Primary tumours of the spine

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Primary bone tumours of the spine account for only 2% of all spinal tumours. They arise de novo in the bone, cartilage, neural or ligamentous structures of the spine. They may be benign, intermediate or malignant. Benign primary spine tumours include osteoid osteoma, osteoblastoma (Figure 37.6), chondroma, chondroblastoma, chondromyxoid fibroma, giant cell tumours, haemangioma, lymphangioma and lipoma. Intermediate primary spine tumours include aggressive osteoblastoma, haemangiopericytoma, haemangioendothe - lioma and chordoma. Malignant primary spinal tumours include osteosarcoma, chondrosarcoma, Ewing’s sarcoma, neuroectodermal tumours, malignant lymphoma, myeloma, eader is angiosarcoma, fibrosarcoma and liposarcoma. The r

(b) (d) Figure 37.6 Osteoblastoma arising from the posterior elements of C5. This 21-year-old man presented with severe unremitting neck pain. Isotope bone scan (a) demonstrated increased uptake in C5. An axial computed tomography scan (b) further delineated the expansive lesion. The tumour was successfully removed with the aid of an intraoperative gamma probe to con /f_i rm complete excision; (c, d) postoperative anteroposterior and lateral radiographs, /uni00A0 respectively, following reconstruction with a tricortical bone graft, lateral mass screws and rods.

oncology . In patients less than 18 years of age, 68% of all tumours are benign. For those patients who present over 18 years of age, more than 80% of tumours are malignant. Benign tumours tend to occur in the posterior elements; malignant tumours tend to in volve the vertebral body . Primary tumours of the spine

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