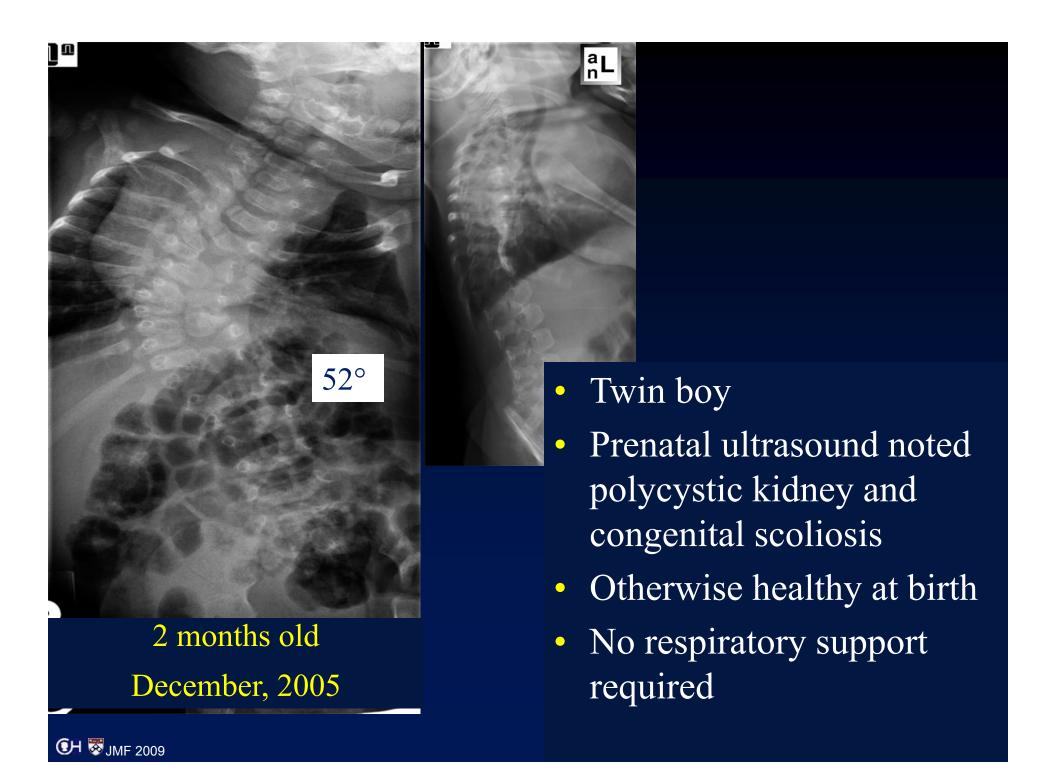
Case discussions

ICEOS 2009 Istanbul

Jack Flynn, MD

Associate Chief of Orthopaedic Surgery Children's Hospital of Philadelphia Associate Professor of Orthopaedic Surgery University of Pennsylvania School of Medicine





This cervicothoracic spine film at age 4 mos most clearly shows the vertebral and rib anomalies

