1<sup>st</sup> International Congress on Early Onset Scoliosis & Growing Rods Madrid, Spain 2-3 November 2007

# Debates: VEPTR vs. Growing Rods Non-Congenital

George H. Thompson, M.D. (Growing Rods)
Cleveland, OH
John Flynn, M.D. (VEPTR)
Philadelphia, PA



# Expandable (Growing) Rod Techniques

- Single rod Thompson
- **Dual rods Akbarnia**
- Luque "trolley"
- SHILLA procedure McCarthy
- VEPTR Vertically Expandable Prosthetic Titanium Rib - Campbell
- "Not truly a growing rod system"



## Controversies

Obtaining and maintaining deformity correction

Achieving adequate spinal growth

Allowing lung development

Decreasing the high incidence of complications



# Single Growing Rod

George H. Thompson, M.D.



# Submuscular Isola Rod With or Without Limited Apical Fusion in the Management of Severe Spinal Deformities in Young Children: A Preliminary Report

Blakemore LC, Scoles PV, Poe-Kochert C, Thompson GH Spine 2001; 26: 2044-2048



# **Patients**

53 children

6.7 yrs. (1.4 - 10.7 yrs.)

34 females, 19 males

**Treatment** 

Submuscular rods only 38

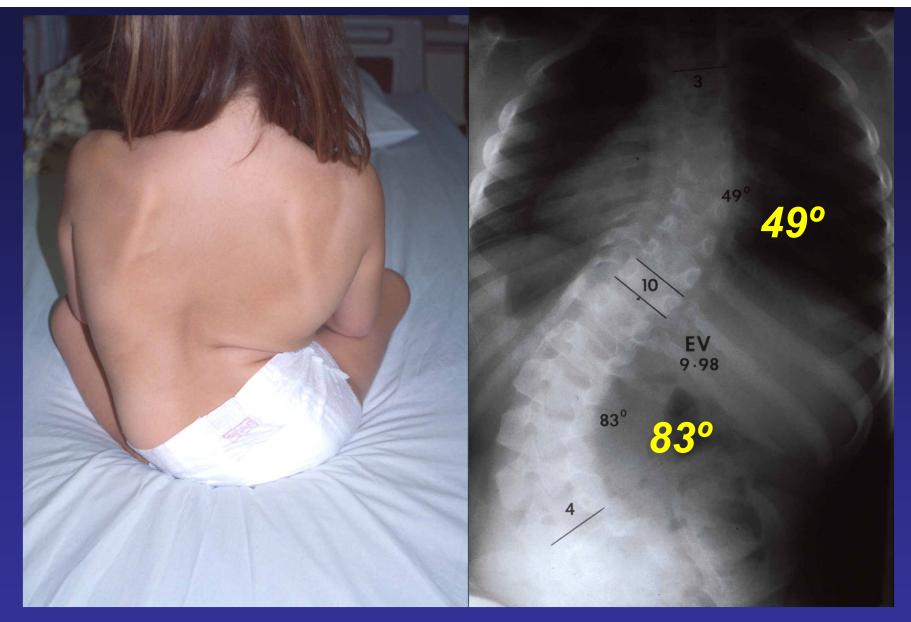
Apical fusion and rod15

**\*# Lengthenings / pt.** 5 (3 - 7)

Completed fusions 28

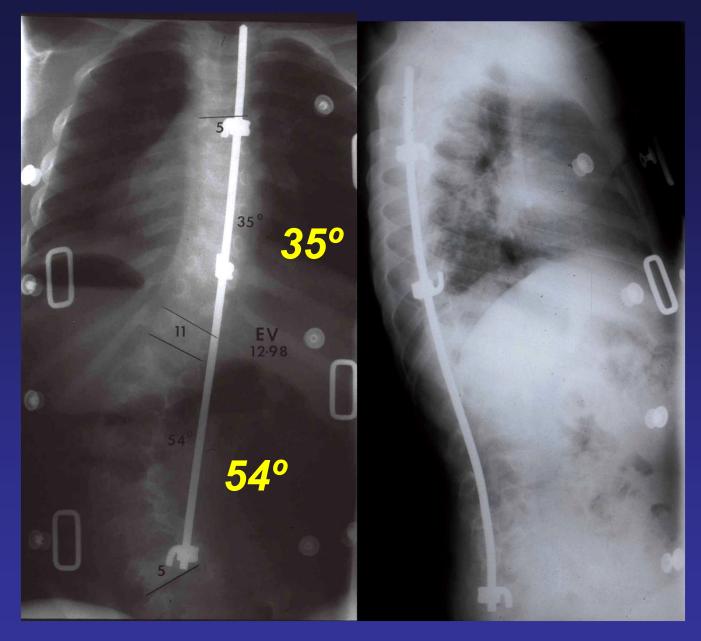
Follow-up 5.2 yrs. (1.2 – 9.1 yrs)





