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# Pulmonary And Radiographic Outcomes Of VEPTR Treatment In Early Onset Scoliosis



Ozgur Dede, Etsuro K Motoyama,  
Charles Yang, Rebecca Mutich,  
Austin Bowles, Vincent F Deeney



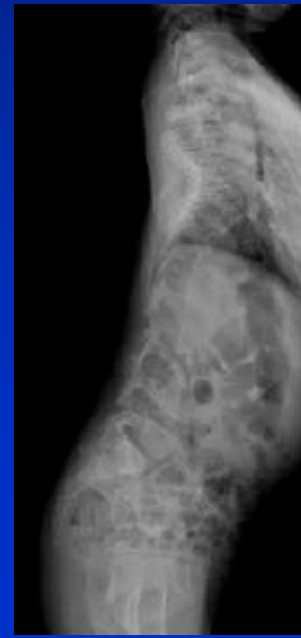
Children's  
Hospital of Pittsburgh

of  
UPMC

# Introduction

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- The pulmonary effects of VEPTR expansion thoracoplasty is not clear



# **Materials and Methods**

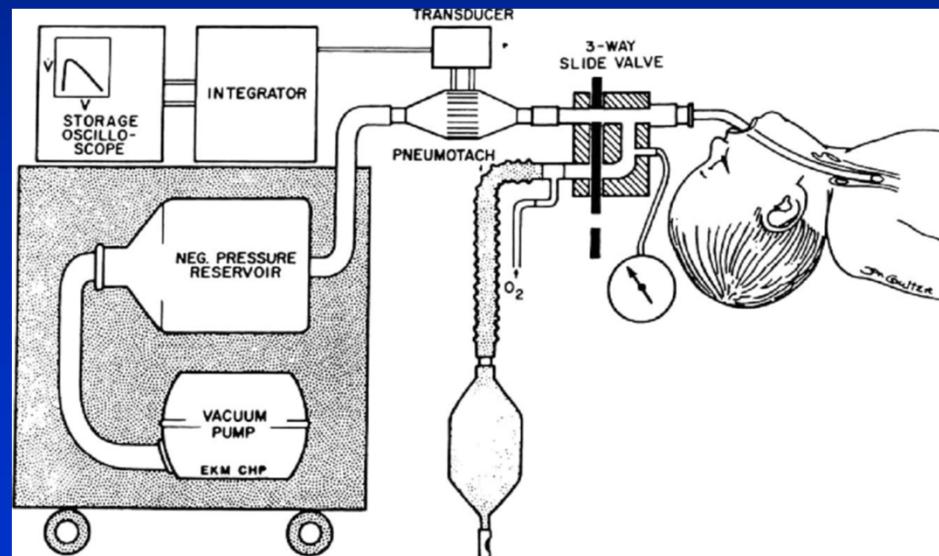
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- **Twenty-one patients**
  - **VEPTR expansion thoracoplasty treatment between 2002 – 2012**
  - **complete pre-operative and follow up PFTs and radiographs**

# Materials and Methods

## *Pulmonary Function Tests*

- Immediately before index surgery and all subsequent expansions
  - Under general anesthesia



*Motoyama et al. Am Rev Respir Dis. 1987*

# Results

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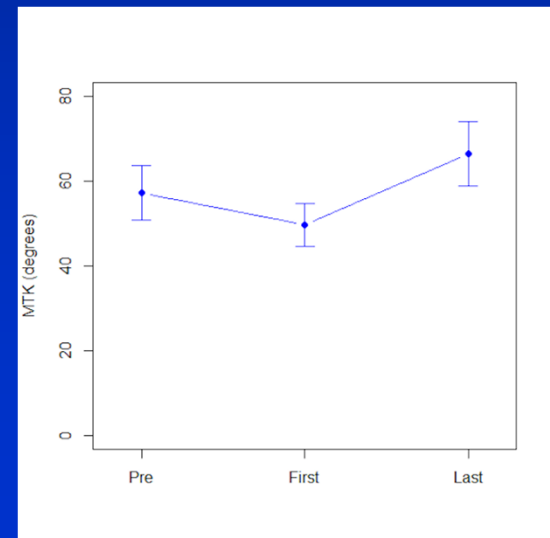
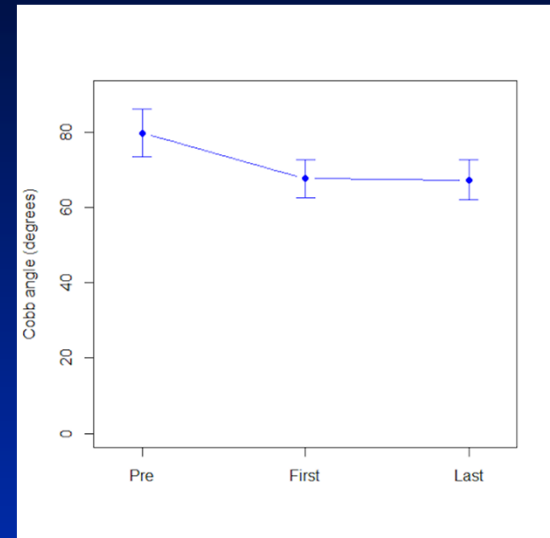
## *Patients*

