The Utility of VEPTR in the Older Child with Complex Spine and Chest Deformity

Amer F. Samdani, MD Tricia St. Hilaire John Emans, MD John Smith, MD Kit Song, MD Robert Campbell, MD Randal R. Betz, MD

(Chest Wall and Spine Deformity Study Group, Synthes Spine, and AO Spine North America)

Disclosures

- RM Campbell
 - Grant Support
 - NORD, FDA Office of Orphan Product Development
 - Royalites
 - Synthes Spine Co

Background

 Main indication for titanium rib surgery: to increase lung volume in patients < age 8

 What options exist to correct the complex congenital spine and chest wall deformity in older children?

Significance

- Correction of congenital spine deformity in patients over 10 remains a challenge.
- Vertebral column resection is an option but has a high neurological risk and is technically demanding.

Wedge Osteotomies







16 yo old with complex cervical thoracic congenital scoliosis





Purpose

 To analyze the radiographic spine deformity correction following treatment with VEPTR implants in a group of older children (> age 10) at time of first surgery

Methods

- Retrospective study of patients who participated in FDA IDE study who:
 have had VEPTR surgery
 - were over 10 yrs of age at initial surgery
 - have minimum 2 yr follow-up

Methods

- Of 214 total patients in database, 10 met the inclusion criteria
- Mean age at surgery: 12.4 years
- Diagnoses:
 - Congenital scoliosis = 6
 - Hypoplastic thorax = 3
 - Myelomeningocele = 1
- 4 had prior limited spine fusion

Methods

- Radiographic measurements
 - Maximum Cobb angle
 - Hemithoracic height and width
 - Thoracic height
 - Head shift
 - T1 tilt angle

Results

Diagnosis	N	Pre/Post Cobb Correction	2 yr Cobb Correction	Pre/Post Head Shift (cm)	Definitive Procedure
Congenital Scoliosis with or without Fused Ribs	6	36.4%	32.1%	4.3	Posterior spinal fusion (n=2); planned for fusion (n=2); no fusion planned (n=2)
Hypoplastic Thorax	3	15.9%	-4.7%	1.8	Posterior spinal fusion (n=1); planned for fusion (n=2)
Myelomeningocele	1	12.7%	-16.4%	7.9	Posterior spinal fusion (n=1)

Complications

- No patient sustained a neurologic injury
- One patient with device fracture and migration
- One patient with pain in the upper lumbar spine
- Two patients with pneumonia





July 2002

March 2005

The Effect of Mid-Thoracic VEPTR Opening Wedge Thoracostomy on Cervical Tilt associated with Congenital Scoliosis SPINE 2007



Avg Age 4.4 yrs

RM Campbell, Jr., MD BM Adcox, MD MD Smith, MD, JW Simmons III, DO, BR Cofer, MD, SC Inscore, MD, C Grohman, RN



Summary

- This study demonstrated the safety and utility of VEPTR in carefully selected older patients with complex spine and chest wall deformities.
- VEPTR may be a viable option for these children when vertebral column resection is deemed too risky.

Thank You

