

# Možnosti využití modelu páteře při operacích vrozených skolióz u dětí.

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**Spondylochirurgické centrum FN Brno**  
**Ortopedická klinika LF MU a FN Brno**  
**Přednosta: prof. MUDr. Martin Repko, Ph.D.**

**IX. SPINÁLNÍ KONGRES**

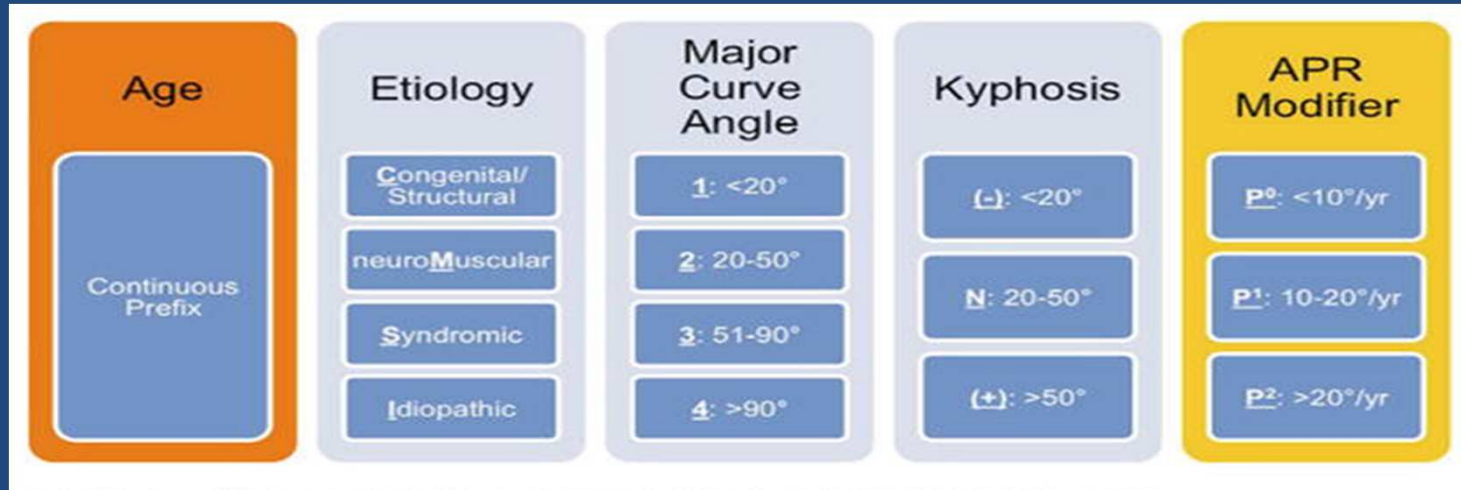
**4. – 5. listopadu 2021 Mikulov, hotel Galant**

