

Poster presentation

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Why are the extension/strengthening exercises wrong in the treatment of idiopathic scoliosis? New conservative treatment plan based on types of scoliosis (new classification 2001–2007)

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Introduction

Until the determination of etiology for "so-called" idiopathic scoliosis (Karski 1995–2006 [1-6]), rehabilitation treatments were mostly unsuccessful. New treatments are designed for specific "group/type of scoliosis". Utilization of the new, Lublin classification may be assist in the appropriate recommendation for new rehabilitation exercises. In addition, previous strengthening exercises have been proven harmful.

New rehabilitation exercises

- * Exercises to remove contractures of right hip.
- * Flexion-extension (two phases) asymmetric exercises for spine.
- * Active sport practice in schools – stretching exercises like Karate, Aikido etc.
- * Special sleep positions – fetus position.
- * "At ease" – standing position only on left leg.

The lecture will give all details of new exercises.

New classification (2001 – 2007): Three groups divided by etiological and pathological features

in the development of scoliosis [epg] (I-st, II/A, II/B and III-rd)

To understand rules of new treatment and of prophylaxis recommendations, this lecture will present the new Lublin classification of "so-called" idiopathic scoliosis based on biomechanical etiology. For details see lectures in: <http://www.ortopedia.karski.lublin.pl>

Results

Results of new treatment will be presented in tables. Most cases showed correction of axis of spine or stopping of deformity. In I-st epg we observed progression only at 13% of children and in II-nd epg only at 3%. The number of children who needed operative procedures in Poland decreased!

Conclusion

1. Old "strengthening exercises" are wrong. They only cause larger iatrogenic deformity.
2. New asymmetric flexion-rotation exercises are correct and effective in beginning stages of scoliosis. Subsequently, they constitute good, new prophylactics.
3. The Lublin experience confirms that we can introduce rules of "neo-prophylaxis" in our orthopedic management of "so-called" idiopathic scoliosis in all countries.

References

1. Karski T: **Biomechanical factors in etiology of the so-called idiopathic scoliosis; two etiopathological groups of spinal**

- deformities.** *Ortopedia Traumatologia Rehabilitacja* 2004, **5**:800-808. (Polish)
2. Karski T, Madej J, Rehak L, Kokavec M, Karski J, Latalski M, Kałakucki J: **New conservative treatment of the so-called idiopathic scoliosis; effectiveness of therapy.** *Ortopedia Traumatologia Rehabilitacja* 2005, **7**:28-35. (Polish)
 3. Karski J, Karski J, Kandzierski G, Tarczyńska M, Kałakucki J, Latalski M: **"Contracture syndrome" in newborns and infants according to Prof. H. Mau as explanation of "geography" and certain clinical features of idiopathic scoliosis.** *Ortopedia Traumatologia Rehabilitacja* 2005, **7**:23-27. (Polish)
 4. Karski T: **Recent observations in the biomechanical etiology of so-called idiopathic scoliosis. New classification of spinal deformity – I-st, II-nd and III-rd etiopathological groups.** In *Technology and informatics, Research into spinal deformities Volume 123*. 5th edition. Edited by: Uyttendaele D, Dangerfield PH. Washington, IOS Press; 2006:473-482.
 5. Karski T, Kalakucki J, Karski J: **"Syndrome of contractures" (according to Mau) with the abduction contracture of the right hip as causative factor for development of the so-called idiopathic scoliosis".** In *Technology and informatics, Research into spinal deformities Volume 123*. 5th edition. Edited by: Uyttendaele D, Dangerfield PH. Washington, IOS Press; 2006:34-39.
 6. Kalakucki J, Karski J, Karski T, Kandzierski G, Madej J, Długosz M: **Informace o drivejsim (nespravnem) rehabilitacnim lecení idiopaticke skoliozy patere.** *Vysledky nove rehabilitacni terapie. Pravidla neo-profylaxe in "Pohybove Ustroji" rocnik 13/cislo 1-2, Czech Republic, October 2006* 2006:9-16.

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