Metastatic spinal cord compression (MSCC)

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This fact sheet is for men with advanced (metastatic) prostate cancer that has spread to the bones. Your partner, family or friends might also find it helpful.

We talk about a condition called metastatic spinal cord compression (MSCC). This happens when cancer cells grow in or near to your spine and press on your spinal cord. You might also hear MSCC called malignant spinal cord compression, or spinal cord compression (SCC).

MSCC doesn’t happen to all men whose cancer has spread to the bones. It isn’t common, but it is very important that you’re aware of the risk, what symptoms to look out for and how to get help. For more information on MSCC, speak to your doctor or nurse. You can also speak to our Specialist Nurses, in confidence, on 0800 074 8383.

Don’t wait
It is very important to seek medical advice immediately if you have any of the signs or symptoms of MSCC. The sooner you have treatment, the lower your risk of long-term problems.

Symbols
These symbols appear in this fact sheet:
- Speak to our Specialist Nurses
- Read our publications
- Sections for you to fill in

What is metastatic spinal cord compression (MSCC)?

MSCC happens when cancer cells that have spread from the prostate grow in or near to the spine and press on the spinal cord.
The spinal cord is a long, thin bundle of nerves and other cells. It runs from your brain down through your spine. The nerves carry messages between your brain and all parts of the body. These messages allow you to move and to feel things like heat, cold, touch or pain. They also help control body temperature and how your internal organs work.

Cancer cells pressing on the spinal cord can cause problems with how these messages are carried. This can cause a range of symptoms that can get worse if left untreated. For example, you may be less able to walk and move around.

At its worst, MSCC can cause nerve damage and even paralysis, which could mean you can’t walk or use your arms or legs normally. Remember, there are treatments available and getting treatment straight away can lower the risk of this happening, or of it being permanent.

What is my risk of developing MSCC?
MSCC isn’t common, but you need to be aware of the risk if your prostate cancer has spread to your bones or has a high risk of spreading to your bones. Your risk of MSCC is highest if the cancer has already spread to your spine.

Speak to your doctor or nurse for more information about your risk of MSCC.

What should I do if I get symptoms?
If you get any of the symptoms listed above, you should get medical advice straight away.
Don’t wait to see if your symptoms get better and don’t worry if you think it’s an inconvenient time, such as the evening or weekend.

Ask your doctor or nurse to fill in the box on the next page with details of who to contact in your local area.

What symptoms do I need to watch out for?
MSCC can cause any of the following symptoms.

- Pain or soreness in your lower, middle or upper back or neck. The pain may be severe or get worse over time. It might get worse when you cough, sneeze, lift or strain, go to the toilet, or lie down. It may wake you at night or stop you from sleeping.

- A narrow band of pain around your chest or abdomen (stomach area) that can move towards your back, buttocks or legs.

- Pain that moves down your arms or legs.

- Weakness or loss of control of your arms or legs, or difficulty standing or walking. You might feel unsteady on your feet or feel as if your legs are giving way. Some people say they feel clumsy.

- Numbness or tingling (pins and needles) in your legs, arms, fingers, toes, buttocks, stomach area or chest that doesn’t go away.

- Problems controlling your bladder or bowel. You might not be able to empty your bladder or bowel, or you might have no control over emptying them.

These symptoms can also be caused by other conditions, but it’s still important to get medical advice straight away in case you do have MSCC.
Who to contact if I get symptoms of MSCC:
Each hospital is different, but your doctor should give you an emergency number to call. You can write the contact details below.

During the day (from ___ am to ___ pm):

At night (from ___ pm to ___ am):

At the weekend (if different to above):

If you don’t have details of who to contact, or your doctor or nurse isn’t available, go to your nearest accident and emergency (A&E) department.

MSCC can be hard to diagnose, particularly if you have other health problems. It can sometimes be mistaken for general back pain, or bone pain caused by your cancer. So it’s important to tell the A&E staff that you have prostate cancer and symptoms of spinal cord compression. Not everyone will be familiar with MSCC, so it might be a good idea to take this fact sheet or other information about MSCC with you.

