

Growth of the Lungs: Impact of EOS and Treatments

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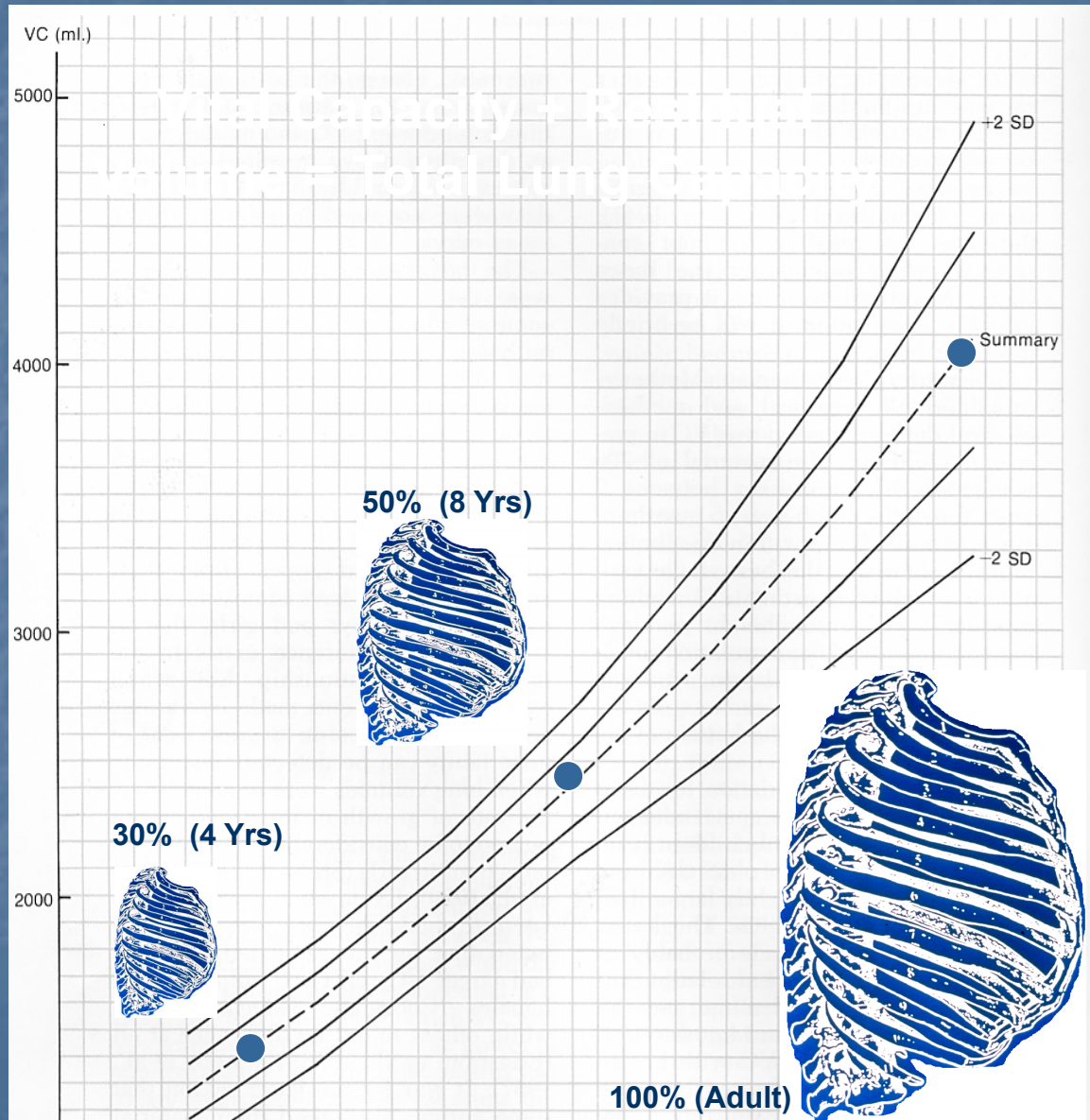
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Disclosures

