

adult indications

Suitable Conditions:

- Adolescent Idiopathic Scoliosis in the Adult (ASA)
- Degenerative De-novo Scoliosis (DDS)
- Postural Scoliosis
- Chronic Antalgic Scoliosis
- Post Traumatic Scoliosis
- Hyperkyphosis
- Support for chronic poor posture

Patient Suitability:

- Male or Female 16 years of age +
- Risser 5
- Initial Cobb angle equal or above 20°
- All scoliosis curve types and hyperkyphosis

Treatment Objectives:

- Pain relief
- Prevention of progression caused by degeneration or postural collapse
- Postural improvement

adult contra-indications

Neuromuscular scoliosis resulting from abnormal asymmetrical innervation or unbalanced muscle function, e.g:

- CP
- Traumatic paraplegia or quadriplegia
- Motor Neurone Disease
- Spinal Muscular Atrophy
- Friedreich's Ataxia
- Familial Dysautonomia
- Peroneal Muscular Atrophy
- Duchenne
- Myopathy

Potential Contra-Indications (case dependent):

- Acute Pain
- Radiculopathy with hard neurological signs
- Parkinson's disease
- Advanced Osteoporosis
- Post traumatic stabilisation

paediatric indications - idiopathic

- Idiopathic Scoliosis diagnosed and confirmed
- Boy or Girl 5 years of age +
- Initial Cobb angle equal or above 20° or 15° if there is a first degree family history of Scoliosis or proven progression >5° in last 6/12
- Initial Cobb angle equal or below 50°
- Risser 0, 1, 2 or 3
- Curve Type: All classes including curves that are inverse to normal patterns (e.g. Left Thoracic, Right Lumbar)

In some special cases SpineCor has been shown to be effective for non-idiopathic Scoliosis. Such cases include a number of syndrome related Scoliosis where there is no specific neuromuscular deficit. It is not advisable to treat such patients without significant experience of SpineCor and without very close monitoring. Advice should be sought from The SpineCorporation before attempting treatment of any non-idiopathic Scoliosis.

Any patients treated outside the above indications must be considered experimental and informed consent obtained from patients/parents. Out of indication treatments are the responsibility of the prescribing doctor.

paediatric contra-indications

- Neuromuscular scoliosis resulting from abnormal asymmetrical innervation or unbalanced muscle function. E.g.;
 - CP
 - Traumatic paraplegia or quadriplegia
 - Spinal Muscular Atrophy
 - Friedreich's Ataxia
 - Familial Dysautonomia
 - Peroneal Muscular Atrophy
 - Duchenne
 - Myopathy
- Postural Scoliosis when a prone/supine Vs PA X-ray shows an almost complete reduction (Cobb angle less than 5°).
- Adolescent patients who have had previous treatment except for Physio or shoe lift. (Patients who have been in rigid bracing for less than six months and/or with very little compliance may be still suitable for SpineCor treatment.)
- Juvenile patients who have been in rigid bracing over six months are often suitable for SpineCor treatment due to good flexibility.
- Patients with Congenital defect Scoliosis.