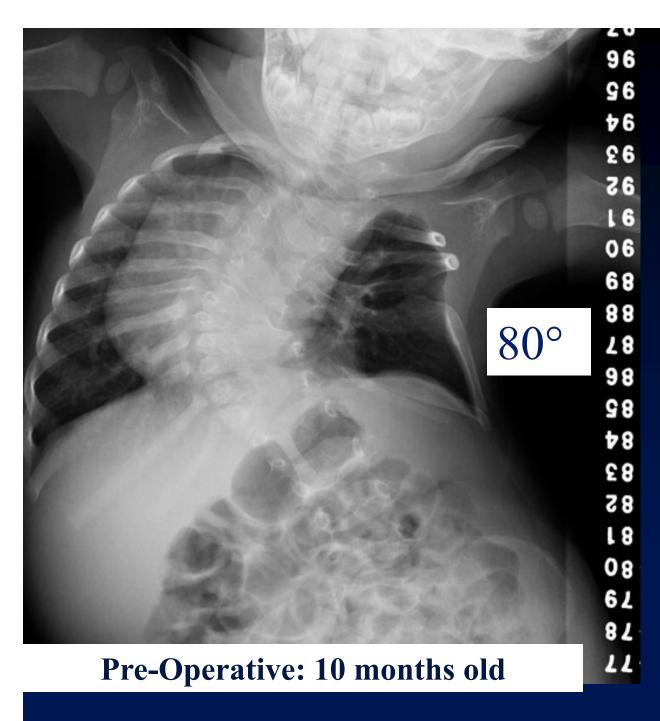
CT scan at 4 months of age

60° congenital scoliosis

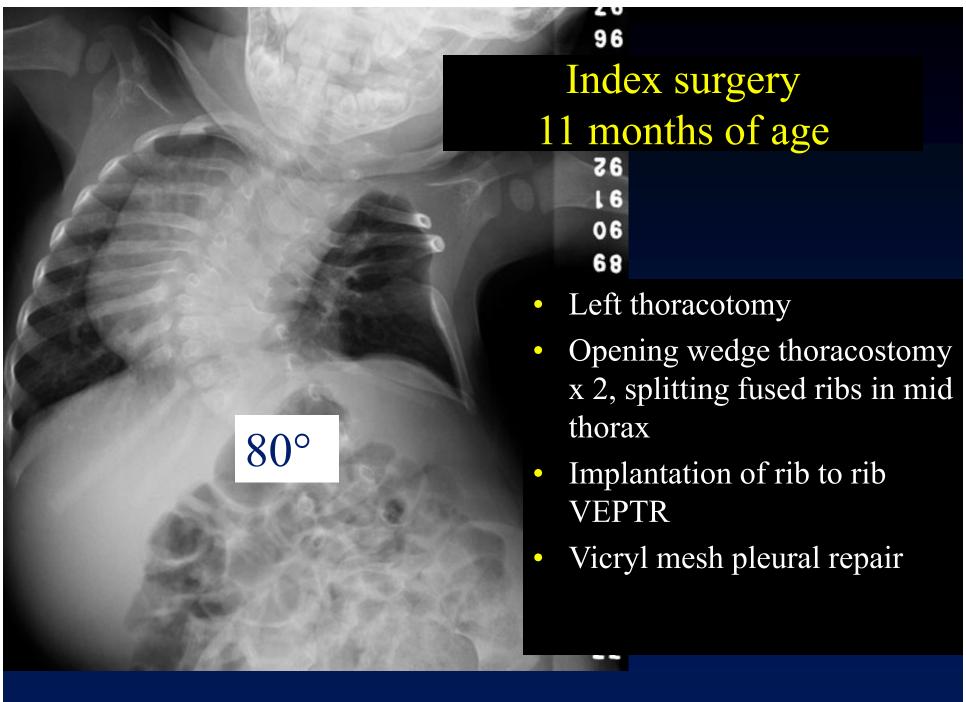
anomalies of multiple left-sided ribs and vertebra affecting the lower six thoracic vertebral bodies and multiple ribs

