

Imaging in Early Onset Scoliosis



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Early Onset Scoliosis (*noun*): A condition of children that requires the spine surgeon to select from a long list of sub-optimal treatment options



3 y/o with
a bit of scoliosis

Early Onset Scoliosis

Imaging

Key issues

- Elucidating anatomic features of the deformity
- Detecting associated problems
 - Neurologic
 - Systemic
- Preparing for operative treatment

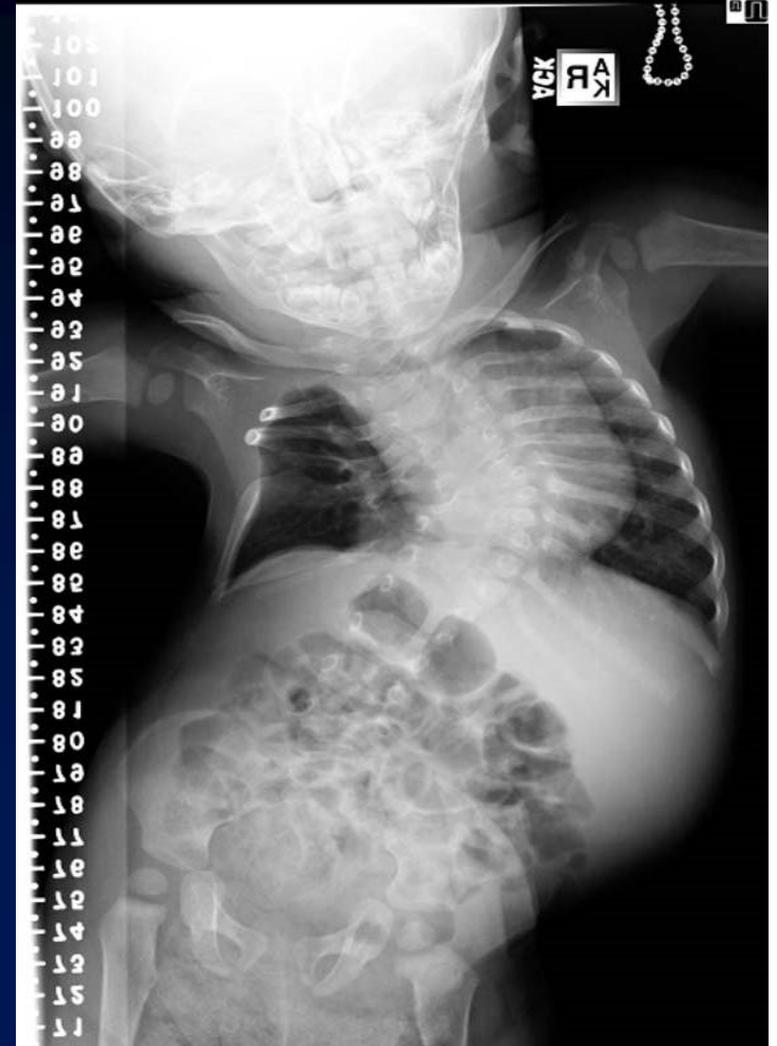


Early Onset Scoliosis

Imaging

Plain radiographs

- Quantify spinal deformity
 - Coronal plane
 - Sagittal plane
- Basic assessment: effect of chest and spine deformity on lungs
- Qualitative assessment of growth potential of congenital anomalies
- Radiographic ruler

