



*Case Presentation:*

*Presenter –*

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- 70yr female came with **c/o pain over the low back for the past 2-3 months with weakness of bilateral lower limb (left > right) for the past 1 month**

**HOPI : Pt was apparently normal 2-3 months ago**

- **H/O Pain present**
- ✓ **Location –low back ,Duration – 2-3months**
- ✓ **Gradual in onset ,Progressive and increased in severity for the past 1 month,**
- ✓ **Nature – dull aching**
- ✓ **Non radiating , associated with difficulty in walking, weakness of bilateral lower limb 1 month**
- ✓ **NO aggravating factors, Relieves on talking rest and medication**
- ✓ **No diurnal variation**



- **H/o Weakness present over bilateral lowerlimb**
- **Gradual** in onset
  - ✓ **Progressive** in nature
  - ✓ **Duration 1month**
  - ✓ **H/o change in gait (?unsteadiness)**
  - ✓ **H/o difficulty in walking,**
  - ✓ **H/o difficulty in climbing stairs ,**
  - ✓ **No h/o slippage of chappals**
- **No H/o claudication, numbness/Parasthesia, No h/o trauma**

- **Past history-**

- ✓ **H/o LVF, ARF and NSAID induced GI present**

- ✓ **No h/o DM, BA, TB, HTN, Drug allergy, any other surgeries in past.**

- **Personal history -**

- ✓ **NO h/o evening raise in temperature , loss of weight and appetite, no h/o bowel and bladder disturbance**



- **General Examination:**

- ✓ Conscious ,oriented, mod built and mod nourished
- ✓ No Pallor, Cyanosis, Icterus, Lymphadenopathy, Pedal edema.
- ✓ Pr-90/mt ; RR- 20/mt spo2 99% in room air ;BP- 130/90mmhg

- **Systemic examination**

- ✓ CVS- S1S2 +
- ✓ RS – NVBS
- ✓ Per abdomen soft ,BS +

- **Local Examination** : Pt examined in a lying posture

**Inspection-** No visible deformity, prominence of paraspinal muscles, scars, sinuses, swellings.

**Palpation** –No local raise in temperature, No palpable deformity, no paraspinal muscle spasm,  
**Tenderness present at low back (at L1 level).**



- **Neurological Examination:**
- HMF, cranial nerve examination normal
- Upper limb – normal

- Lower limb
- Motor-Bulk – normal, Tone – normal, Gait – antalgic Gait, No involuntary movements

✓ Power

| Lower limb         | Right | Left |
|--------------------|-------|------|
| Hip flexion        | 4/5   | 4/5  |
| Hip abduction      | 4/5   | 4/5  |
| Knee extension     | 4/5   | 3/5  |
| Ankle dorsiflexion | 4/5   | 3/5  |
| EHL                | 4/5   | 3/5  |
| Plantar flexion    | 4/5   | 3/5  |

