

# The Characterization of the Thoracic Biomechanics of Respiration in Thoracic Insufficiency Syndrome by Dynamic Lung MRI: A Preliminary Report

R M Campbell , Jr., MD  
Division of Orthopaedics, CHOP  
Philadelphia, PA

A Aubrey MD, M D Smith, MD, J. W Simmons,  
Phd, DO, Ajeya Joshi, MD , S Inscore, MD, B.  
Cofer MD, J Doski, MD

Department of Orthopaedics  
University of Texas Health Science Center at San Antonio  
The Thoracic Institute  
Christus Santa Rosa Children's Hospital  
San Antonio, Texas, USA



**T**horacic  
Institute

Christus Santa Rosa  
Children's Hospital

# Disclosures

- RM Campbell

- Grant Support

- NORD, FDA Office of Orphan Product Development

- Royalities

- Synthes Spine Co

- JW Simmons

- Honorarium

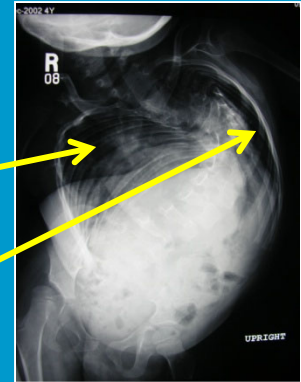
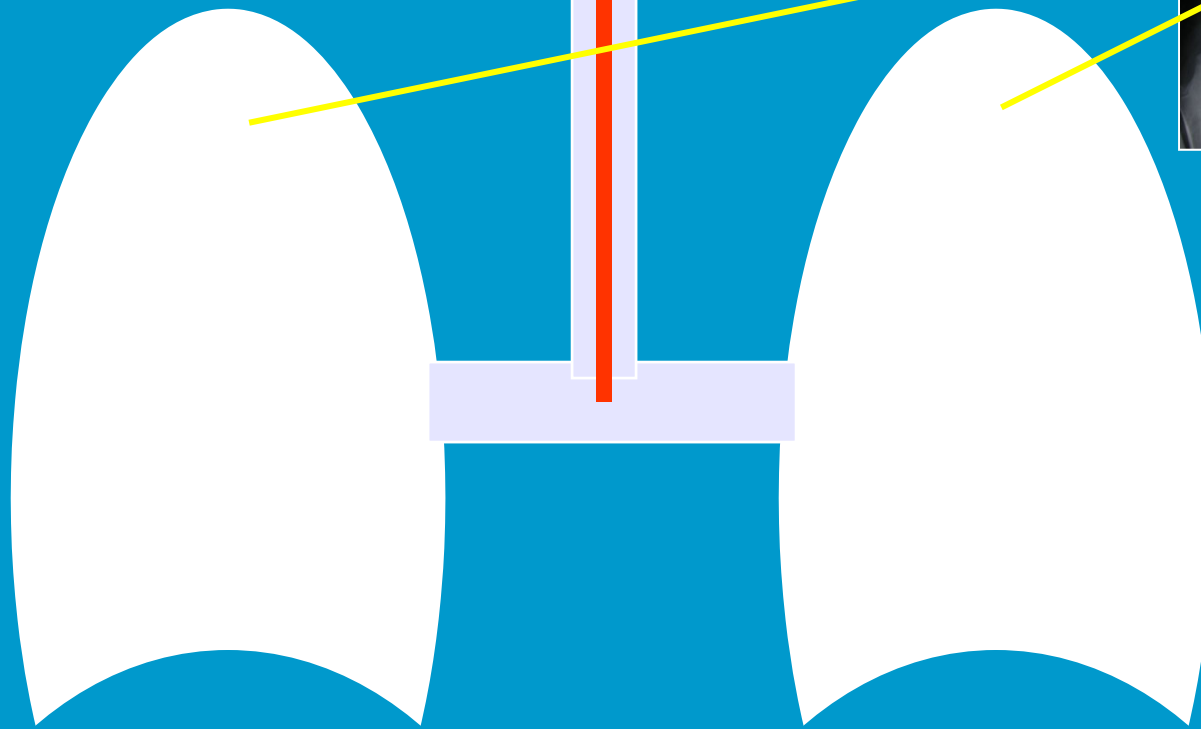
- Synthes Spine Co



Thoracic  
Institute

Christus Santa Rosa  
Children's Hospital

FVC, TV, Etc ..