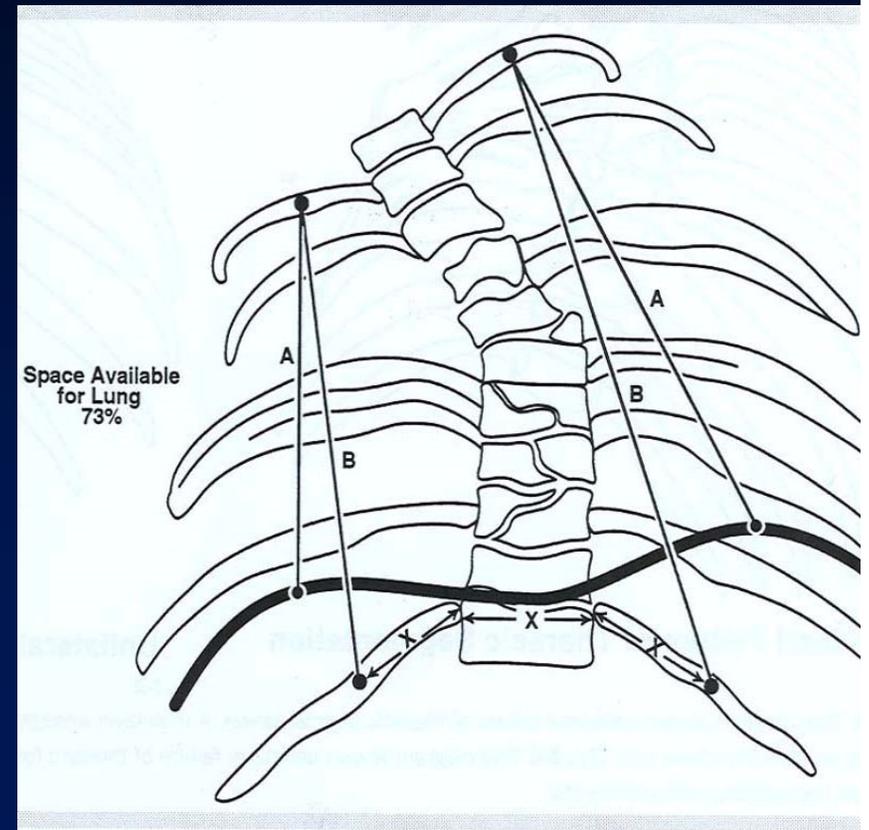


Early Onset Scoliosis

Imaging

X-ray measurements

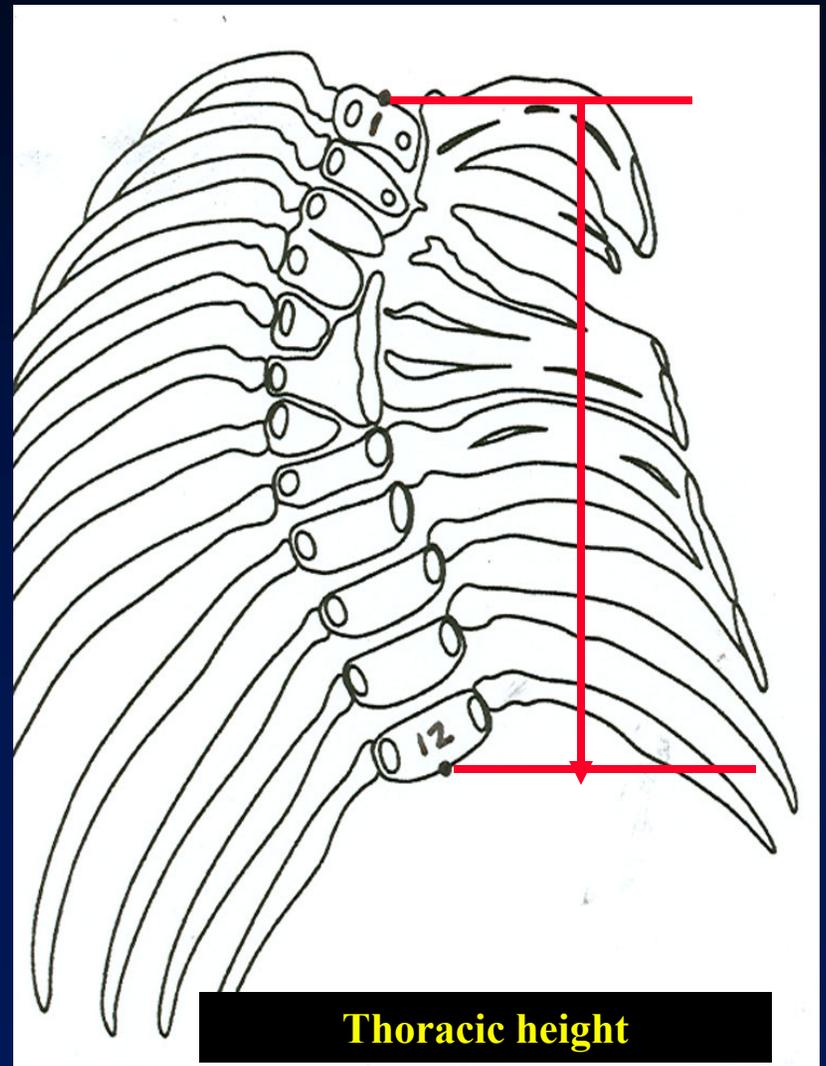
- Cobb angle
- Kyphosis/lordosis
- Space available for the lung