What will happen if my doctor thinks I have MSCC?
If your doctor thinks you may have MSCC, you will need to have a magnetic resonance imaging (MRI) scan to look at your spine. If you can’t have an MRI scan, you may have a computerised tomography (CT) scan instead. While you’re waiting for a diagnosis, there are a number of things that can be done to make you more comfortable and to help protect your spinal cord from further harm.

- **Pain relief**
  There are a number of ways to treat the pain caused by MSCC and by the cancer in other parts of your body, including pain-relieving drugs. Read more about these in our fact sheet, *Managing pain in advanced prostate cancer*.

- **A steroid called dexamethasone**
  This works quickly to reduce swelling and relieve pressure on the spinal cord. You’ll be given a daily dose as tablets or a drip into a vein in your arm. The dose will be gradually reduced and stopped if your symptoms improve or you start another treatment. You might also be given tablets to help prevent the steroids irritating your stomach.

- **Bed rest**
  You might be asked to lie flat on your back while you are waiting for a diagnosis. This helps keep your spine still and can reduce the risk of further damage to your spinal cord. Lying down will also stop you from falling over if you’re finding it difficult to stand up or walk. You might be given support stockings to wear while you’re lying in bed, to help prevent blood clots. Your doctor or nurse will monitor your condition and let you know when it’s safe for you to gradually sit up.

How is MSCC treated?
If you are diagnosed with MSCC, you should start treatment as soon as possible – ideally within 24 hours. Your doctor will explain the different treatment options to help you decide what’s right for you. They will consider your wishes as far as possible. They will also support you and your family after treatment to help you recover from MSCC.
There are two main treatments available – you may be offered one of these, or your doctor may suggest having both.

• **Radiotherapy**
  This aims to shrink the cancer cells that are pressing on your spinal cord. It can also help to relieve the pain. High-energy X-ray beams are directed at the affected area from outside the body. This is known as external beam radiotherapy. You may have one or more treatment sessions – your medical team will discuss this with you. Read more in our fact sheet, Radiotherapy for advanced prostate cancer.

• **Surgery**
  Surgery is sometimes used to treat MSCC. Your doctor will discuss this with you if it’s suitable for you. It usually aims to reduce the pressure on your spinal cord and makes your spine more stable. Surgery is sometimes done at a specialist spinal unit. You might be given radiotherapy once you’ve recovered from surgery, to shrink any areas of cancer that might be left in the spine.

If radiotherapy or surgery aren’t suitable for you, or if your spine still needs support after treatment, you may be offered a support brace or collar. This fits around your back or neck and helps to support your spine. It can also help with pain. Speak to your doctor or nurse about whether a support brace or collar might be helpful for you.

What happens after treatment?
MSCC can affect men in different ways. Getting treatment early can reduce the risk of long-term problems, but for some men it can take weeks or months to recover. Sometimes the effects can last longer or are permanent. Your doctor or nurse at the hospital will make sure you get the support you need.

If MSCC means that you’re less able to walk and move around, a physiotherapist can show you exercises that can help. An occupational therapist can make sure you have the right equipment in your house so that you’re comfortable and can move about more easily. Your doctor will also look at the treatments you are having for your prostate cancer to see if they need changing.

You can read about treatments that may be used to help control the growth of prostate cancer in our fact sheet, Treatment options after your first hormone therapy. There are also treatments that might help with symptoms. Read about this in our booklet, Advanced prostate cancer: Managing symptoms and getting support.

What is my outlook?
Some men with MSCC want to know if it will affect how long they will live. This is sometimes called your outlook or prognosis.

If you have MSCC, this means your cancer is advanced and cannot be cured. MSCC itself doesn’t affect how long you will live. But it could affect your ability to walk and move around if it isn’t treated quickly. And it may be a sign that your cancer is becoming more advanced.

For more information about advanced prostate cancer and how to get support, read our booklet, Advanced prostate cancer: Managing symptoms and getting support.