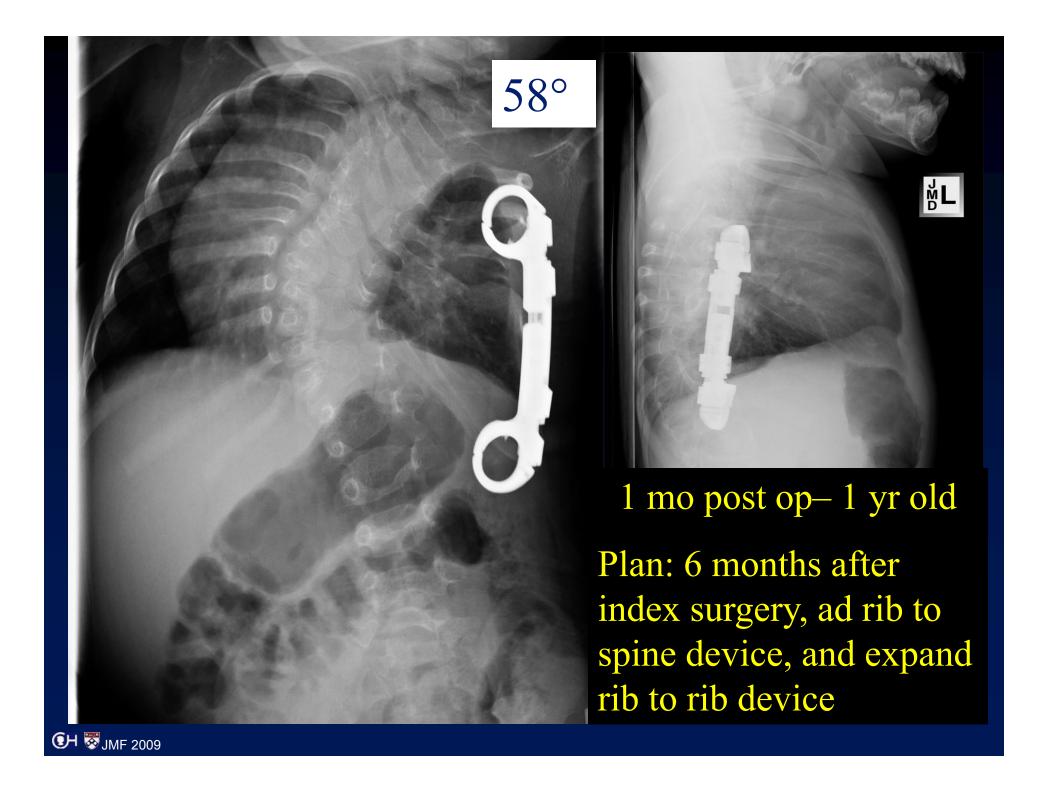
poor lung aeration on the left side left lung volume 53 cc right lung volume 88 cc

