A red and white kite flying in the sky.

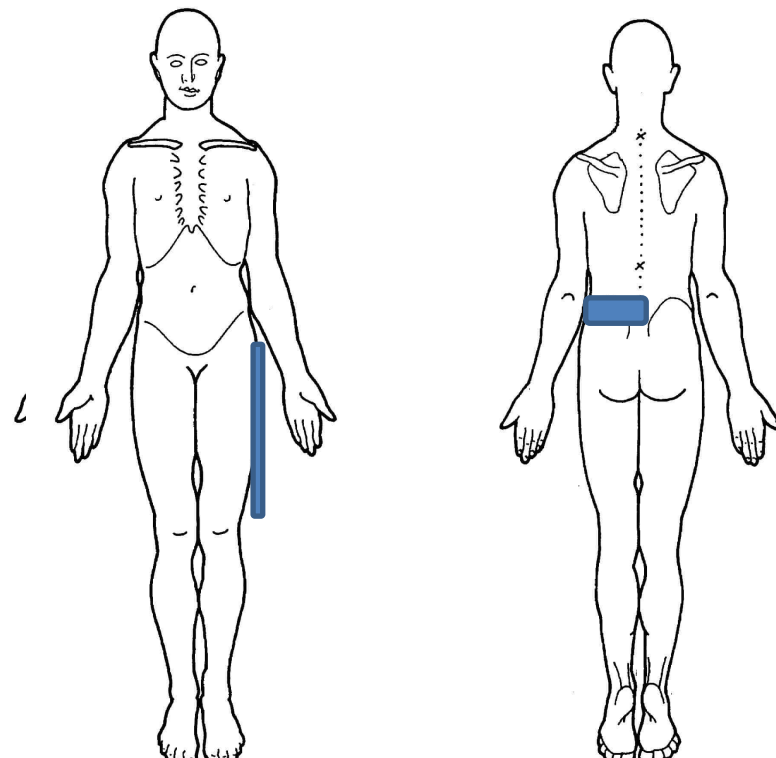
# Spinal Masqueraders Case Study

A black and red kite flying in the sky.

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Dorset Health Care

# Case study 72 year old male

- 4/12 hx of LBP since playing golf, gradually increased since
- Leg pain present past 3/12
- Aggs – sitting, reaching above head, L side laying, walking, standing
- Eases – paracetamol
- Increased urgency with bladder past 5/52 – no problems with flow/initiation/emptying/control/hematuria/UTI & no other CES signs
- Wakes at night but can go back to sleep
- Pt anxious this could be something sinister.....however both pt and pts wife report the pt has terrible health anxiety



- PMH – Hypertension, TB lung as a child, non-smoker
- Drinks 2-3 cans of lager a night
- DH – Bisoprolol, simvastatin, amlodipine
- SH - lives with wife works, as a volunteer driver



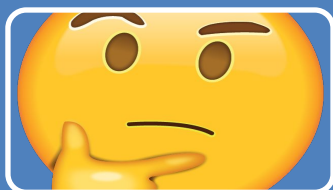
# Objective

- Lumbar LSF and ext = Pb
- Hands above head = Pb
- Neuro – power and sensation intact. Present and equal KJ, Present R AJ absent Left
- SLR – ve





What are your possible hypothesis?



What else might you have done?



To treat or not to treat?

## Day 1 Rx

- L5 unilat III 3x1min//LSF and hands above head = no Pb
- Ext increased ROM decreased Pb
- HEP taught self mobs

