

# Vertebral growth plate histomorphometry in severe idiopathic scoliosis:

Are hypertrophic zone and cell  
heights greater than controls?

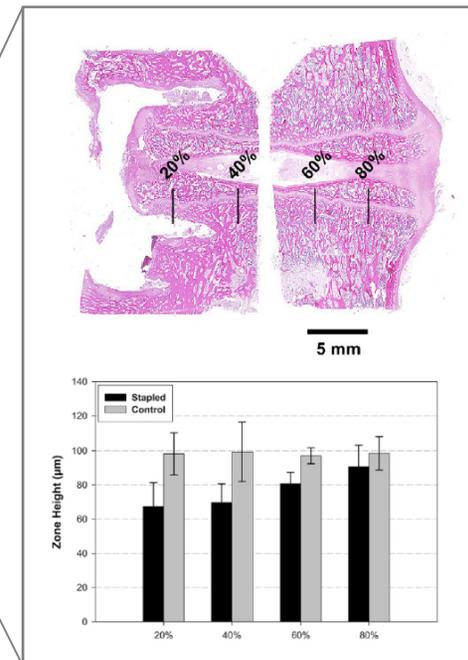
---

Bylski-Austrow DI, Okonny M, Glos DL,  
Wall EJ, Crawford AH

# Growth plate structure important to etiology and treatments

## Heights of hypertrophic zone and cells

- Correlate directly with biological and mechanical factors
  - Bone growth rate
    - *Farnum et al Cells Tissues Organs 2000*
  - Magnitude of compression
    - *Stokes et al J Bone Joint Surg Am 2002*
  - Experimental growth modulation
    - *Bylski-Austrow et al J Bone Joint Surg Am 2009*
- Inform etiologic theories
  - Relative anterior column overgrowth
    - *Zhu et al 2006*



# Purpose

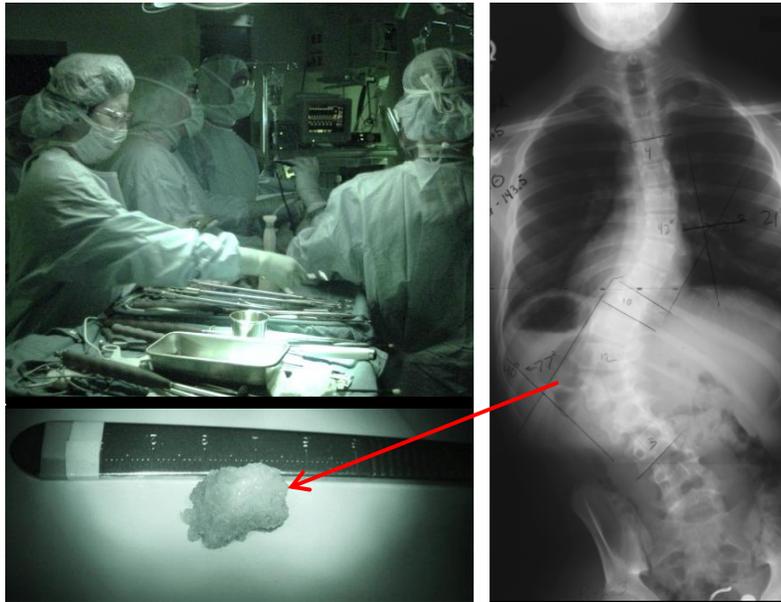
---

1. Determine whether vertebral body growth plate hypertrophic zone height ( $H_z$ ), cell height ( $h_c$ ) and cell width ( $w_c$ ) of specimens from curve apex of patients with juvenile or adolescent idiopathic scoliosis (IS) differ from controls
2. Compare concave versus convex sides in IS

