

# **Sarcopenia But Not Frailty Predicts Adverse Events in Urgent Surgery for Spine Metastasis**

**Étienne Bourassa-Moreau, Anne Versteeg,**

**Raphaelle Charest-Morin, Scott Paquette, Charles Fisher, Micheal  
Boyd, Brian Kwon, Marcel Dvorak, Tamir Ailon, Nicolas Dea and**

**John Street**

**University of British-Columbia**

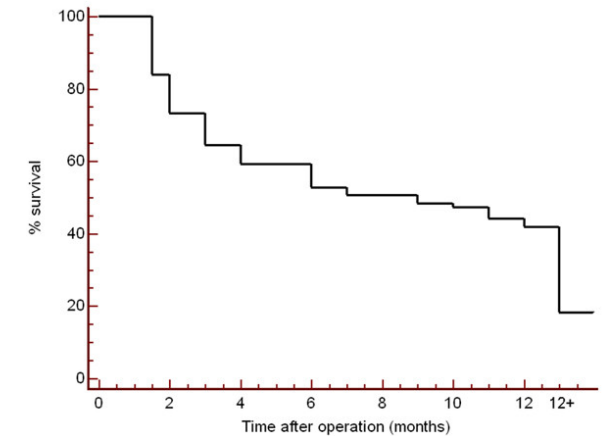
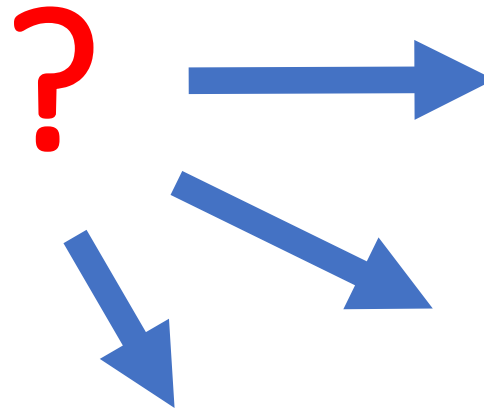
**Vancouver, Canada**