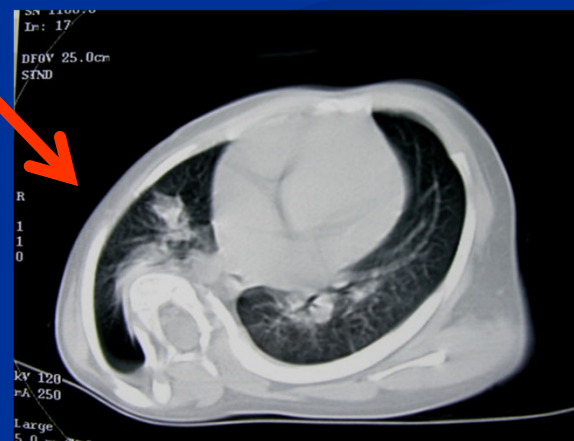
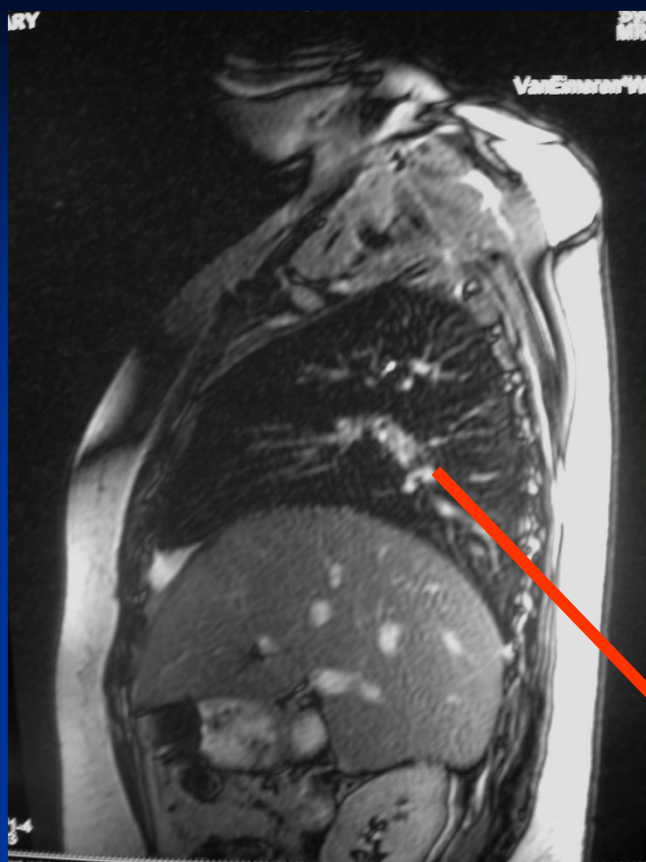