- **10 male ; 11 female**
  - » Congenital : 8
  - » Syndromic : 9
  - » Neuromuscular : 3
  - » Idiopathic : 1
- **Age at index : 58 months (24 – 131)**
- **Follow-up: 72 months (38 – 103)**
- **Expansions/patient: 11**
- **Pulmonary tests/patient:10**
- **Interval: 6.4 months**

# Results

## *Radiographs - Deformity*

- **Coronal Cobb Angle**
  - Initial: 80°
  - Final 67° (p= 0.002)
- **Maximum Thoracic Kyphosis**
  - Initial: 57°
  - Final: 66° (p=0.08)
  - Severe proximal thoracic kyphosis in 4
  - Coronal and/or sagittal off-balance in 7



# Results

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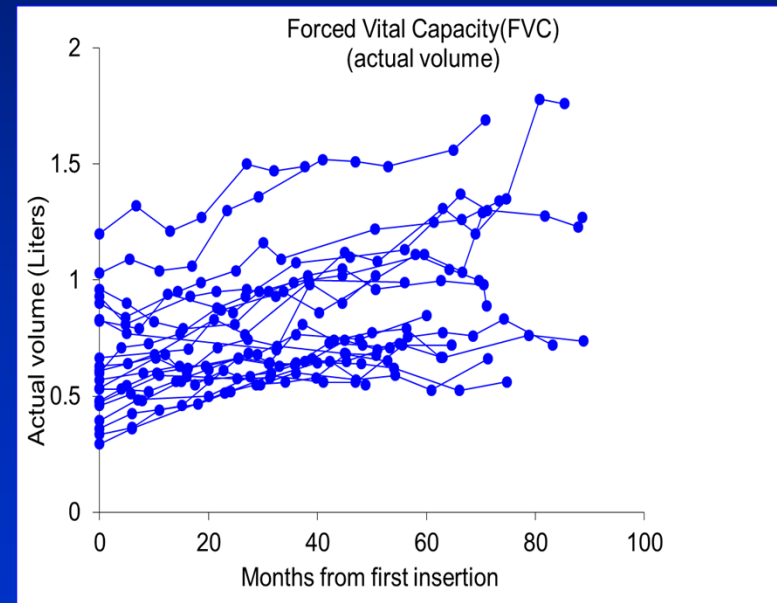
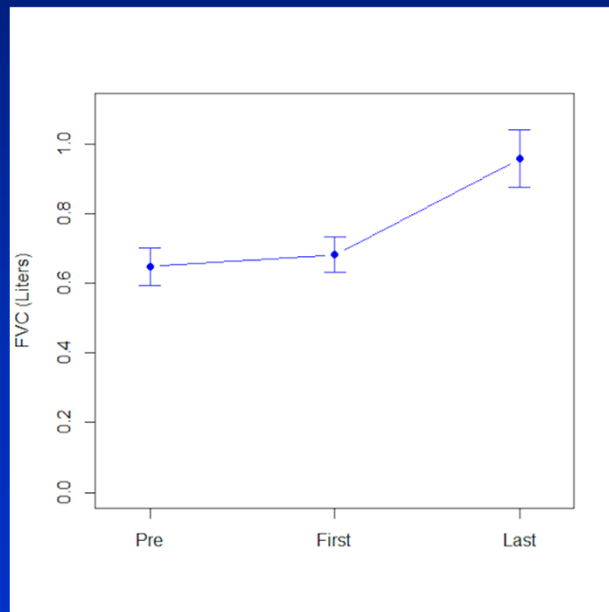
## *Radiographs - Spine Growth*