## • Day 2

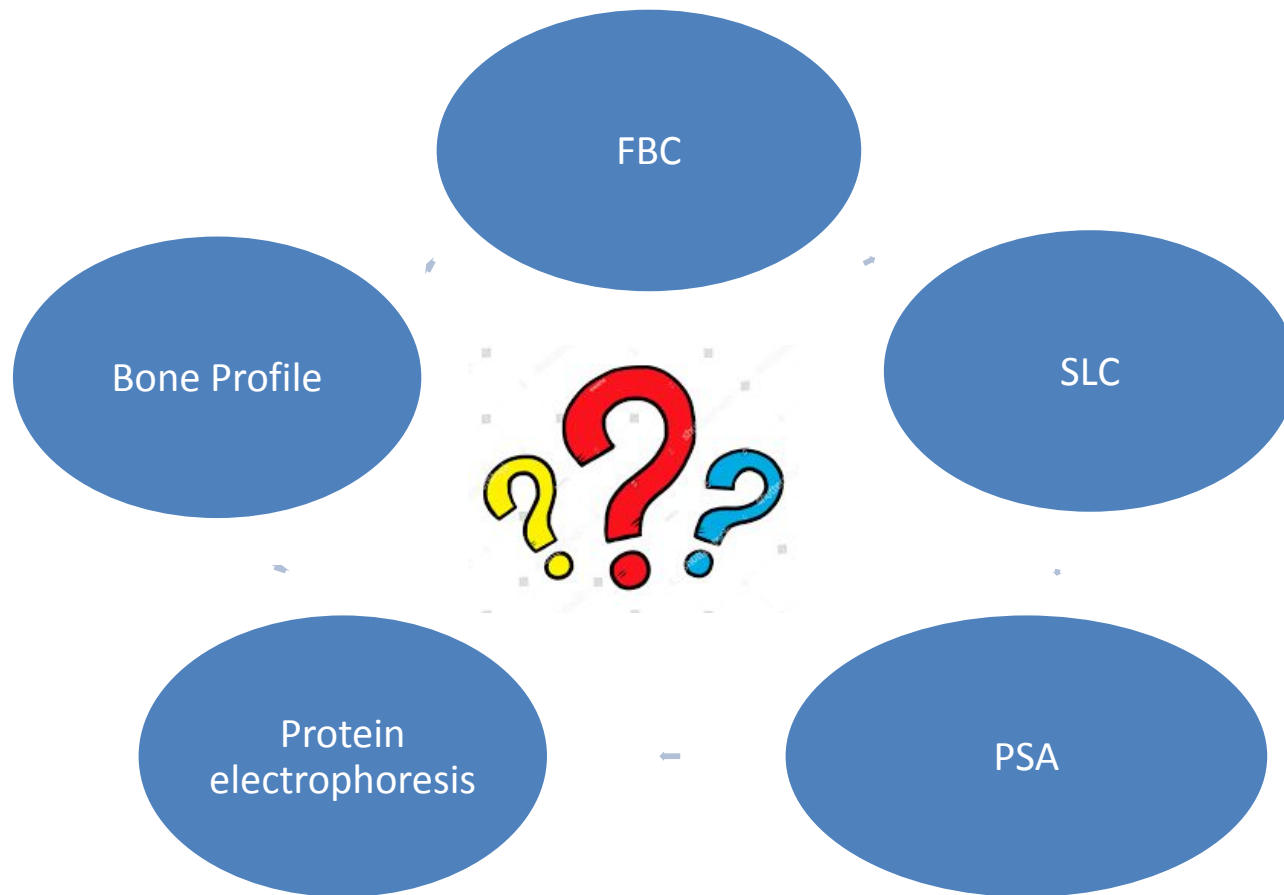
- Pt feeling much better. Bladder resolved, sitting, reaching above head and walking all better.
- Standing ISQ
- Rx as before in ext and increased grade during Rx
- HEP self mobs in ext
- Pt keen to start swimming and walking

## Day 3

- Pt reports increased walking no problems
- But..... Pb much worse at night. Pt is going out in his car when Pb wakes him

