



#### Growing Rod and VEPTR Perform differently for Idiopathic EOS at 5-year follow-up

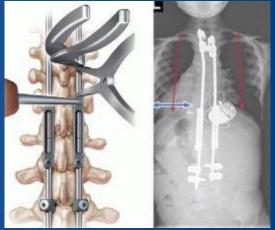
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#### Introduction

- While VEPTR uniquely suited for rib deformities
- IEOS has been treated with VEPTR or GR







#### PURPOSE

Compare outcomes for matched cohorts of patients undergoing distraction for IEOS GR and VEPTR

#### Hypothesis:

- Two systems will produce varying amounts of thoracic height gains and curve correction
- Complications are treatment specific



#### **STUDY DESIGN**

GSSG and CSSG databases used to identify: GR and VEPTR patients idiopathic etiologies Included syrinx, Chiari minimum 5-year follow up ≥ 4 lengthenings

Compared pre-operative, immediate post-operative, and most recent visit prior to final treatment

### **GR Pre-op vs FFU**



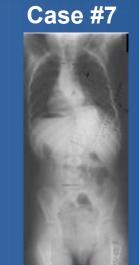
# Case #1 Case #2 Case #3 Case #5 PREOP FFU



#### **VEPTR Pre-op vs FFU**

#### Case #6

















PREOP











#### RESULTS

TABLE I: Demographic and Surgical Data					
	<u>GR</u>	<u>VEPTR</u>	<u>P value</u>		
Number	50	22	0.318		
Age	5.5	4.3	<mark>0.044</mark>		
Years of follow up	8.3	7.7	0.566		
Number of lengthenings	8.5	9.8	0.188		
Number of surgeries	9.6	14.8	<mark>&lt;0.001</mark>		

## **Radiographic Data**



			Barris Luca
			<u>P value</u>
Pre Cobb	77.6	74.3	0.388
Post Cobb	38.3	53.3	<mark>&lt;0.001</mark>
Pre-Post % Cobb	50.0%	27.3%	<mark>&lt;0.001</mark>
Pre Final T1S1	351.4	314.6	<mark>0.003</mark>
Change T1S1	96	76	<mark>0.04</mark>
Pre Final T1T12	219.3	188.7	<mark>0.004</mark>
Post Kyphosis	38.2	40	0.748



TABLE III: Complications Data						
	<u>GR</u>	<u>VEPTR</u>	<u>P value</u>			
Complication (Incidence)	1.8	2	0.296			
Implant Comp (Incidence)	1.3	1.4	0.413			
Wound Comp (incidence)	0.3	0.5	<mark>0.017</mark>			
Medical Comp (incidence)	0.2	0.1	0.415			



#### **Bilateral vs Unilateral**

- Bilateral constructs (VEPTR & GR) maintained better curve correction when compared to unilateral constructs.
- Bilateral VEPTR constructs had 27% more wound complications than unilateral constructs.
- Bilateral GR constructs experienced fewer wound complications than dual rod constructs.



#### Conclusion

- Compared to VEPTR, GR patients had significantly greater initial correction of their main curves and maintained this correction at latest follow-up
- -showed greater continued growth of thoracic height during the lengthening period
- GR patients had a lower incidence of wound related complications.



## **THANK YOU**