**Podpora projektu**

**Příspěvek je podpořen grantem AZV**

**Registrační číslo projektu NV 18-08-00459**

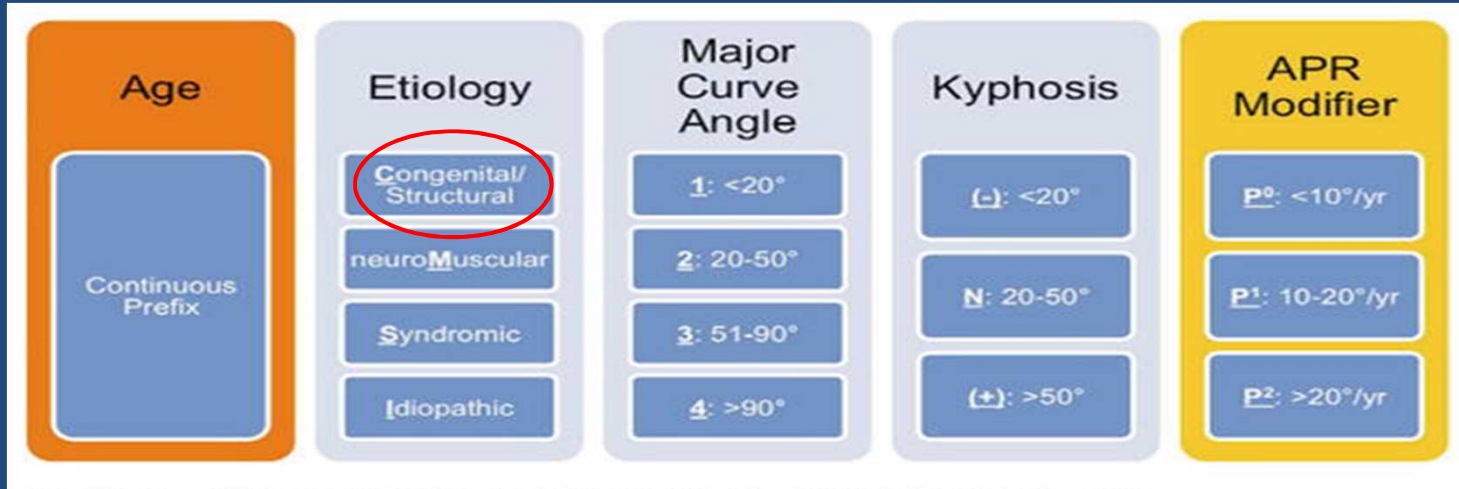
# Early-onset scoliosis (EOS)



Williams BA, Matsumoto H, McCalla DJ, Akbarnia BA, Blakemore LC, Betz RR, Flynn JM, Johnston CE, McCarthy RE, Roye DP Jr, Skaggs DL, Smith JT, Snyder BD, Sponseller PD, Sturm PF, Thompson GH, Yazici M., Vitale MG.

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# Treatment of scoliosis

- goal = prevention of curve progression
- reduction of deformity = brace and surgery
- curves  $< 20^\circ$  physiotherapy  
20 – 40° brace + physiotherapy  
> **SURGERY**

# Surgery possibilities

- **Simple hemi-/ fusion**
  - convexity hemiepifyseodesis
  - posterior fusion
  - combined a/p fusion
- **Osteotomy, hemivertebrectomy, VCR**
  - posterior approach
  - combined a/p
- **Fusion with instrumentation**
- **Instrumentation without fusion**



# Preop investigation

- spine – X-rays, CT (3D), MRI, EOS
- screening of VACTERL abnormalities  
(Visceral, Anorectal, Cardiac, Tracheo-esophageal fistula, Renal and Lung)

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- **3D individual spine model**



## Patient-specific 3D spine model and screw guides successfully used in scoliosis surgery

November 19, 2019



Al Zahra Hospital, Sharjah, is proud to announce its first scoliosis correction surgery using 3D printing technology

# SPINE MODEL FOR SCOLIOSIS TREATMENT

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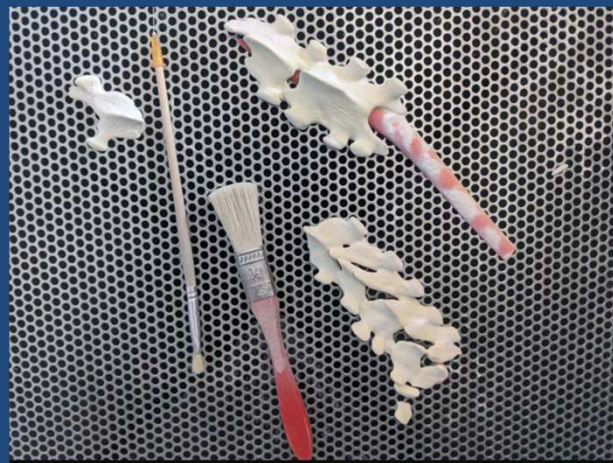
3D4Med anatomical model support

