

Current Status of Adult Spinal Deformity

Abstract

Purpose To review the current literature for the nonoperative and operative treatment for adult spinal deformity.

Recent Findings With more than 11 million baby boomers joining the population of over 60 years of age in the United States, the incidence of lumbar deformity is greatly increasing. Recent literature suggests that a lack of evidence exists to support the effectiveness of nonoperative treatment for adult scoliosis. In regards to operative treatment, current literature reports a varying range of improved clinical outcomes, curve correction, and complication rates. The extension of fusion to S1 compared with L5 and lower thoracic levels compared with L1 remains a highly controversial topic among literature.

Summary Most adult deformity patients never seek nonoperative or operative treatment. Of the few that seek treatment, many can benefit from nonoperative treatment. However, in selected patients who have failed nonoperative treatment and who are candidates for surgical intervention, the literature reflects positive outcomes related to surgical intervention as compared with nonoperative treatment despite varying associated ranges in morbidity and mortality rates. If nonoperative therapy fails in addressing a patient's complaints, then an appropriate surgical procedure that relieves neural compression, corrects excessive sagittal or coronal imbalance, and results in a solidly fused, pain-free spine is warranted.

成人脊柱畸形的現狀

目的 回顧目前有關以非手術和手術治療成人脊柱畸形的文獻。

最近結果 在美國，超過 11 萬嬰兒潮的人加入超過 60 歲的年齡人口，腰椎畸形的發病率大大增加。最近的文獻顯示缺乏證據支持以非手術治療成人脊柱側凸的有效性。在手術治療方面，目前文獻報告了不同範疇的臨床結果得以改善，曲線校正，和並發症發生率。延伸融合至 S1 與 L5 相比，和融合至下胸椎節段和 L1 相比，仍然是在文獻間一個極具爭議的話題。

摘要 大多數成人畸形患者從未尋求非手術或手術治療。尋求治療的少數中，很多可以從非手術治療中獲益。然而，在以非手術治療失敗的患者和適合進行以手術治療的患者中，儘管存在不同範圍的發病率和死亡率，文獻反映了與非手術治療相比，以手術治療的正面

的結果。如果非手術治療未能處理病人的問題，之後以適當的外科手術解除神經壓迫，糾正過度的矢狀切面或冠狀切面不平衡，最後得到一個穩固融合和無痛楚的脊柱是必要的。