# Methods: Materials

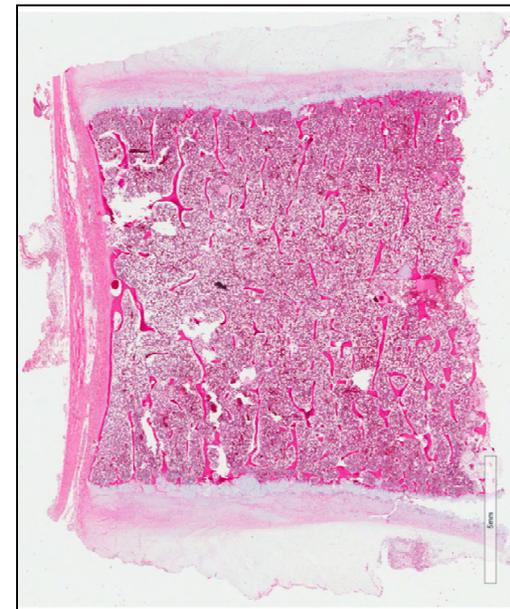
## Scoliosis specimens

- Surgical removal of disc
- At or near apex
- Severe spine deformity
  - IRB approved



## Control specimens

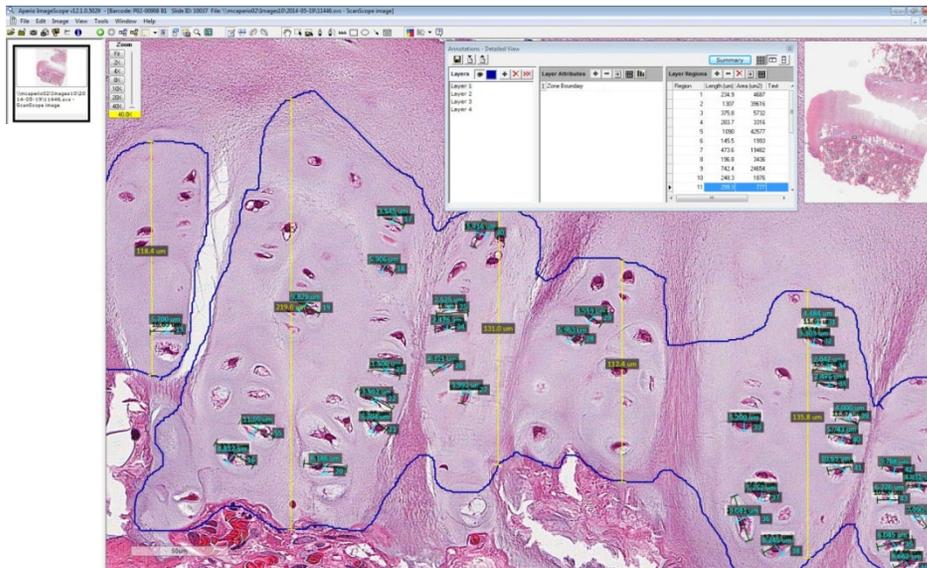
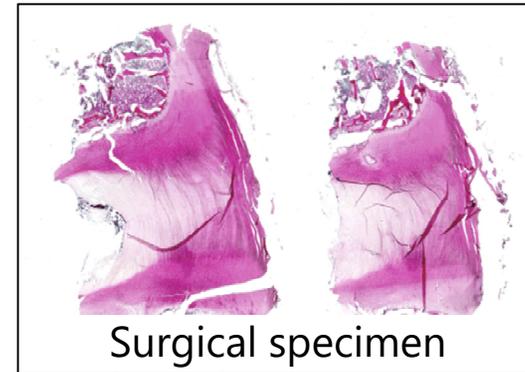
- Pathology slide files
- Age-matched
- No spinal deformity
- Chronic condition



# Histology processing & analysis

## Surgical specimen histology

- Routine protocol for autopsy
  - Paraffin embedded, 4  $\mu\text{m}$  sections, H&E
  - CCHMC Pathology