Imaging

X-ray measurements

- Spinal length
- Thoracic height



Thoracic height

Early Onset Scoliosis

Imaging

Other radiographs

- Cervical spine
 - Associated congenital anomalies
 - Pre-op eval of cervical stability
- Cervicothoracic films
 - Dedicated study of C-T junction
 - Cervical tilt



Early Onset Scoliosis

Imaging

Flexibility

- Key to estimating correction and planning for balance
- Multiple options
 - Longitudinal traction
 - Bending
 - Bolster bending



Early Onset Scoliosis

Imaging

Diaphragm evaluation

- Important to detect diaphragm dysfunction
- Fluoroscopy
- Ultrasound
 - More accurate*
 - No irradiation
 - Logistically easier



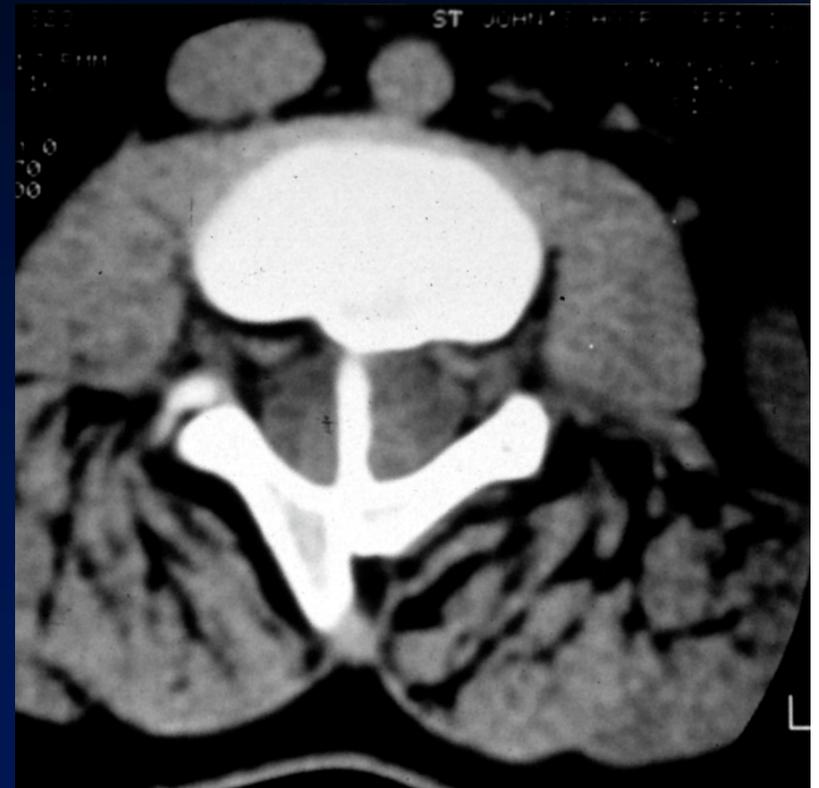
*Miller et al. [Pediatr Crit Care Med](#) 2006

Early Onset Scoliosis

Imaging

CT scan

- Define vertebral and rib anomalies
 - Standard
 - 3D reconstruction
- Assess spinal rotation
- Some intraspinal anomalies (e.g. diastematomyelia)
- Measure lung volumes