Paid speaker for Synthes and Stryker
CE activities

Lung Volumes Change with Age and Height

Total Lung Capacity



Lung Structures & Postnatal Growth Patterns

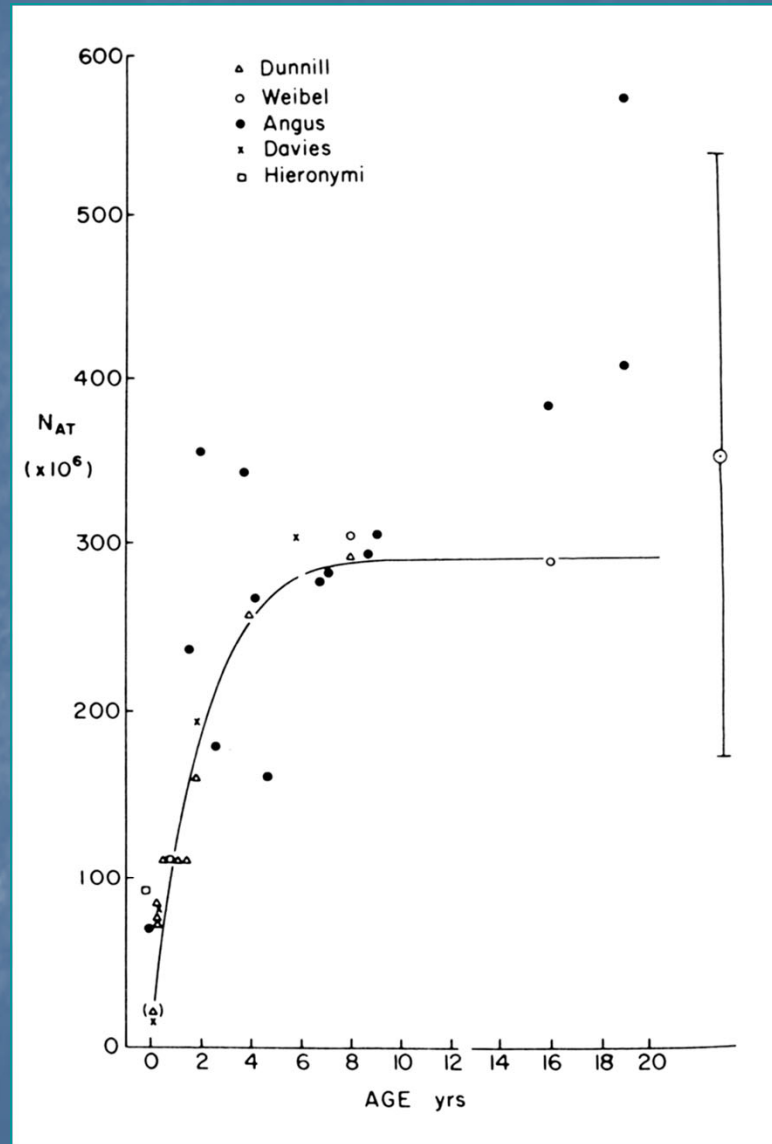
		Generation	Number	
Conducting zone	trachea	0	1	
	bronchi	1	2	
		2	4	
		3	8	
		4	16	
	bronchioles	5	32	
terminal bronchioles	16	6×10^4		
Transitional and Respiratory zones	respiratory bronchioles	17	5×10^5	
		18		
		19		
	alveolar ducts	T ₃	20	↓
		T ₂	21	
		T ₁	22	
alveolar sacs	T	23	8×10^6	

Pulmonary Changes From Neonatal Period to Adulthood

	Adult/Neonatal Ratio
Bronchial Diameter	2.5
Bronchial & Bronchiolar Number	1
Alveolar Number	12.3
Alveolar Size*	5.5
Alveolar-capillary surface area	10-15