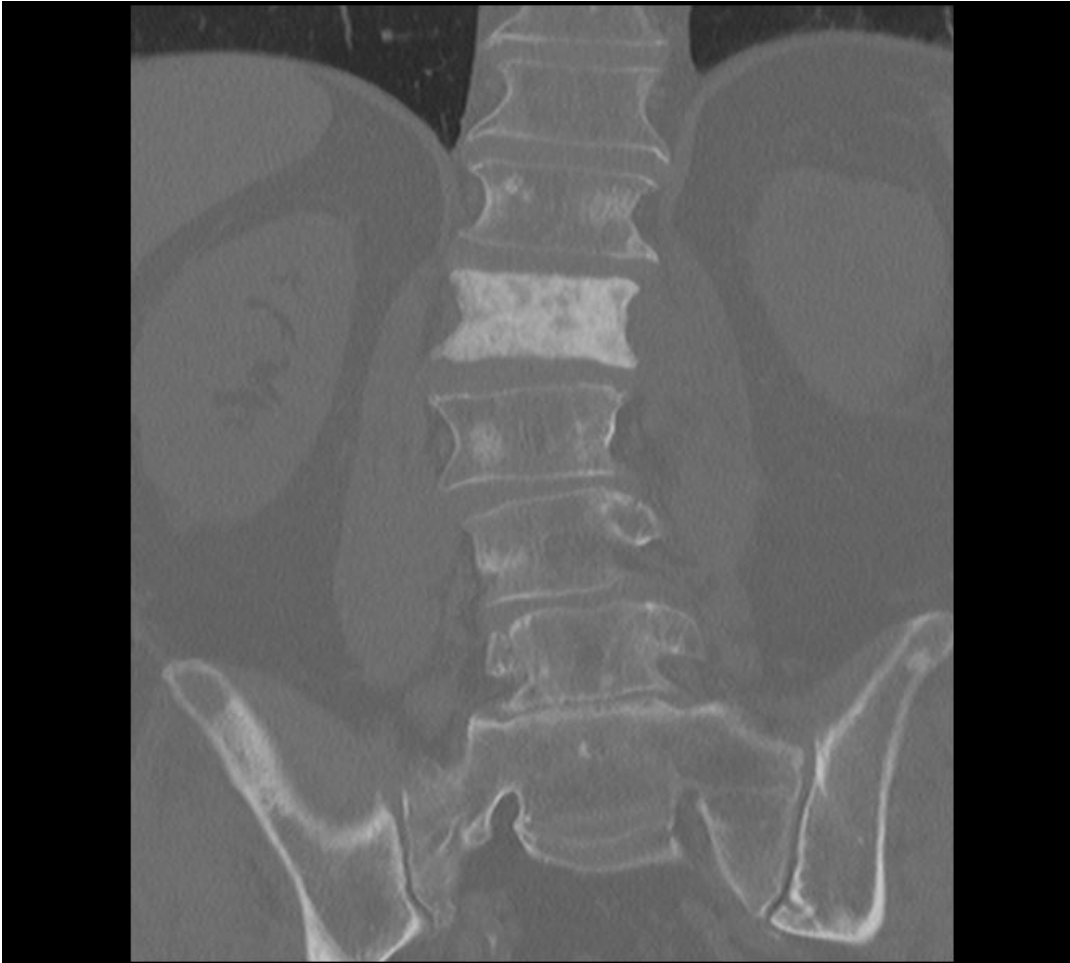
Now where is your level of concern?

