

# **Adult Idiopathic Scoliosis treated with ASF/PSF**

**Robert S. Pashman, MD**

---

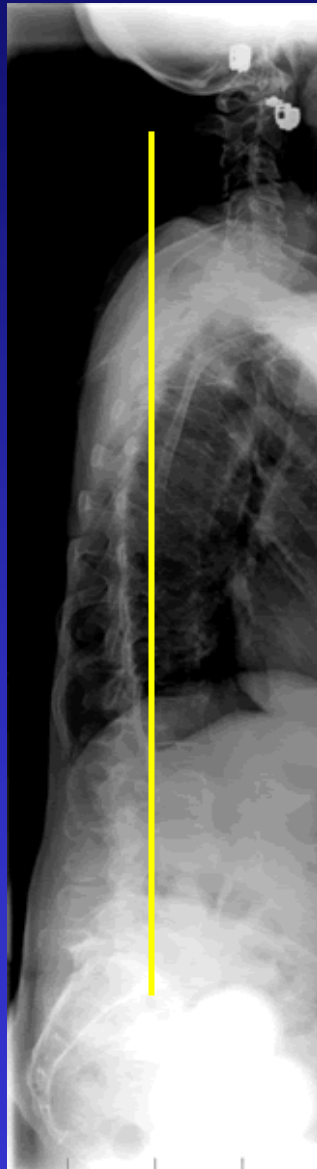
---

**Scoliosis and Spinal Deformity Surgery**  
**[www.eSpine.com](http://www.eSpine.com)**

# Patient History

- 65 year old female with Adult Idiopathic Scoliosis
- Progressive thoracic curve
- Secondary diagnosis:
  - Isthmic Spondylolisthesis, L5/S1, Grade I
  - Sagittal plane deformity with Flatback Syndrome
- Status post C7-T1 removal of facet cyst
- Severe low back and leg pain
- Failed conservative therapy

