

Straight Talk On Scoliosis

(NAPSA)—Recent research may bring good news to the one in every 1,000 children diagnosed with scoliosis and their families.

Scoliosis is a musculoskeletal disorder that causes the back to have an abnormal curve.

Symptoms

According to Anthony Sin, M.D., board-certified neurosurgeon and spine specialist at Shriners Hospitals for Children—Shreveport, parents should watch for “a visible curve in the spine, uneven hips, a protruding shoulder blade or shoulders that are not even.”

You may notice your child's clothes are not fitting correctly or that hems are not hanging evenly. In some cases, your child's spine may appear crooked or his or her ribs may protrude.

Treatments

Some children with mild spinal curves may require no treatment. For those who do need treatment, your primary pediatrician may refer you to an orthopaedic spine specialist for the best plan based on your child's age and the degree and pattern of the curve and the type of scoliosis. Common treatments include:

• **Observation**—If the curve measures less than 25 degrees, typically, no treatment is needed other than doctors examining the child every four to six months.

• **Surgery**—often with implants.

• **Bracing**—In some cases, physicians recommend their patients to be fitted for a brace to prevent the curve from worsening. A study supported by Shriners Hospitals for Children and others, published in *The New England Journal of Medicine*, indicates that this can be quite effective.

The Bracing in Adolescent Idiopathic Scoliosis Trial compared the risk of curve progression in ado-



Scoliosis, an abnormally curved spine, can be hereditary. A child with a parent or sibling with scoliosis should be checked for it regularly.

lescents who wore a brace with those who did not. In the study, 72 percent who received bracing were successful.* Those who wore their brace an average of 13 hours a day had a success rate of 90 to 93 percent.

“Knowing—with confidence—that bracing is effective changes the treatment paradigm,” said Matthew Dobbs, M.D., orthopaedic surgeon at Shriners Hospitals for Children—St. Louis and lead investigator for the Shriners Hospitals portion of the study. “We can now say, for a specific patient population, that we can avoid the need for surgery through bracing.”

The study is just one way Shriners Hospitals for Children changes lives every day through innovative pediatric specialty care, world-class research and outstanding medical education. Its 23 facilities throughout North America provide advanced care for children with orthopaedic conditions, burns, spinal cord injuries, and cleft lip and palate, regardless of the families' ability to pay.

Learn More

Further facts are at shriners.hospitalsforchildren.org.

**Treatment was considered successful if the participant reached skeletal maturity with his or her curve remaining under 50 degrees.*