No one can tell you exactly what your outlook will be as it will depend on many things such as your general health, where your cancer has spread to, how quickly it is spreading, and how well you respond to treatments. But if your doctor has explained that you are approaching the end of your life, you may want to read our information about dying from prostate cancer at prostatecanceruk.org/dying-from-prostate-cancer

Dealing with advanced prostate cancer
If you are dealing with prostate cancer you might feel scared, worried, stressed, helpless or even angry.
Lots of men with prostate cancer get these kinds of thoughts and feelings from time to time. But there’s no ‘right’ way that you’re supposed to feel and everyone reacts in their own way.

This section suggests some things you can do to help yourself and people who can help. Families can also find this a difficult time and they may need support and information too.

They may want to read our booklet, *When you’re close to a man with prostate cancer: A guide for partners and family.*

**How can I help myself?**

Everyone has their own way of dealing with prostate cancer, but you may find some of the following suggestions helpful.

**Find out about your treatment options**

Find out about the treatments that are available to you. And ask about any side effects so you know what to expect and how to manage them. This will help you decide what’s right for you.

**Talk to someone**

Share what you’re thinking – find someone you can talk to. It could be someone close or someone trained to listen, like a counsellor, clinical psychologist or your doctor or nurse. People involved in your care should be able to discuss any questions or concerns you might have.

**Set yourself some goals**

Set yourself goals and plan things to look forward to – even if they’re just for the next few days or weeks.

**Look after yourself**

Take time out to look after yourself. When you feel up to it, learn some techniques to manage stress and to relax – like breathing exercises or listening to music. If you’re having difficulty sleeping, talk to your doctor or nurse.

**Eat a healthy, balanced diet**

Eating well is good for your general health and can also help with some side effects of treatment. For more information, read our fact sheet, *Diet and physical activity for men with prostate cancer.*

**Be as active as you can**

If you have advanced prostate cancer you might feel tired and find it harder to keep active. Speak to your doctor, nurse or physiotherapist about what you can and can’t do. Don’t push yourself, and rest if you feel you need to. Some hospitals or community services offer tailored exercise groups for men with prostate cancer on hormone therapy. Ask your doctor, nurse, radiographer or cancer information centre about what options are available locally.

**Think and plan ahead**

If you are approaching the end of your life, you may want to sort out practical things, such as organising your finances and making an up-to-date Will. You may also want to think about how and where you want to be cared for. Some men find that making plans helps them feel more in control. Planning ahead can also make things easier for your family and friends. Not all men want to think about these things. But if you do, you may find our information about dying from prostate cancer helpful. It also has information on what to expect as your cancer progresses, and how to deal with different thoughts and feelings you might have. For more information, visit prostatecanceruk.org/dying-from-prostate-cancer

Get more ideas about how to look after yourself from Macmillan Cancer Support, Maggie’s Centres, Penny Brohn UK, or your nearest cancer support centre. You can also find more ideas in our booklet, *Living with and after prostate cancer: A guide to physical, emotional and practical issues.* For information about getting support, read our booklet, *Advanced prostate cancer: Managing symptoms and getting support.*

**Who else can help?**

**Your medical team**

It may be useful to speak to your nurse, doctor, radiographer, GP or someone else in your medical team. They can explain your diagnosis, treatment and side effects, listen to your concerns, and put you in touch with other people who can help.
Our Specialist Nurses
Our Specialist Nurses can help with any questions and explain your diagnosis and treatment options. They’ve got time to listen, in confidence, to any concerns you or those close to you have.

Trained counsellors or psychologists
Counsellors and clinical psychologists are trained to listen and can help you find your own ways to deal with things. Many hospitals have counsellors or psychologists who specialise in helping people with cancer – ask your doctor or nurse at the hospital if this is available. Your GP may also be able to refer you to a counsellor, or you could see a private counsellor. To find out more, contact the British Association for Counselling & Psychotherapy.

Our one-to-one support service
Our one-to-one support service is a chance to speak to someone who’s been there and understands what you’re going through. They can share their experiences and listen to yours. You can discuss whatever’s important to you. Our Specialist Nurses will try to match you with someone with similar experiences.

Our online community
Our online community is a place to talk about whatever’s on your mind – your questions, your ups and your downs. Anyone can ask a question or share an experience.

