

Improvement of Functional Outcome Using 6-minute walk in Patients with Congenital Scoliosis Treated by Growth Friendly Surgery: Five Years Follow-up Study



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Disclosure

- Noriaki Kawakami NPO Japan Spinal Deformity Institute (JSDI) (a, e)
Medtronic (b)
DepyuSynthes (b)
Kisco (b)
EOS imaging (a)
- Hiroko Matsumoto SRS (a)
POSNA (a)
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6 Minute-Walk Test (6MW)



- To assess function in several cardiopulmonary and neuromuscular conditions
- Influenced by muscle strength, balance, nutritional status, cardiac and lung function
- Standardized with norms for children ≥ 5 years of age
- Easy to do in the outpatient setting

6-minute Walk Test in EOS

- **Pre-op 6MW test in congenital scoliosis with rib anomalies**
 - ◆ ICEOS 2017, San Diego (Kawakami, Matsumoto, Redding)
 - Reduced in all patients compared to norm (10-30%)
 - Absolute 6MW values correlated with age, FVC and major curve
- **6MW test has not been widely used for EOS.**
- **No report of changes during surgical treatment in EOS**

Purpose

- **To investigate changes in 6-minute walk test before and after serial surgical treatment for congenital scoliosis**
 - Hypothesis: Growth friendly surgery improves functional outcome measured by 6-minute walk
- **To examine correlations between 6-minutes walk test and BMI and lung function forced vital capacity (FVC)**
 - Hypothesis: Longer walking distance in 6MW test is associated with higher BMI and FVC
- **To compare the results to changes reported in normal children**
 - Hypothesis: EOS patients have less changes in function compared to norm

Study Methods

Design and Setting:

- A retrospective cohort study
- Consecutive patients 2004-2012 from a single center

Study Participants:

- Congenital scoliosis with rib anomalies (fused/defect, or severe deformed)
- Rib-based growth-friendly surgery
- Follow-up period: five years

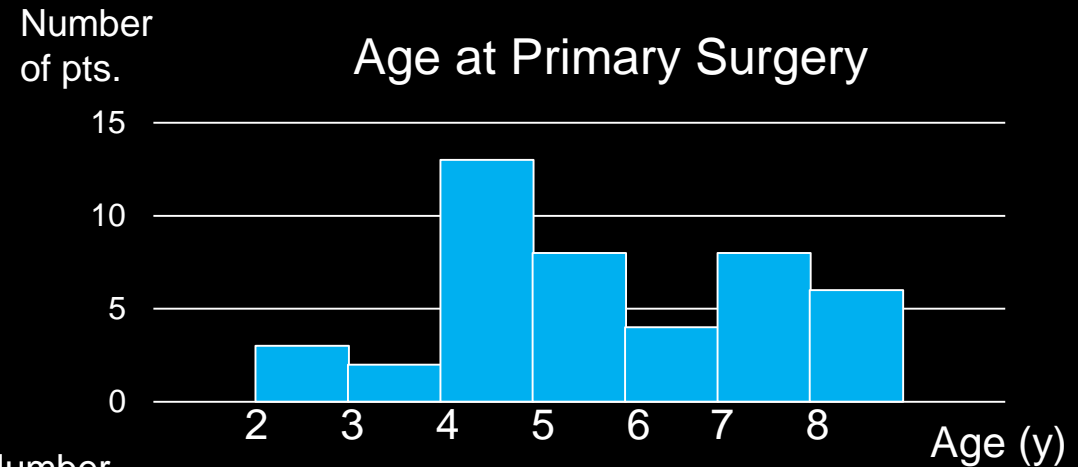
Methods

Endpoints:

- **6 minutes walk test at 1-year, 2-year and 5-year**
 - Absolute distance (m)
 - Standardized (height, age)
- **BMI %tile at 1-year, 2-year and 5-year**
 - Calculated by arm span
 - %tile by Japanese age specific norms
- **FVC %tile at 1-year, 2-year and 5-year**
 - Calculated by arm span

