

Scoliosis – an abnormal, lateral “side-to-side” curvature of the spine.

Synonyms: spinal curvature.

Symptoms: may or may not be present with scoliosis. Diffuse back pain with or without muscle spasms may be present.

How is it diagnosed?

A thorough patient history and physical examination can lead towards the diagnosis of scoliosis. X-rays are confirmatory.

Scoliosis can be divided into categories based on type: idiopathic (unknown cause), degenerative, neuromuscular (e.g. muscular dystrophy), or congenital (due to a birth defect). It can be further classified by age: infantile, juvenile, adolescent, adult.

How is it treated?

Conservative therapy that includes chiropractic manipulation, stretching, massage, and electrical stimulation is recommended for the control of symptoms. Regular physical exercise is extremely important.

Specific systems of exercise have been implemented in order to slow down the progression or even reverse scoliosis. Promising systems include the Schroth Method and SEAS (Scientific Exercises Approach to Scoliosis). Specific or not, resistance training can decrease pain, maintain flexibility, and increase pulmonary function.

Whether to brace or undergo surgery depends on the age of the patient, the size of the curve, and whether or not pain is present.

With mild cases of idiopathic scoliosis, a watch-and-wait protocol is recommended. The International Scientific Society on Scoliosis Orthopaedic and Rehabilitation Treatment (SOSORT) produces and regularly updates a full set of guidelines with regards to scoliosis, which can be found online.

Alternative treatments.

NSAID's, analgesic medications, corticosteroid injections, bracing, surgery.

Prognosis is fair to good. Again, prognosis depends on several factors. Mild idiopathic scoliosis may not need treatment and may not progress. However, scoliosis can become debilitating if the progression is severe and left untreated.

Duration of care: *Approximately* 3 times per week for 4 weeks for a total of 12 visits in the first month. There are no guidelines that exist for chiropractic treatment of scoliosis. Care is rendered in order to reduce symptoms, not reverse the curvature.

Care frequency will increase or decrease depending on the clinical presentation of the patient (pain decreases, functional ability increases, measure of flexibility, etc...)