Spine Instability Neoplastic Score (SINS)

- SINS is used to assess the stability of the spine in patients with metastatic spinal cord compression
- It has near-perfect inter- and intraobserver reliability in determining three clinically relevant categories of stability.
- The sensitivity and specificity of SINS for potentially unstable or unstable lesions were 95.7% and 79.5% respectively

Location
- 3 points: Junctional (C0-C2, C7-T2, T11-L1, L5-S1)
- 2 points: Mobile spine (C3-C6, L2-L4)
- 1 point: Semi-rigid (T3-T10)
- 0 points: Rigid (S2-S5)

Pain relief with recumbency and/or pain with movement/loading of the spine
- 3 points: Yes
- 1 point: No (occasional pain but not mechanical)
- 0 points: Pain free lesion

Bone lesion
- 2 points: Lytic
- 1 point: Mixed (lytic/blastic)
- 0 points: Blastic

Radiographic spinal alignment
- 4 points: Subluxation / translation present
- 2 points: De novo deformity (kyphosis / scoliosis)
- 0 points: Normal alignment

Vertebral body collapse
- 3 points: >50% collapse
- 2 points: <50% collapse
- 1 point: No collapse with >50% body involved
- 0 points: None of the above

Posterolateral involvement of the spinal elements (facet, pedicle or costovertebral joint fracture or replacement with tumor)
- 3 points: Bilateral
- 1 point: Unilateral
- 0 points: None of the above

Interpretation of the SINS score
- sum score 0-6: stable
- sum score 7-12: indeterminate (possibly impending) instability
- sum score 13-18: instability
- SINS scores of 7 to 18 warrant surgical consultation.

Reference