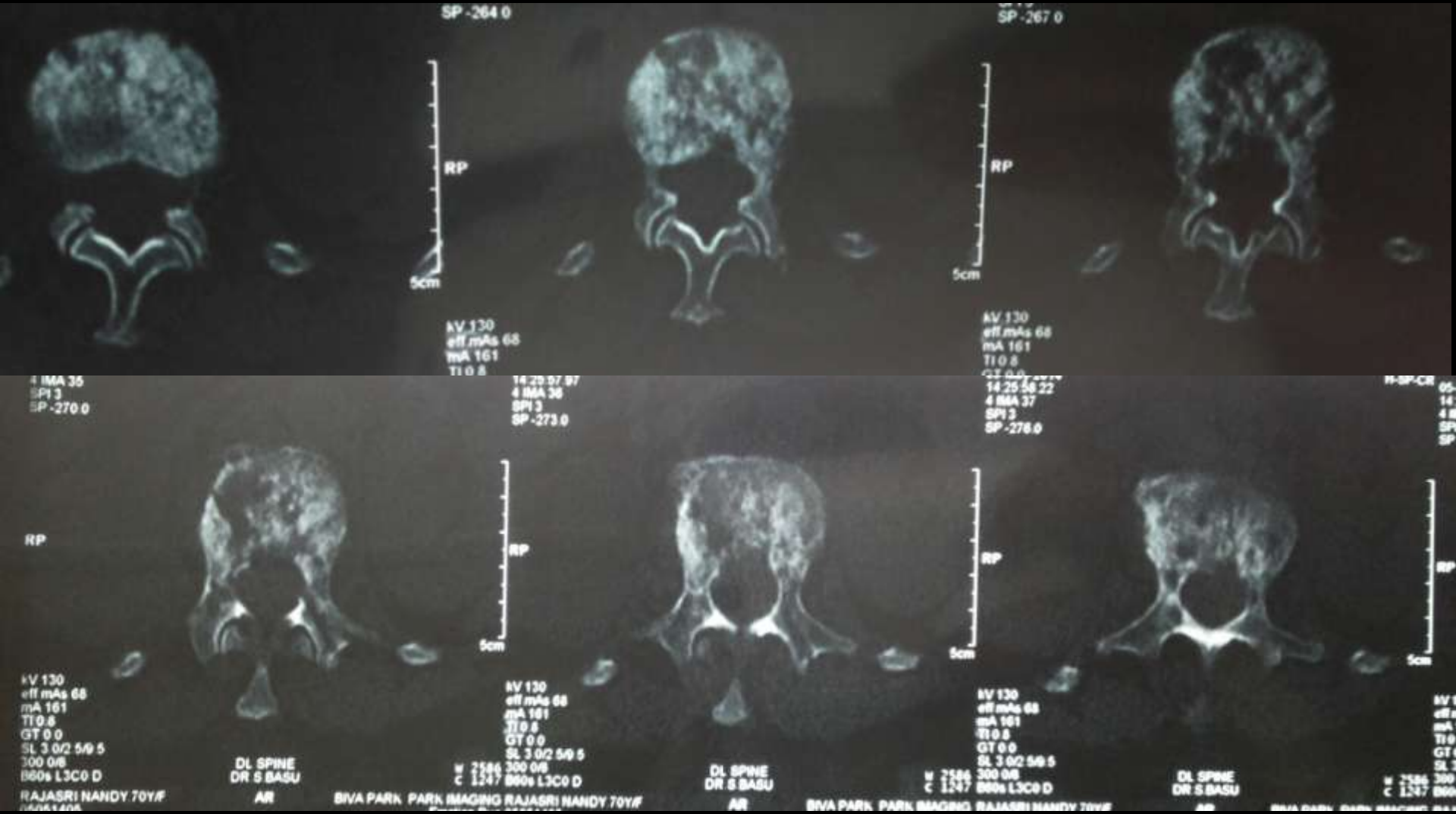
- ✓ Sensory – Intact, Lower limb Reflexes – Present (normal)