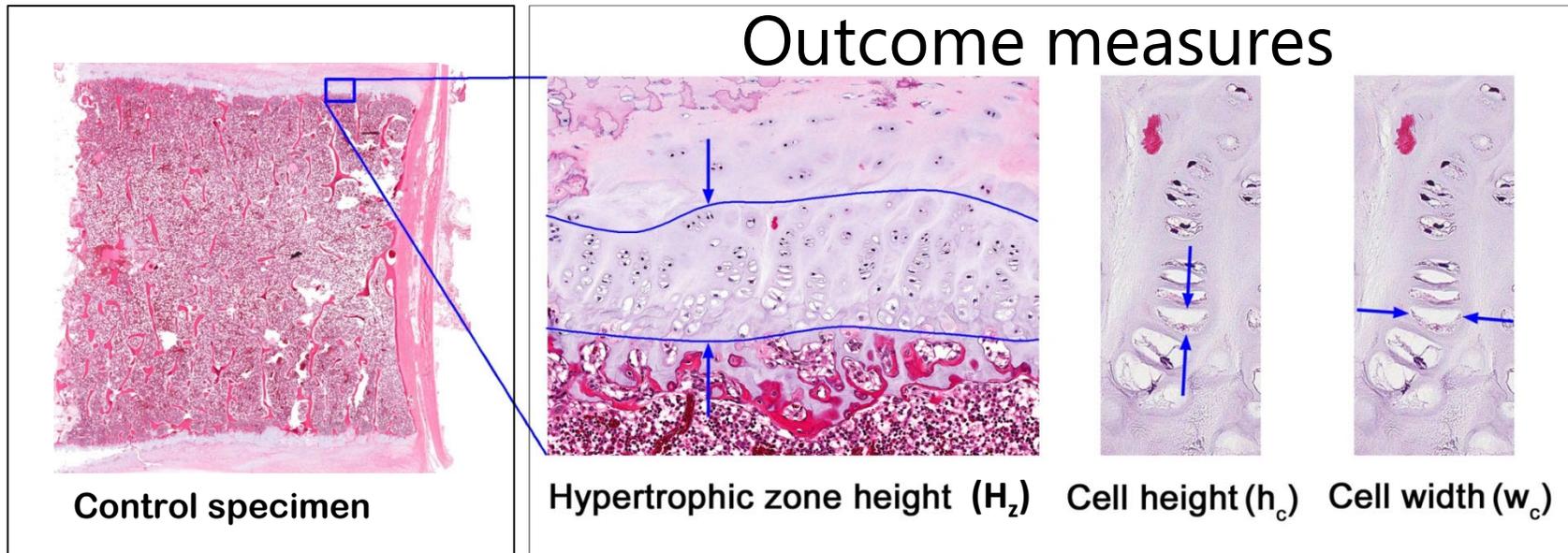
## All slides digitized & analyzed

- Scanner and software
  - *Aperio Technologies, Spectrum 11.1*

## Sampling protocol

- Hypertrophic zone height intervals
  - 250  $\mu\text{m}$  for controls
  - 150  $\mu\text{m}$  for surgical specimens
- Hypertrophic cells counted
  - All cells with clear boundaries
  - ~ 75% of all cells measured

# Quantitative analysis



## Statistics: IS vs control

- t-tests, two-tailed
- Bonferroni, 2 primary comparisons
  - Zone height, cell height
    - $\alpha = 0.05/2 = 0.025$

# Results: Demographics

---

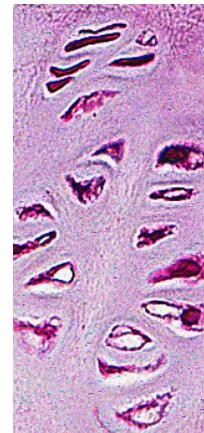
## Control

- n = 3, 2 female, 1 male
  - Age range 13 – 16 years of age
  - Diagnoses: Aneurysm, diabetes, meningitis