Rt Lung

Lt Lung

PFT's are Lacking Biomechanically

# Dynamic Lung MRI and Spine Deformity

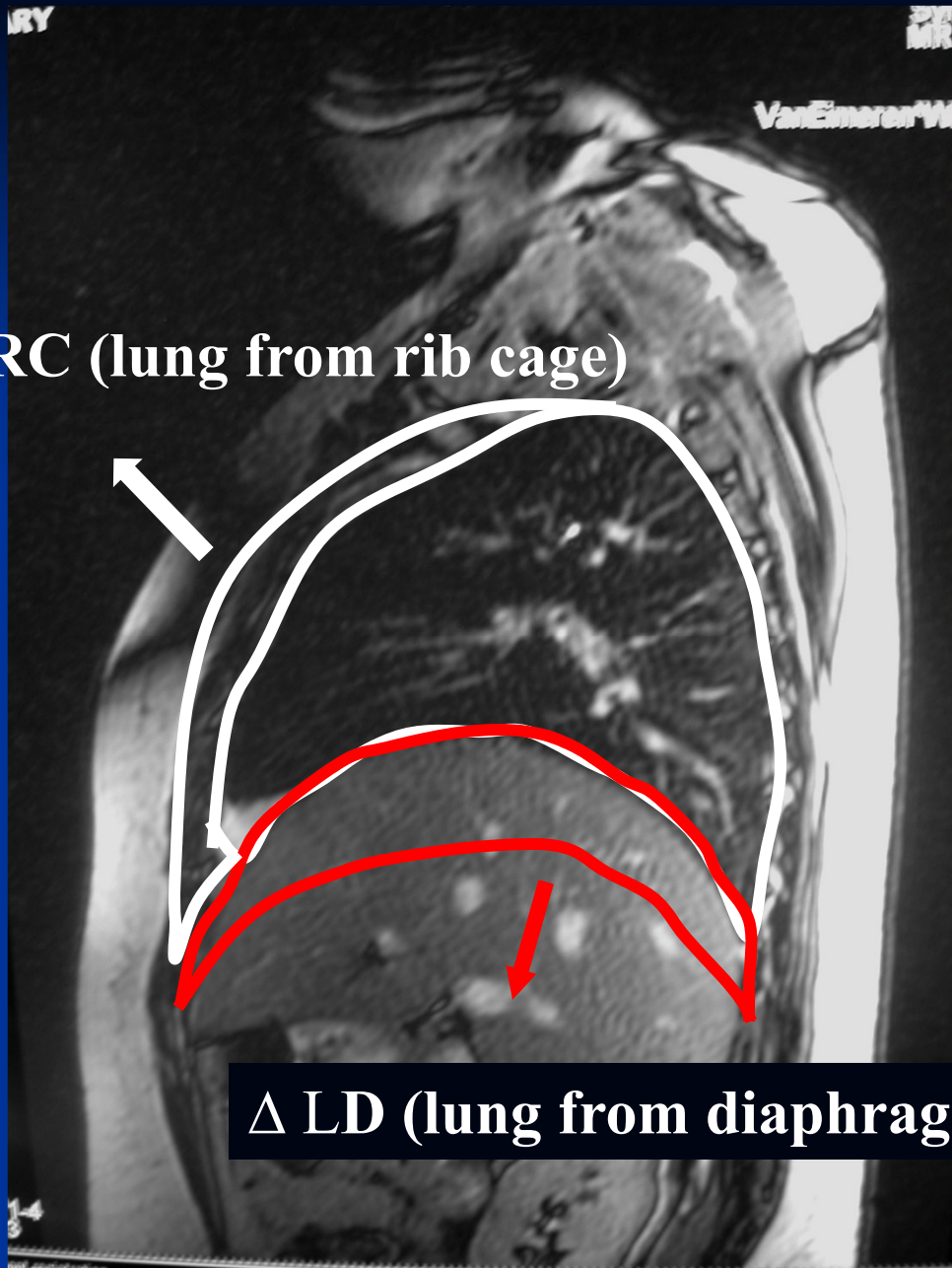


**Thoracic  
Institute**

Christus Santa Rosa  
Children's Hospital

# Methods

- 20 pts
  - evaluated for TIS, studied with radiographs, CT scans, PFT's ( when practical), and dynamic lung MRIs performed with spontaneous breathing ( tidal volume)
  - 6 had EOS
  - 7 had congenital scoliosis
  - 4 had kyphoscoliosis
  - 3 hypoplastic thorax.



$\Delta$  LRC (lung from rib cage)

$\Delta$  LD (lung from diaphragm)