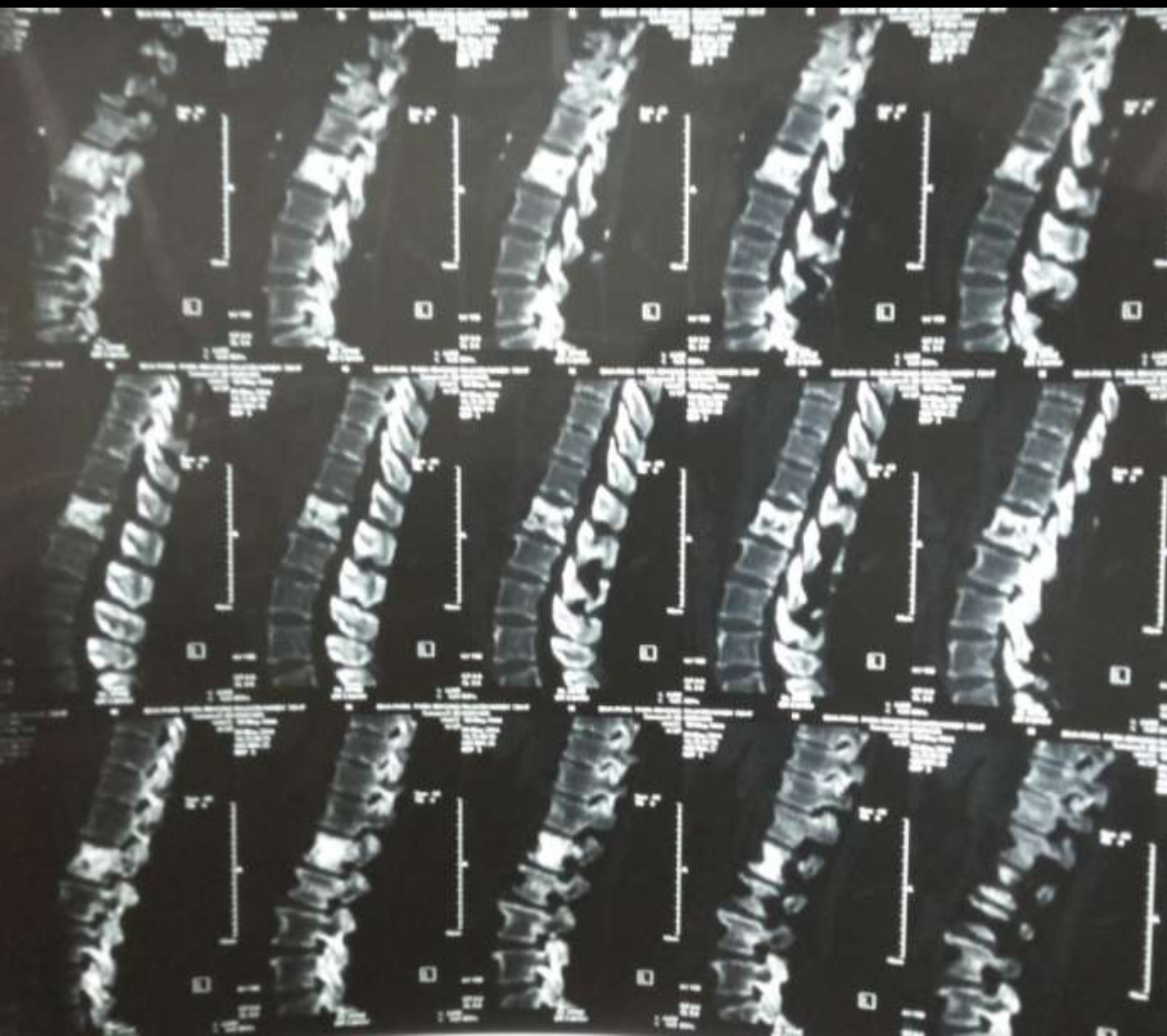
# X-Rays supine , standing AP and lateral



