



DSTEOCHONDRITIS DISSECANS **>>>**



What is Osteochondritis Dissecans?

Osteochondritis dissecans (OCD) is a condition in the joints where the cartilage in the joint along with a small segment of the bone beneath it begins to loosen. This occurs most often in physically active adolescents and most frequently affects the knee, but may also affect the ankle, elbow and other joints.

OCD lesions are thought to be caused by decrease in blood flow which may be due to repetitive trauma or stresses to the bone over time. In many cases of OCD in children, especially when they are still growing, the affected bone and cartilage will heal on its own. However, in some cases there may be pieces of both cartilage and bone that breaks off into the joint, which can lead to pain and long term damage such as arthritis.

What are the symptoms?

- Pain
- Swelling
- Joint catching or locking

What tests do I need?

X-ray - Will be needed for an initial OCD diagnosis, and to evaluate the size and location of the OCD lesion.

MRI - Will reveal the how much the cartilage is affected.





What are the treatment options?

Observation - OCD lesions in growing adolescents in most cases heal on their own. Rest and avoiding vigorous physical exercises will help reduce the pain and swelling.

Nonsurgical - If symptoms persist, the use of crutches, a brace or splinting or casting of the affected joint area for a short period of time may be recommended. In most cases, symptoms improve in a couple of months.

Surgical - Treatment may be recommended if:

- Nonsurgical methods are ineffective
- The lesion is very large (greater than 1 cm in diameter)
- The a fragment from lesion has detached and is moving around in the joint
- Your child's knee bones are done growing

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IDIOPATHIC SCOLIOSIS >>>

Frequently asked questions

Did my poor posture or heavy backpack cause my scoliosis?

The cause of scoliosis is unknown, and poor posture and carrying heavy backpacks neither cause nor progress the development of the curve.

Will my siblings get scoliosis?

Because scoliosis runs in families, there is a higher risk for siblings of patients with scoliosis to also be diagnosed with scoliosis. Younger siblings of patients should get examined and undergo observation during times of rapid growth.

Are there exercises, yoga, pilates or physical therapy I can do, or can a Chiropractor help fix the curve in my back?

There is no research that has proven that exercises or chiropractic medicine helps decrease the curve of scoliosis. However, core strength can encourage general aback health for all individuals.

What activity restrictions are there for people with scoliosis?

There are no activity restrictions for people with untreated idiopathic scoliosis.

What are problems that can arise from scoliosis?

With scoliosis, patients can present with asymmetry in the back, in shoulder height, hip prominence or height. While normally this causes only cosmetic issues, one problem that can arise from the asymmetry is back pain from unequal muscle development. Usually the back pain is mild and doesn't affect normal activities. However, if back pain is severe the patient should be closely examined to look for other possible causes. In severe cases of scoliosis, lung function can be impaired as a result of stiffness and torsion in the ribs.

Will scoliosis affect my ability to have a child in the future?

Studies have shown that scoliosis will have no affect on pregnancy, and the patients will be able to live a normal life. Also, pregnancy hasn't been shown to progress an untreated curve in skeletally mature adults.

Will scoliosis make me more prone to other bone conditions in the future, such as osteoporosis?

While there is some scientific debate about the relationship between scoliosis and osteoporosis, no scientific evidence has been show to prove a correlation between the two conditions.

The best way to prevent osteoporosis is to intake a lot of calcium, vitamin D, not smoke, and to do weight bearing exercises.

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Am I going to need surgery? When would I need surgery?

The need for surgery is dependent on many factors, including the size of your curve, age, physiologic maturity, location, and progression of the curve. There is no set age that patients undergo surgery and the surgery is performed depending on the above factors. The best surgical prevention is routine observation and monitoring of the curve with your orthopaedic surgeon.

Will surgery make my back completely straight?

While there is a lot of correction in the straightness of the spine during surgery, the spine is never completely straightened and most likely there will still be a small curve following surgery.

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