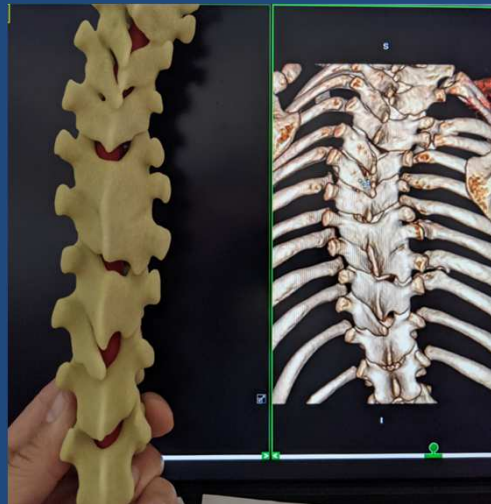


# ZPrinter 650



# ZPrinter 650





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# Surgical Treatment 1977 – 2002

329 Pts

	patients	deformity	correction
• Hemi/epifyzeodesis	102 (31%)	44°	34° (22%)
• PIF	145 (44%)	65°	40° (38%)
• Strut graft + PIF	27 (8%)	66°	39° (40%)
• OT + PIF	33 (10%)	65°	37° (43%)
• HV + PIF	22 (7%)	51°	19° (61%)

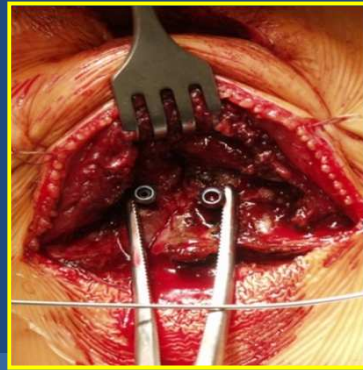
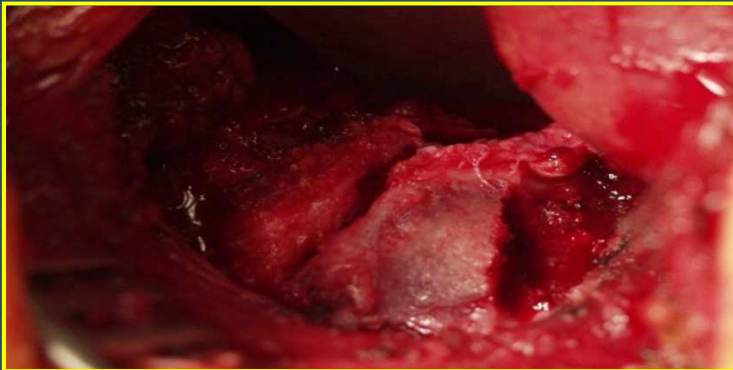
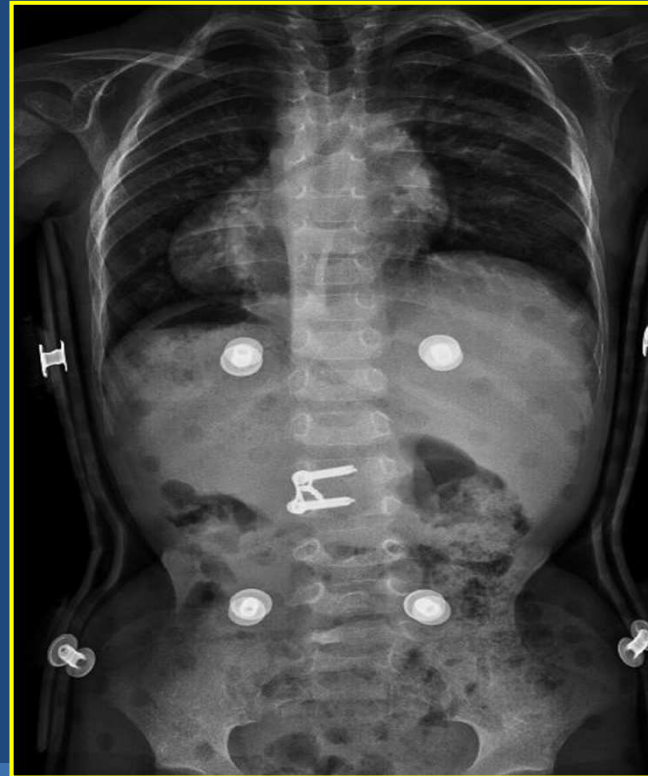
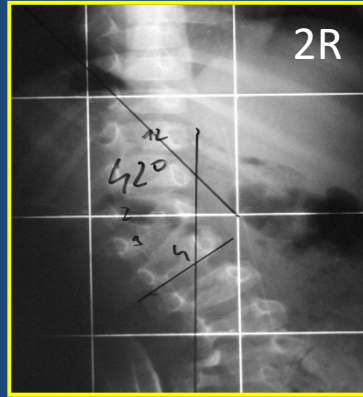