# CT – Axial images



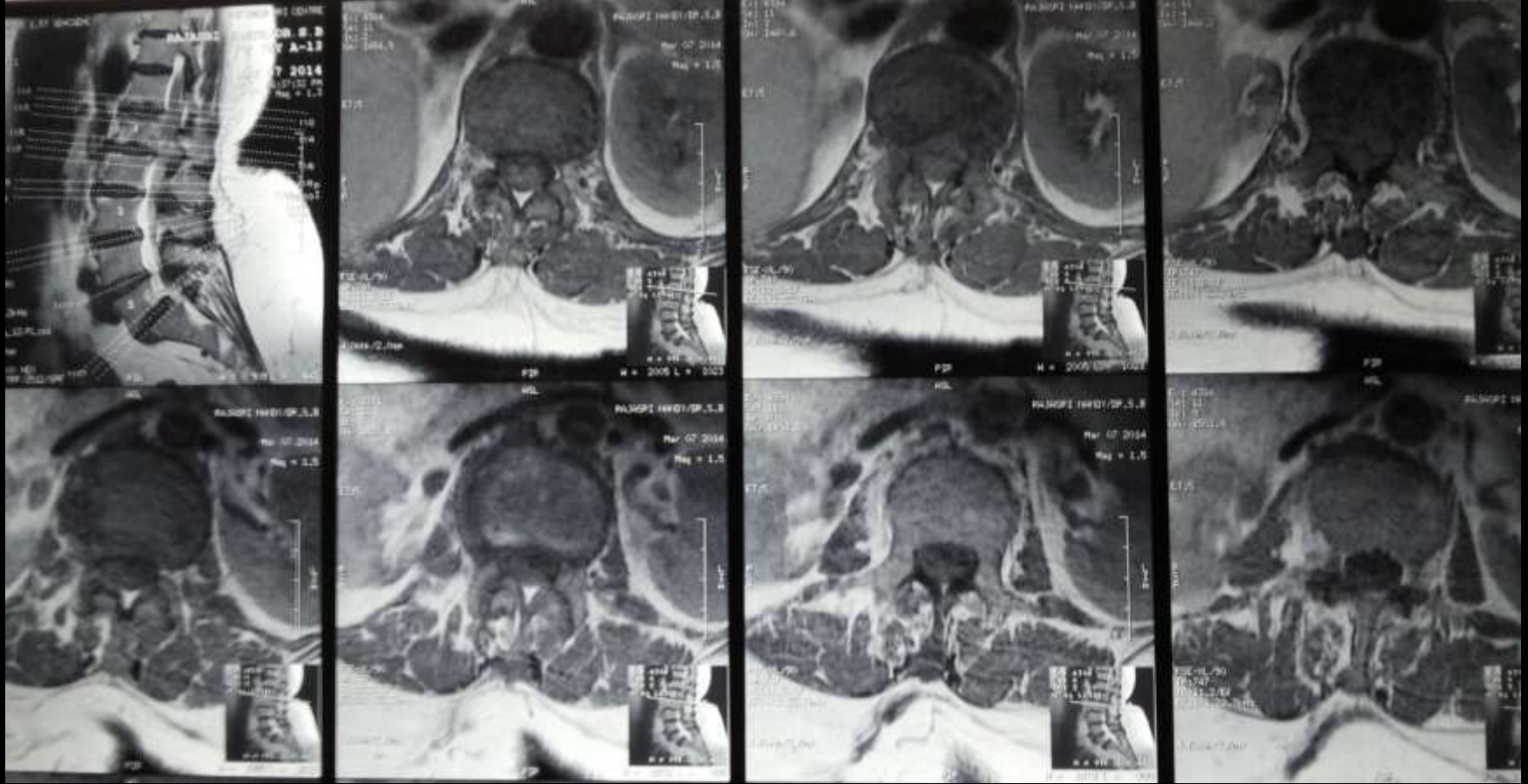
# CT – Sag images





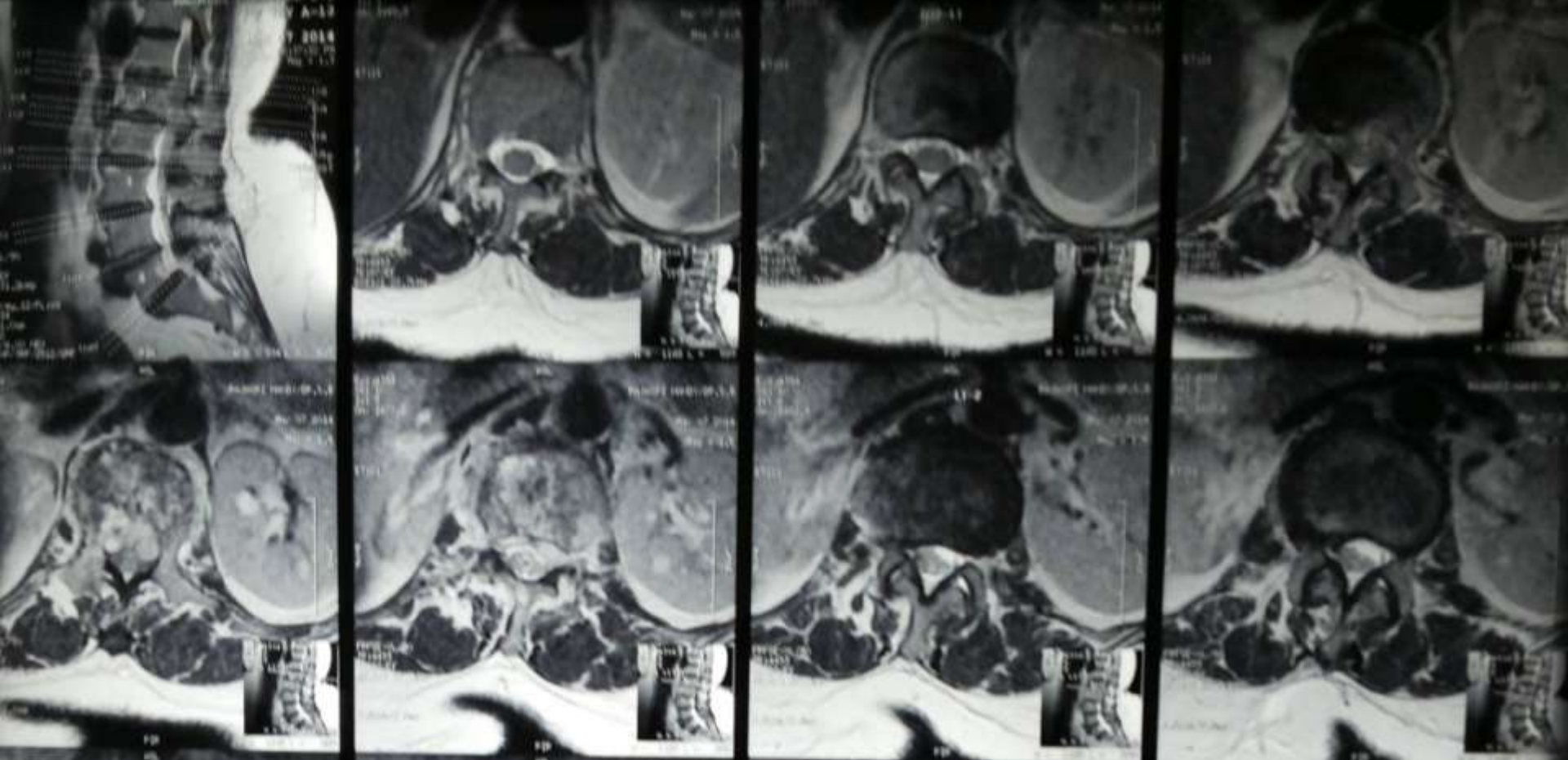