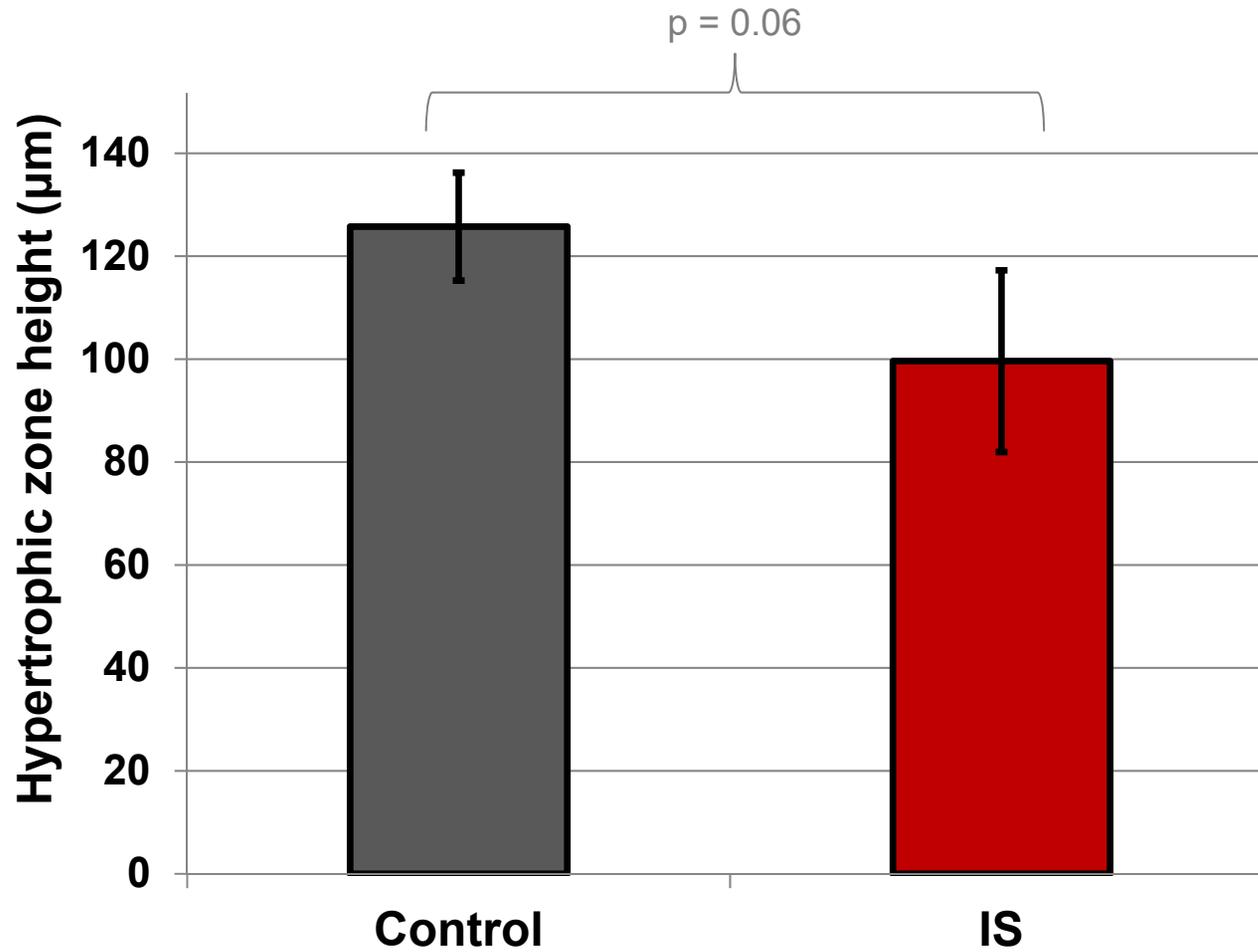


## IS

- 5 patients, 4 AIS, 1 JIS (f); 4 F, 1 M
- Age 12.8 years, range 10 - 14
- Main curvature 62° ( $\pm$  13 )
- 2 cases with both convex and concave sides
  - AIS, 1 M, 1 F, age 13 years