**T**horacic  
Institute

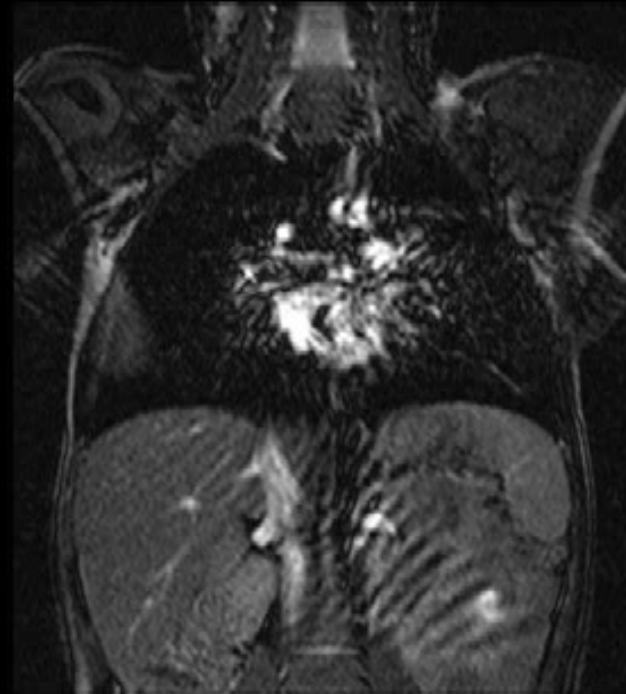
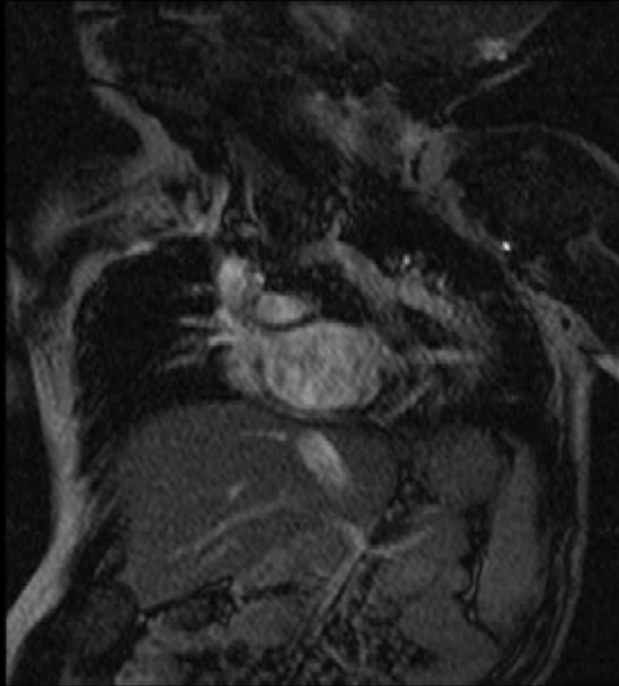
Christus Santa Rosa  
Children's Hospital