# CT – coronal images





MRI Images





MRI images



✓ **Investigations:**

✓ BMD T score-1.0,

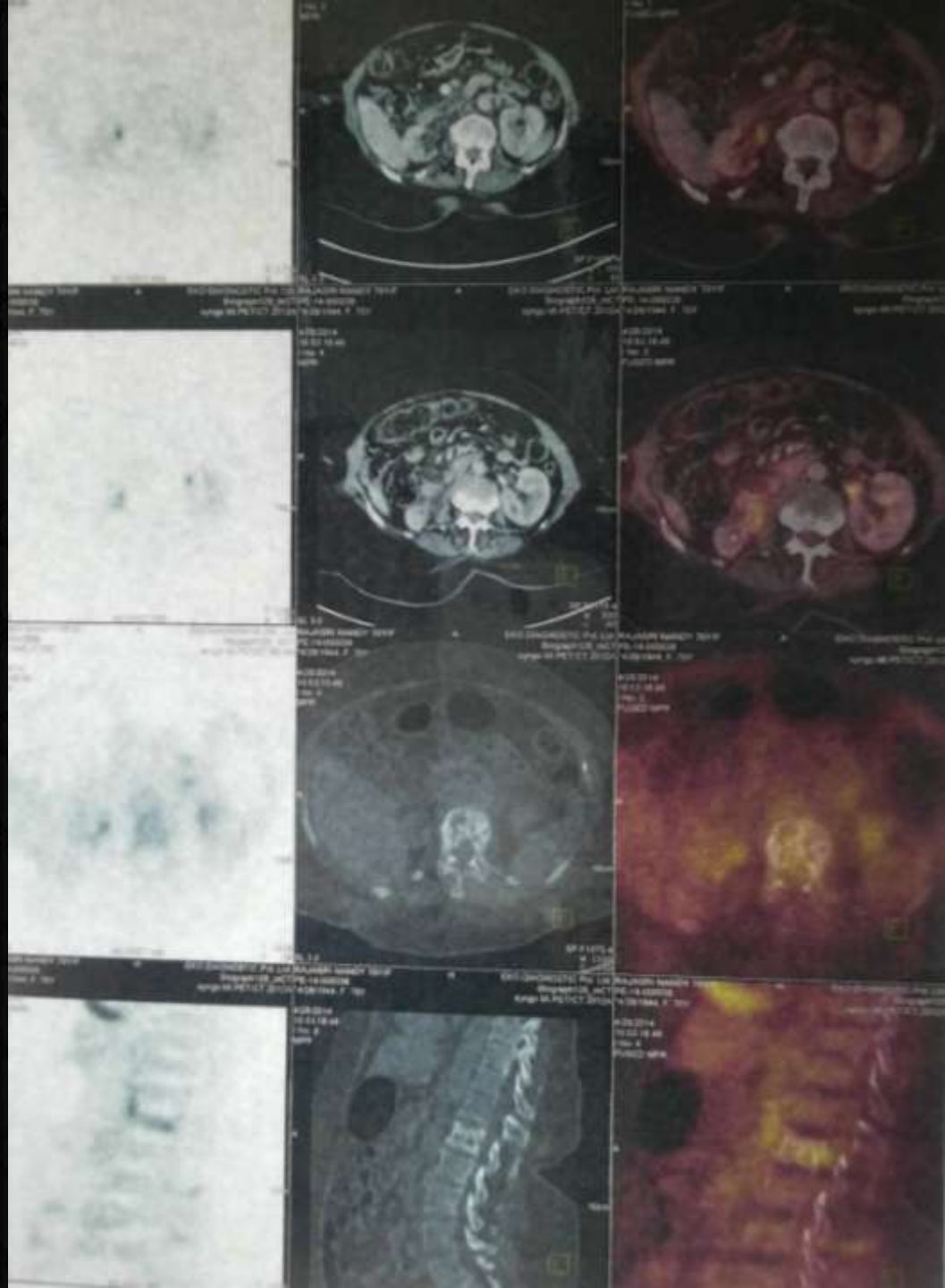
✓ CRP – negative, ESR – Normal,

✓ FNAC – Chondroma,

✓ Serum Protein

Electrophoresis- NO 'M' Spike.

