

Case Review:

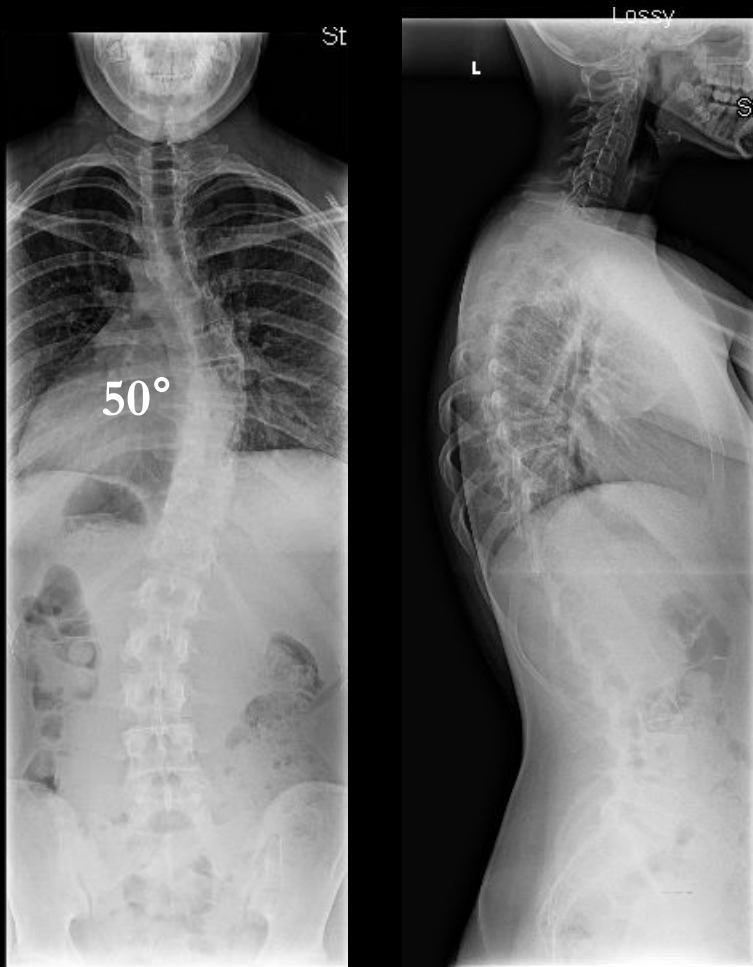
17 year old female with
Adolescent Idiopathic Scoliosis
Curve progression despite bracing

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Patient History

- 16+9 year old female
- Adolescent Idiopathic Scoliosis
- Patient wore her brace with good compliance for 2 years
- Curve progression despite bracing
- 2-cm right rib hump and elevation of left shoulder

Pre-op X-rays and Indications for Surgery



1. Lenke 1A 50 degree of progressive adolescent idiopathic scoliosis.
2. Failed conservative therapy, including bracing.
3. Now with increasing curve and upper thoracic pain.

Surgical Strategy

- T3 to L1 selective thoracic fusion for Lenke 1C progressive adolescent idiopathic scoliosis using quarter-inch stainless steel Legacy pedicle screw rod construct.
- Multiple level spinal osteotomy at T4 to T10, Smith-Pete osteotomies, radical facetectomies.
- Posterior spinal fusion, T3 to L1, using locally harvested autogenous bone and banked allograft.
- Intraoperative SSEPs and motor-evoked potentials.
- Intraoperative O-arm neuro navigation.

Pre-Op/Post-op Comparison