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# Hemivertebrectomy (combined approach)



# Surgical Treatment 2003-2020 144 Pts

- Hemivertebrectomy + 52 Pts (36%)
- Hemivertebrectomy only 27 Pts (19%)
  
- Single-segment 19 Pts (24%)
- Since 2011 posteror approach only

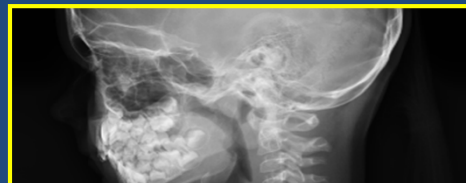
# Surgical Treatment 2003-2020 144 Pts

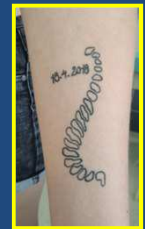
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- Single-segment 19 Pts (24%)
- Since 2011 posteror approach only (55%)

# Hemivertebrectomy

- in 1928 Royle - first hemivertebrectomy from the front
- in 1976 Ruf and Harms - hemivertebral resection by a posterior approach
- in 1979 Leatherman - hemivertebrectomy as a two stage procedure
- in 1990 Bradford and Boachie-Adje - done in a single stage
  
- in 2002,3 Ruf and Harms - posterior resection of hemivertebrae with transpedicular instrumentation is very promising procedure, pedicle screws in 1- and 2-year-old children effect on further growth
  
- in 2011 Wang - comparison of one-stage anteroposterior and posterior- alone hemivertebrae resection combined with posterior correction for hemivertebrae deformity

# Posterior only





# Unilateral vs bilateral instrumentation ??









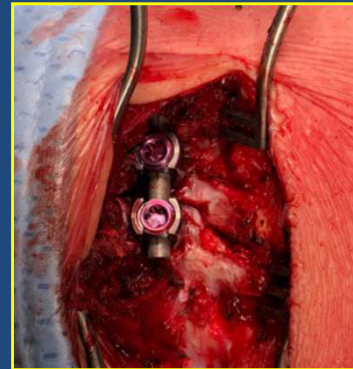
# Posterior-only lumbosacral hemivertebrae resection and fusion in paediatric scoliosis with minimum two year follow-up

- 16 Pts
- mean age  $10.4 \pm 3.4$  years (3–15 years)
- mean follow-up  $38.8 \pm 16.2$  months (24–79 months)
- mean segmental scoliosis  $35.4 \pm 9.2$  pre-operatively
- and  $7.7 \pm 5.4$  post-operatively (78.4% correction rate)
- and  $8.2 \pm 5.0$  (77%) at the latest follow-up
- **no significant difference between bilateral and unilateral instrumentation groups (P > 0.05)**

Xuhong Xue & Sheng Zhao & Feng Miao & Kai Li, International Orthopaedics (2020) 44:979–986

