



DR VANESSA SAMMONS

NEUROSURGEON



Guide to  
SPINAL CORD TUMOURS

[WWW.DRVANESSASAMMONS.COM.AU](http://WWW.DRVANESSASAMMONS.COM.AU)



## KEY FACTS

- A tumour is an abnormal mass of tissue that develops when cellular problems disrupt the balance between cell growth and cell death
- Symptoms of benign and cancerous tumours that form in the spinal cord include back pain, weakness of limbs, reduced sensation, and bladder, bowel and/or erectile dysfunction
- Some types of tumours can be closely monitored, others require surgery and/or radiotherapy and chemotherapy
- Surgical patients are typically discharged in under a week following surgery, and full recovery may take as long as a year depending on spinal cord involvement

## WHAT ARE SPINAL CORD TUMOURS?

A tumour is an abnormal lump or mass of tissue that can appear almost anywhere in the body. Tumours can be tiny nodules or large masses. They develop when the body's ability to grow, divide, and replace cells is disrupted, and an excess of cells is produced.

There are many different tumours that can develop on the spine and nerve sheath:

### **Nerve Root/Nerve Sheath Tumours that can occur next to the spinal cord**

- Schwannoma
- Neurofibroma

### **Spinal Cord Tumours**

- Ependymoma
- Subependymoma
- Myxopapillary Ependymoma
- Paraganglioma
- Dermoid
- Lipoma
- Low Grade Astrocytoma
- Anaplastic Astrocytoma
- Glioblastoma

Tumours are characterised in one of three ways:

- **Benign** – made up of non-cancerous cells
- **Premalignant** - made up of cells that have the potential to become malignant
- **Malignant** – comprised of cancerous cells

Benign tumours can become premalignant or malignant, so it's important to monitor any growth that appears in the body.

## WHAT ARE THE SYMPTOMS OF SPINAL CORD TUMOURS?

Tumours put pressure on the spinal cord and nerve roots. Tumours that put pressure on the spinal cord cause:

- Decreased sensation
- Progressive weakness
- Unsteadiness with walking
- Paralysis
- Erectile dysfunction
- Loss of bladder/bowel control
- Back pain

Symptoms of tumour pressure on spinal nerve roots include:

- Weakness
- Numbness
- Tingling
- Radiating pain
- Difficulty walking

## WHAT CAUSES TUMOURS ON THE SPINE AND SPINAL CORD?

It is not yet clear why spinal tumours develop. They may be genetic in nature or the result of environment toxins. Some tumours are linked to inherited syndromes such as neurofibromatosis. Spinal and spinal nerve tumours are further classified like this:

- **Primary spinal cord tumours** originate in the cells within or surrounding the spinal cord. Meningiomas and neurofibromas originate in cells next to the spinal cord and are the most common primary spinal and non-cancerous tumours.
- **Secondary spinal cord tumours** develop when cancerous cells in other parts of the body spread (metastasise) to the spinal area. The tumours grow in the vertebrae, the space between the bones, and the epidural space (an outer layer of tissue around the spinal cord).

## WHEN SHOULD I CONSULT A DOCTOR?

Do not hesitate to consult a medical professional if you experience weakness, numbness or bladder/bowel dysfunction. The majority of spine tumours and spinal nerve root tumours are not life-threatening, but some are. “If caught early and treated aggressively, it may be possible to prevent further loss of function and regain nerve function,” reports the [Mayo Clinic](#).

## HOW ARE SPINE TUMOURS DIAGNOSED?

An initial consultation regarding symptoms or signs caused by tumours begins with a discussion of your symptoms. Next, your doctor will discuss your medical history to rule out other conditions that have similar symptoms. A physical exam completes the preliminaries. When doctors suspect a spinal tumour, they may order tests to understand the tumour more fully:

- Spinal MRI – creates accurate images of the spine, spinal cord, and nerves
- Biopsy – to determine whether a tumour is cancerous or benign

An accurate and comprehensive view of a spine tumour helps doctors determine which treatment or procedure will help achieve optimal healing.

## WHAT IS THE TREATMENT FOR SPINE TUMOURS?

Benign spinal tumours that are too small to cause symptoms may simply be monitored. Other tumours likely will require surgery. The goal of surgery is to excise the tumour completely without compromising spinal cord and/or nerve function. Two key considerations include:

- What type of tumour it is (benign, precancerous or cancerous)
- Whether it is a primary or secondary tumour

The procedure is performed under general anaesthesia. An incision is made in the skin overlying the tumour and the surgeon works to carefully dissect the tumour from the surrounding structures. (Complete excision is not always possible and tumours may be treated post-surgically with chemotherapy or radiation.) The incision is stitched and closed with a dissolving suture and covered with a gauze bandage.

## WHAT CAN I EXPECT AFTER SURGERY?

After surgery for a spinal tumour, you will be taken to an observation room where your progress will be monitored. When you wake up, you may feel drowsy. You may experience discomfort at the treatment site which should be communicated to the nurse looking after you so pain can be controlled. Oral and intravenous pain medications will help to keep you comfortable.

You will be taken to your hospital room when you are stable. Most patients are discharged after 3 or so days and given a prescription for oral pain medication.

## WHAT SHOULD I DO AFTER SURGERY?

Self-care is an important part of a successful recovery. You will be provided with guidelines which should be followed carefully regarding bathing, a return to normal activities, and whether or not you will need rehabilitation or physical therapy.

## SHOULD I FOLLOW UP WITH DR SAMMONS AFTER SURGERY?

Yes. You will need to see Dr Sammons for a follow-up visit after surgery. A practice nurse will reach out to you after you have returned home to schedule your appointment. Should you have any concerns prior to your visit, Dr Sammons is happy to talk with you earlier to address them. For patients with cancerous tumours, you will have follow up appointments with an oncologist.

Please call our rooms if you have any additional concerns or questions.



Hello!

I'm a Neurosurgeon at North Shore Private Hospital, Gosford Private Hospital, Brisbane Waters Private Hospital and the Sydney Adventist Hospital. I treat all neurosurgical conditions, but with a particular interest in Peripheral Nerve Surgery. I pride myself on providing personalised and thoughtful patient care and utilising my skills to achieve the best outcome possible.

I believe that a great neurosurgeon will ensure you feel listened to, will ensure that you understand what your surgery involves, and should also work together with your GP to achieve the best outcome for you.

*Dr Vanessa*

MBBS (Hons) MPhil FRACS (Neurosurgery)



## CONSULTING ROOMS

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