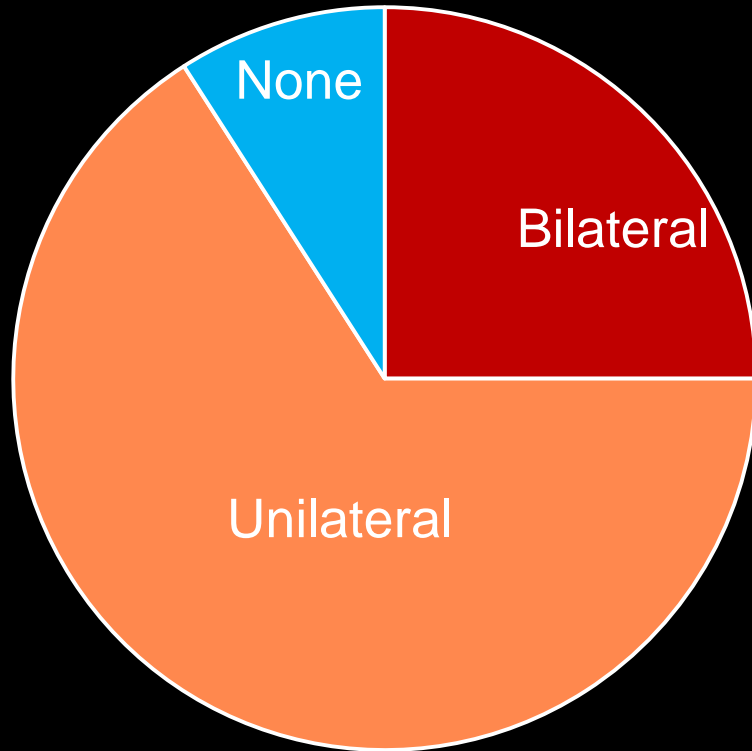
Study Participants

- **44 patients** (Male 14, Female 30)
- Age at primary surg.: **5.8 ± 1.8 ys.**
- Pre-op BMI: **53 ± 30 %tile**
- Number of procedures: **9.8 ± 1.4 within 5 years**
- 14 of 44 (32%) underwent spine fusion, implant removal, or termination of expansion by the end of the study



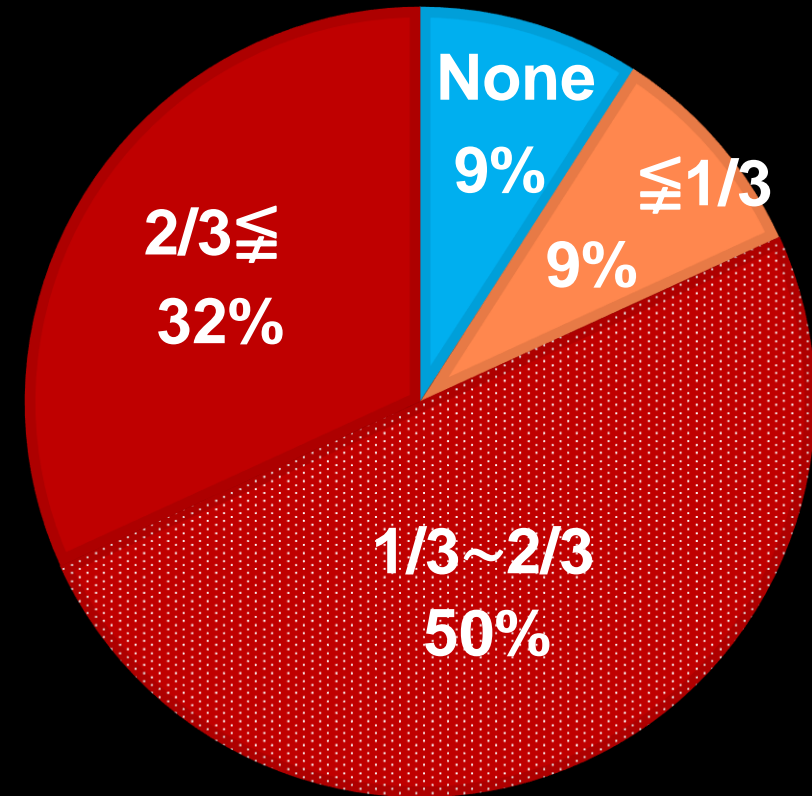
Involvement of Rib Anomalies in Thoracic Cage