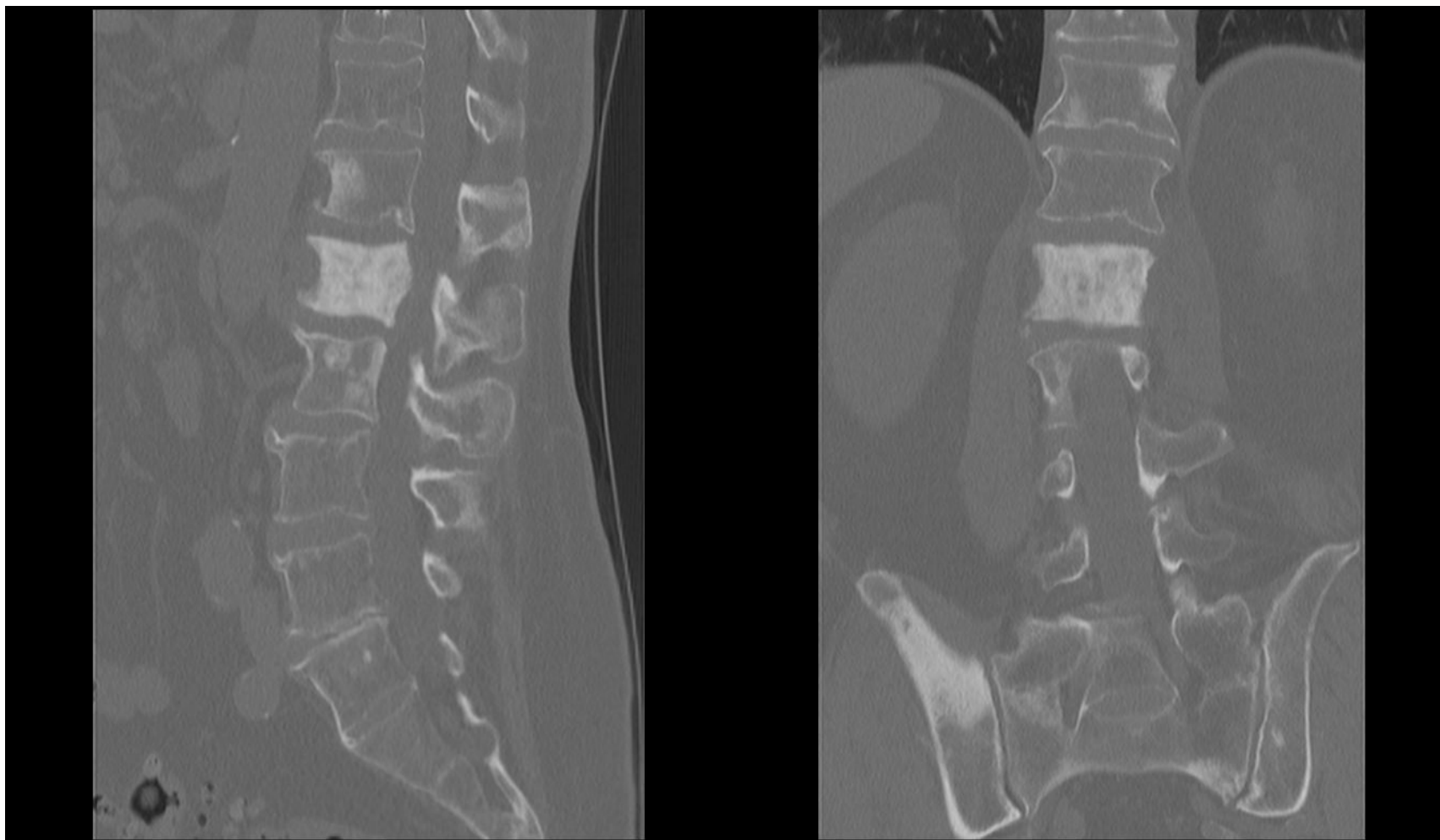
# Blood tests.....





# CT Scan





# So who gets Prostate Ca?

## Are you at risk of prostate cancer?

Most men with early prostate cancer don't have any symptoms. That's why it's important to know about your risk.



**1 in 8**

In the UK, about 1 in 8 men will get prostate cancer in their lifetime.



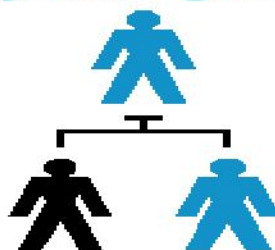
Prostate cancer is the most commonly diagnosed cancer in the UK.

## Over 50 years old

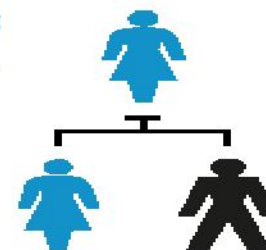
Prostate cancer mainly affects men over 50 and your risk increases with age. The most common age for men to be diagnosed with prostate cancer is between 65 and 69 years.

## Family history and genes

You are two and a half times more likely to get prostate cancer if your father or brother has been diagnosed with it, compared to a man who has no relatives with prostate cancer.



Your risk of getting prostate cancer may also be higher if your mother or sister has had breast cancer.