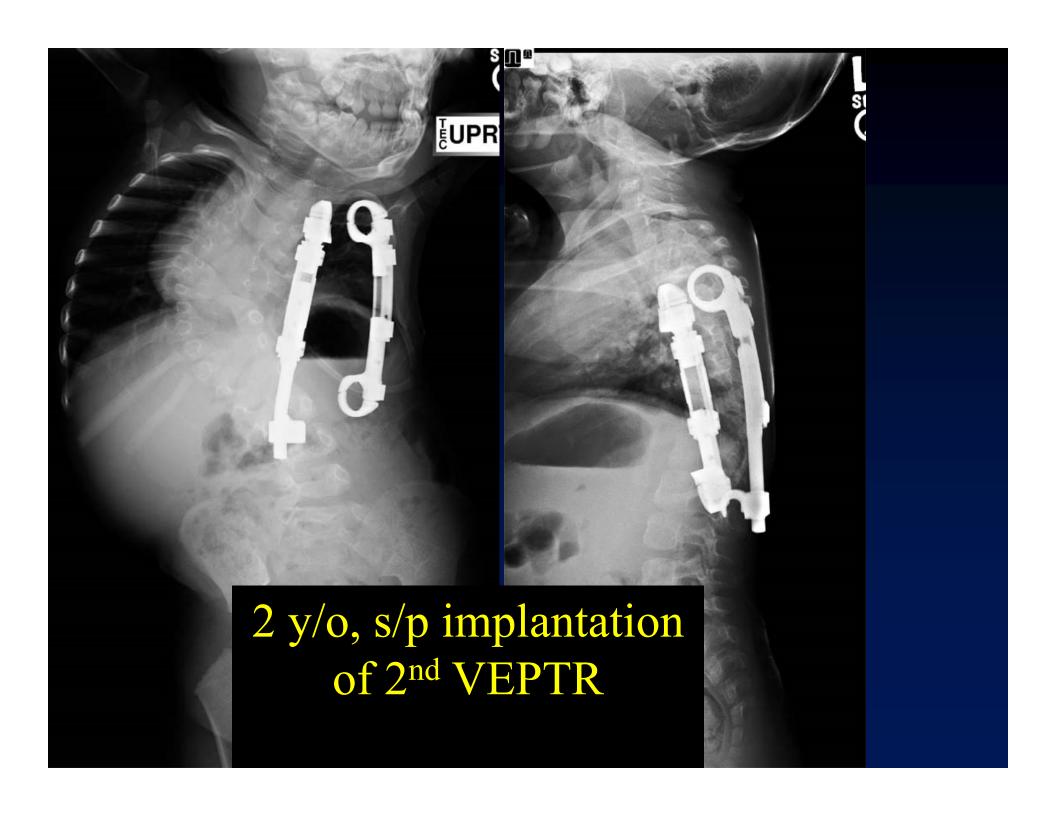


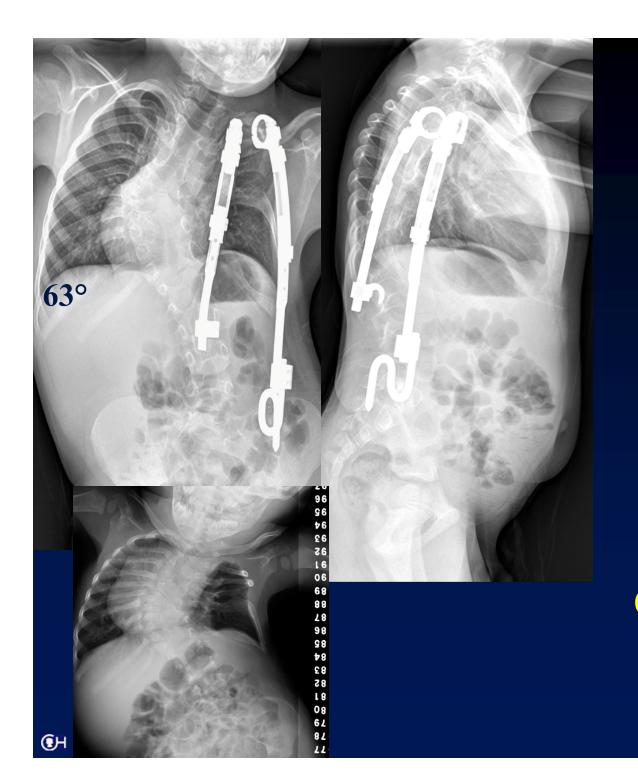


What would be your plan?





