

Orthopaedic Connection

Scoliosis In Children and Adolescents

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Transforming patient information into patient understanding.

Since we have been spending much time on the back, we might as well go a little further and clarify terms my patients don't seem to be completely familiar with. Ready? O.K. Let's go.

Scoliosis

It is a sideways curvature of the spine that makes it look more like an S or C rather than a straight T.

- Not only do the bones of the spine curve in scoliosis, they rotate or slowly twist so that one shoulder or hip appears higher than the other.
- Scoliosis' exact cause is unknown. It does run in families and in many patients it no doubt has a genetic cause.
- Scoliosis can occur at any age.
- In children under 3 years it is caused by birth defects, muscle or nerve diseases (CP) or tumors.
- It can occur between 3 and 10 years but is not common.
- Adolescent scoliosis is the most common form and occurs after age 10.
- Does not usually cause any pain.
- Occurs about equally in boys and girls.
- Girls have more severe curves that progress and require treatment more often.

Diagnosis

Most often patients are referred to me by their family doctor or pediatrician.

I do a thorough medical history to determine if another problem is causing it. I have on occasion diagnosed spinal cord tumors in children referred to me for a back problem.

Comprehensive physical exam is next. Scoliosis is confirmed with an x-ray of the spine which I do in the office. The curve can be

measured in degrees from these x-rays. MRI in most cases is not needed unless I am concerned about a possible spinal tumor or infection.

Treatment

The type of treatment depends on many factors. These are the degree of curve when I first see it, the child's age and the number of remaining growth years.

Observation

If the curve is mild or near skeletal maturity and there is no idea how long it has been there, I will choose to observe it. I will recheck it in 3 - 6 months and continue to do that to keep on top of it. If the curve progresses, keep reading!

Bracing

The goal is to keep curves from getting worse. Bracing is effective if the child is still growing or the curve is between 25 and 40 degrees. There are several types of braces.

We do have quite a bit more to cover so I think this would be a good place to stop.

I will cover the rest of scoliosis next week so I hope you can rejoin us to learn more.

In the meantime you can always access our office teaching website www.orthopodsurgeon.com for information about any Orthopaedic or musculoskeletal topic or anything I treat in the office and hospital.

Our goal is simple - To help people return to more pain free, functional lives. I specialize in you.

Good health. Good life. All the best to you.

Be well.

Dr. Haverbush