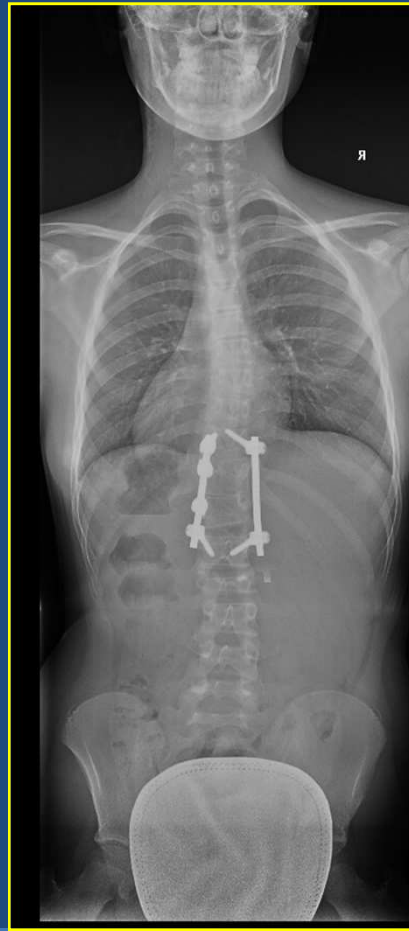
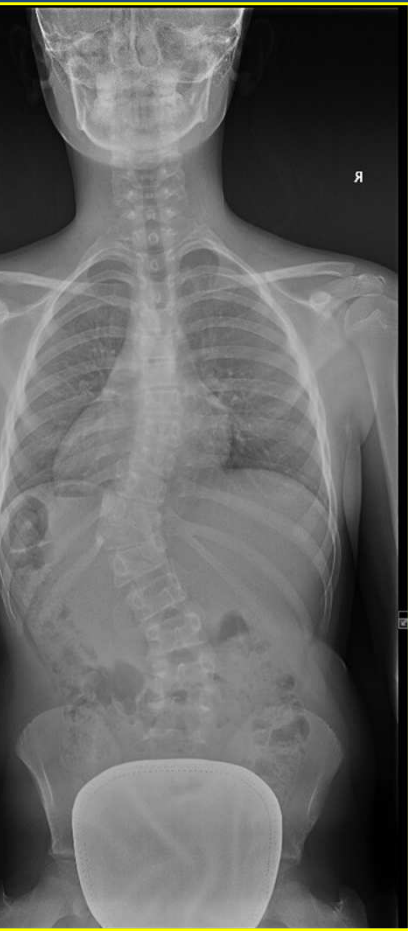
# 19 pts with HE and single-segment fixation

- mean age 7,1 (2,2 - 14,2 years)
- mean follow-up 7,8 (6 - 144 months)
- mean segmental scoliosis  $39,6 \pm 9,5$  pre-operatively
- mean segmental scoliosis  $10,1 \pm 5,8$  post-operatively (74%)
  
- bilateral instrumentation and fusion – 8 pts
- unilateral instrumentation and fusion – 11 pts