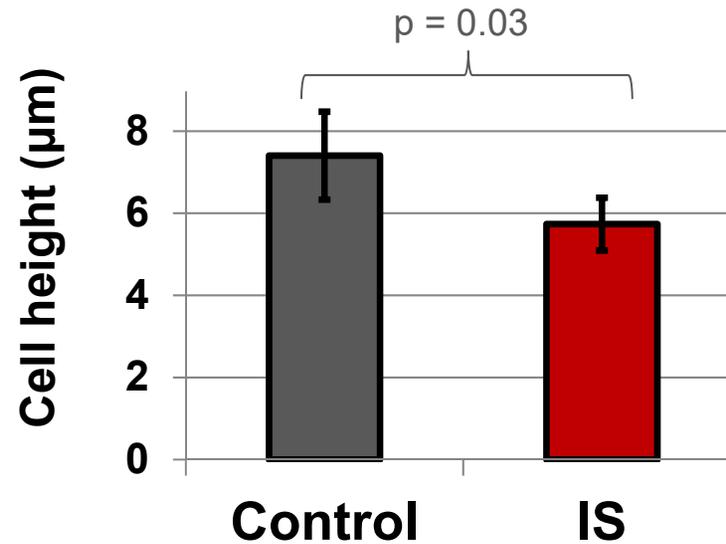


# Zone height



# Cell size

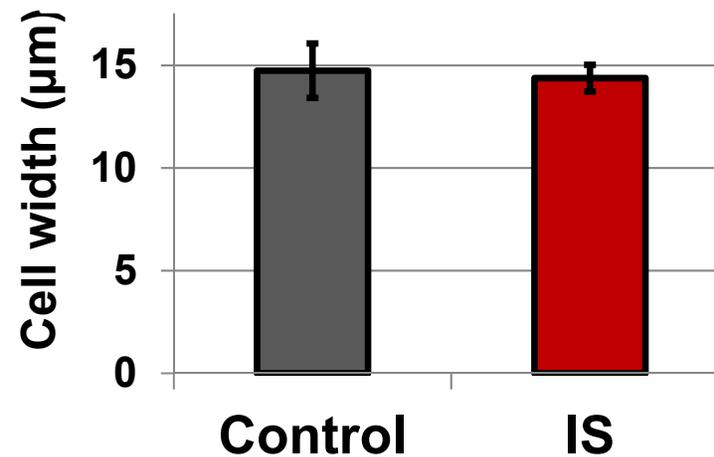
Hypertrophic cell height ( $\mu\text{m}$ )