Local support groups
At local support groups, men get together to share their experiences of living with prostate cancer. You can ask questions, share worries and know that someone understands what you’re going through. Some groups have been set up by local health professionals, others by men themselves. Many also welcome partners, friends and relatives.

Our fatigue support service
This is a 10-week telephone service delivered by our Specialist Nurses. It can help if you have problems with extreme tiredness (fatigue). Fatigue is a common symptom of prostate cancer, and a side effect of some treatments. The fatigue support service can help you make positive changes to your behaviour and lifestyle that can improve your fatigue over time.

Hospices
You may be able to get support from your local hospice or community palliative care team. Hospices don’t just provide care for people at the end of their life – you may be able to use their services while still living at home. They provide a range of services, including treatment to manage pain. They can also offer emotional and spiritual support, practical and financial advice, and support for families. Your GP, doctor or nurse can refer you to a hospice service, and will work closely with these teams to support you.

Spiritual support
You might begin to think more about spiritual beliefs as a result of having advanced prostate cancer. It’s important to get spiritual support if you need it. This could be from your friends, family, religious leader or faith group.

To find out more about any of the above, visit prostatecanceruk.org/get-support or call our Specialist Nurses on 0800 074 8383.
More information

British Association for Counselling & Psychotherapy (BACP)
www.bacp.co.uk
Telephone: 01455 883 300
Information about counselling and details of therapists in your area.

Cancer Research UK
www.cancerresearchuk.org
Telephone: 0808 800 4040
Patient information, including information about MSCC.

Carers UK
www.carersuk.org
Telephone: 0808 808 7777
Information and advice for carers, and details of local support groups.

Hospice UK
www.hospiceuk.org
Telephone: 020 7520 8200
Includes a database of hospice and palliative care providers.

Macmillan Cancer Support
www.macmillan.org.uk
Telephone: 0808 808 0000
Practical, financial and emotional support for people with cancer, their family and friends.

Maggie’s Centres
www.maggiescentres.org
Telephone: 0300 123 1801
Drop-in centres for cancer information and support, and an online support group.

Marie Curie
www.mariecurie.org.uk
Telephone: 0800 090 2309
Runs hospices throughout the UK and a free nursing service for people in their own home.

Penny Brohn UK
www.pennybrohn.org.uk
Telephone: 0303 3000 118
Runs courses and offers physical, emotional and spiritual support.

About us

Prostate Cancer UK has a simple ambition: to stop men dying from prostate cancer – by driving improvements in prevention, diagnosis, treatment and support.

This fact sheet is part of the Tool Kit. You can order more fact sheets, including an A to Z of medical words, which explains some of the words and phrases used in this fact sheet.

Download and order our fact sheets and booklets from our website at prostatecanceruk.org/publications or call us on 0800 074 8383.

At Prostate Cancer UK, we take great care to provide up-to-date, unbiased and accurate facts about prostate cancer, and other prostate problems. We hope these will add to the medical advice you have had and help you to make decisions. Our services are not intended to replace advice from your doctor.

References to sources of information used in the production of this fact sheet are available at prostatecanceruk.org

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• Our Specialist Nurses
• Our Volunteers.
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Did you find this information useful? Would you like to help others in your situation access the facts they need? Every year, 40,000 men face a prostate cancer diagnosis. Thanks to our generous supporters, we offer information free to all who need it. If you would like to help us continue this service, please consider making a donation. Your gift could fund the following services:

- £10 could buy a Tool Kit – a set of fact sheets, tailored to the needs of each man with vital information on diagnosis, treatment and lifestyle.
- £25 could give a man diagnosed with a prostate problem unlimited time to talk over treatment options with one of our Specialist Nurses.

To make a donation of any amount, please call us on 0800 082 1616, visit prostatecanceruk.org/donate or text PROSTATE to 70004†.

There are many other ways to support us. For more details please visit prostatecanceruk.org/get-involved

† You can donate up to £10 via SMS and we will receive 100% of your donation. Texts are charged at your standard rate. For full terms and conditions and more information, please visit prostatecanceruk.org/terms

∗ Calls are recorded for training purposes only.
Confidentiality is maintained between callers and Prostate Cancer UK.