- **PET-CT – Partial collapse with lytic sclerotic lesion showing FDG uptake with primary malignant (Chondrosarcoma) at L1 vertebra**



# Plan of Management

- **Transpedicular biopsy for Histopathology and AFB**
- ✓ **HPE shows Grade III Chondrosarcoma**
- ✓ **AFB culture Negative**

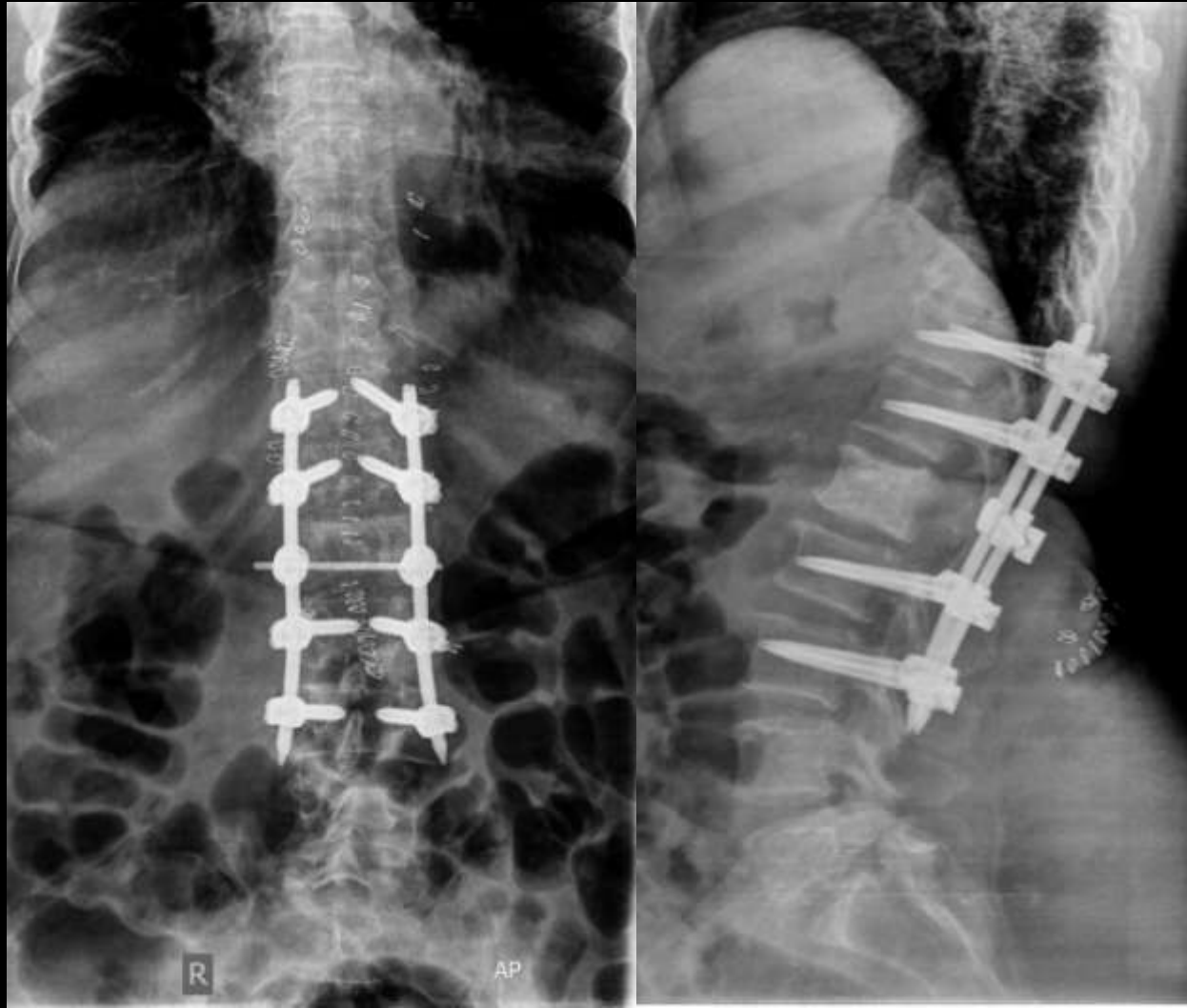


## PLAN OF SURGERY

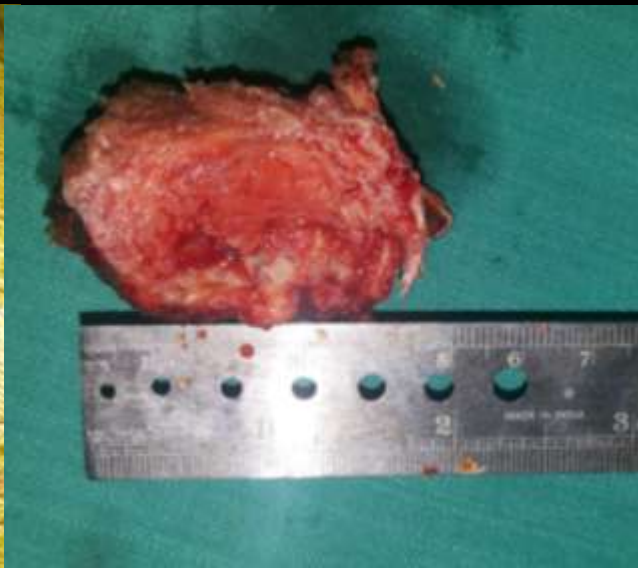
- ✓ **Surgery in 2 stages**
- ✓ **1<sup>st</sup> MIS posterior Stabilisation**
- ✓ **2<sup>nd</sup> anterior En lock Resection and stabilisation**