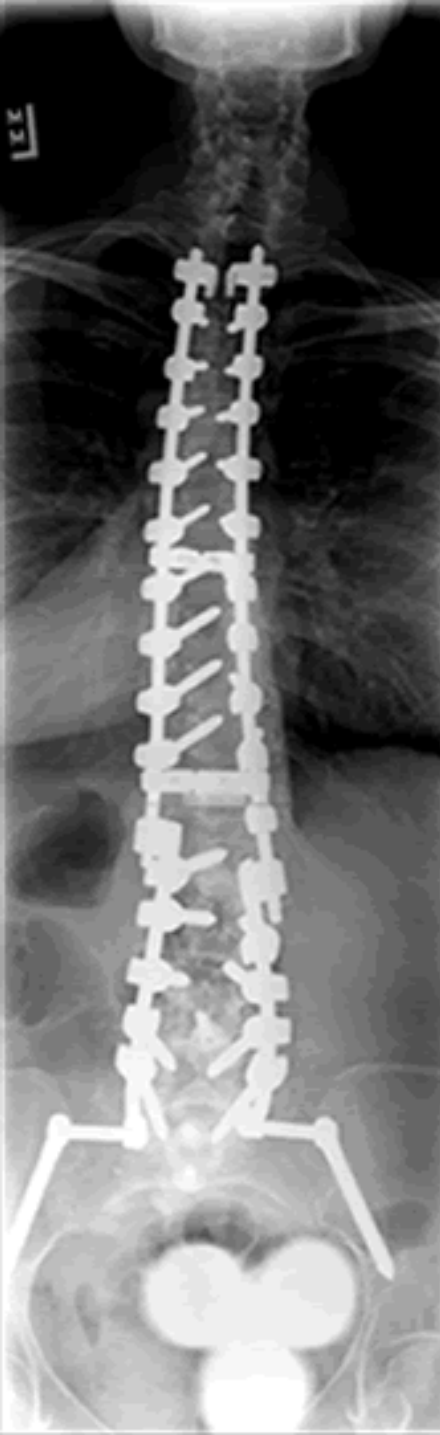
# Pre-Operative X-Rays



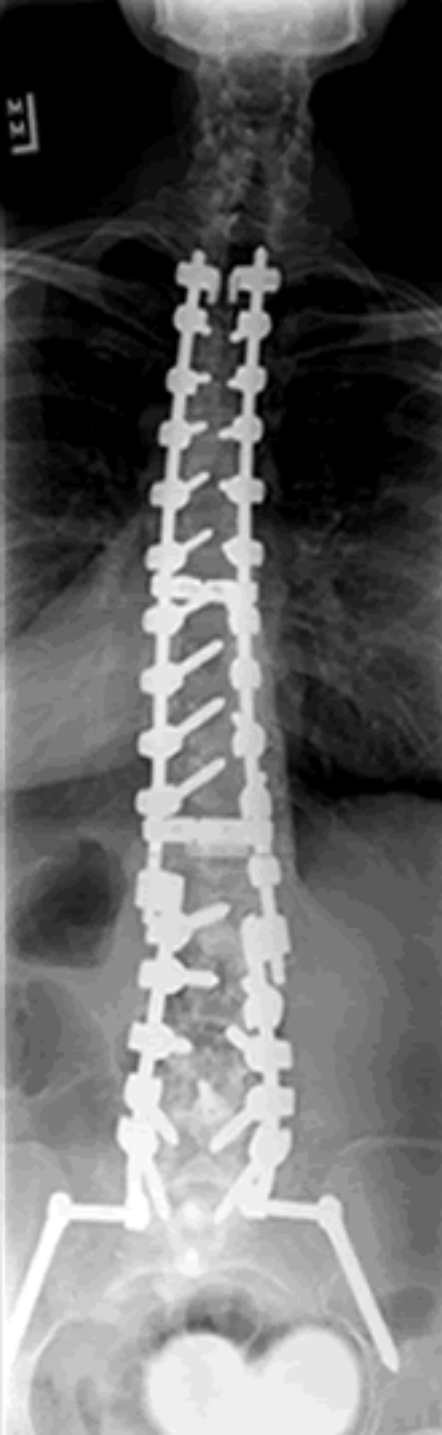
The patient is decompensated to the left and forward, as shown with plumb line.