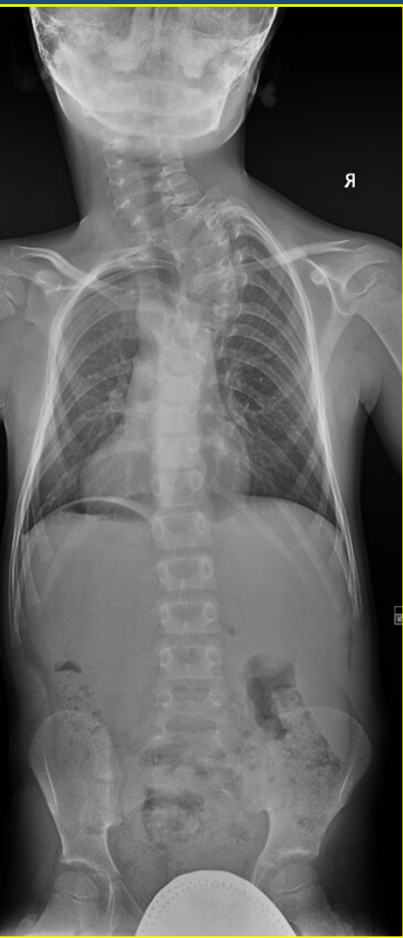


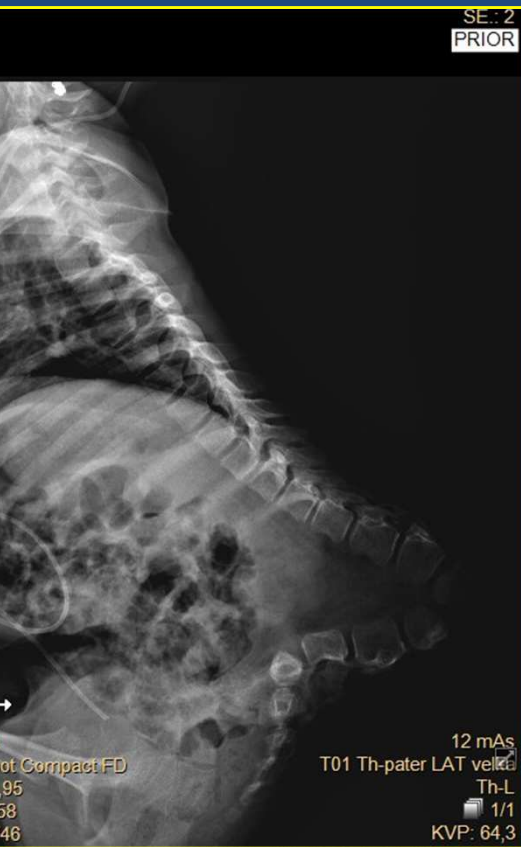


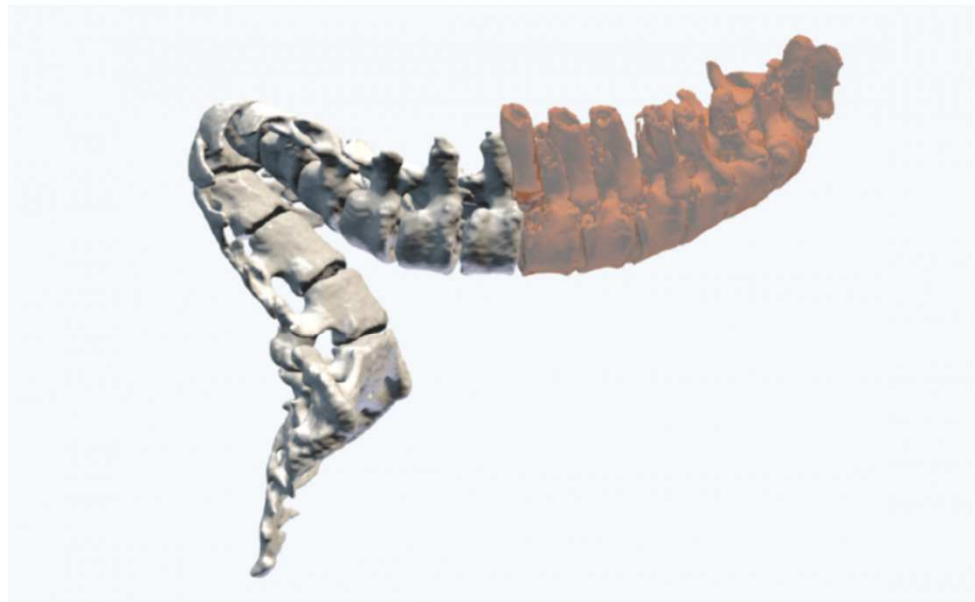












## Two Hours of Surgery Time Saved - Spina Bifida & Severe Kyphotic Deformity

# Main goal of treatment

- prevention of curve progression
- reduction of spine deformity
- conservative treatment
- **surgery**

