Scoliosis: know the facts
What is scoliosis?

Scoliosis means that the spine curves to the side. The curve can be in a ‘C’ or ‘S’ shape. The spine can also twist at the same time. Scoliosis is not a disease – it just means that the spine is curved. It is not infectious or contagious. It does not develop because of anything a person did or did not do.

Although many people have not heard of scoliosis it is not a rare condition. Scoliosis can happen at any age. However, the most common time is around age 10 to 15 when a child is in early adolescence.

Scoliosis can affect a person’s appearance because when the spine bends to the side it can also twist. This twisting can pull the ribcage out of place. The ribcage can then sometimes form a lump on the back and cause a shoulder blade to stick out.
There is a quick test you can do to check for the possibility of scoliosis. It is called the ‘forward bend’ test. The test is very easy to do and can be done by a doctor or parent or guardian. If a person with scoliosis bends forward from the waist with their legs and arms straight, the curve in the spine may be seen. You may also be able to see a clear bulge where the ribs are.

Other common signs of scoliosis are: one shoulder blade sticking out more than the other, a tendency to lean a little to one side, or an uneven waist or hips.

**What next?**

If you think that you or your child has scoliosis you will need to see a doctor who will be able to check. If scoliosis is diagnosed; it is important that you see a scoliosis specialist. If you call or email SAUK we can tell you who your nearest specialists are.
Who is affected?

Babies and children
Scoliosis can develop before birth and happens because the spine does not develop properly in the womb. The spine is made up of small bones called vertebrae. Sometimes these vertebrae do not form fully. One or more might not form at all. These partly formed vertebrae will cause the spine to grow unevenly once a baby is born.

Scoliosis can also develop in babies and children between birth and the age of 10, before puberty (early-onset scoliosis). Usually, early onset scoliosis is idiopathic. The word idiopathic means that there is no known cause.

If a curve is spotted in a baby or child they should be checked regularly by a scoliosis specialist to see whether the curve is getting larger. Some children will have a curve that will not get bigger but others will have a curve that keeps on getting larger. Curves can get bigger quickly so referral to see a specialist should be made as soon as possible.

The earlier that treatment is started for young children with scoliosis the better because the spine can be guided into more normal, straighter growth. For a baby, if the curve is treated early, the spine might grow straight.

Sometimes children can develop scoliosis because of a neuromuscular condition or as part of a syndrome (e.g., Marfan’s syndrome).

Adolescents
Scoliosis is most common in this age group (older than about 10 years) and is called adolescent idiopathic scoliosis (AIS). AIS affects more girls than boys. Around 5 out of 6 people with AIS are female.

If you or your child has scoliosis it is important to make sure that your GP arranges a referral to a scoliosis specialist early on. At your first appointment you will be examined by the specialist, X-rays will be taken, and you will be told the Cobb angle. The Cobb angle is measured in degrees, and will tell you how big the curve is.

The specialist will then talk to you about your scoliosis and possible treatments. For smaller curves the specialist will probably want to start by checking you regularly to see if the curve is getting bigger. For larger curves: treatment will probably be recommended. It is important to remember that every scoliosis is different and there is no standard treatment, so getting the advice of a specialist is very important.

Adults
Degenerative scoliosis occurs in adults for two main reasons. First, scoliosis may have started when the person was younger and may have worsened or become arthritic as they have got older.

The second degenerative type of scoliosis is called de novo scoliosis, which starts after 40 years old and is thought to be caused by arthritis or degeneration (gradual deterioration) of the spine.

Degenerative scoliosis of both kinds can happen because the spine gets weaker as we age. Often, the discs and facet joints in the vertebrae (small bones that make up the spine) wear out causing the vertebrae to slip out of place. The spine will then curve to one side.

Discs are part of the spine. They sit between the vertebrae and act as a kind of cushion. Facet joints are small joints between each of the vertebrae in your spine linking the bones together.

Degenerative curves might get a bit bigger each year. Surgery can still be an option for an older person with scoliosis. However, because the spines (and the patient) are older and the bones are probably weaker it can be harder to predict what the results of surgery will be.

There are treatments available to help manage pain and improve mobility if surgery is not an option.
Having scoliosis doesn’t mean that a child cannot do sport or PE. People should try to keep fit and active to keep the back muscles strong. Always check with a specialist about what sports can be done before, during, and after treatment.

Having scoliosis does not mean that you will be unable to have children or will have trouble with a normal birth. Scoliosis has no effect on conception and in most cases women have no problems with pregnancy and labour.

At the moment spinal surgery is the only proven way of correcting spinal curvature, except in the case of very young children. 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 the progression (growth).

Having metalwork in your spine will not necessarily set off the detection system at airports.

Scoliosis cannot be prevented. It is not caused by carrying heavy school bags or anything a child or parent did or did not do. In most cases scoliosis is idiopathic, i.e. there is no known cause.

Scoliosis can worsen very quickly during adolescence because the child is growing fast at this time. As a parent you shouldn’t blame yourself for not spotting the curvature sooner. The child’s scoliosis will probably have developed very quickly and can seem to appear out of nowhere. What might have been a straight spine a few weeks before may suddenly show signs of curving.

After surgery many people think that they cannot take part in activities such as horse riding, sky diving, and contact sports. Most patients will be able to do these things after a time. However, it is very important to check with your specialist to make sure you are back to full health before taking part in such activities.

With all surgery there are risks, and with spinal surgery there is a very small chance of paralysis. The important thing to remember is that paralysis happens very rarely. The scoliosis specialists weigh up all the pros and cons. If they think the risks are too great they won’t do the operation.

Just because you are diagnosed with scoliosis does not mean you will need to have an operation. If the curve is very big or growing very quickly surgery might be recommended. However, many people simply need to have their spine checked regularly to make sure the curve isn’t getting bigger.
How Scoliosis Association (UK) can help

Finding out that you or your child has scoliosis can be a shock. Many people have never heard of scoliosis and don’t have an understanding of the effect it can have on lives. Having scoliosis can leave people feeling isolated and unsure where to turn.

SAUK is the only national support organisation in the UK for people with scoliosis. We provide advice and support to people who are affected by scoliosis and raise awareness about the condition. At SAUK we aim to be there for people with scoliosis and those close to them so that we can help to reduce feelings of isolation, poor body image, inadequate care, needless pain, worry, fear, and lack of information.

Advice and information

Through its Helpline, SAUK offers confidential advice and support for people with scoliosis and their families. SAUK’s website provides up-to-date reliable information and advice about scoliosis and treatment options. We also hold patient meetings, which allow people the opportunity to hear from specialists and experts, get answers to their questions, and talk to others affected by scoliosis.

Finding a specialist

If you are diagnosed with scoliosis it is very important that you see a specialist. SAUK can tell you who your nearest scoliosis specialists are.

Talking to others

SAUK’s membership network allows us to put people with scoliosis and their families in touch with others who have been through similar experiences. Many members have found the support and advice of other members to be a great comfort.
Contact SAUK
Website: www.sauk.org.uk
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