



## Scoliosis

### What is it?

Scoliosis is not a disease. It is an abnormal curvature of the spine or backbone. In addition to curving sideways, the spine also twists, making the ribs (which are attached to the spine) look uneven. This may cause a “bump” on the back. Other signs include a shoulder or hip that looks higher than the other does or the chest may appear unequal. Scoliosis is not contagious and is usually a painless condition.

### Why does it happen?

Sometimes the cause of scoliosis is known: i.e. a child may be born with a misshapen spine or a curve may develop from a neurologic disorder. Most of the time, however, the cause is unknown (idiopathic). It is **not** caused by carrying heavy books, backpacks or purses; nor is it caused by slouching, bad posture, sleeping wrong or lack of calcium. **No one** did anything wrong to cause scoliosis nor can it be prevented.

### Who has it?

Scoliosis usually occurs in early adolescence, becoming more noticeable during a growth spurt. Approximately 0.5 percent of young people develop scoliosis that requires treatment. Girls have it eight times more often than boys do. Sometimes scoliosis can be found in several family members, for several generations.



## **How is it found?**

Finding scoliosis is easy when the back is examined closely but it can be missed if someone isn't looking for it. Sometimes clothes don't hang right: one pant leg may be longer or a skirt hem doesn't look level. A shoulder blade may look higher and be seen through clothes or when wearing a swimsuit. Parents or friends might notice the curve, but most curves are found through a school-screening program or by a pediatrician. A trained examiner can detect even a slight curve when a person bends over to touch her or his toes. If a curve is suspected, a referral is often made to an orthopedic doctor.

Scoliosis is diagnosed by X-ray of the spine. If a curve measures more than 10 degrees, it is considered to be scoliosis.

## **What are the types of curves?**

Curves occur in the spine between the neck and the pelvis. They are named depending on their location. The most common type is in the upper back ("thoracic") and tends to curve to the right. Other curves are in the lower ("lumbar") spine. Many children have both types of curves.

## **How are curves treated?**

Treatment depends on how big the curve is when it's detected and how much growth is left. (Curves worsen during the major growth spurts.) Curves less than 20 degrees, for example, may not need any treatment except to be checked by the doctor from time to time until the person has stopped growing.

If a person is still growing and the curve is greater than 20 degrees, the doctor might recommend wearing a brace. Bracing will not correct a curve but will help prevent the curve from getting worse during growth. Braces must be worn as prescribed by the doctor during the growth years in order to be effective. After growth is completed or if the curve does not respond to bracing, the brace is no longer worn.

If a curve is advanced, the doctor may suggest an operation to correct the scoliosis. Allowing a large curve to progress could interfere with heart and lung function in later years. The most common type of operation is called posterior spinal instrumentation and fusion. Instrumentation refers to metal rods and hooks that are implanted to hold the spine in the corrected position. Fusion refers to the bone that is placed along the spine making the vertebrae one solid piece.

Scoliosis is a treatable condition and should not be allowed to become a disabling one. When treated, it should not affect one's ability to lead a normal life.

If you would like more information, ask your doctor, nurse or visit our Family Resource Center.