- Mean IS cell height less than control

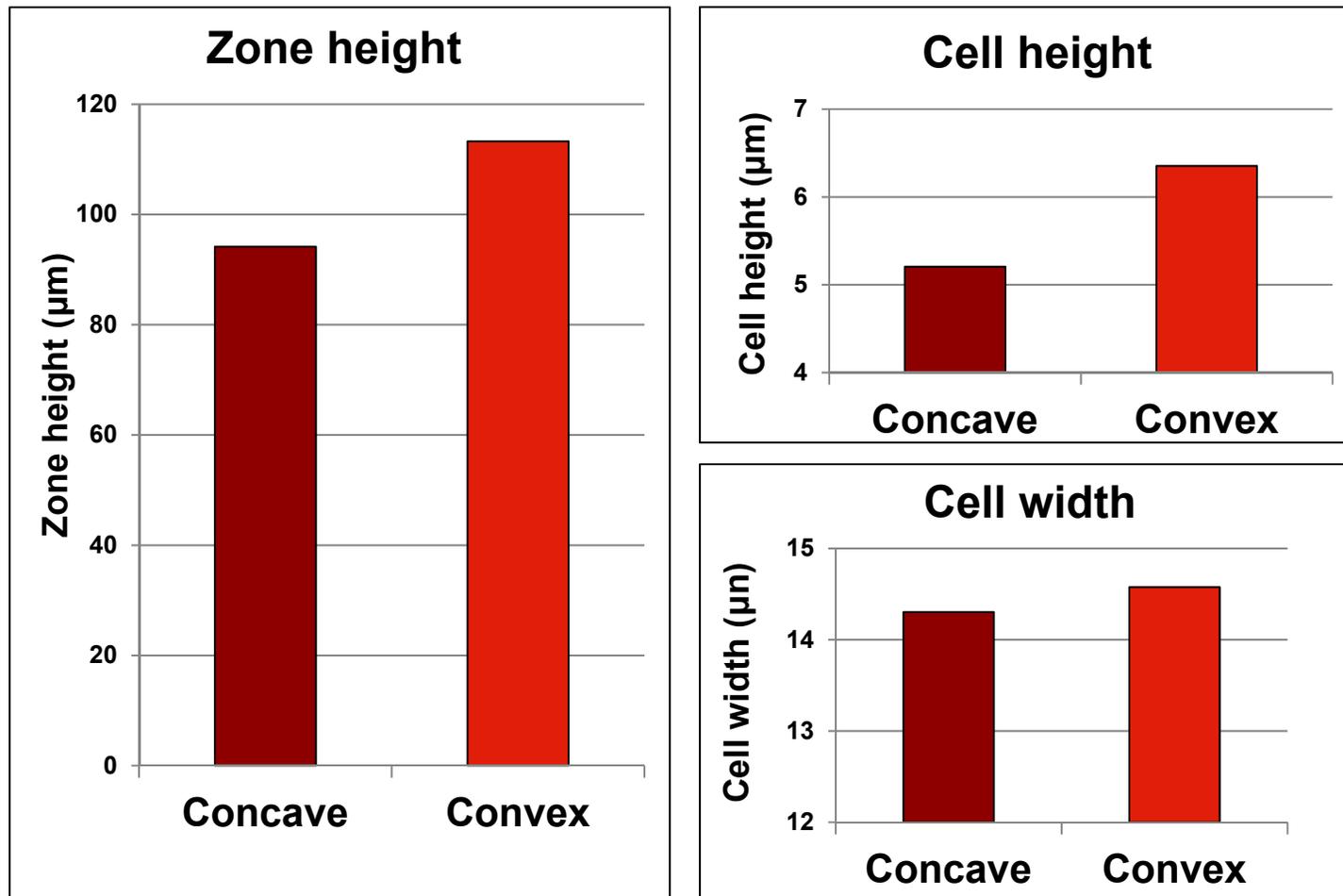
- Aspect ratios: Cell heights ~50% widths

Hypertrophic cell width ( $\mu\text{m}$ )



- IS cell width not different than control ( $p=0.6$ )

# IS: Concave vs convex



(n = 2)

# Conclusions

---

- Structure of vertebral body growth plate hypertrophic zones taken from curve apex in IS were not statistically significantly different than controls
- However, IS hypertrophic zone heights and cell heights were not greater than control
  - On average, for all outcome measures
    - IS < Control
    - Concave < Convex
- Comparisons: Results do not support greater anterior growth, and/or lower compression of anterior column, in IS
- Limitations: Small numbers, and large 3D late-stage deformities
- Significance: Results are clinically relevant to growth modification methods & mechanobiological etiology theories

# Acknowledgments & Disclosures

---

- **Funding**

- CCHMC Schmidlapp Women Scholar Program through UC WISE Women in Science and Engineering (MO)

- **CCHMC Pathology**

- ET Ballard MD
- Keith Stringer MD



- **D.I. Bylski-Austrow:** A; SpineForm, LLC. F; SpineForm, LLC
- **E.J. Wall:** A; SpineForm LLC. B; OrthoPediatric Sports, OrthoPediatric Spine, Stryker Trauma. D; SpineForm LLC. F; SpineForm LLC
- **M. Okonny:** None; **D.L. Glos:** None **A.H. Crawford:** None

*Thank you*