# Positive Marionette sign



Patient

Normal 4 y/o



Thoracic  
Institute

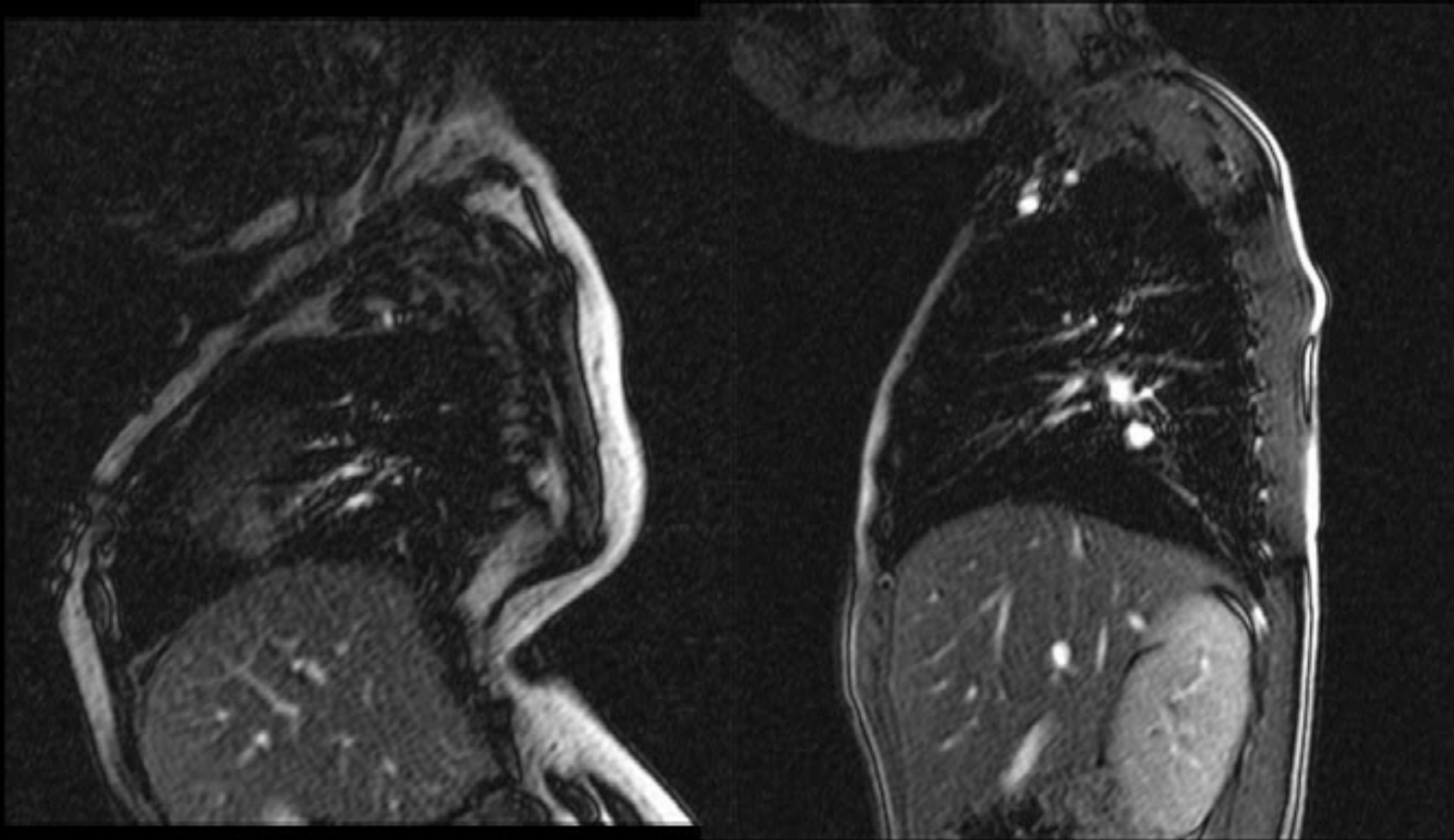
Christus Santa Rosa  
Children's Hospital



