

## DOES A DEDICATED SPINE DEFORMITY TEAM IMPROVE THE EFFICIENCY AND PERIOPERATIVE OUTCOME IN ADOLESCENT IDIOPATHIC SCOLIOSIS (AIS) SURGERY?

<sup>1</sup>Aw, WO; <sup>1</sup>Chung, WH; <sup>2</sup>Hasan, MS; <sup>1</sup>Chiu CK; <sup>1</sup>Chan, CYW; <sup>1</sup>Kwan, MK

<sup>1</sup>Department of Orthopaedic Surgery (NOCERAL), University of Malaya, Kuala Lumpur, Malaysia.

<sup>2</sup>Department of Anesthesiology, University of Malaya, Kuala Lumpur, Malaysia.

### INTRODUCTION:

Despite growing advances in the adolescent idiopathic surgery, complications become an inevitable challenge.

The concept of a dedicated team has been described and recommended with growing evidence in order to offer standardised high-level care and improve cost effectiveness.<sup>1-3</sup>

### METHODS:

We retrospectively analysed the data of 100 AIS patients treated by a dedicated spine deformity team between September 2019 until June 2020. Throughout this period our institution utilised a dedicated team.

### RESULTS:

All patients had undergone deformity correction and posterior spinal fusion surgery. The mean number of fusion levels was  $11.4 \pm 2.1$ . The mean major Cobb angle was corrected from  $63.5 \pm 17.2^\circ$  preoperatively to  $24.0 \pm 10.9^\circ$  with a mean correction rate of  $63.2 \pm 10.6\%$ . The mean surgery time was  $105.6 \pm 24.8$  mins, the mean intraoperative blood loss was  $686.3 \pm 359.6$  mL, and the mean length of hospital stay was  $3.9 \pm 0.7$  days. One patient (1.0%) had allogenic blood transfusion. Perioperative complications occurred in 1 patient (1.0%) with superficial surgical site infection as a minor complication.

### DISCUSSIONS

The results of this study have shown that a dedicated spine deformity team leads to improved intraoperative efficiency and perioperative outcomes of posterior correction surgery for AIS. The implementation of a dedicated deformity team in our center has enhanced

communication and increased the team familiarity to this complex surgery.

### CONCLUSION:

The usage of a dedicated team for AIS corrective surgery resulted in acceptable correction of scoliosis with a short surgery time, short total time in operation theatre, low intra operative blood loss, short length of hospital stays and low complication rate. The long-term safety and efficiency of a dedicated team should be evaluated with further follow up and a larger cohort.

### REFERENCES:

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