

Oral presentation

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The skeletal maturity determination in idiopathic scoliosis

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Introduction

In the Physical and Rehabilitation Medicine Service (PRMS) of Hospital Curry Cabral, Lisbon – Portugal, a protocol for idiopathic scoliosis follow-up was established. This protocol has both resemblances and discrepancies to the SOSORT approach approved by the Consensus Meeting 2005.

Objectives

To present the indications for brace treatment from the PRMS follow-up protocol and SOSORT guidelines. Outline a comparison of SOSORT and PRMS approaches.

Materials and methods

Analysis and comparison of the approach in two clinical cases of idiopathic scoliosis by the SOSORT guidelines and by the PRMS protocol.

Results

Clinical Case 1

By the SOSORT guidelines, there is an indication for brace treatment.

By the PRMS protocol, there is no indication for brace treatment.

Clinical Case 2

By the SOSORT guidelines, there is no indication for brace treatment.

By the PRMS protocol, there is an indication for brace treatment.

Conclusion

Clinical evidence supports the application of more variables in the treatment decision of whether to recommend brace wearing. Cobb angle, Risser sign and chronological age may not be enough. It is important to obtain other data from the observation of the patient, including a hand-wrist X-ray according to Greulich and Pyle Atlas.

References

1. Sanders JO, Browne RH, McConnell SJ, Margraf SA, Cooney TE, Finegold DN: **Maturity assessment and curve progression in girls with idiopathic scoliosis.** *J Bone Joint Surg Am* 2007, **89**(1):64-73.