

# Scheuermann's kyphosis

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Typically, in this condition, there is wedging of the seventh to 10th thoracic vertebrae. The patient presents with both apical pain and low back pain (due to attempts by the lumbar musculature to compensate for the thoracic hyperkyphosis). - The incidence has been estimated at 1-8% of the population, and it is more common in males. Physiotherapy may be useful. Bracing for skeletally immature patients with kyphosis up to 65° may be effective in arresting progression. Indications for surgery include pain (apical or low back pain produced by compensatory hyperlordosis), progressive deformity greater than 70°, unacceptable cosmesis and neurological and/or cardiopulmonary compromise. If surgery is contemplated, it may require anterior release followed by posterior correction and fusion. Increasingly, posterior chevron osteotomies carried out at the time of posterior instrumentation may prevent the need for the initial anterior release.

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