Safety and efficacy of growing rod following kyphectomy in myelomeningocele patients

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Disclosures

- Can Emre BAS, Gokhan DEMIRKIRAN, Caglar YILGOR, Mehmet AYVAZ
 - No disclosure
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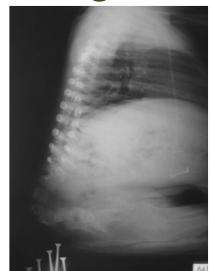
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Introduction

- High lumbar/low thoracic neurologic level
 - Paraplegia and kyphosis
- Severe kyphosis
 - Skin ulceration
 - Over the spine
 - Sitting surface decubiti
 - INFECTION!
 - Decreased abdominal volume
 - Restrictive lung disease
 - Sitting imbalance
 - Functional dysfunction because of supporting himself with hands to sit upright



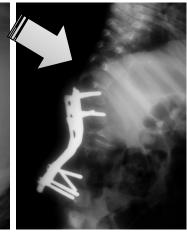


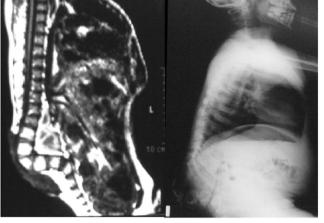
Background

- Kyphectomy+short instrumentation
 - Prone to failure and deformity recurrence
- Kyphectomy+long instrumentation
 - Trunk shortening and thoracic insufficiency













Introduction

- 'Principle of included middle'
- Deformity control and growth preservation?
- Kyphectomy+GR





Aim

 Efficacy and safety of GR following kyphectomy in MMC patients with pure thoracolumbar/lumbar kyphosis



Material & Methods

- Procedure
 - Conventional kyphectomy or multiple egg-shells at apex
 - DGR, T2-3 to pelvis
 - Regular lengthening at every 6 months
- Eight patients
 - -4M,4M
- Mean age at the time of surgery
 - 6 yo
- Mean age at latest follow-up
 - 12 yo



Material & Methods

- X-rays
 - Pre-, post-index and final fu
 - Local kyphosis
 - Thoracic kyphosis
 - Sacral slope angle
 - T1-12 and T1-S1 heights
- Unplanned surgery, if any
 - Infection
 - Implant failure
 - Others



Sagittal alignment

	Pre-op	Post-op Last FU	
T2-12 kyph.(°)	1	16.8	22.75
Local kyph.(°)	72.5	29	25.5
Sacral slope(°)	4.25	17.3	16.7

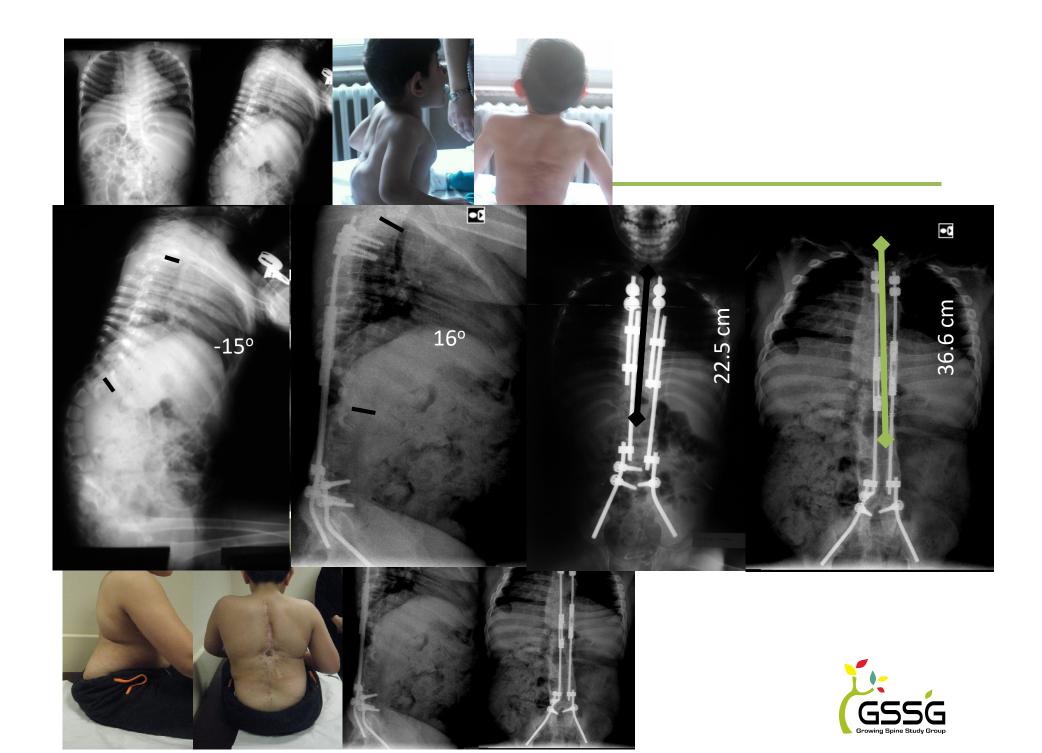


Growth parameters

	Pre-op	Post-op	Last FU
T1-12 height(cm)		12.8	21.4
T1-S1 height(cm)		21.2	33.2

- Mean thoracic height per year
 - 1.6 cm
- Six out of 8 passed the 22 cm limit
 - -Lengthenings continue in the remaining 2





Complications

- No difficulty for skin healing at scarred area
- Infection
 - 4 patients
 - 2 episodes in 1 patient
 - All recovered by debridement and antibiotics
- CSF leak
 - 1 patient
- Deformity recurrence and re-osteotomy
 - 1 patient
- Implant problems required revision
 - All patients
 - During lengthening in 3 patiens
 - Unplanned surgery needs in 5 patients



Conclusion

- Good deformity control
 - Restore thoracic kyphosis
- Maintain spinal growth
 - Especially at thoracic spine
 - Over 22 cm limits
- High complication rate
 - But all manageable
 - No need to alters the planned course of treatment



Conclusions

- GR following kyphectomy with regular lengthening is safe, effective and growth friendly technique with manageable complications
- Principle of included middle!

