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Background: Malignant spinal cord compression (MSCC) is one of the palliative care emergencies where rapid and early management has drastic effect on patients' outcome.

Aim: This study was done to evaluate the pain and symptom burden assessment and management in patients with MSCC in palliative care setup.

Materials & Methodology: We reviewed the records of patients with MSCC presented to pain clinic over the period of one year. Details of their symptom burden like back pain, motor or sensory weakness, bladder or bowel involvement and radiological data (CT/MRI) of level of compression and details of treatment were reviewed.

Results: Records of 43 patients with MSCC in palliative care setup were reviewed. Pain scores (NRS) more than 6 was present in 55.8% of patients. Morphine was prescribed in 69.8% and fentanyl

patch in 4.6% of patients. Adjuvants used were gabapentin, pregabalin, flupirtine, amitriptyline and duloxetine for neuropathic pain. The commonest treatment employed was steroids (79.1%) followed by radiotherapy (74.4%) and physiotherapy (41.9%). 25.6% patients were advised for Taylor's brace and all patients were counselled, prognosticated and advised for dietician referral. Issues like bladder and bowel care, pressure sores, use of air mattresses or cushions and psychological issues were also dealt. MSCC has overall poor functional outcome but pain control and maintaining mobility of patients are key to palliative approach.

Conclusion: Symptom burden is very high in MSCC. Multidisciplinary approach is required for its management. It has overall poor functional outcome but pain control and promoting functional independence are key to palliative approach.

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