Early Onset Scoliosis

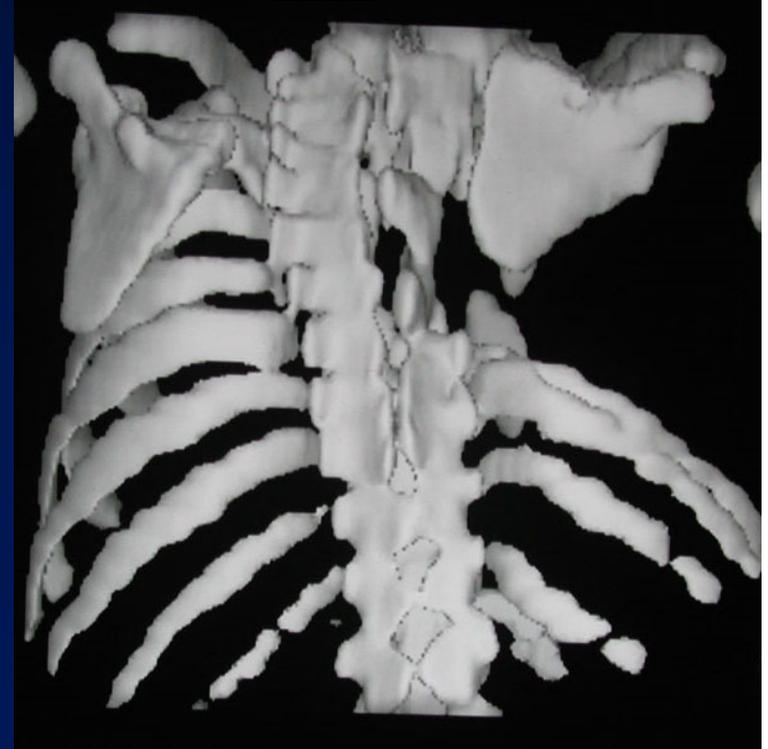
Imaging

CT scan—3D reconstruction

- Particularly valuable in congenital scoliosis
- Defines anomalies—esp. better than plain radiographs for posterior vertebral anomalies*
- More than 50% pts: new anomaly found**
- Does not expose pt to increased radiation

* Hedequist et al. Spine 2003

**Newton et al. Spine 2001

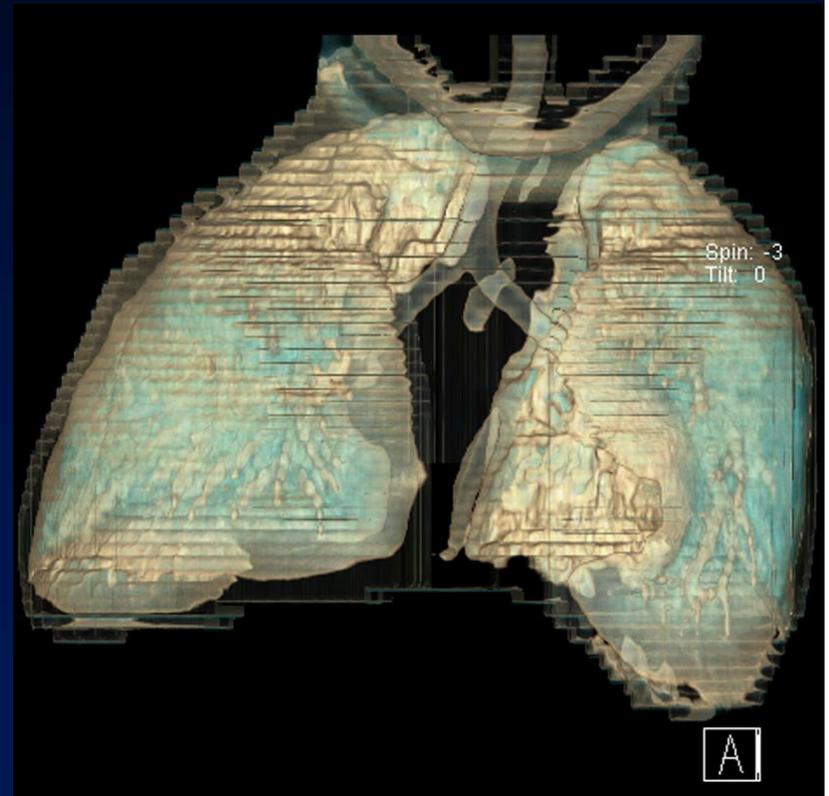


Early Onset Scoliosis

Imaging

CT Lung Volumes

- Established as reliable*
- Norms now available for children**
- May be valuable proxy for PFT's in children too young to cooperate with PFT's



*Schlesinger AJR 1995

**Gollogly et al Spine 2004 (CT measured norms for kids)

Early Onset Scoliosis

Imaging



CT radiation concerns

- Given CT setting yields higher pediatric organ dose
- Brenner AJR 2001: Estimated lifetime cancer mortality risks attributable to the radiation exposure from a CT in a 1-year-old are 0.18% (abdominal)
- Stephan et al. Int. Jnl Radiat Bio 2007
 - Increased chromosomal damage of blood leukocytes after CT
 - Effect highest in children < 10 y/o



