MASTER'S TECHNIQUE: VCR & GROWING RODS

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DISCLOSURES Last 36 months

Consultant: DePuy Synthes Spine, K2M, Medtronic (monies donated to charitable foundation)

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Editorial: Associate Editorial Board of Spine. Editorial Board of the Journal of Spinal Disorders & Techniques and Scoliosis, Professional Advisory Board of Backtalk and the Scoliosis Association, Associate Board of the Journal of Neurosurgery: Spine, The Spine Journal, Associate Editor for iscoliosis.com and spineuniverse.com, Deputy Editor of Spine Deformity

INDICATIONS: VCR & GR

- Limited
- Severe Localized Deformity in an EOS pt. where Apical Resection and Concomitant Cephalo-caudad Deformity Control is Needed
- Goal is to AVOID this Combined Treatment if Possible!
- Either VCR alone or GR alone, Delay tactics if possible!
- Prelim. HGTx can be very useful!

Post VCR: 217 CASES/ 42 < AGE 10

- Posterior vertebral column resection for severe pediatric deformity. Minimum 2-year follow-up of thirty-five consecutive patients. *Spine* 2009;34:2213-21
- Vertebral column resection for the treatment of severe spinal deformity. CORR 2010;468:687-99
- Posterior vertebral column resection (VCR). SRS e-Text Spinal Deformity. www.srs.org, May 2011
- Vertebral column resection in children with neuromuscular spine deformity. *Spine* 2012;37:E655-1
- Antifibrinolytic agents reduce blood loss during pediatric vertebral column resection procedures. *Spine* 2012;37:E1459-63
- Posterior vertebral column resection for the treatment of dystrophic kyphosis and dislocation associated with type-1 neurofibromatosis: a case report and review of the literature. *Spine* 2012;37:E1659-64
- Complications following 147 consecutive vertebral column resections for severe pediatric spinal deformity: A multicenter analysis. *Spine* 2013;38:119-32
- Predicting kyphosis correction during posterior-only vertebral column resection by the amount of spinal column shortening. Spine Deform J (under rev 2013)
 - . Is there a Difference in Single Stage vs Staged VCR's regarding Clincal and Radiographic Correction and Complications? *Spine (under rev 2013)*





















 Device complications occurred in 54% of participants in the HGT group, 75% in the SR group and 28% in the control group, and had a negative impact on final thoracic spine height

> Caubet JF, Emans JB J Spinal Disord Tech. 2011;24(2):99-104

HALO TRACTION

- Perioperative halo-gravity traction in the Tx. of severe scoliosis & kyphosis. (Rinella, Lenke, et al. *Spine* 2004)
- 45 Pediatric pts. (>200 pts)
- Scoliosis±kyphosis >90°
 Sugrue, Lenke et al: Halo-Gravity Traction in Early Onset Spine Deformity: Results in 43 Consecutive Pts. SRS 2014
- Ventura et al ICEOS 2014

STANDARD PROTOCOL



Includes wheelchair, daily activities and treadmill as well as at night/Typically lasting for 4-6 weeks/or Longer (11 months longest!)



55% CORRECTION







PROXIMAL IMPLANT TENTING









HALO-GRAVITY TRACTION IMPROVES KYPHOSIS CORRECTION FOR THOSE EARLY ONSET SCOLIOSIS PATIENTS UNDERGOING GROWING SPINE TECHNIQUES

Cohort Comparison of 15 EOS pts. Treated with Preliminary HGTx vs. 15 EOS pts without HGTx

The 2 groups did not differ in any Preop Xray parameter Pts. Who underwent Prelim HGTx. Had Statistically improved Total Thoracic Kyphosis (42 deg vs. 55 deg) and T5-T12 Kyphosis (27 deg vs 33 deg) vs. those without Prelim. HGTx. Following application of their Growing device

No Complications attributed to HGTx noted Sugrue, Lenke et al IMAST 2014

SEVERE CONGENTIAL THORACIC LORDOSCOLIOSIS



"ILIAC-AXILLARY" DEFORMITY



7 MOS HALO-GRAVITY Tx



TETHERED CORD RELEASE WITH HALO APPLICATION















TAKE HOME MESSAGES

- Use of VCR in EOS is a Viable Option for Severe Angular Deformities +/-Myelopathy, Those Circumferentially Fused, and for Salvage Procedures
- Consider HGTx for Preop Correction of Severe EOS Deformities as a potential means to Avoid a VCR, and in Preperation for a Growth Modulation Technique
- Use of VCR along with Growth Modulation is viable but unusual Technique at our center