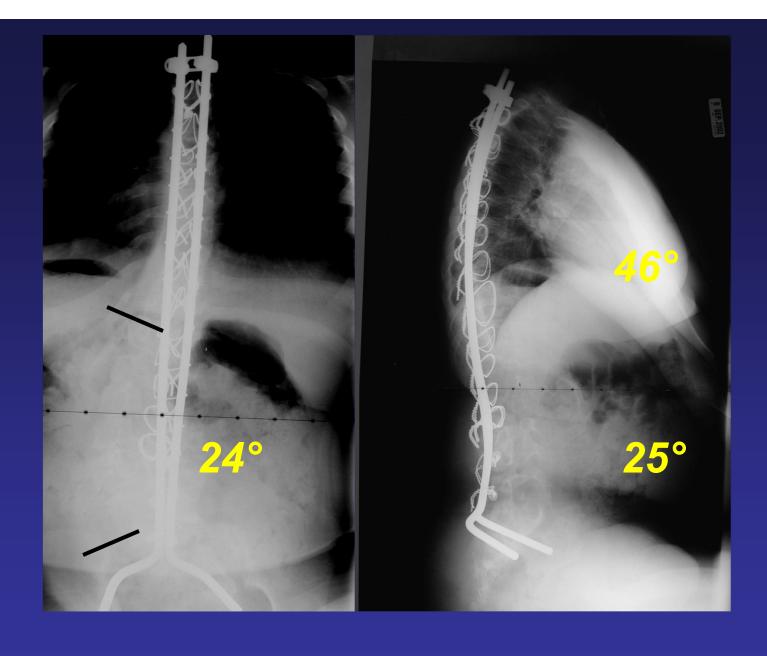
7+5 yo female SCIWORA + hypophosphatasia 9-98





3 mos postoperative 12 - 98





EV 13+5 s/p ASF, PSF & LRI 7-04



# Complications

11 patients (21%), 19 complications

Rod breakage

Hook dislodgement 10

**Upper hook 8** 

Lower hook 2

Infection





# **Dual Growing Rods**

Behrooz Akbarnia, M.D.



# **Dual Growing Rods**







# Comparison of Single and Dual Growing Rod Techniques Followed Through Definitive Surgery: A Preliminary Study

Thompson GH, Akbarnia BA, Kostial P, Poe-Kochert C,Armstrong DG, Roh J, Lowe R, Asher MA, Marks DS

Spine 2005; 30:2039-2044



# **Patients**

### **Study Criteria**

- Single or dual growing rod
- Definitive spinal fusion
- Minimum 2 years follow-upPatients 28 patients
- 21 RBCH
- 7 SDCSD data base



# **Study Groups**

- **Group 1 5 patients**
- Short single Isola growing rod
- Anterior and posterior apical fusion
- **Group 2 16 patients**
- Single Isola growing rod
- No apical fusion
- **Group 3 7 patients**
- Dual Isola growing rods
- No apical fusion



# Radiographic Results

Group	1	2	3
Scoliosis (°)			
Preop initial	85±23	61±13	92±21
Postop initial	44±21	36±7	39±15
Preop final	77±20	55±15	33±16
Postop final	65±20	39±15	26±18



# Radiographic Results

Group	1	2	3	
Length / Growth (cm)				
Elongation	3.8±2.8	3.9±4.9	5.9±1.5	
T1 – S1 / yr	-0.2±1.2	0.5±.95	1.04±.65	
(Postop initial to preop final)				
T1 – S1 / yr	0.3±1.02	1.04±.09	1.51±.58	
(Postop initial to postop final)				
Percent expected	25%	80%	130%	
Total (cm)	6.4±1.4	7.6±4.7	11.8±4.0	



# Complications

Group 1 – 4 patients 80%

Rod breakage (3)

Hook displacement (5)

Group 2 – 3 patients 19%

Rod breakage (3)

Hook displacement (1)

Other (1)

Group 3 – 2 patients 29%

Rod breakage (1)

Other (1)



# What Are We Learning

#### **Growing rods effective in:**

- Controlling curve progression
- Allowing spinal growthDual rods better than a single rod
- Stronger
- More frequent lengthenings

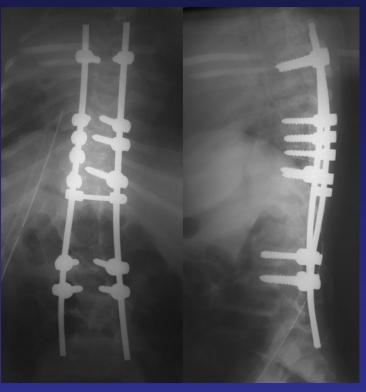
Avoid apical fusions? – curve stiffening, crankshaft, less correction, more complications

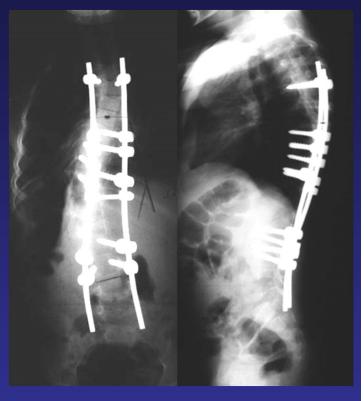
# Shilla Procedure

Rick McCarthy, M.D.









Preop

**Postop** 

2 yr postop



# **VEPTR**



Robert M. Campbell, Jr., M.D.



# Thoracic Insufficiency Syndrome



Describes the inability of the thorax to support normal respiration or lung growth

R.M.Campbell, Jr





# **VEPTR Strategies**

#### **Volume Depletion Deformities**

- I Absent ribs and scoliosis
- II Fused ribs and scoliosis
- Illa Foreshortened thorax

  Jarcho-Levin syndrome
- IIIb Transverse constricted thorax

  Jeunes syndrome
  Infantile idiopathic scoliosis



# "Opinion" Based Surgery

Growing rods better than VEPTR for non-congenital spinal deformities

Avoids surgery on a potentially normal chest wall

Better biomechanical stability

- Spine rather than rib
- Theoretical better correction
- Fewer complications



### Conclusions

Growing rods beneficial in EOS

- Spinal growth
- Lung development

Complication rate moderate but manageable

Exact indications and best implant system controversial

Cosmesis not ideal