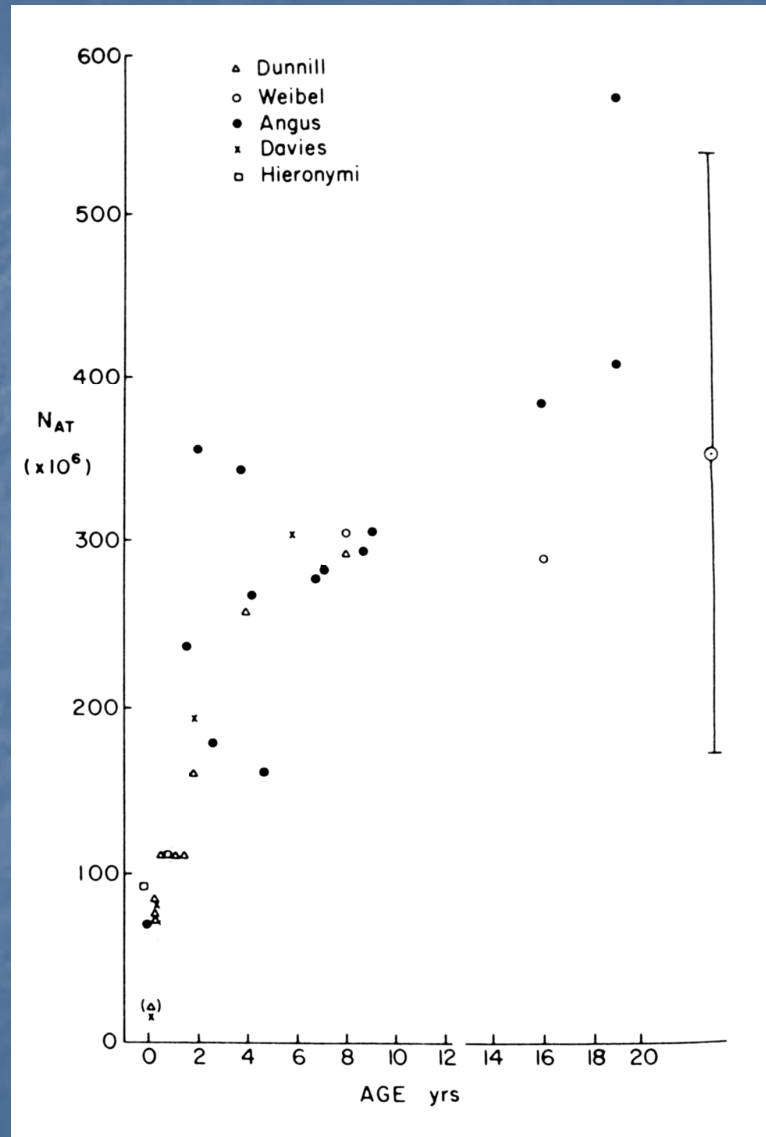
**Does account for increased alveolar configuration complexity and capillary development which contribute to alveolar-capillary surface area*

Postnatal Lung Development: Alveolar Number



Murray JF. In: The Normal Lung (2nd Ed.), W.B. Saunders, Philadelphia, 2:23-60, 1986.

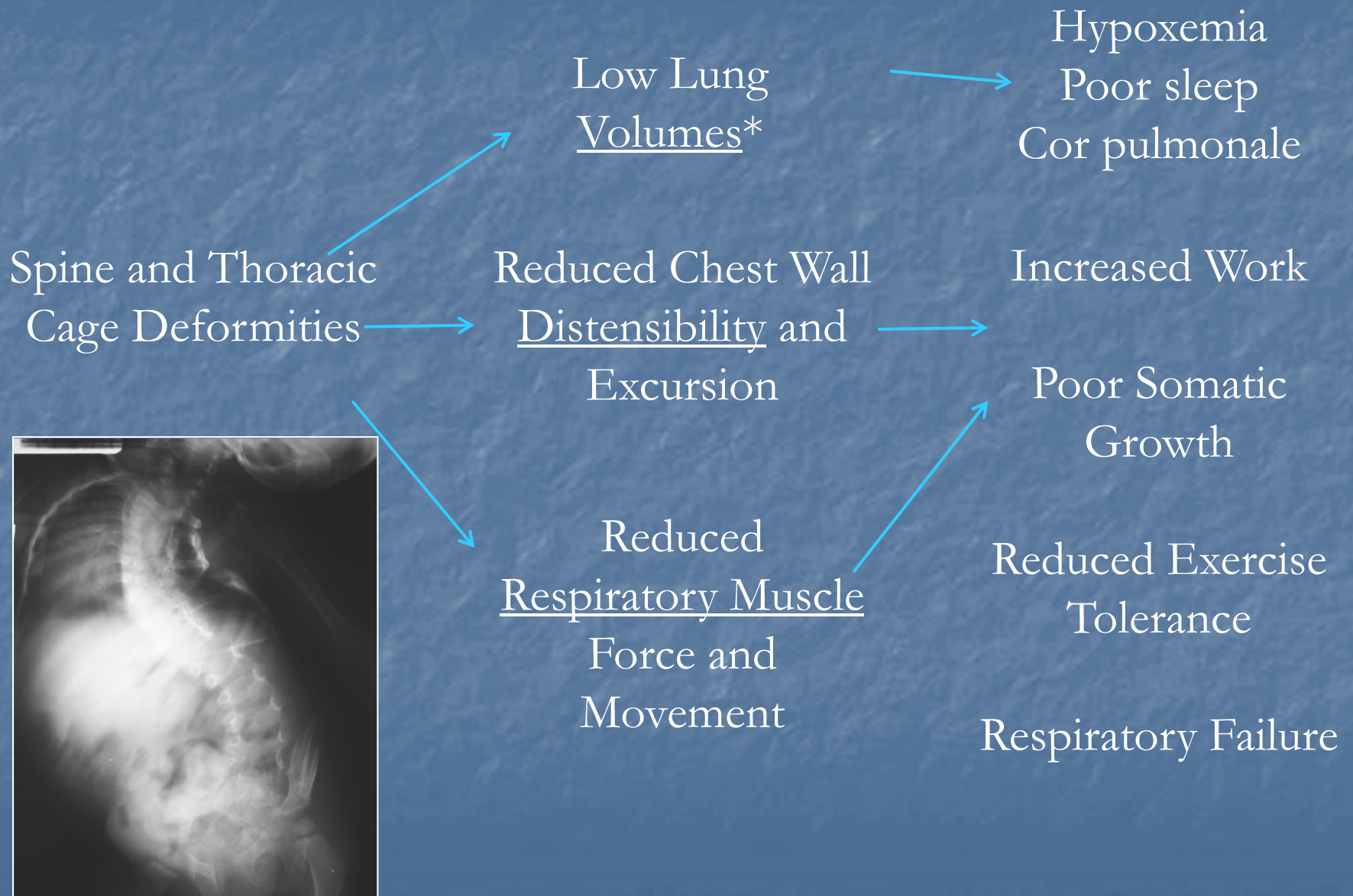
Postnatal Lung Development: Alveolar Number



