

Case Review:

13 year old female with
Progressive Adolescent
Idiopathic Scoliosis.

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Patient History



- 13 year old post-menarchal female
- Progressive adolescent idiopathic scoliosis
- 1AN 50° progressive curve.
- 2 cm rib asymmetry. Her left shoulder is slightly down from her right.
- The patient has failed conservative therapy.
- She has thoracic and lumbar pain.

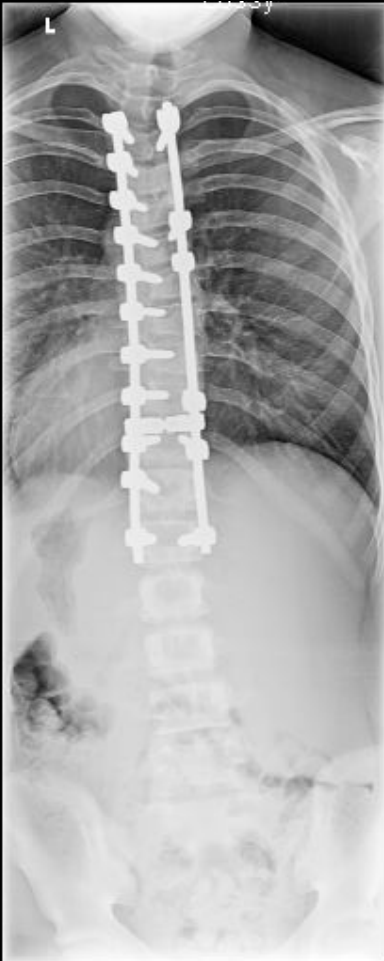
Indications for Surgery

1. Progressive adolescent idiopathic scoliosis, type 1AN 46° right thoracic curve.
2. Significant pain, thoracic and lumbar spine.
3. Cosmetic deformity of thoracic spine associated with progressive deformity.
4. Failed conservative therapy.

Surgical Strategy

- Segmental spinal instrumentation, thoracic 3 to lumbar 1 using 5.5 stainless steel pedicle screw-rod construct.
- Multiple level osteotomies, T5 to T10, for loosening of thoracolumbar spine.
- Posterior spinal fusion, T3 to L1, using locally harvested autogenous bone and allograft bone.
- Interlaminar decompression at T12-L1 for adjacent segment flexibility and identification of pedicles of L1.
- Plastic closure of wound.
- Intraoperative SSEP and motor sensory evoked potential management.
- Intraoperative fluoroscopy management.

Post-op Films



- The patient did very well post-operatively.
- She resumed her favorite sporting activities at one year post-op.

Pre-Op/Post-op Comparison