# Disclosure

- **Nothing to disclose**

# Who will develop post-op AEs or early mortality?



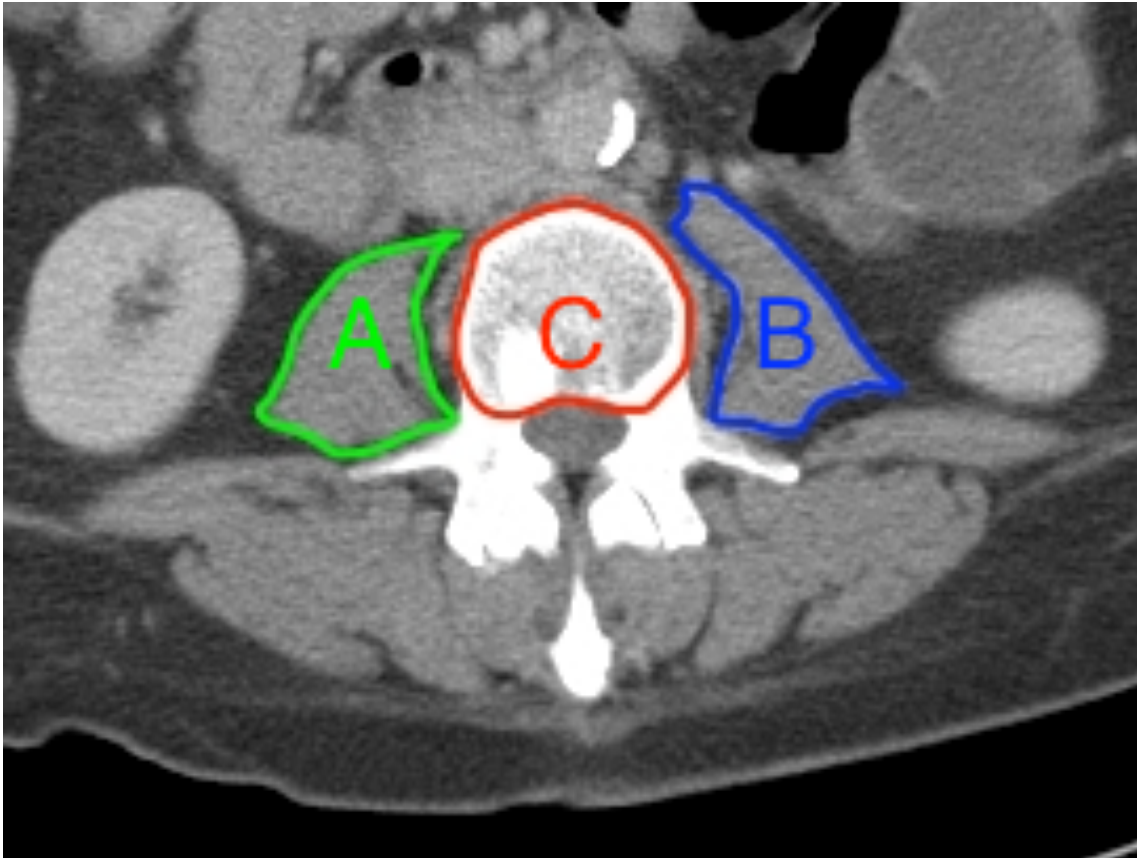
# Study Design

- **Ambispective Study**
  - Vancouver General Hospital, Spine Unit
  - 2009-2016 Consecutive Emergent Surgical Spinal Metastasis
- **Risk factors studied**
  - **Bollen Prognostic Scale**
    - (Clinical profile, Karnofsky and visceral/brain Mets)
  - **Frailty index**
    - Modified Frailty Index; mFI
    - Metstatic Spinal Frailty Index; MSTFI
  - **Sarcopenia**
- **Outcome**
  - SAVES V2
  - Early Mortality (< 3 months)

# Normalized Total Psoas Area (NTPA)

=

$$(A + B) / C$$



**281 Patients Screened**

```
graph TD; A[281 Patients Screened] --> B[108 Surgical Emergency Spinal mets]; A --> C[163 Excluded]; C --> C1[110: No valid CT]; C --> C2[16: Primary Cancers]; C --> C3[10: L3 mets]; C --> C4[7: Two hosp.]; C --> C5[20: Non surgical];
```

**163 Excluded**

**110: No valid CT**

**16: Primary Cancers**

**10: L3 mets**

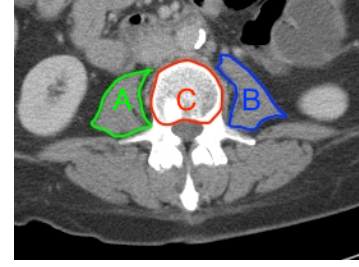
**7: Two hosp.**

**20: Non surgical**

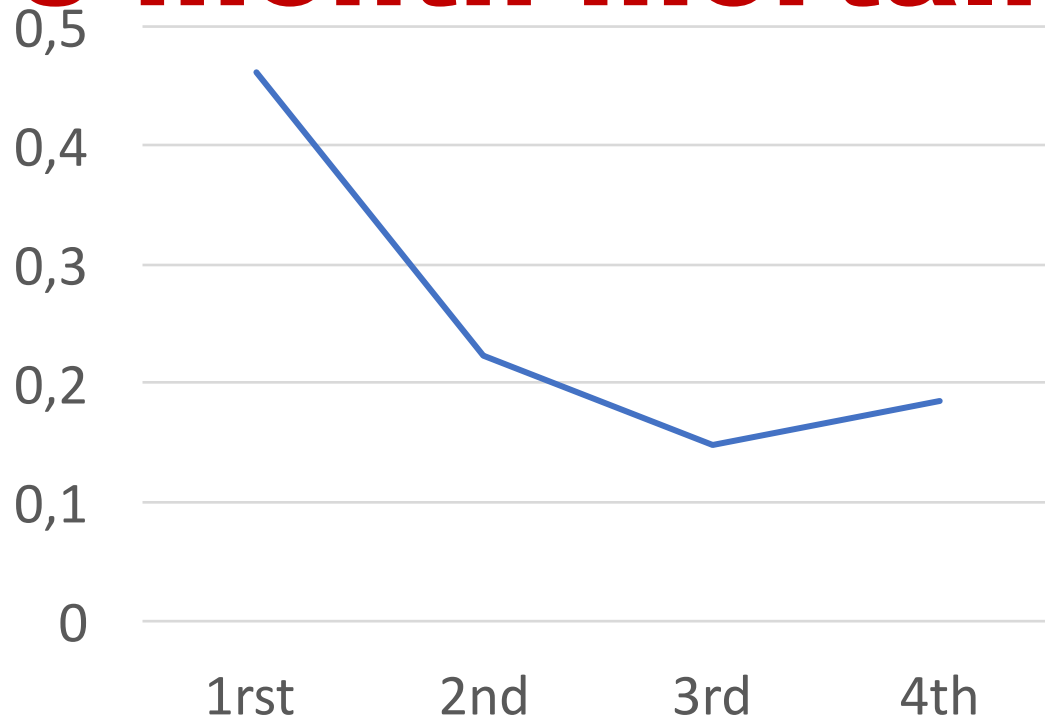
**108 Surgical Emergency  
Spinal mets**

