Case studie "HELGA"

Every scoliosis, even a large one, begins with a minimal curve, perhaps due to body weakness or slumping in one's seat. It grows, initially unnoticed, into a visible spinal curve if nothing is done to prevent it.
If at this point counterproductive exercises (see the book, illustrations 336 to 433) are performed, as in Helga's case, the abnormal spinal curve will increase. The whole body will lapse into misalignment, with all its risks of poor health and pain. For patients with severe scoliosis, five or ten degrees one way or another make little difference. What is important is that the form improve and discomfort is alleviated even though the scoliosis is still present.

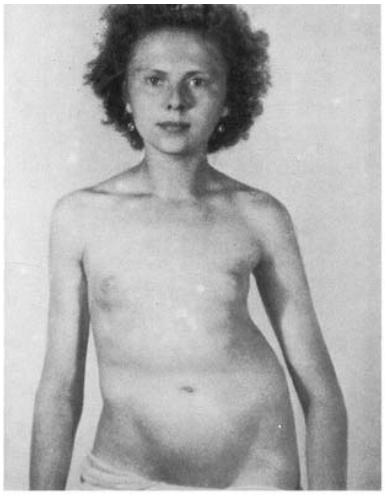

Fig. 1a

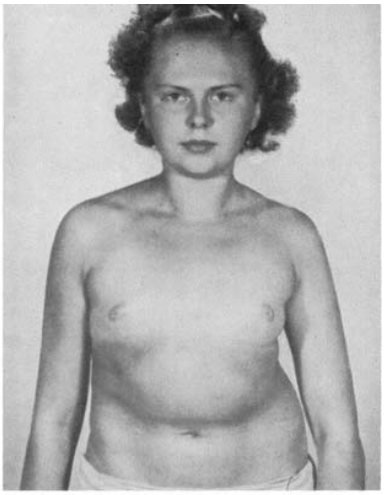

Fig. 1b

Improvement in form is also traceable in X-ray drawings. The pictures stem from a time when we had almost no X-rays to deal with, and particularly no total-spinal views which today are common.

Fig. 1c

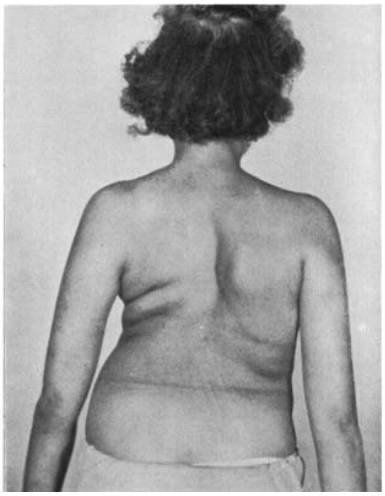

Fig. 1d

We invented our own measurement techniques. We measured the vertebrae that are visible on the two a-p X-rays, in this case L3 to T6. On the drawing on the left, a few other vertebrae are clearly visible above. On the drawing on the right, a few lower vertebrae can be discerned which cannot be included in the measurement.

Fig. 1a und c:
Helga at 16 years with severe scoliosis and stark form dislocation. The patient had created an artificial padded hip on the right side to disguise her imbalance.

Fig. 1b und d:
Helga following 3 months treatment according to Schroth. Weight gain: 8 kilograms.

A distinctive point is chosen which is common to and clearly visible on both X-rays. We draw a horizontal line through it.
Then we look for two points which deviate laterally furthest from the midline. Here they are on the lumbar spine left at L2, and on the thoracic spine on the right at T7/8. These two points are connected vertically with the lower and the upper horizontal lines. The result is a rectangular frame, which in this case has a height of 24.4 cm and a width of 16 cm.
After eleven weeks of treatment the height of this rectangle had increased by 1.4 cm to 25.8 cm and the width decreased 2 cm to 14 cm. In total height, the girl had become 3.5 cm taller. Her hip, shifted laterally to the left, has become more centered. The lateral rib hump extension on the right has decreased. The spinal curves no longer appear so extreme, although this is not visible in the X-ray and the curve angles have hardly improved.
Measurement of these X-ray drawings show a reduction of thoracic curve from 98 to 92 degrees and lumbar from 85 to 82 degrees. A positive result was a significant improvement in overall appearance. The patient was very pleased.

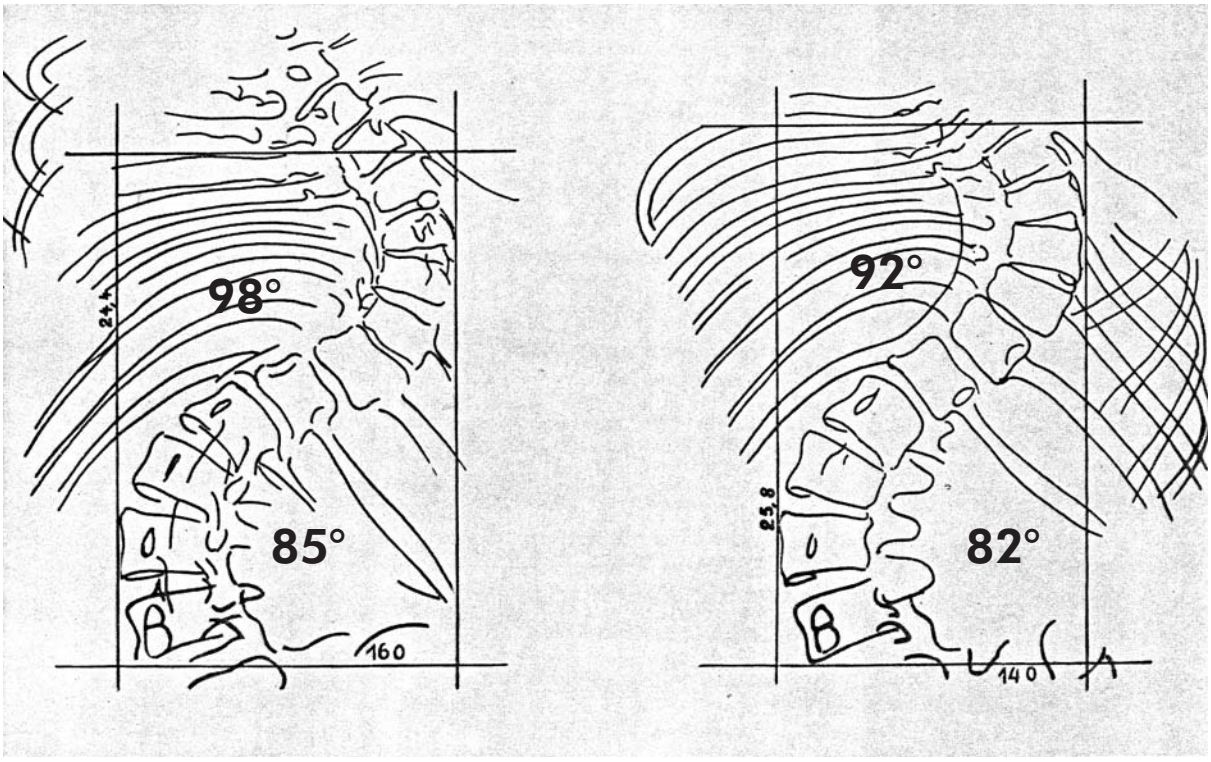

Fig. 2a
Drawing of Helga's X-ray photo at the beginning of treatment.

Fig. 2b
Drawing of X-ray photo of Helga after 11 weeks of Schroth treatment. The two rectangles, which intersect identical vertebrae in Figs. 2a and b, show the improvement in height and derotation.