

Scoliosis Reduction Center[®] Case Study

Name: Ronica B Type: Idiopathic Age: Adolescent (10-18) Severity: Severe (40°/45° - 80°)

BY DR. TONY NALDA

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Initial Evaluation:

During Ronica's initial assessment, her scoliosis was measured at 53.1 degrees, categorizing it as severe. At that time, she reported discomfort in her back and right shoulder, along with difficulties performing many daily activities. Some of these included transitioning from sitting to standing, climbing stairs, using a computer for extended periods, and engaging in general household chores. Her evaluation was conducted through a thorough and comprehensive process.

Before Meeting Dr Tony:

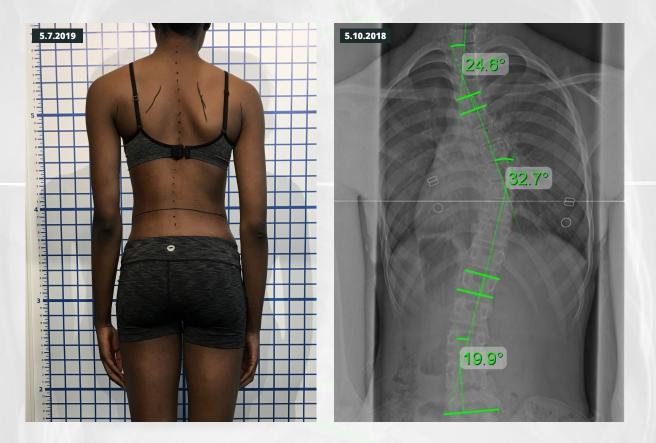
Ronica's family observed the onset of her scoliosis and consulted her pediatrician, who referred her to a pediatric orthopedic specialist. Following an assessment, she was diagnosed with scoliosis with a curvature in the 30-degree range and was prescribed a Boston brace, aligning with standard medical protocol. After wearing the brace for one year, Ronica outgrew it, and her orthopedic specialist recommended surgery due to an increase in curvature to 48 degrees—a course of action the family was reluctant to pursue.



Mid-Treatment

Challenging Aspects of this Particular Case:

The patient initially resided in Canada, which added complexity to her care and treatment logistics.



Treatment Modalities Used:

- Standing Vibrating Traction Used to elongate the spine while standing on vibration. the vibration
 helps to amplify anything we do while on the traction. We can customize this traction using weights
 and exercises to target specific areas of the spine from the cervical to the lumbar.
- Vibrating Traction Low tone vibration traction used to relax ligaments of the spine.
- Flexion Distraction provides traction to the lumbar spine, by added the straps we are able to create counter rotations and unbend the specific areas of the scoliosis.
- Mechanical Drop Piece low tone vibration to help mobilize the rib cage and reduce stiffness associated with scoliosis.
- Scoliosis Traction Chair targeted traction and derotation focusing on the thoracic and lumbar areas not possible with other types of traction while promoting relaxation and potential curve reduction.

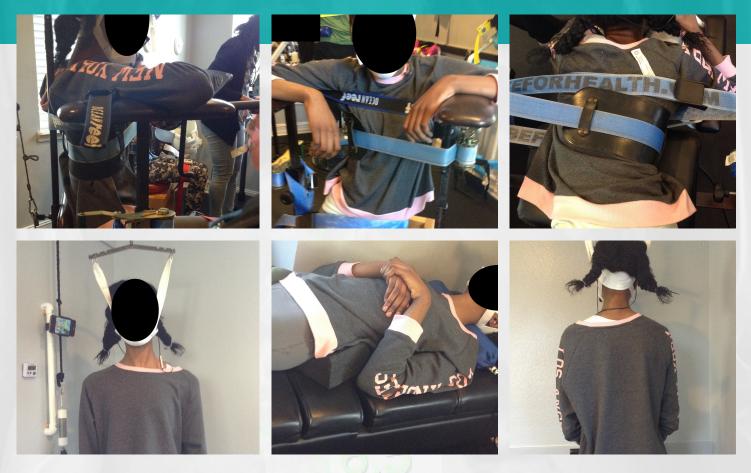
Re-evaluation Checkpoints:

After her initial treatment, Ronica's family made the proactive decision to relocate to Florida temporarily to be closer to the clinic and ensure she received optimal care. During this time, Ronica attended weekly treatment sessions. Following a 90-day period, she underwent a comprehensive re-evaluation, which included an update on her post-treatment progress, x-rays, and posture assessments. These evaluations revealed significant improvements in her posture and a reduction in her scoliosis, placing it in the mild category. Ronica was advised to continue her current treatment plan and return for another evaluation in 90 days.

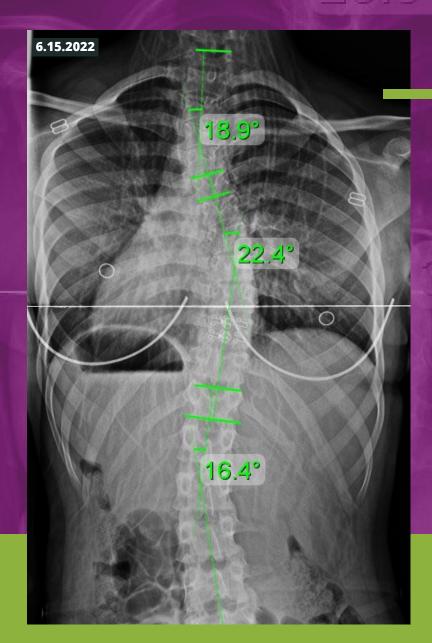
At her next re-evaluation, Ronica maintained her mild scoliosis classification, reported minimal discomfort, and demonstrated improved daily living activities. It was recommended that she continue her existing plan, along with a brace modification for enhanced correction, which her family agreed to. With ongoing compliance in her home treatment and brace wear, Ronica's subsequent evaluation indicated she was maintaining her scoliosis status while experiencing normal growth—1.5 inches in height and a weight gain of approximately 34 pounds. Due to her growth, a new ScoliBrace was recommended to provide optimal stabilization, and her family, eager to support her progress, proceeded with this plan before relocating from Florida for work.

After 90 days, Ronica submitted the necessary reevaluation information gathered locally. Her assessment indicated continued curve stabilization, adherence to her home care plan, further improvements in posture, and minimal discomfort with no difficulties in daily activities. She was advised to maintain her current home care regimen and plan for another evaluation in 90 days.

Although the next evaluation was conducted nearly six months later, it showed that Ronica's scoliosis remained stable in the mild category. With her goals focused on reducing brace wear time, she was recommended to enter the weaning phase of her treatment, with plans to re-evaluate in six months. Through careful monitoring and gradual reduction of brace wear, Ronica successfully stabilized her scoliosis and further improved her posture.



Long-Term Results:



Ronica has experienced remarkable long-term improvements due to her dedicated home care and consistent adherence to prescribed brace wear. It is currently recommended that she continues to monitor her progress through annual evaluations.