	Included	Excluded
Total	108	163
Gender (Male)	47,2%	48,4%
Age	61,9+11,8	60,6+14,0
Early Mortality	25,0%	13,0%
Tumor Type		
Kidney	15,7%	11,3%
Lung	16,7%	17,7%
Breast	22,2%	17,7%
Prostate	12,0%	9,7%
Other	33,3%	43,5%
ASIA		
A	0,0%	1,6%
B	1,9%	3,2%
C	13,0%	4,8%
D	39,8%	32,3%
E	45,4%	58,1%

# Psoas Quartiles VS Outcomes



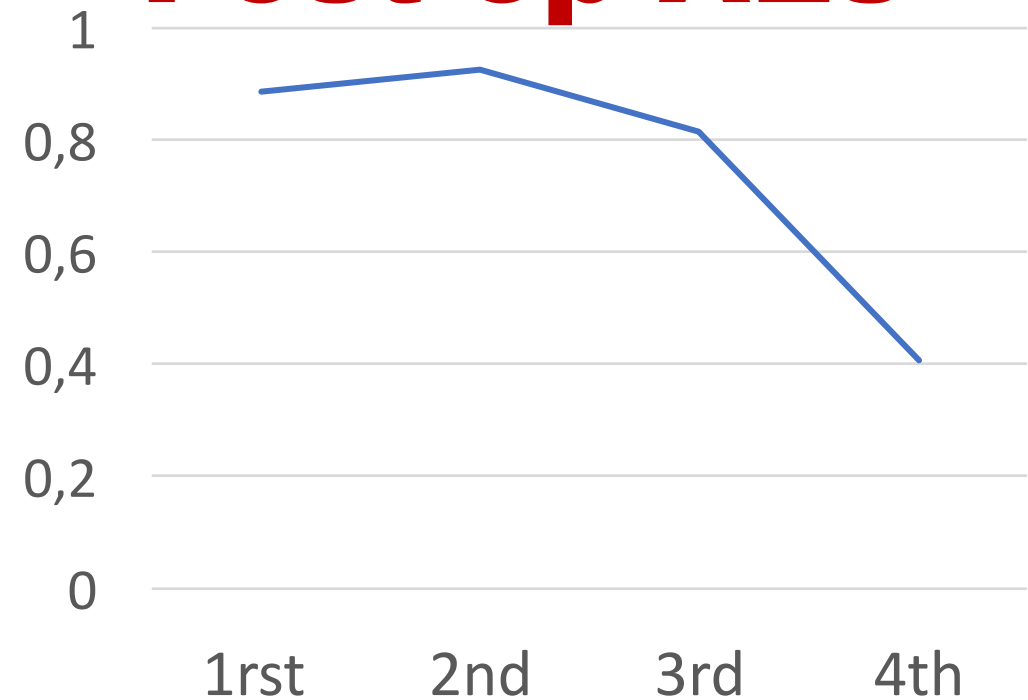
## 3 month mortality



$X^2$  p=0.04

OR (95%CI) = 0.20 (0.05 - 0.71)

