



Understanding Scoliosis: Types, Symptoms and Diagnosis

Scoliosis is a sideways curvature of the spine, often diagnosed in adolescents, though it can also develop later as adult-onset or degenerative scoliosis. Normally, the spine curves slightly forward and backward, but in scoliosis, it curves sideways, forming a “C” or “S” shape.

While some cases are linked to conditions like cerebral palsy or muscular dystrophy, the cause of most childhood scoliosis remains unknown. Mild cases are common, but severe scoliosis can lead to complications and reduced mobility.

Types of Scoliosis

- **Idiopathic Scoliosis:** The most common type with no identifiable cause, though genetics may play a role.
- **Congenital Scoliosis:** Rare, caused by improper spinal formation in the embryo, often detected at birth.
- **Neuromuscular Scoliosis:** Linked to conditions like cerebral palsy or muscular dystrophy, where nerve or muscle abnormalities affect spinal alignment.

Classification by Age

- **Infantile:** Below 3 years
- **Juvenile:** Ages 4–10
- **Adolescent:** Ages 11–18
- **Adult Idiopathic:** After age 18

Symptoms of Scoliosis

- Uneven shoulders, waist or hips
- A prominent shoulder blade or ribcage on one side
- Visible prominence on one side of the back when bending forward

In severe cases, the spine may twist, causing ribs or muscles on one side to protrude.

Diagnosis

Diagnosis begins with a physical exam:

- Assessment of spine shape and flexibility
- Testing reflexes and muscle strength
- Reviewing medical and family history
- Imaging tests like X-rays, MRIs or CT scans for detailed evaluation

If diagnosed, patients are referred to an orthopaedic spine specialist. Scoliosis is most commonly detected during adolescence (age 10–15).