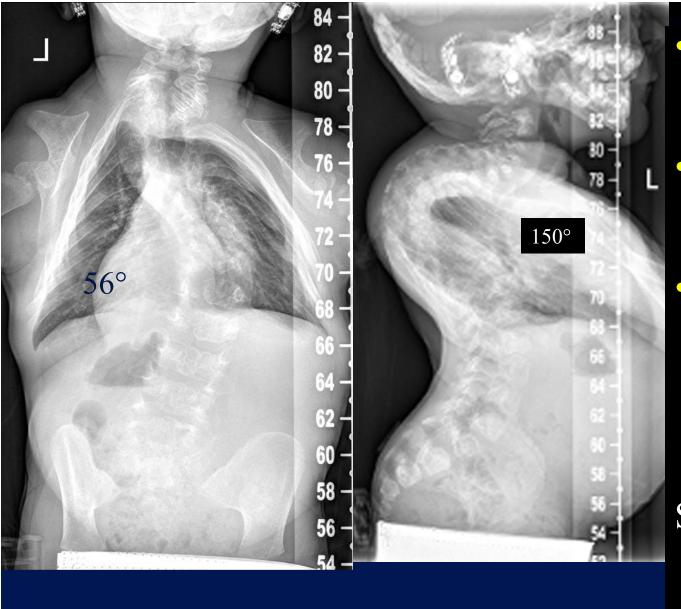




5 y/o

4 yrs after index surgery

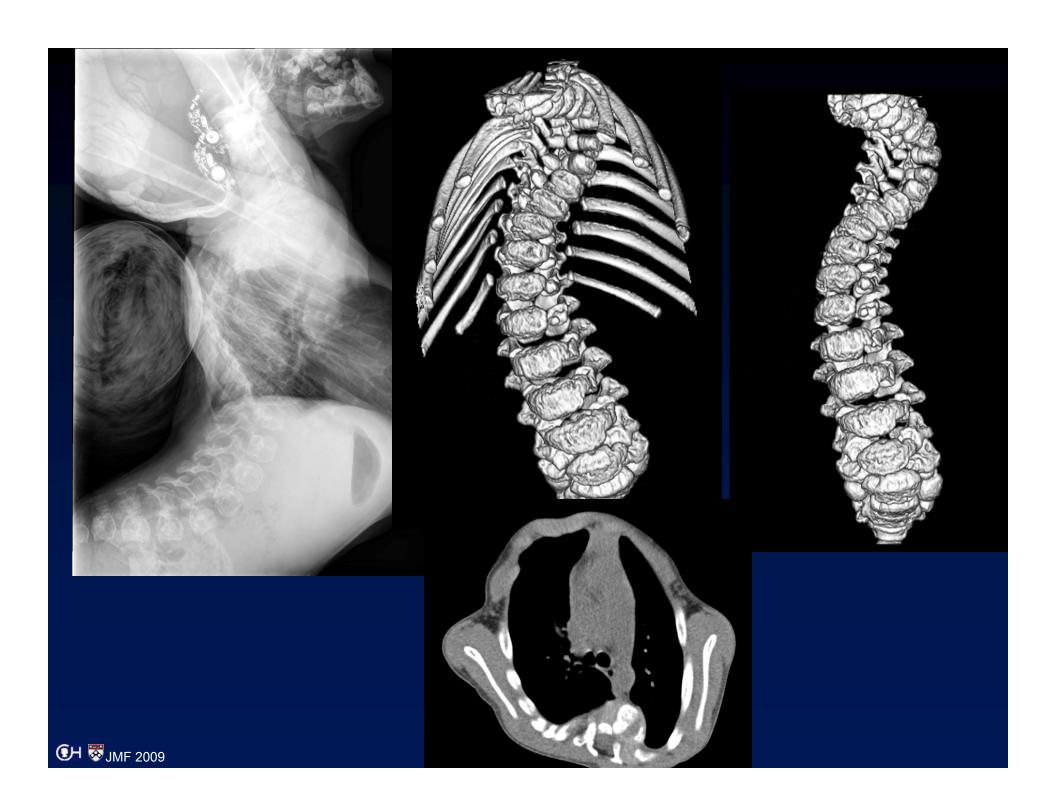
rib to rib has been exchanged for rib to pelvis



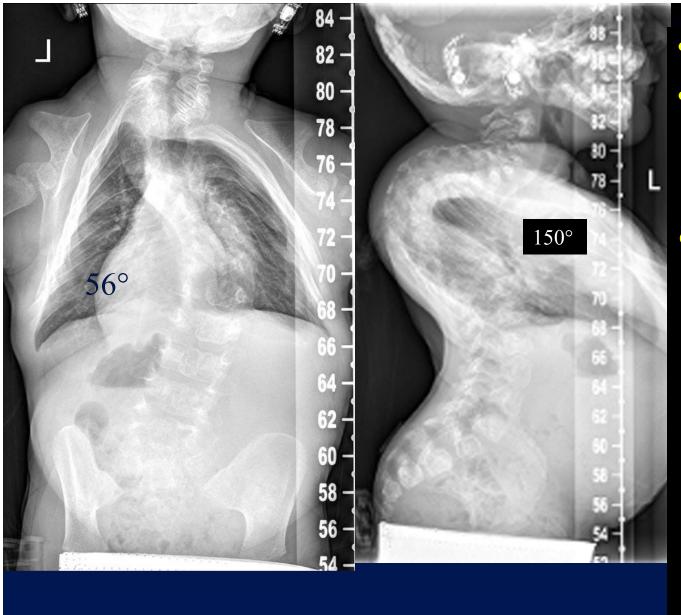
- 8 y.o. male from 700 miles away
- Cleidocranial Dysostosis Syndrome
- underwent brace treatment without effect on the deformity

Spirometry (BTPS)

- FVC 75%
- FEV1 57%







- 8 y.o. male
- Cleidocranial Dysostosis
- What is your plan?





