

Oral Presentation

Surgical Intervention for Enneking Stage-III Vertebral Hemangiomas and Literature Review

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Introduction

Vertebral hemangiomas are benign, slow-growing tumors. They represent 2–3% of spinal tumors and are incidentally found. Various treatment protocols have been described for Enneking stage-III vertebral hemangiomas. However, it is still controversial and a comprehensive treatment protocol is still lacking.

Methodology

A retrospective clinical review was conducted on patients diagnosed with Enneking stage-III vertebral hemangiomas at two centers in Riyadh, Saudi Arabia between 2010 and 2020.

Result

A total of 11 patients with Enneking stage-III vertebral hemangiomas were included. The mean follow-up period was 47.5 ± 24.1 (9–120 months) months. All patients were symptomatic; the most common presentations were neurological deficit and/or myelopathy (n=7). Ten patients underwent surgical intervention. Six patients had preoperative embolization, with a mean blood loss of 880.00 ± 334.46 ml. One patient refused surgery and underwent vertebroplasty and repeated sclerotherapy. All patients regained full neurological recovery during follow-up. No recurrence was reported.

Conclusion

Intralesional spondylectomy showed good results in treating Enneking Stage-III vertebral hemangiomas. However, larger studies comparing treatment methods are needed to reach a gold standard approach.

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