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Treatment of tumours involving the spine

Of the tumours, the most frequent occurrences in the spine region are the result of other tumours, or metastases. Tumours originating from the spine and nerve structures occur less frequently.

Tumour tissue can involve all the structures that make up the spine and the tissues surrounding the spine and spread to nearby organs as well. Most often, breast, lung and prostate cancer metastasise to the spine. Kidney cancer, myeloma and melanoma metastases also occur.

In the case of tumours, the specific treatment strategy depends primarily on the initial tumour localisation/foci, which is specified by taking a tissue sample (biopsy). The involvement of the spine, the spread of the tumour in other parts of the body, the manifestations of paralysis, the patient's life expectancy and their general condition are also important.

Patients who develop a spinal fracture or have a tumour pressing on the spinal cord and are starting to become paralysed need surgical treatment.

The goal of surgical treatment is to remove the tumour, release the spinal cord and maintain a stable spine, allowing the patient to continue living an active life. Surgical treatment is only one part of the oncological treatment of the tumour. In most cases, surgical treatment is followed by radiotherapy in the operated area.

In the case of a tumour originating in the spine itself, an individual treatment plan is drawn up for each patient. The treatment plan for oncological patients in the Centre of Spine Surgery at the East Tallinn Central Hospital is drawn up by the oncology council in cooperation with pathologists, radiologists and chemotherapy and radiotherapy doctors. Our centre has the greatest experience in the surgical treatment of spine tumours in Estonia.

More information about oncological treatment at our hospital can be found at cancer.itk.ee