Laterality



2/3 of patients :
unilateral involvement

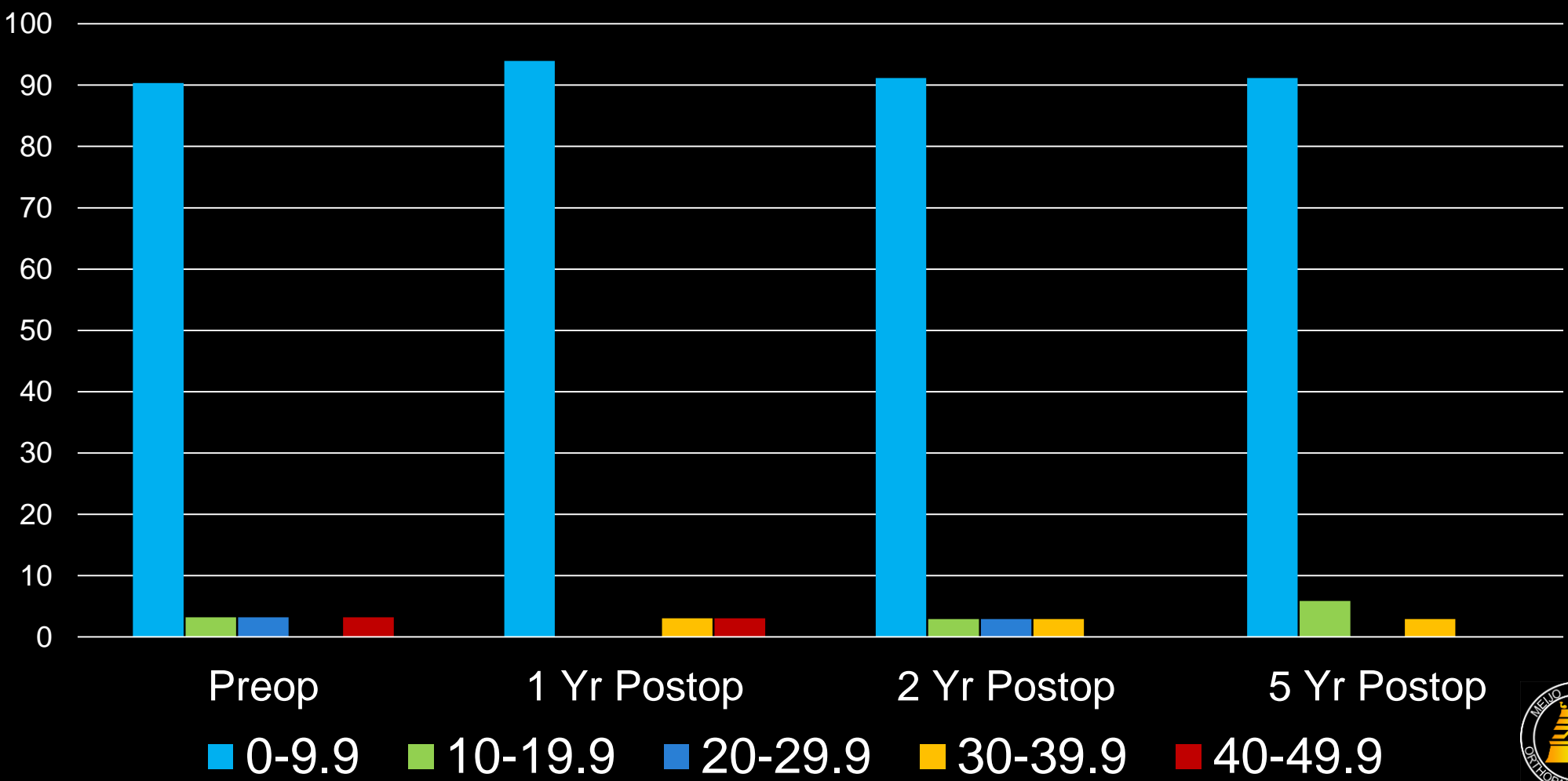
Area



80% of patients :
>1/3 of the unilateral thoracic cage

Changes of Walking Distance: Standardized 6MW was compromised at preop but did not worsen postoperatively

6 MW %tile
using
Swiss Age
Norms



Results:

	Preop.	Immediate Postop.	1-year Postop.	2-year Postop.	5-year Postop.
Major curve (°)	72 ± 28	53 ± 23	56 ± 22	56 ± 22	52 ± 23
BMI (%tile)	53 ± 30	---	51 ± 29	43 ± 31	34 ± 27
FVC % Predicted (%)	58 ± 17	---	57 ± 15	57 ± 15	54 ± 16
6-minute Walk (m)	344 ± 86	---	374 ± 74	390 ± 78	434 ± 80

Results:

- Over the 5-year period of study, 6-minute walk increased by $86 \pm 97\text{m}$ (17.2m/year)
 - Normal children increase distance of 16-25m per year
- The change in FVC did not correlate with the change in 6-minute walk as a % of incremental change over 5 years ($p=0.30$)
- No correlation between BMI and 6-minutes walk

Conclusions

- **Over 5 ys. of surgical Tx. for congenital scoliosis:**
 - ✓ Major coronal curve was reduced
 - ✓ BMI decreased
 - ✓ Lung function did not change as FVC % of predicted
 - ✓ 6-minute walk distance increased in absolute terms at a rate seen in normal children over time
- **Improvement in 6 minute walk occurs despite persistently reduced lung function, suggesting improvements in balance, strength, and stride length may be more important determinants of performance by rib-based growth-friendly surgery.**

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Standardized 6MW was compromised at preop but did not worsen postoperatively