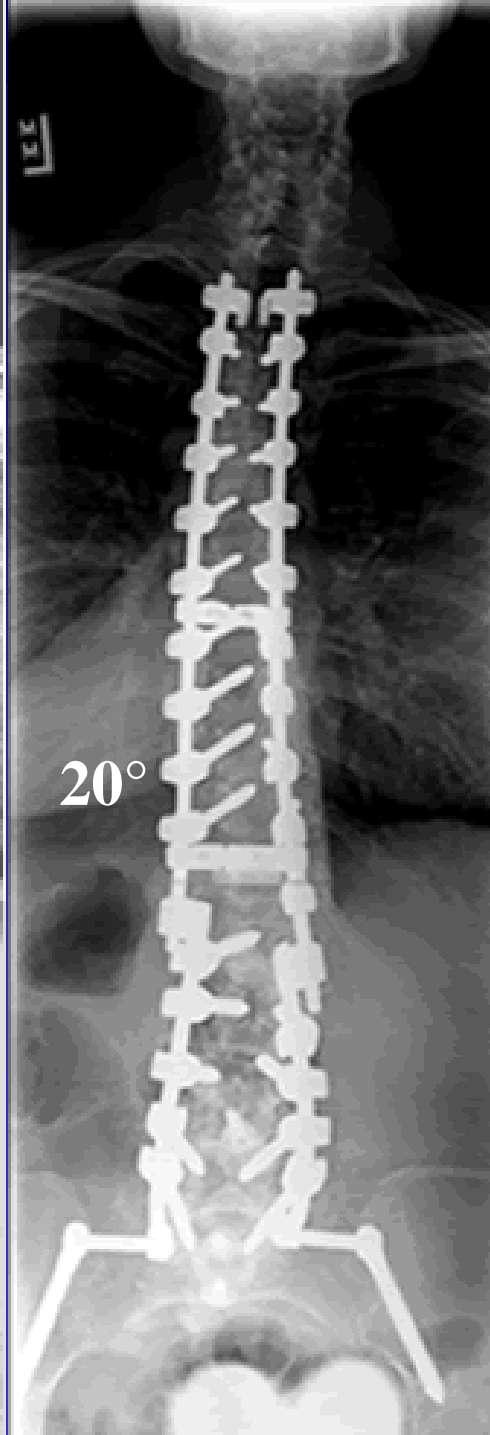
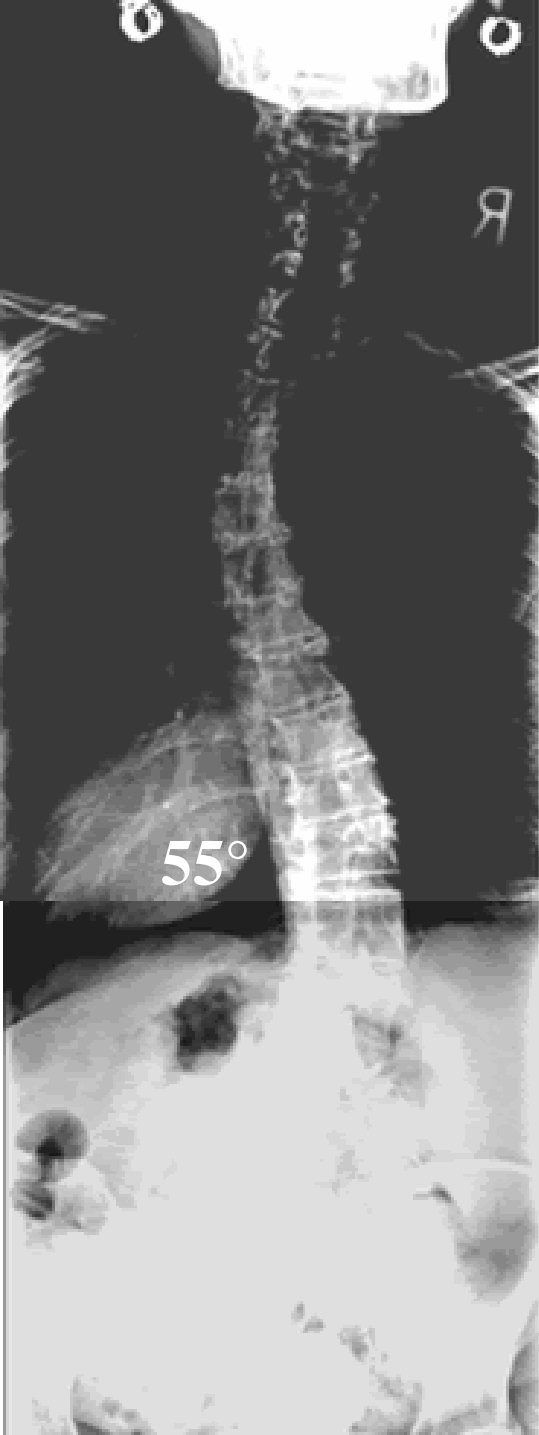
# Surgical Strategy

1. Segmental spinal instrumentation for correction of adult idiopathic scoliosis T2 to sacropelvis pelvic fixation, that is 17-18 level fusion using Cotrel-Dubousset 5-5 thoracic quarter inch stainless steel lumbar with sacropelvic fixation.
2. Posterior spinal fusion T2 to sacropelvis with combination of autogenous harvested bone and RHBMP.
3. Interlaminar laminotomy, mesial facetectomy, lateral recess release for re-exploration decompression L1-2, L2-3, L3-4, L4-5 and L5-S1 bilaterally.
4. Intraoperative SSEPs.
5. Intraoperative fluoro using iso-C navigation and fluoro.
6. Plastic closure of wound.



