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Intramedullary metastasis of pulmonary carcinoma: Case report

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Background: Intramedullary spinal cord metastasis (IMM) of pulmonary carcinoma are extremely rare. Review of the literature reveals only 300 cases documented.

Case description: A 54-year-old man K.S, a medical radiology technician, with history of chronic tobacco use presented with progressive tetraparsis with predominant weakness of the left limbs for 03 Months

Radiologic explorations: Resonance Imaging (MRI) of the cervical spine showed intradural intramedullary tumor at the spinal level of C4-C5.

The Treatment: In order to ovoid tetraplegia the patient underwent surgery with a total macroscopic tumor removal.

Histopathology: Diagnosis of metastatic carcinoma, Thoracic CT showed a 1,27 X 1,42cm right hilar nodule. The patient was advised Chemotherapy and Radiation by oncologists. **Discussion:** Intramedullary spinal cord metastasis pulmonary carcinoma is extremely rare,

Theyrepresent 1% of all spinal cord tumors and 1-3% of intramedullary tumors.

pulmonary cancers are the most frequent type of tumors with spinal cord metastasis (48% of cases.

Conclusion: Metastasis to the spinal cord is rare and may be the first manifestation of a primary cancer. Rapid progression of neurological symptoms should warrant imaging and may indicate metastasis to the spinal cord, especially in patients with previously diagnosed cancer. -Though the prognosis for metastatic pulmonary carcinoma patients is poor, early detection and appropriate treatment of such cancer patients may ameliorate symptoms and prolong good quality life.

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