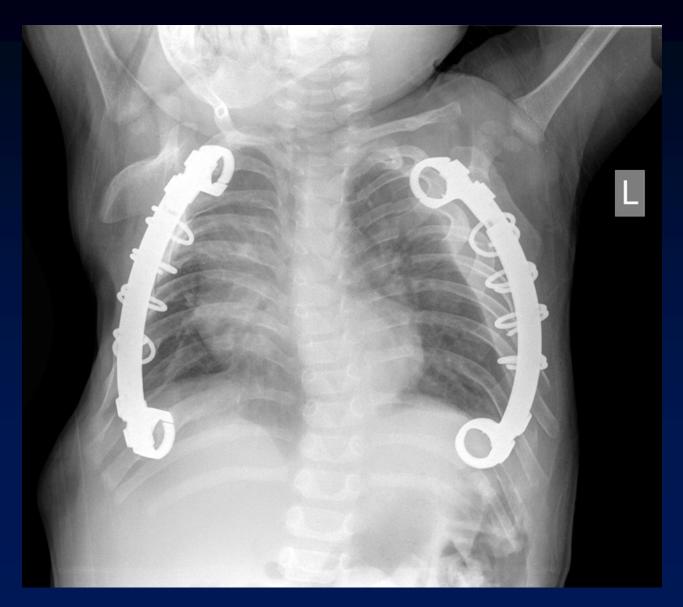
- 8 month old boy
- Chest wall deformity, similar to bell-shaped chest.
- Restrictive lung disease, with continual oxygen use.
- Status post genetics evaluation with no specific syndrome identified.