- **T1-T12 : 18 mm height gain – 2.9 mm/year**  
1<sup>st</sup> expansion to the last - excluding the initial length gain
- **SAL (Space Available for the Lung) increased 77% to 87 % (p = 0.006)**

# Results

## *Pulmonary – Forced Vital Capacity*

- Pre-op: 0.65L
- Last FU: 0.96 L (P<0.001)



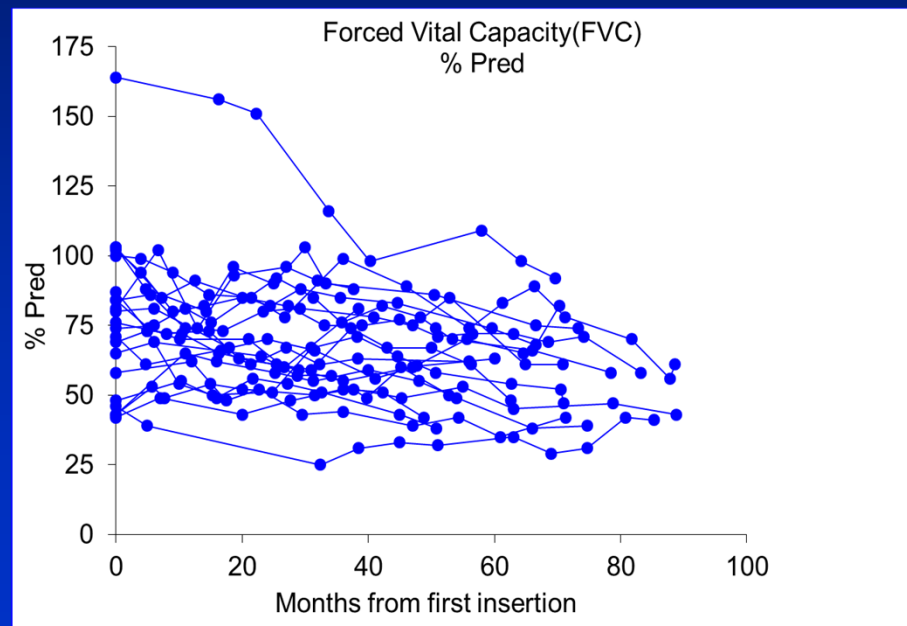
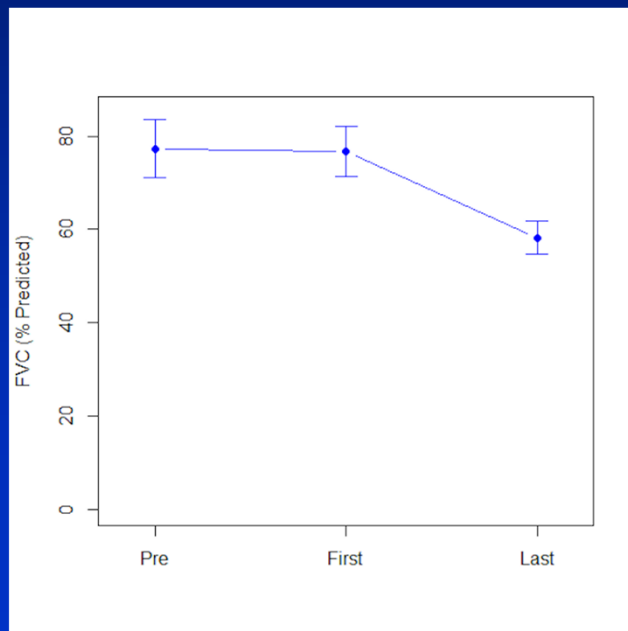
**FVC increased throughout the treatment**



# Results

## *Pulmonary – % predicted FVC*

- Pre-op : 77%
- Last FU: 58% ( $p < 0.0001$ )