## Post-op AEs

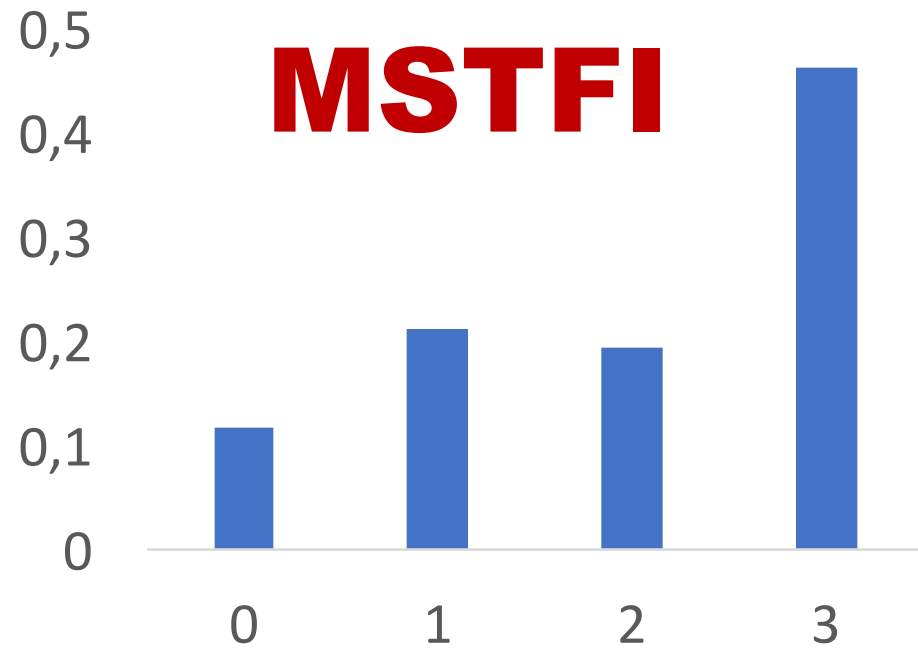


$X^2$  p=0.01

OR (95%CI) = 0.19 (0.038-0.72)



