The Pediatric Spine

Mohamad Samih Yasin, FRCS

Scoliosis

Normal Spinal Curvatures





















Types of Scoliosis

- Idiopathic
 - Infantile
 - Juvenile
 - Adolescent
- Congenital

Neuromuscular

Idiopathic Scoliosis

Infantile
 – < 3 years

- Juvenile
 4-10 years
- Adolescent
 >10 years





Adolescent Idiopathic Scoliosis





Adolescent Idiopathic Scoliosis



Classification (Curve Pattern)

- Thoracic
- Thorcolumbar
- Lumbar
- Double major

T2 - T11/12 Disc T12 - L1

- L1-2 Disc L4
- **2** structural curves



Thoracic Curve Pattern







ThoracoLumbar Curve Pattern







Lumbar Curve Pattern



Adolescent Idiopathic Scoliosis

Cobb's Angle



Adolescent Idiopathic Scoliosis

Cobb's Angle



Why Treat Scoliosis?

Cosmesis

Curve Progression

Pulmonary Function

Mortality

Curve Progression

TABLE 2. Probability of progression: magnitude of curve at initial detection versus age

Curve magnitude at detection (degrees)	Age at detection (years)		
	10–12	13–15	16
<19	25%	10%	0%
20-29	60	40	10
30-59	90	70	30
>60	100	90	70

Reproduced with permission from ref. 78.

Cardiopulmonary Complications

 Early onset deformity Inability to stabilize or correct - lack of thoracic growth - ineffective respiration Underlying systemic (N-M, collagen) Non idiopathic









Death age 20



EOS - Overview

Early Onset Scoliosis

Thoracic Insufficiency Syndrome

- Surgical Treatment
 - Growing Rods
 - VEPTR (Rib Expanders)

Early Onset Scoliosis

 Scoliosis of any etiology with onset less than 5 years of age

Now 10 years

Early Onset Scoliosis

Infantile Idiopathic <3 yo

Juvenile Idiopathic 3-10 yo

Congenital Scoliosis

 Failure of Segmentation
 Failure of Formation

Infantile Idiopathic Scoliosis

Onset <3 years of age



Congenital Scoliosis



Failure of Segmentation

- Bony bar between 2 or more vertebra
- Unilateral bar most common





Failure of Formation

• i.e. Hemi-vertebrae



Associated Anomalies

- 60% other organ systems involved
 - 20% GU
 - 12% cardiac

 Other possibilities: cranial nerve palsy, radial hypoplasia, TEV, DDH, Sprengel's deformity, imperforate anus



Associated Anomalies

- Spinal dysraphism (40%)
 - Diastematomyelia
 - Syringomyelia
 - Arnold-Chiari malformations
 - Intra-spinal tumors

Evaluate with MRI

Neurosurgery Evaluation / Treatment

Associated Anomalies




























Casting





Risser Cast







Traction









Bracing

- Types of Braces
 - Boston TLSO (Thoraco Lumbo Sacral Orthosis)
 - Milwaukee CTLSO (Cervical...)
 - Charleston Bending Brace
- Remaining Growth

Bracing Indications

- Greater than 25-30 degrees
- Less than 45 degrees
- Immature
 - Remaining spine growth
 - < 6 months post-menarchal</p>
 - Risser 0-2



Boston TLSO





Boston TLSO





Boston TLSO





Milwaukee CTLSO



Charleston Bending Brace







Hypercorrection x 8-10 hrs./night

Surgery

- Curves greater than 50 degrees
 Spinal Fusion and Instrumentation
 - Posterior
 - Anterior
 - Thoracoscopic
 - Combination

Harrington Rods





Use of a Bivalved Polypropylene Orthosis in the Postoperative Management of Idiopathic Scoliosis ROBERT S. ROBERTS, M.D.,* CHARLES T. PRICE, M.D.,** AND MAX F. RIDDICK, M.D.,*

Lucque Technique

Sub-laminar wiresNeurological risk



Thoracic Pedicle Screws

- Suk 1995Lenke
- South KoreaSt. Louis



















MRI 2012: No tethering – Tight Fillum Terminale

LAROCHE, JOSHUA, PAUL, CONTRAST: ACCES#000978604NS086 19 K00645271NS086 SE:6 25/08/2011 IM:11 10:36:16 029M М А R S I EC:1 **DFOV:220** 3thk/ 3.3sp **IWK HEALTH CENTRE** TE:139.6 ILA TR:5575

Syrinx T6-12 with prominence at T7-8, T10-11









Kyphosis

- Terminology
 - Kyphosis, Hyperkyphosis, Kyphos (gibbus)
- Postural Kyohosis
 - 'Round back', 'drooping shoulders'
 - May be associated with other postural defects such as flat-feet.
- Structural Kyphosis
 - Osteoporosis of the spine
 - Ankylosing spondylitis
 - Scheuermann's Disease
- Kyphos
 - A sharp post. Angulation due to localized collapse or wedging of one or more vertebrae.
 - Causes:
 - 1. Congenital defect
 - 2. Fracture
 - 3. Spinal TB

Kyphosis



Gibbus Deformity (Kyphos)





Gibbus at L3-L4 in a 12 year old boy

 Collapse of the vertebral body may result in short segment kyphotic deformity, or Gibbus deformity. Note also the paravertebral abscess.

Gibbus Deformity (Kyphos)


Scheuermann's Disease (Adolescent Kyphosis)

A developmental disorder of the growing spine.

- Irregular ossification
- Some fragmentation
- Osteochondrosis.
- Pathology
 - Irregularity of vertebral end-plates
 - Schmorls' Nodes ; small central herniation of disc material into the vertebral body.
 - Wedging
 - Thoracic vs. Lumbar response



Scheuermann's Disease

Irregular, fragmented vertebral endplates with lucent areas surrounded by sclerosis.

Schmorls' Nodes





Scheuermann's Disease

- Lateral thoracic radiograph showing typical appearances of type I Scheuermann's disease with
 - end-plate abnormalities
 - and anterior wedging resulting in a kyphotic deformity



Scheuermann's Disease Thoracic Form

- The typical form
 - Appear in the mid thoracic vertebrae
 - Starts at or shortly after puberty
- Males >> Females
- Clinical Presentation:
 - History
 - Rounded shoulder
 - Backache
 - fatigue
 - Physical Examination
 - X-rays
 - Lateral views : patchiness or irregularity of the vertebral end plates
 - Schmorls nodes at several intervertebral levels.,,, wedge of ver.

Scheuermann's Disease Thoracic Form

Treatment

- Depends on the severity
- Conservative
 - Extension brace for a yr or 18 mon
- Surgical
 - Correction & Fusion

Scheuermann's Disease Thoracolumbar Form

- May appear together with thoracic kyphosis or may occur on their own.
- Cf. Thoracic Scheuermann's Disease :
 - Prevalence.
 - Age of Presentation
 - Type of Presentation
 - Local deformity
 - X-ray changes
- Treatment
 - Usually conservative
 - No need for operative management