## Ethnicity

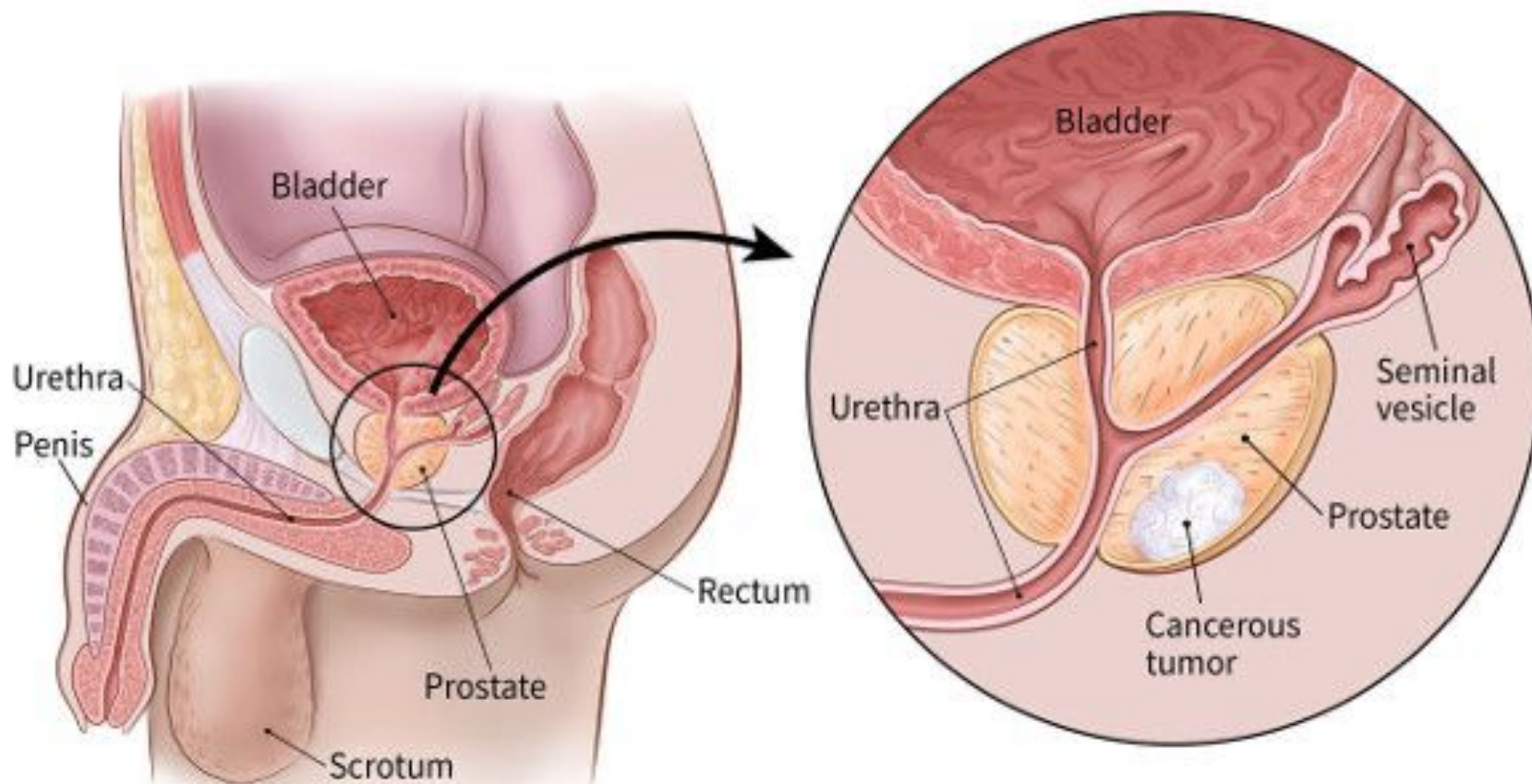


Black men are more likely to get prostate cancer than other men, and at a younger age. In the UK, about 1 in 4 black men will get prostate cancer in their lifetime. If you are a black man, your risk may increase once you're over 45.



**PROSTATE  
CANCER UK**

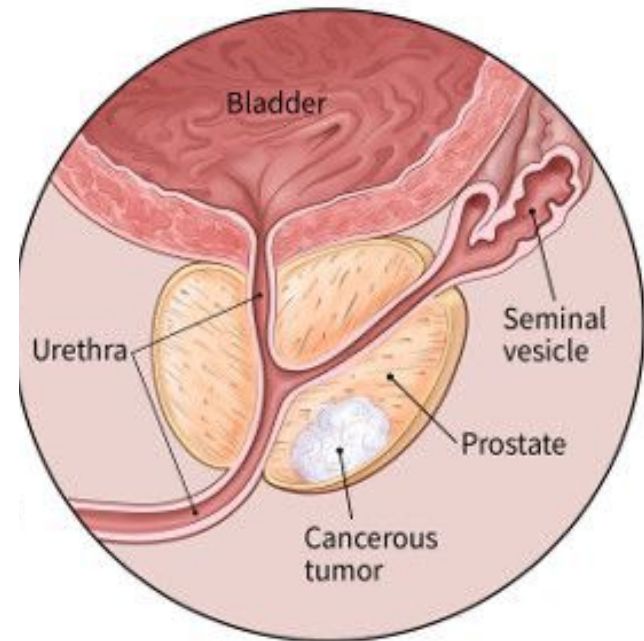
Speak to our Specialist Nurses  
**0800 074 8383\***  
[prostatecanceruk.org](http://prostatecanceruk.org)





