

Palliative Care Emergencies

Guideline: Fractures

Introduction

In palliative care, fractures may occur due to bone metastases, osteoporosis or trauma. Nearly every malignant tumour can metastasise to bone and may be associated with a pathological fracture. The most common cancers associated with pathological fractures are breast, bronchus, prostate and Myeloma. The most common site of fracture is in the femur, but any long bone is at risk.

Characteristics:

- Sudden increase of pain
- Deformity
- Swelling
- Altered mobility
- Shock

Management

- Analgesia: if not on opioid give s/c diamorphine 5 mg
- Make patient comfortable, i.e. splint or padding
- Confirm diagnosis

Consider:

- a. Orthopaedic / surgical management - surgical fixation may be the one way of ensuring adequate pain relief.
- b. Radiotherapy may provide pain relief, control the underlying tumour, prevent further osteolysis and help to prevent loosening of any internal fixation post-operatively.

The choice of treatment depends on the general fitness of the patient, the degree of disease dissemination, the primary tumour and presence of other complications.