# Surgery 1<sup>st</sup> stage

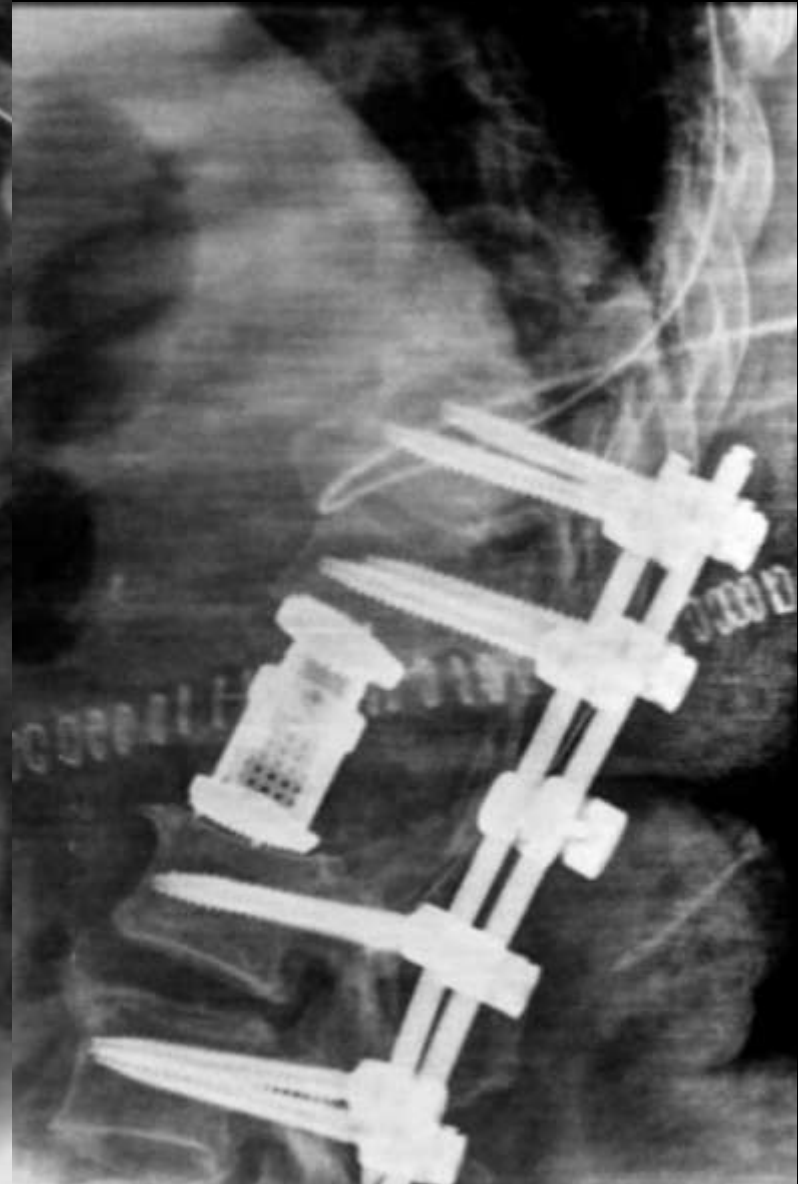


# 2<sup>nd</sup> Stage surgery





# Immediate post op X-RAYS

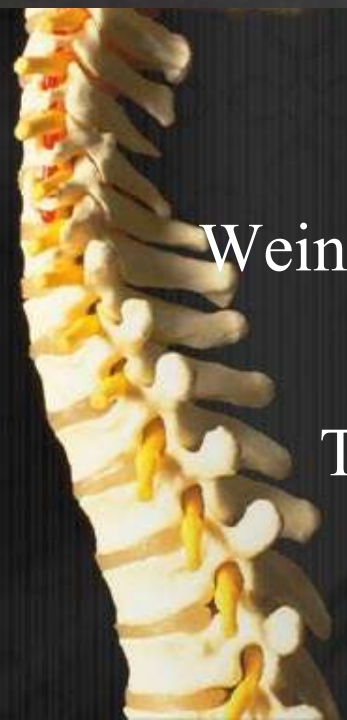
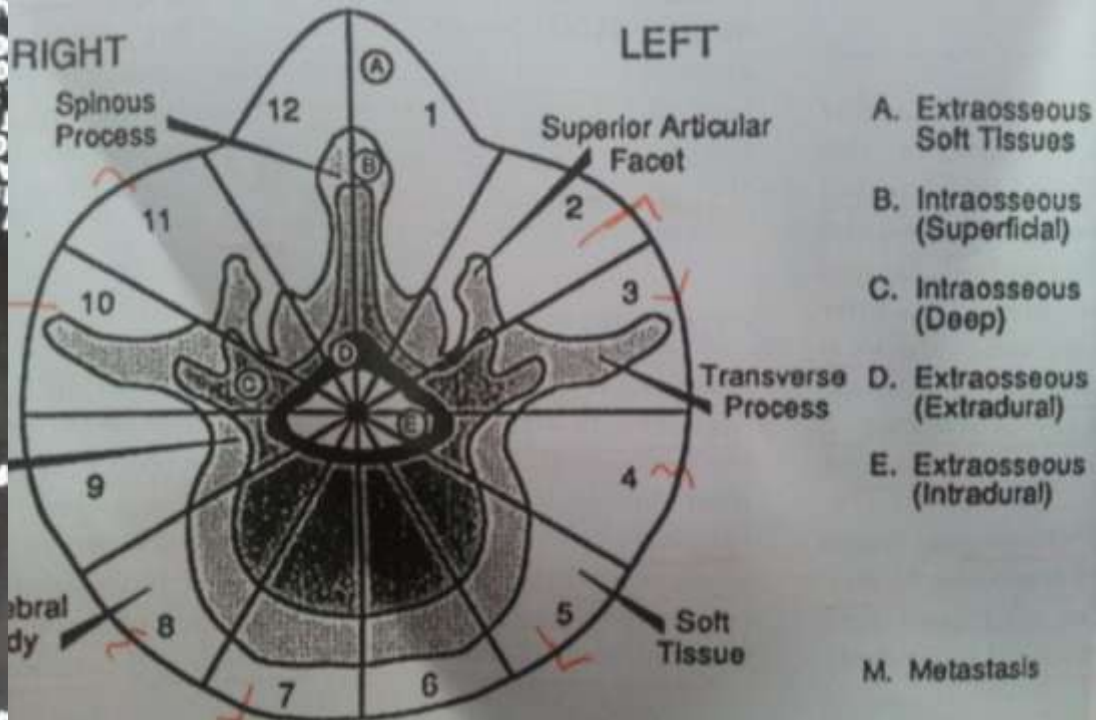


# 3<sup>rd</sup> Month Follow-up Xray (After 21/28 sitting of Radiotherapy)



Preop  
&  
Post op  
X-Rays





Weinstein, boriani, and biagini staging system  
(WBB)

Tumour involvement is between zone 4-9