# Post-Operative X-rays

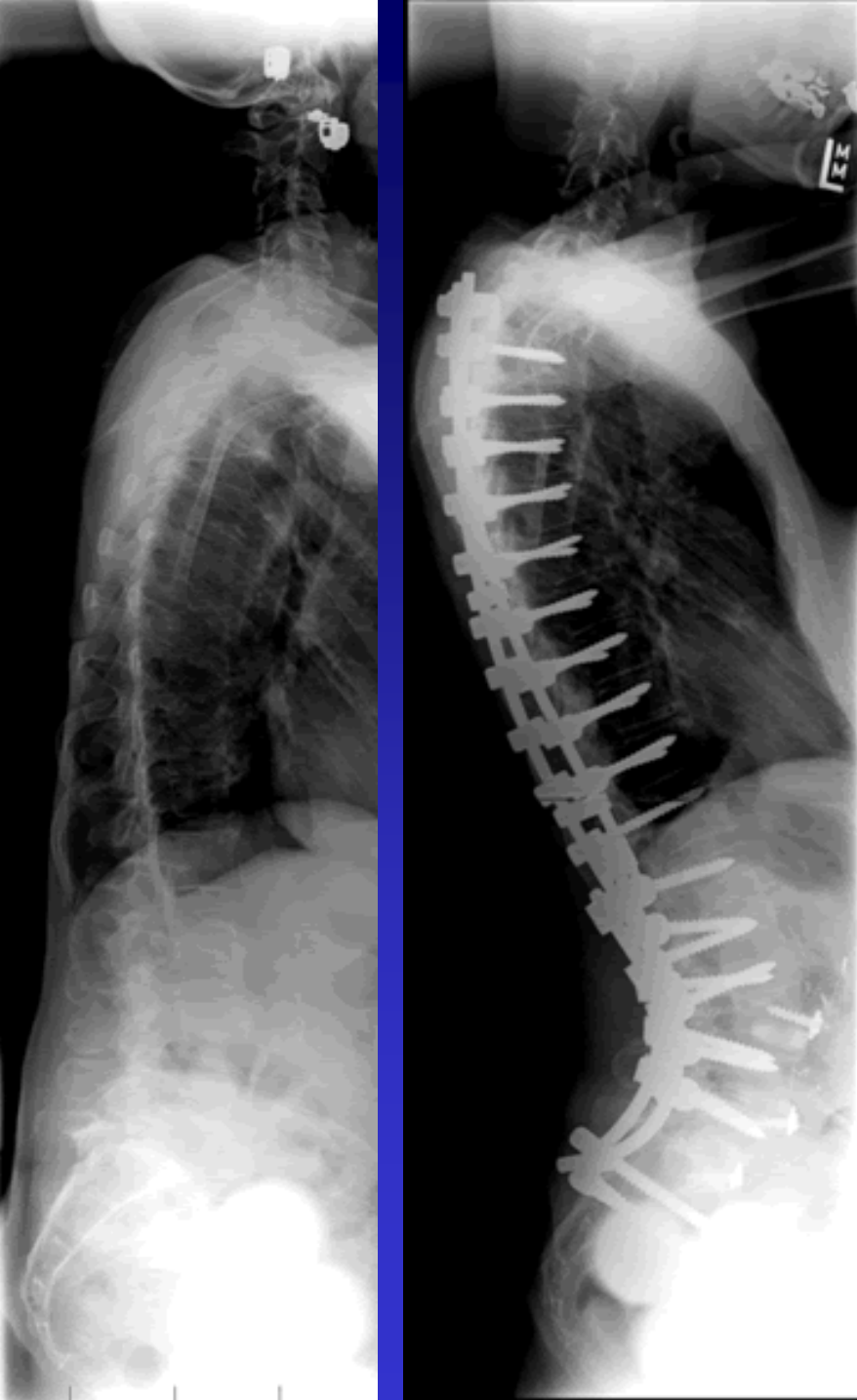




# Results

37% correction of was obtained.

Her sagittal balance is perfect, all of the patient's symptoms have resolved.



The patient's sagittal plane balance was restored.

At one year post-op, the patient had no radiculopathy, no pain, and no complaints.