**TL 58 s.c.  $\Delta$  LRC 6.3 (11%)**  
 **$\Delta$  LD 5.2 (9%)**

**TL 89 s.c.  $\Delta$  LRC 5.3 (6%)**  
 **$\Delta$  LD 6.9 (8%)**

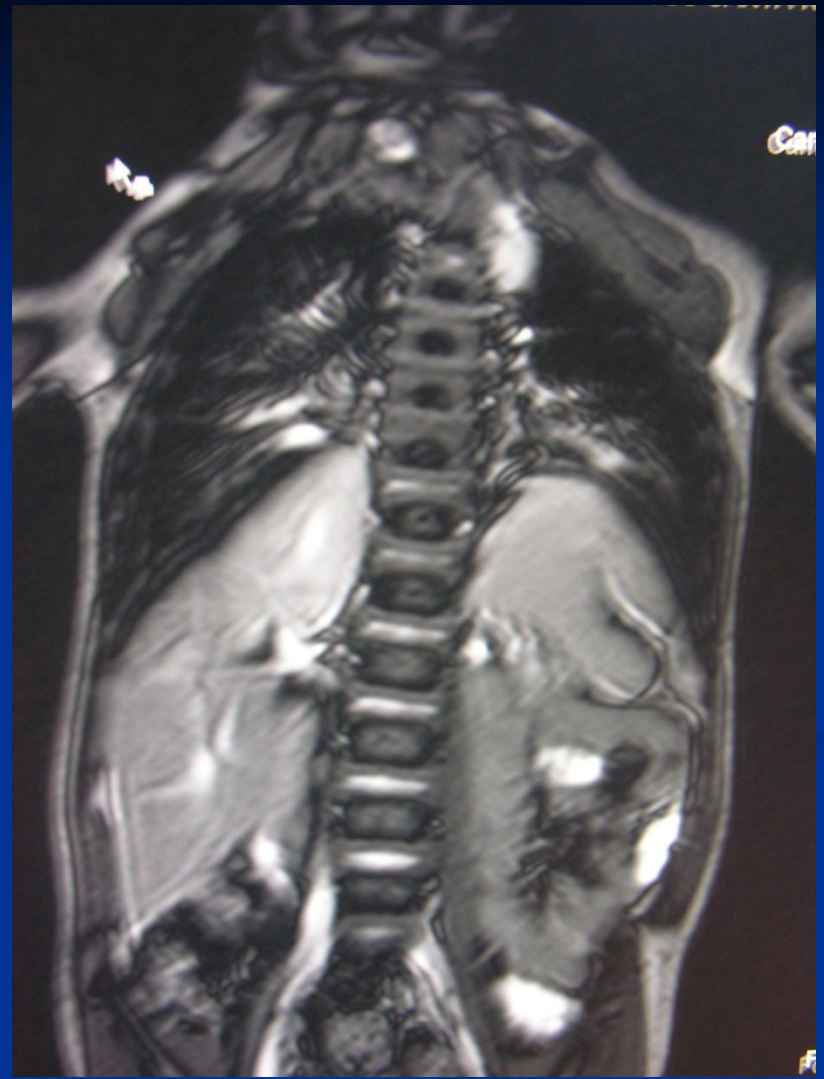
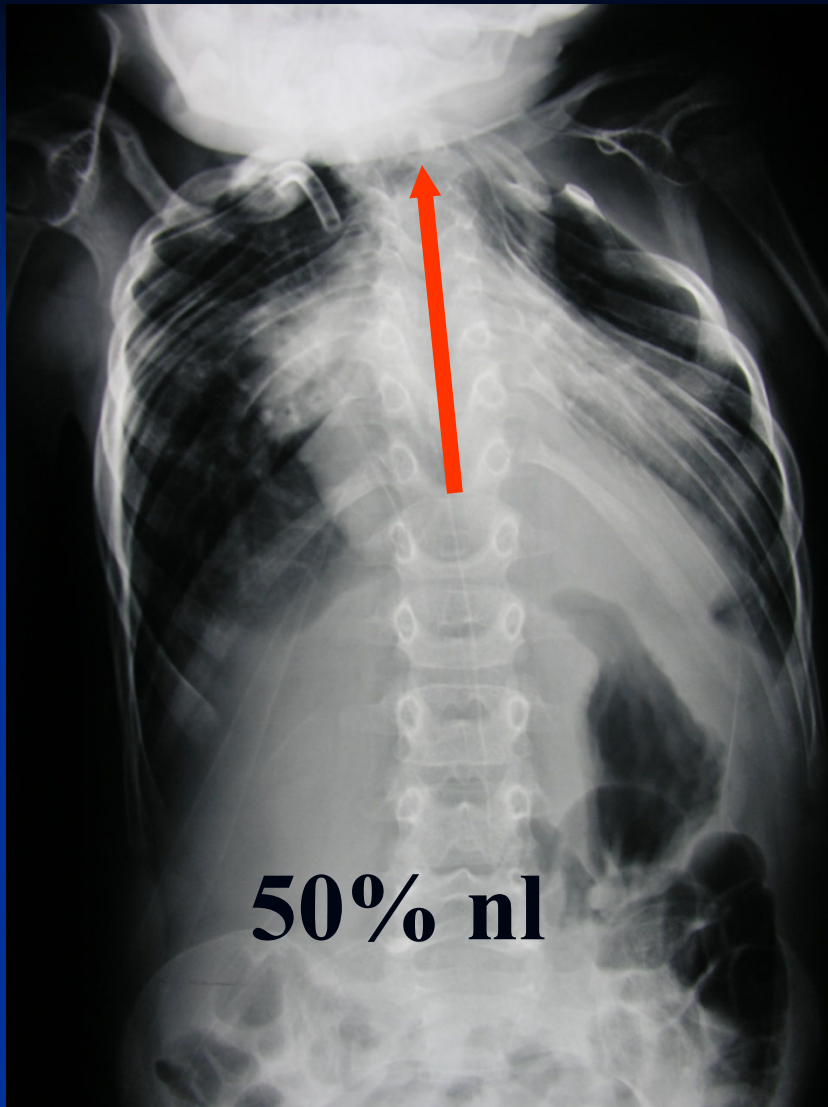
Normal





