Rheumato-Geriatric Day

Imaging of Bone Metastases: About 52 Cases Collected at the Oncology Unit of Fattouma Bourguiba Monastir University Hospital

Farhat A (1)
Zaied S (2)
El Achek MA (1)
Zrour S (1)
Hafsa C (3)

- (1) Department of Rheumatology, Monastir Hospital, Tunisia
- (2) Unit of carcinology, Monastir Hospital, Tunisia
- (3) Department of radiology, Monastir Hospital, Tunisia

Please cite this article as: Farhat A. et al. Imaging of Bone Metastases: About 52 Cases Collected at the Oncology Unit of Fattouma Bourguiba Monastir University Hospital Middle East Journal of Age and Ageing. 15(3):18. DOI: 10.5742MEJAA.2018.93520

ABSTRACT

Introduction: Bone metastases (BM) are frequent, often symptomatic. It is a major event in the cancer's evolution. Although the radiological methods are numerous, the chronology of their achievement is not yet well codified.

Objectives: To identify the epidemiological and clinical particularities of BM, to identify the interest of the different radiological techniques in their diagnosis and their follow-up by comparing them with the data of the literature and to specify their radiological characteristics according to the primitive cancer.

Methods : 52 BM files, collected at the oncology unit, were retrospectively reviewed and compared to literature data.

Results: Average age was 55 years [29-86]. SR=0.48. BMs were incidentally discovered as part of an extension assessment in 67.3%. Pain was constant. Spinal cord compression was present in 7.7%. The onset time of BMs ranged from zero to 156 months with an average of 12 months. The most common radiological aspect was osteolytic in 53.8%. Bone locations were multiple in 88.5% and spinal location was the most common (98.1%) followed by pelvis (50%). We used CT in all cases, magnetic resonance imaging in 17 cases and scintigraphy in 32 cases. Breast cancer ranked

first (61.5%). The prostate cancer was noted in 7.7%, lung cancer in 1.9% and digestive tumors in 17.3% of cases. The origin of the primitive was undetermined in 1.9%.

Conclusion: BMs remain a major turning point in the evolution of cancer. Their research is a crucial step for perfect care. A polyvocal exploration strategy must be adapted according to several symptoms especially neurological ones.