

# Complications and Radiographic Outcomes of Posterior Spinal Fusion and Observation in Patients Who Have Undergone Distraction-Based Treatment for Early Onset Scoliosis

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## Co Authors

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# Disclosures

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I have no relevant financial disclosures.

Authors disclosures listed in program.

# Introduction

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- Common EOS treatment strategy:  
Growth friendly treatment → PSF
- Some patients do not undergo PSF at end of distraction
  - patient preference
  - surgeon preference
  - medical conditions

# Purpose

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- To compare the outcomes of EOS patients who are observed to those who have PSF at the end of distraction.
- Information useful in decision regarding PSF at end of distraction.

# Methods

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- IRB-approved review of the Children's Spine Foundation(CSF) Database
- Children with EOS undergoing OB or PSF at the end of distraction were included.
  - any etiology
  - $\geq 2$  year from last growing procedure

# Methods

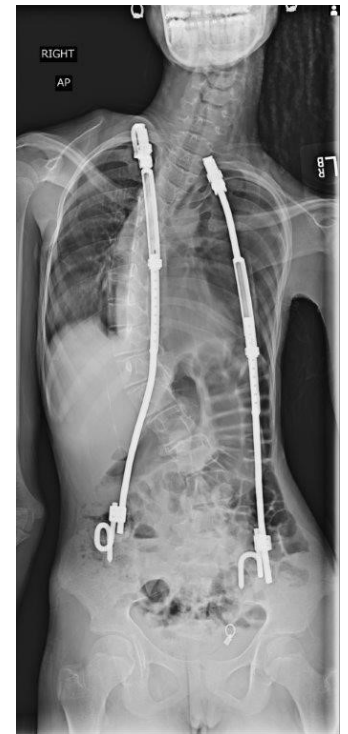
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- Radiographic parameters: coronal/sagittal curve  
T1-T12, T1-S1 height  
spine length
- Treatment outcomes: radiographic correction  
height/length gain  
complications
- Complications stratified by Smith Classification

# Results

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- 37 patients: 25 PSF (67%), 13 Observation (33%)
- Mean follow up from distraction initiation:
  - 15.6 years PSF
  - 16.2 years OB
- Mean age initiation: 4.2 years both





# Results

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- Ambulatory: Observation 12/13 (92%)  
PSF 21/25 (84%)
- Treatment: Observation: 13/13 (100%) VEPTR  
PSF: 21 VEPTR (84%), 3 GR (12%), 1 Hybrid (4%)

# Results

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- Most common CEOS (C3)
- Total procedure number:  
PSF mean: 11.3 (range 3-21)  
OB mean: 8.7 (range 2-16)

Mean age PSF: 12.9 years

Etiology	Major Curve Angle
<u>C</u> ongenital/ Structural	<u>1</u> : <20°
neuro <u>M</u> uscular	<u>2</u> : 20-50°
<u>S</u> yndromic	<u>3</u> : 51-90°
<u>I</u> diopathic	<u>4</u> : >90°

# Results – Radiographic Parameters

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		Distraction end	PSF	Final Follow up
<b>Scoliosis</b>	<b>PSF</b>	59°	49°	55°
	<b>OBS</b>	51°	n/a	59°
<b>Kyphosis</b>	<b>PSF</b>	52°	44°	47°
	<b>OBS</b>	50°	n/a	56°

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## Results – Spine Height/Length

		Distraction end	PSF	Final Follow up
<b>T1-T12 height</b>	<b>PSF</b>	20.4 cm	22.0 cm	21.5 cm
	<b>OBS</b>	19.8 cm	n/a	19.0 cm
<b>T1-S1 height</b>	<b>PSF</b>	32.8 cm	35.3 cm	35.3 cm
	<b>OBS</b>	32.0 cm	n/a	31.4 cm
<b>T1-L1 length</b>	<b>PSF</b>	24.7cm	25.7cm	25.2 cm
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# Results

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## **Complications – PSF**

23 complications/13 patients

35% patients with 1 complication (range 1-4)

11 (48%) device-related

12 (52%) disease-related

## **No complications in OB group**

4 Additional procedures (Post PSF)

1 repeat PSF, 2 implant removal, 1 revision PSF

# Discussion

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Similar findings by Sponseller/GSSG (POSNA 2015) with growing rods.

Need to determine if small additional curve correction, spine length gain are worth the risk of complications.

# Limitations

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Small group of patients

Reasons for observation vs fusion difficult to study retrospectively.

Observation group may represent “survivors” and may not be applicable to all patients.

# Conclusions

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- Decision to perform a PSF after distraction is complicated and multifactorial.
- Observation at the end of lengthening may be good option for certain patients.
- Further studies are necessary to determine the optimal treatment for EOS patients who completing distraction.



# Thank You

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