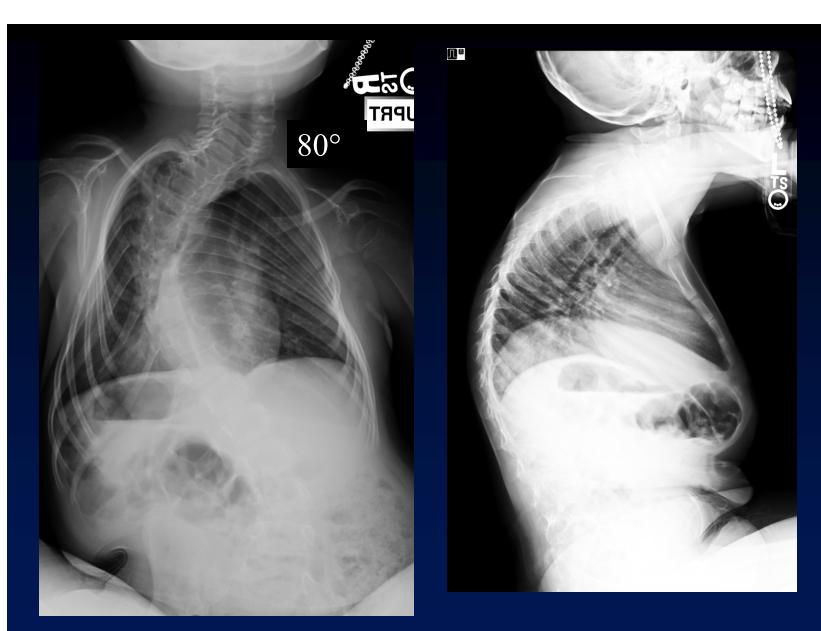




5 months post op from 1st surgery

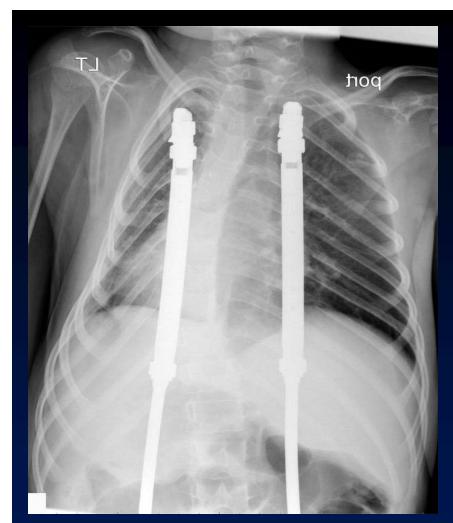
Immediately after 2nd side



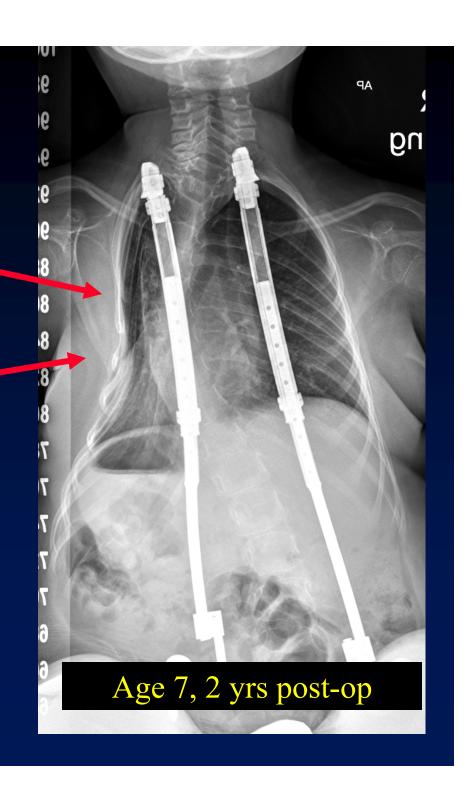


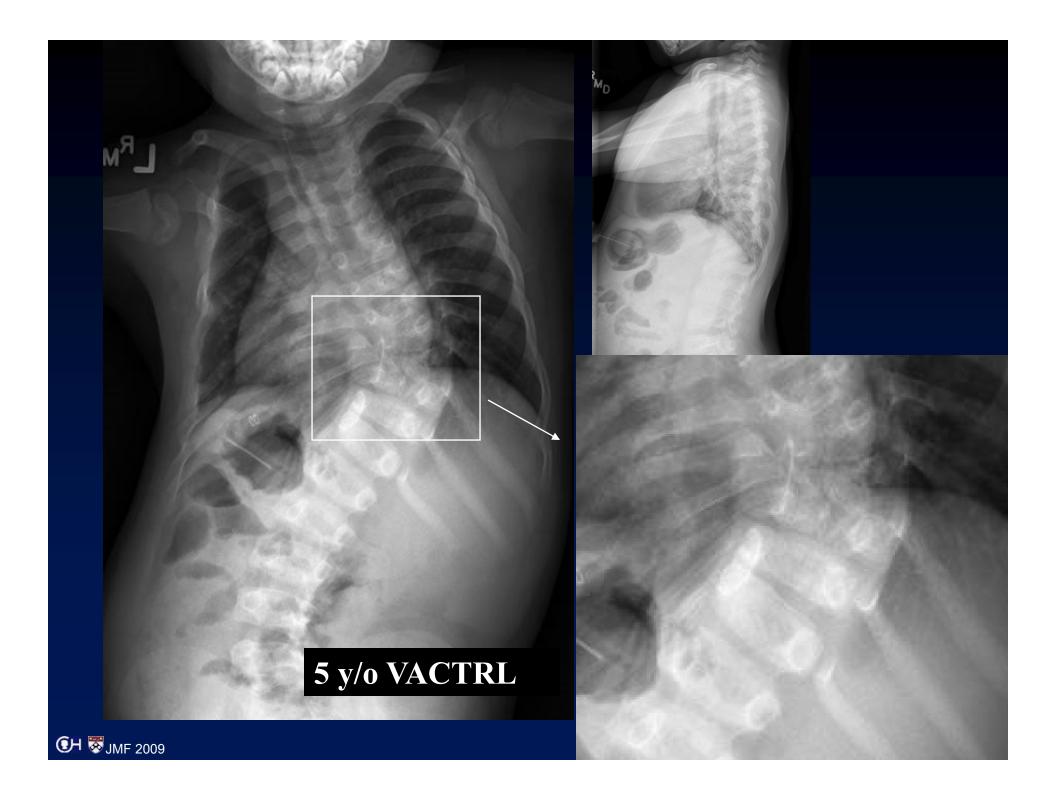
5 y/o with SMA type 2, declining respiratory function, progressive deformity





Immediately post-op









Thank you