Alveolar number increase
with somatic growth

Alveolar growth is more rapid in
children <2 years of age

Pulmonary Pathophysiology of EOS



Reduced Lung Volumes and Diffusion Capacities in Adults with Early Onset Scoliosis*

Group	n	FVC	TLC	DLCO
#1: Untreated	6	97+/-11%	97+/-10%	93+/-17%
#2: Fusion <i>after</i> 10 years of age	6	58+/-16%	71+/-16%	80+/-20%
#3: Fusion <i>before</i> 10 years of age	10	41+/-20%	50+/-15%	58+/-35%

Studied at 21 +/-4 years of age

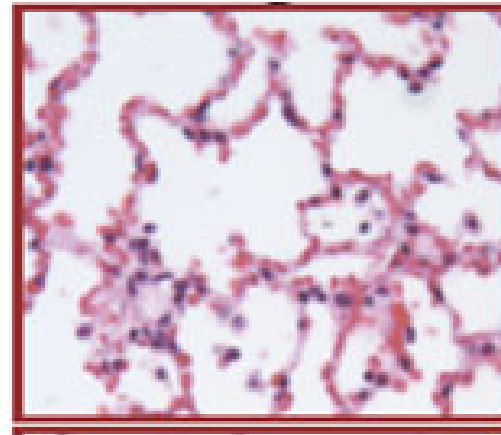
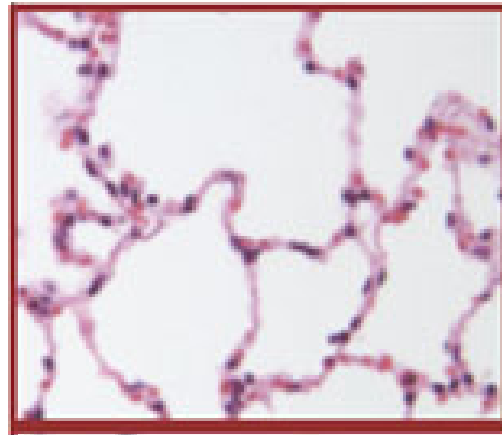
Chest Wall Constraints: Post-natal Pulmonary Hypoplasia Syndrome?