# Signs and Symptoms

- Localised prostate Ca often has no symptoms
- Due to the typical location of prostate Ca it doesn't affect the urethra
- However if the Ca is close to the urethra the patient may experience bladder changes



# Signs and Symptoms

- difficulty starting to urinate or emptying your bladder
- a weak flow when you urinate
- a feeling that your bladder hasn't emptied properly
- dribbling urine after you finish urinating
- needing to urinate more often than usual, especially at night
- a sudden need to urinate – you may sometimes leak urine before you get to the toilet.
- BUT..... often signs of an enlarged prostate/BPH or prostatitis

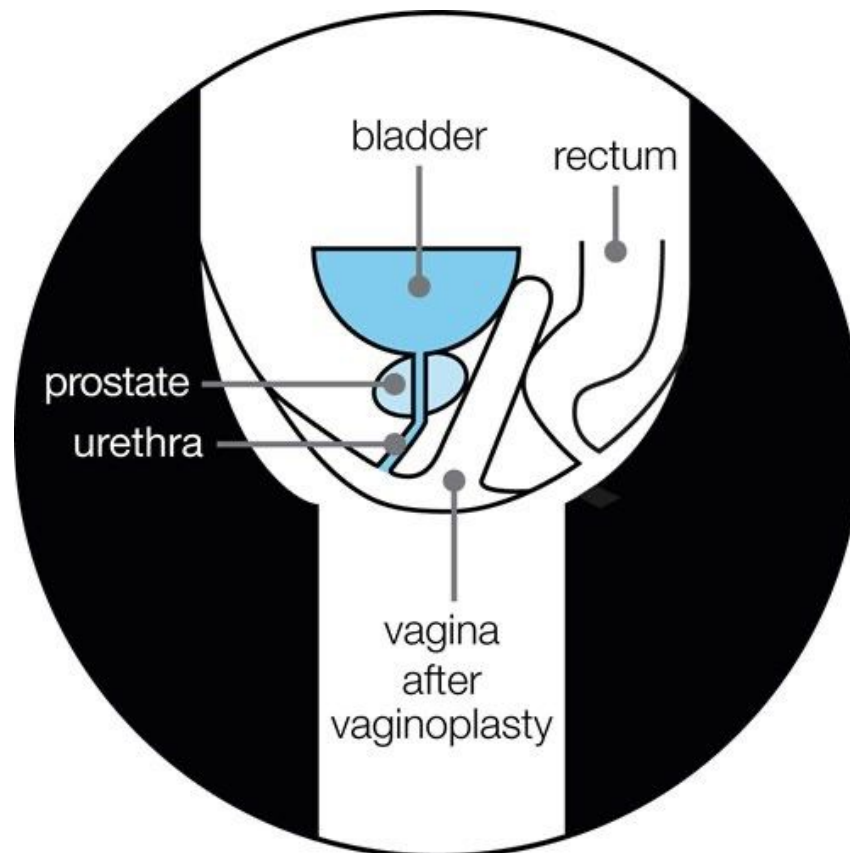
# PSA prostate specific antigen to test or not to test

- 3 out of 4 men with an elevated PSA will not have prostate Ca
- 1 in 7 prostate Ca can be missed due to normal PSA
- Important to counsel your patients prior to testing
- Men over 50 can request PSA test, advised men with high risk have baseline PSA from 45
- GP will combine PSA test with DRE of the prostate

Age	Normal PSA
50–59 years	Up to 3 ng/ml
60–69 years	Up to 4 ng/ml
70–79 years	Up to 5 ng/ml

# What about Trans-women?

- Trans-women have a prostate
- It is not removed during genital reconstruction
- Therefore trans-women can get prostate Ca
- Chance is thought to be lower than cis men due to anti-androgen hormone treatment in trans-women
- Studies are small in this population hence not much is known about the risk
- PSA can be lower in Trans-women due to anti-androgen hormones
- Trans-women can also get other prostate problems





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