USEFULNESS OF THE SINS SCORE IN THE PHYSICAL THERAPY MANAGEMENT OF AN ONCOLOGY PATIENT: A CLINICAL CASE REPORT.

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Background

The rehabilitation of an oncologic patient is a difficult task from which the physiatrist does not shy away. The spine is afflicted from neoplastic diseases which can lead to instability, that it can cause deformity, pain, and spinal cord compression and is an indication for surgery/radiotherapy. The spinal instability neoplastic score (SINS) helps to assess tumor-related instability of the vertebral column. It has been shown to be useful in guiding the mobilization or operative management of patients with neoplastic spinal disease and correlates with patient-reported outcomes.

Case report

An elderly oncologic patient is hospitalized and at the level of the vertebral bodies of L2, L3, L4 and L5, we found areas of subtle osteolysis, in the presence of degenerative phenomena and one area of sub-centimetric osteolysis, , respectively at the level of the distal third of the sternal body, of D7 and D8, of the left hemi-sacrum. We used the Spine Instability Neoplastic Scale (SINS) and obtained a score of 8, which characterized a potential vertebral instability with a significant risk of vertebral fracture caused by lytic lesions of a neoplastic nature. So we e prescribed a trunk orthosis; we started the therapy for the primary neoplasm first in hospital and subsequently establishing new outpatient checks after having activated a home physiotherapy service and managing to discharge the patient to her home.

Conclusion

The concept of spinal instability remains important in the clinical decision-making process for patients with spine neoplasms. SINS is a score that it has the potential to be a valuable guide to the management of patients with spinal metastases. In this case report the skills of the geriatrician and those of the physiatrist and the oncologist are called upon to collaborate closely to take charge of a complex patient using this score in clinical practice.

Keywords: elderly patient