# Mortality < 3month

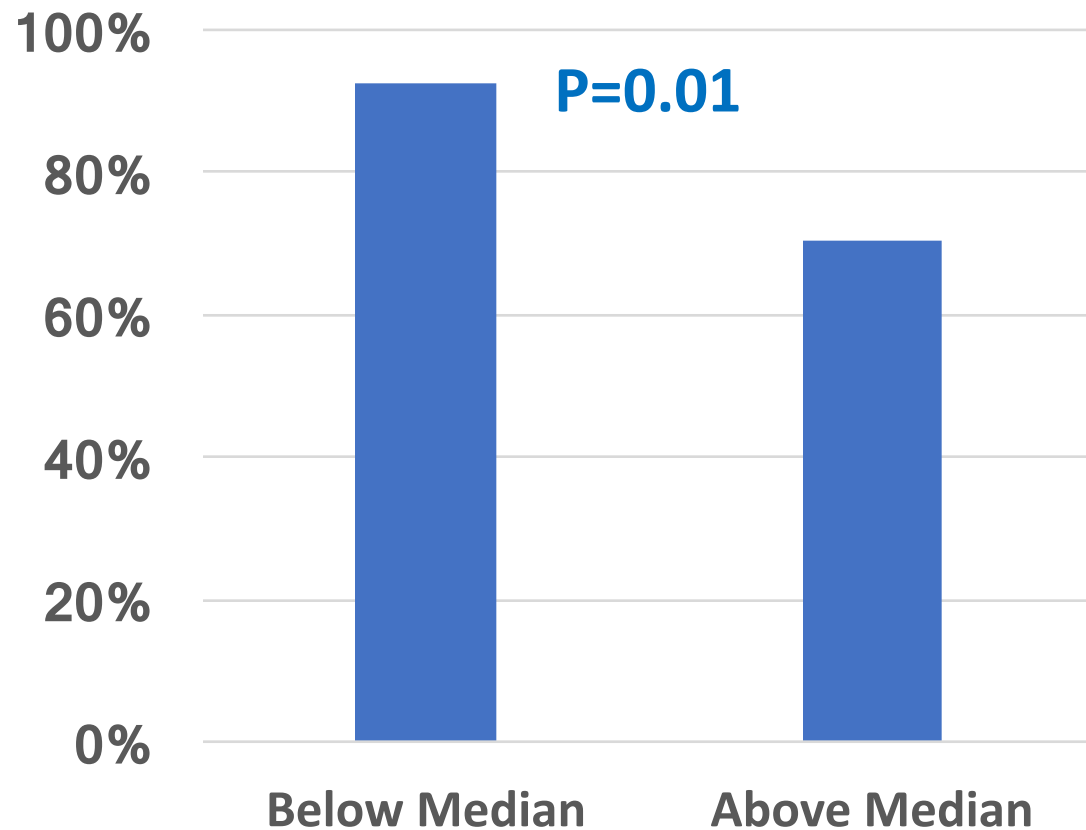


$X^2$  p=0.051

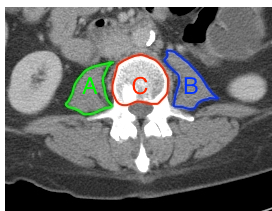
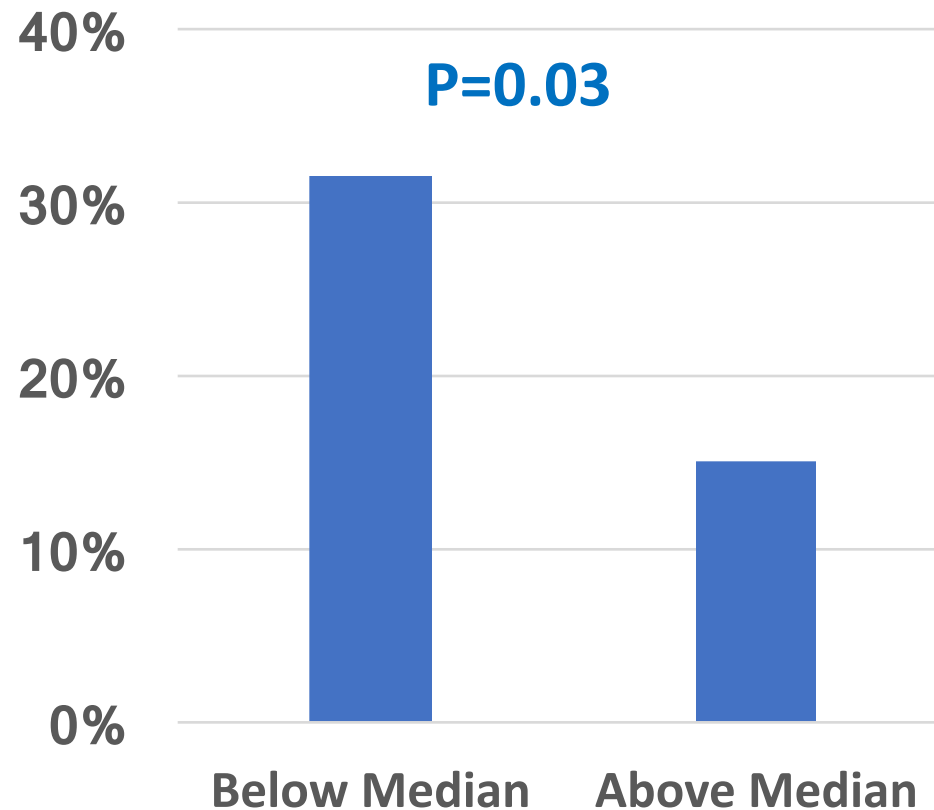


$X^2$  p=0.03

# AEs Rate



# Mortality < 3month



PSOAS U Median= 0.93

# Discussion

- **mFI is is not appropriate for spine metastasis**
- **MSTFI and Bollen predicted Mortality <3 month but not AEs**
- **Limitations**
  - **Not appropriate for L3 mets**
  - **Clinical cut-off still undetermined**
  - **Ongoing Analysis**

# Discussion

- **Psoas Measurement is an objective measure that easy and rapid to obtain**
- **Applicable for emergent metastatic epidural compression**
- **Psoas measurement is indepentent of patient reliability or definitive diagnosis**
- **Only Psoas Measurement predicted both Mortality <3 month and AEs**