**Thoracic  
Institute**

Christus Santa Rosa  
Children's Hospital



**Thoracic  
Institute**

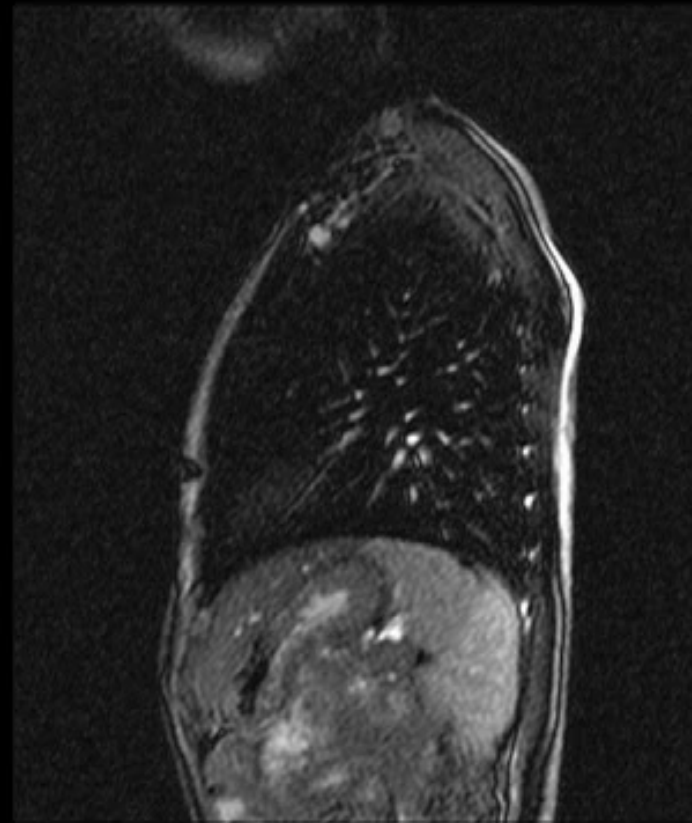
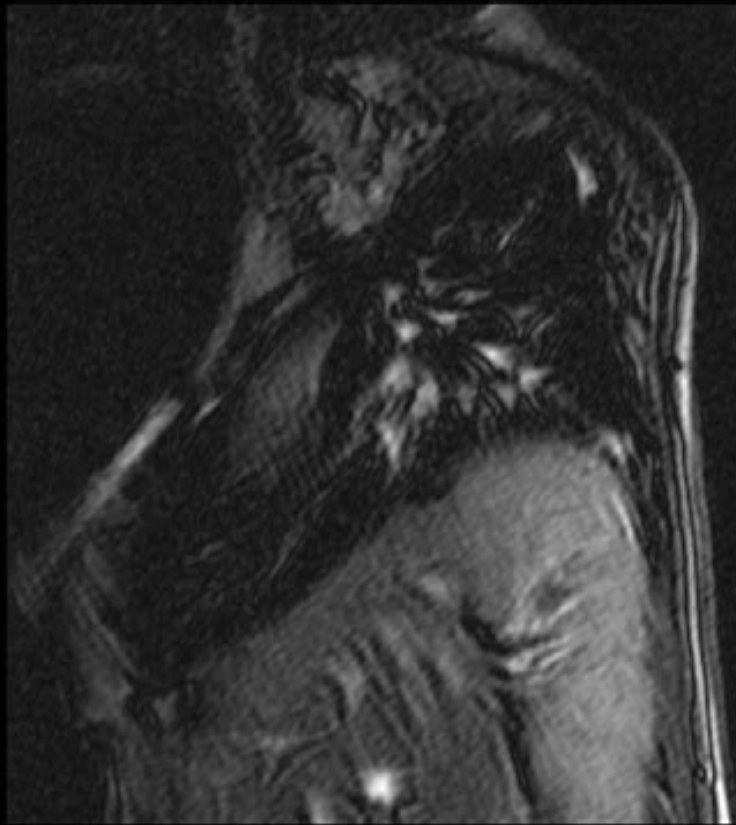
Christus Santa Rosa  
Children's Hospital



**TL 74 s.c.  $\Delta$  LRC 0.37 (0.4%)**  
**(7 y/o)  $\Delta$  LD 8.4 (11%)**

**TL 89 s.c.  $\Delta$  LRC 5.3 (6%)**  
**(4 y/o)  $\Delta$  LD 6.9 (8%)**

Normal



# Results

Δ Lung from Diaphragm % total lung area    Δ L Rib Cage % total lung area

## ■ EOS

■ Convex hemithorax	8.2 %	1.1 %
■ Concave hemithorax	8.3 %	2.5 %

## ■ CONGENITAL SCOLIOSIS

■ Convex hemithorax	12.1 %	2.6 %
■ Concave hemithorax	12.8%	3.4 %

## ■ KYPHOSCOLIOSIS

■ Convex hemithorax	6.1 %	1.1 %
■ Concave hemithorax	7.1%	1 %

## ■ HYPOPLASTIC THORAX

( hemi-thorax symmetric)

8.9 %	5.4 %
-------	-------

# Conclusions

- The convex hemi-thorax in EOS and congenital scoliosis is less efficient than the concave hemi-thorax in the rib cage expansion contribution to respiration
- Kyphoscoliosis degrades respiratory hemi-thorax expansion symmetrically
- Hypoplastic thorax hemi-thorax expansion seems least affected



Thoracic  
Institute

Christus Santa Rosa  
Children's Hospital

# Thank You!

[campbellrm@email.chop.edu](mailto:campbellrm@email.chop.edu)



**Thoracic  
Institute**

Christus Santa Rosa  
Children's Hospital