Rib Tethering



Normal



Olson JC, Kurek KC, Mehta HP, et al. Evaluation of Pulmonary Cellular Response to Treatment of thoracic Insufficiency Syndrome Using Expansion Thoracoplasty in Scoliotic Rabbit Model

Consequences of Lung Hypoplasia*

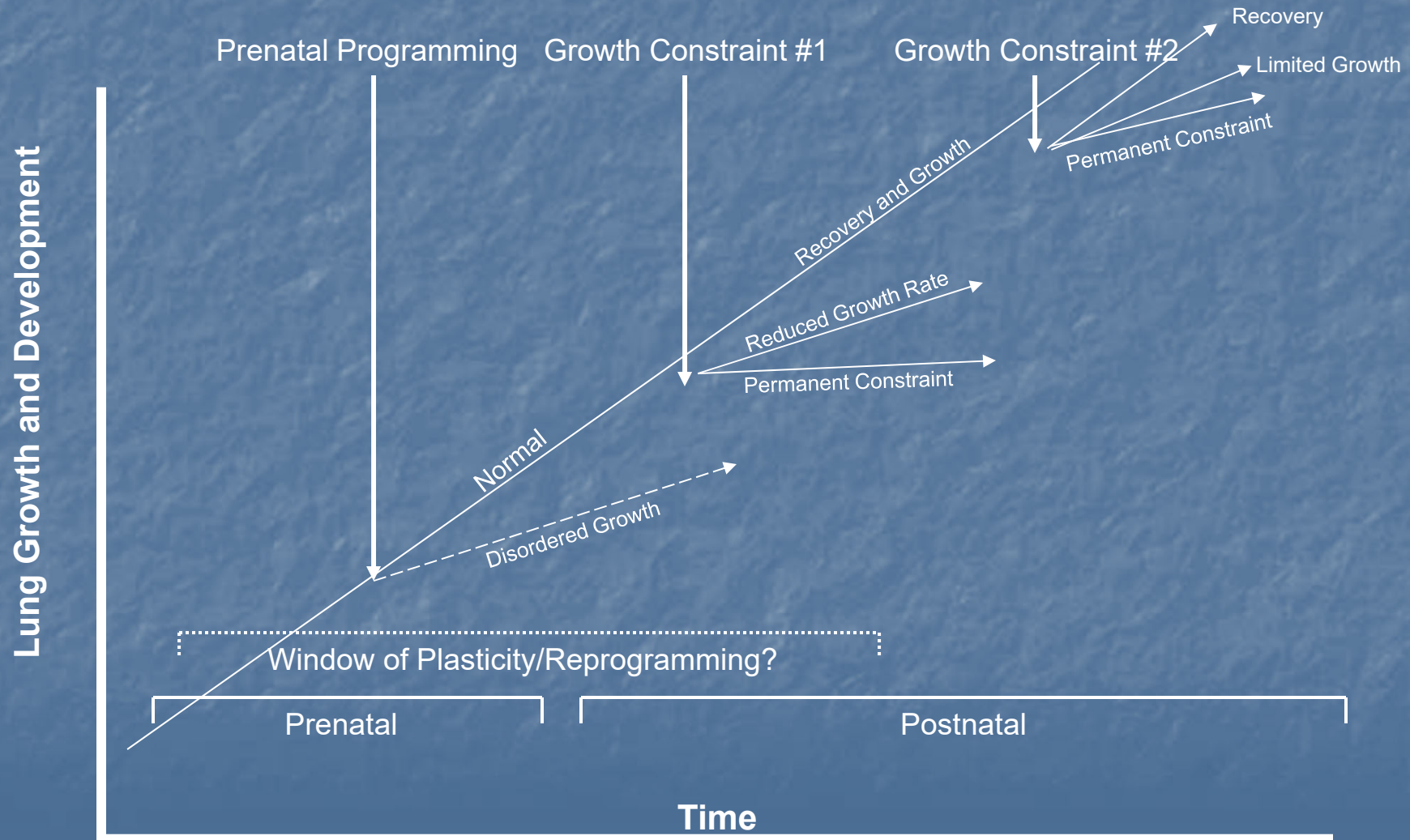
- Increased lung stiffness
- Loss of capillary surface area (with increased risk of Pulmonary Hypertension)
- Limited exercise tolerance