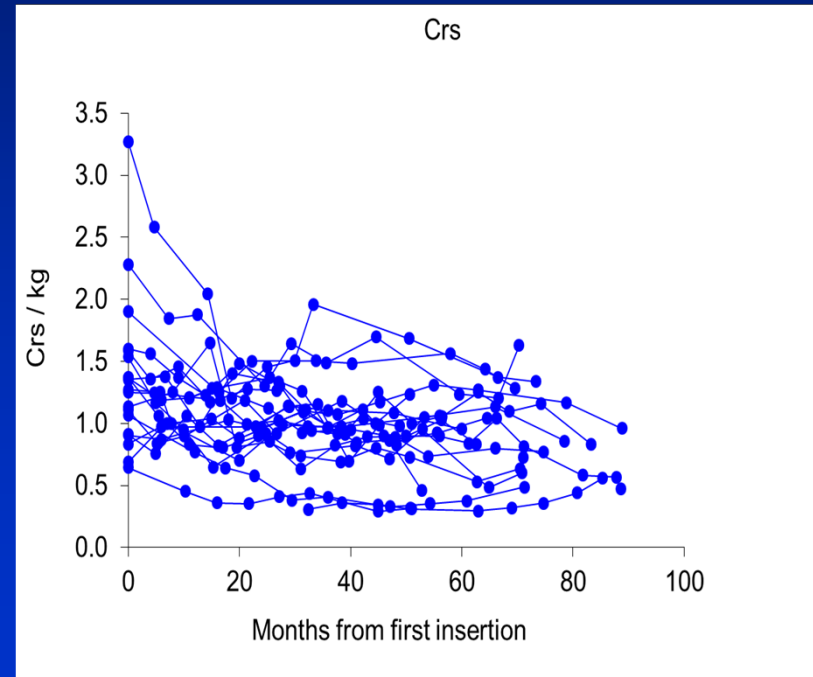
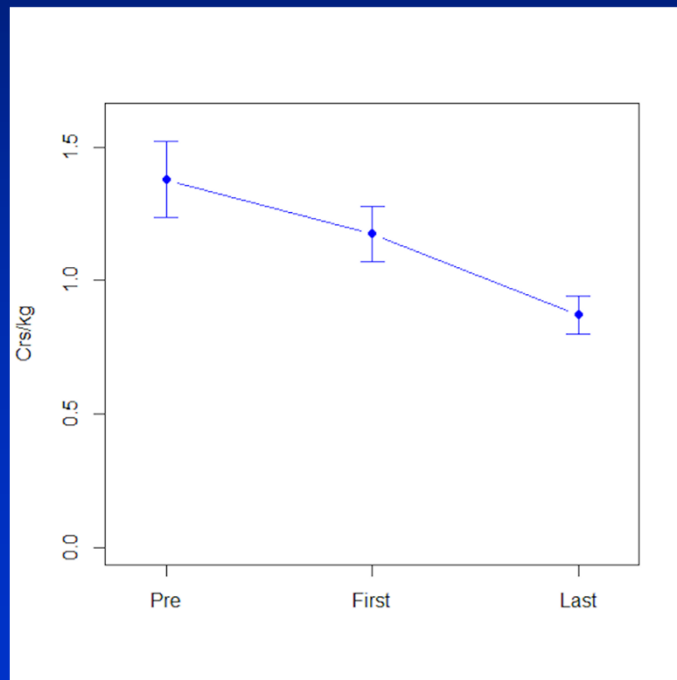


**Based on arm span -  
did not keep pace with growth**

# Results

## *Pulmonary – Respiratory System Compliance*

- Pre-op : 1.4 L/kg
- Last FU: 0.86 L/kg (p=0.0006)



**38% decrease**

# Results

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## *Pulmonary Function Indices*

- **No difference**
  - congenital vs syndromic
  - thoracotomy vs no thoracotomy
  
- **No correlation with**
  - Cobb angle
  - SAL
  - age at index surgery

# Summary

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- **Pros**
  - Coronal correction maintained
  - FVC increased gradually
- **Cons**
  - Proximal thoracic kyphosis increased mildly
  - % pred FVC decreased
  - Respiratory system compliance decreased– chest wall became stiffer

# Conclusions

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- **Our data does not provide convincing evidence on the beneficial effects of VEPTR on pulmonary function**
- **More careful/limited patient selection may improve outcomes**

# Thank You



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