Early Onset Scoliosis

Imaging

CHOP CT radiation control

- a Siemens Somatom Sensation 40/64 scanner
- Pt < 55 kg: use 120 kV, an effective mAs 45
- 1.2 mm collimation to decrease dose
- scanner decreases mAs in the thin portions of the patient body and increases mAs in thicker regions

Early Onset Scoliosis

Imaging

MRI

- Evaluates the spine and spinal cord
- Growing treatments are distraction treatments
 - Must identify/treat tethered spinal cord first
 - Effect on cord of kyphosis
- Downside: long studies that require sedation in young children

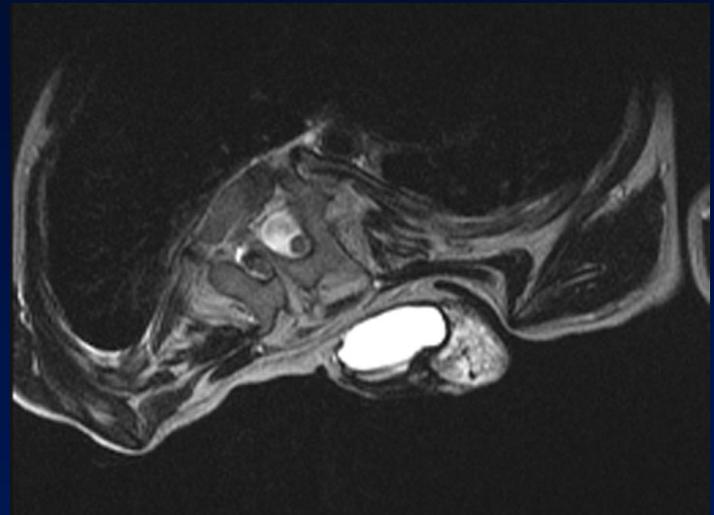


Early Onset Scoliosis

Imaging

MRI

- Evaluate lungs/pulmonary function
 - Dynamic MRI
 - May eliminate radiation concerns with CT
- Screening renal anatomy assessment



Current CHOP imaging protocols

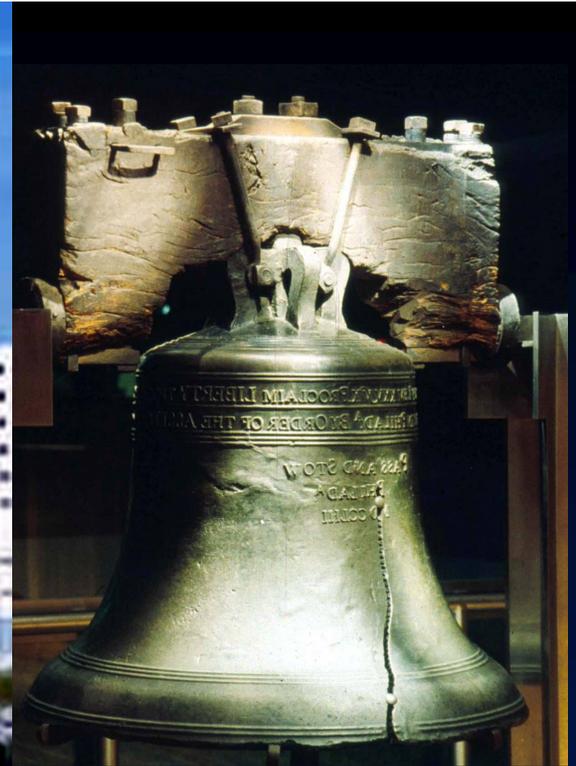
Initial pre-operative evaluation for idiopathic-type EOS

- PA/lat entire spine (pref. standing)
- MRI: brainstem to sacrum
- Maximum bolster bending films

Current CHOP imaging protocols

Initial pre-operative evaluation for congenital/syndromic/TIS EOS

- PA/lat entire spine (pref. standing)
- MRI: brainstem to sacrum
- Maximum bolster bending films
- CT chest with lung volumes
- +/- cervical spine series



Thank You