In addition to pulmonary pathophysiology of EOS

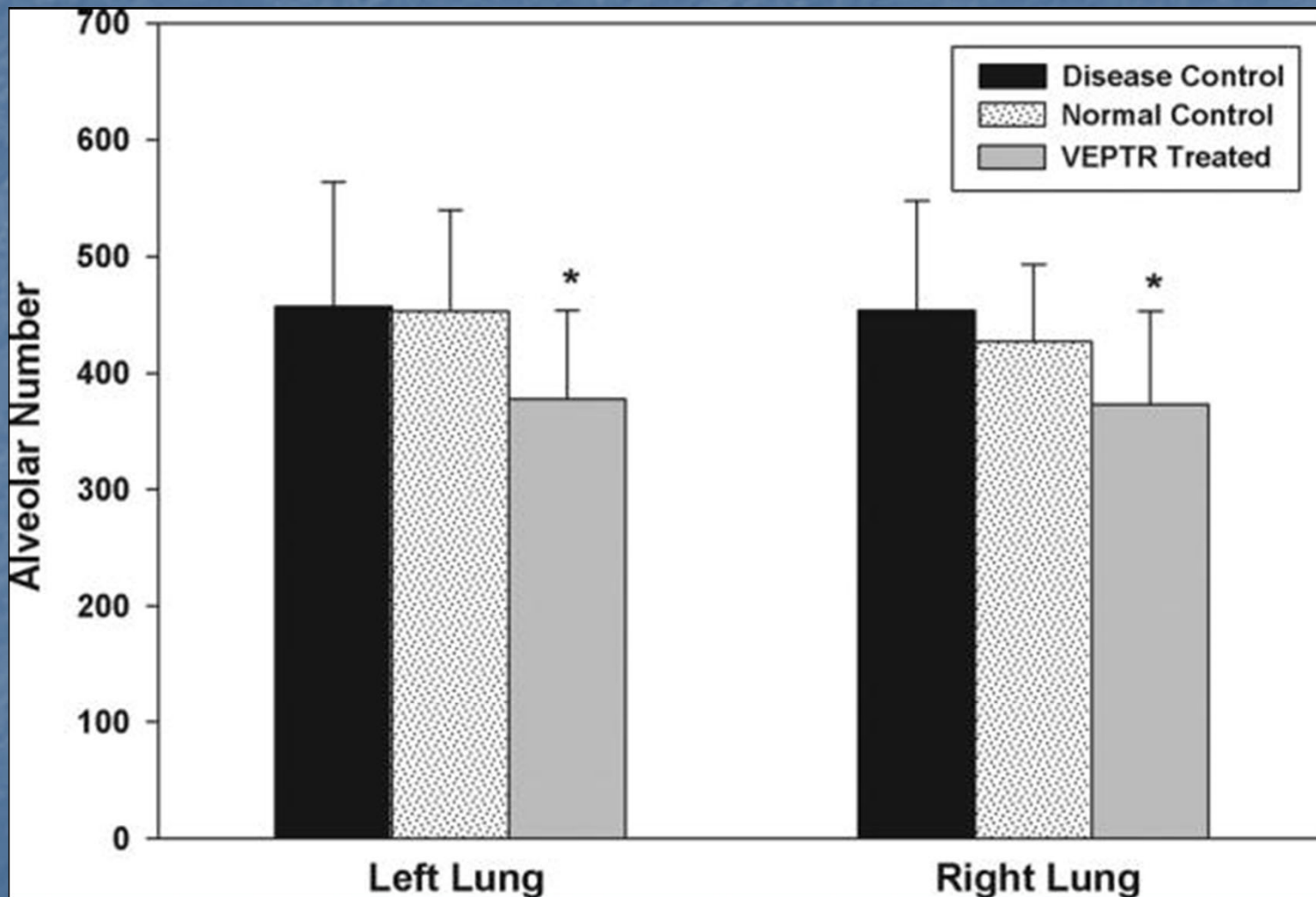
Compensatory Lung Growth Considerations (Post-pneumonectomy studies)

- Lung stretch (phasic and tonic) and space available for lung growth
- Alveolar Hypoxia
- Postnatal Plasticity/Maturation
- Adrenal and other endocrine function
- In-utero and post-natal tobacco smoke

Windows of Responsiveness to Insults and Interventions



Alveolar Numbers with Expansion Thoracoplasty in Rabbits



Summary

- There is circumstantial and experimental evidence that EOS can produce postnatal pulmonary hypoplasia.
- Postnatal lung hypoplasia can worsen lung function associated with spine & chest wall deformities.
- Strategies to prevent lung hypoplasia and perhaps promote compensatory lung growth should be considered a goal of treatments.