Spinal Scoliosis

**What is a scoliosis?**

A scoliosis means that the spine is curved abnormally when viewed from the front or the back.

**How is it caused?**

Scoliosis can be divided into two main categories – adult and childhood scoliosis.

Adult scoliosis is caused either by the degeneration of spinal discs with age or as a result of childhood scoliosis which was not treated; 30-40% of adults over the age of 50 will have scoliosis. #

Childhood scoliosis (affecting infants through to young adults) has several known causes, but in 80% of cases, the exact cause is unknown. This is termed “Idiopathic” scoliosis. Idiopathic scoliosis in children is typically classified according to the age that it is diagnosed. It is most common in adolescents (over 10 years) but also occurs in infants (under 3 years) and juvenile’s (3-10 years). The remaining 20% of cases are typically caused by congenital or genetic conditions, spinal malformations, underlying neuromuscular conditions, metabolic conditions or trauma.

**What are the symptoms?**

* Pain and Stiffness in the spine.
* Reduced mobility and difficulty walking.
* Altered posture or difficulty maintaining an upright posture.
* Sometimes neurological symptoms such as pins and needles, numbness or weakness in the legs.
* When looking from behind, the spine may have a C or S shape curve rather than that of a straight line, this can make the waistlines uneven or one shoulder lower than the other.
* Shoulder blades or ribs may be prominent.

**How is it diagnosed?**

Diagnosis is usually made through a history taking and physical examination. A scoliosis may be suspected if an S shaped spinal curvature remains the same when you asked you asked to bend forwards to touch your toes.

Investigations such as X-rays may be recommended if the curvature has worsened recently.

**What can I do?**

Stay Active

Remaining active will help your body to stay strong and maintain its ability to cope with daily activity. Although exercise will not reduce the size of a curve or slow down worsening of the curve it can help to control pain levels and improve your general physical health.

It is important to be consistent so choose exercise that you enjoy as you are more likely to do this regularly. There are a variety of exercise routines available some of which are listed below:

NHS Pilates for scoliosis: <https://www.nhs.uk/conditions/nhs-fitness-studio/scoliosis-pilates-exercise-video/>

10 exercises for scoliosis: <https://www.youtube.com/watch?v=i-y8pp5EfYw>



**Factors influencing pain**

Whilst you are experiencing pain a number of other factors can influence your pain levels. Keep the following factors in mind to help control your pain levels:

Look after yourself

Pain is not usually simply a physical problem. Your general well-being can make you vulnerable to pain and your wellbeing can also be made worse by pain. Looking after your general health and well-being will help recovery. There is helpful advice on this website: [https://www.nhs.uk/oneyou](https://www.nhs.uk/oneyou/)

Reduce stress and anxiety

It is normal for people with pain to have stress, anxiety and change in mood. This may affect your ability to cope with the pain and may influence your pain levels. Help is available if you are being affected by stress, anxiety or low mood – see the links below or discuss with your practitioner.

It is important that your whole nervous system is in a healthy state to aid recovery. If your brain is stressed or overworked this may slow recovery. Relaxation is an important part of your recovery. Simple relaxation techniques may help manage pain and stress. Try to set aside some time each day to relax – you can use relaxation techniques as linked below, or simply an activity you enjoy – reading, deep breathing, sitting in the garden, singing – whatever relaxes you.

Find help and support here: <https://www.nhs.uk/oneyou/every-mind-matters/>

<https://www.northessexiapt.nhs.uk/west-essex>

Physical Activity

Exercise improves fitness, confidence with movement and strength. It can also help reduce your stress and tension and improve your mood and quality of sleep, helping support you to return to normal activities. Perhaps you could simply start by trying to walk for 10 minutes per day.

Alcohol

Avoid alcohol in the early stages of healing (first three days). Evidence has shown this can slow down recovery and increase the chances of re-injury. <https://www.drinkaware.co.uk/>

Sleep

Sleep is very important for your wellbeing. Poor sleep quality, and lack of sleep can make managing pain more difficult. Consistently getting 6-9 hours is recommended. Get help and tips here:

<https://www.nhs.uk/live-well/sleep-and-tiredness/>

Smoking

Smoking can also impact how quickly tissues can heal and affect pain levels. For help with stopping smoking <https://www.essexlifestyleservice.org.uk/stop-smoking/> <https://www.nhs.uk/better-health/quit-smoking/>

**How long will it last?**

The severity of a scoliosis can vary between people and can change with time. For this reason, a scoliosis is monitored and if and when problems arise, these can be discussed and managed.

**Is there anything I should avoid?**

Long periods of rest can cause muscles to become less strong and joints more stiff. Remaining active will help your body to continue to do the things you want to do.

**What other options are there?**

Physiotherapy:

Treatments such as physiotherapy and exercise routines can help with pain, and improve posture and flexibility but will not reduce the size of a curve or slow down worsening of the curve (progression).

If you require 1:1 physiotherapy treatment please fill out a self-referral form which can found at <https://eput.nhs.uk/our-services/essex/west-essex-community-health-services/adults/rehabilitation/musculo-skeletal-physiotherapy> and send to epunft.mskphysio@nhs.net

Bracing:

Sometimes in adults bracing is used to improve the bodies’ alignment and symmetry and reduce pain and symptoms. Bracing is normally recommended based on the severity of the scoliosis.

Orthopaedic monitoring/Surgery:

If non-surgical treatment is ineffective or the scoliosis curve is worsening, a referral to an orthopaedic team for an assessment will be recommended. Here other options including surgery is will be discussed. Surgery is always complex and presents with significant risk and an intense recovery period, however this is something that would be discussed at length between yourself, your consultant and the multidisciplinary team. It is worth remembering that most people with scoliosis do not have to have surgery.

**Useful links**

British Scoliosis Society - <http://www.britscoliosissoc.org.uk/>

Scoliosis Society UK - <https://www.sauk.org.uk/>