

Vertebral Transverse Open Wedge Osteotomy in Correction of Thoracolumbar Kyphosis Resulting from Ankylosing Spondylitis

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Abstract : In progressive cases of Ankylosing Spondylitis, patients will have high degrees of kyphosis leading to severe disabilities. Several operative techniques have been used in this stage, but little knowledge exists on the indications for and outcome of these methods. In this study, we examined the efficacy of monosegmental transverse open wedge osteotomy of L3 in 11 patients with progressive spinal kyphosis. The average correction was 36° (20 to 42) with no loss of correction after operation. The average operating time was 120 minutes (100 to 130) and the mean blood loss was 1500 ml (1100 to 2000). Osteotomy corrected all patients sufficiently to allow them to see ahead and their posture was improved. There were no fatal complications but one patient had paraplegia after the operation.

Keywords : ankylosing spondylitis, thoracolumbar kyphosis, open wedge osteotomy, L3 transverse open wedge osteotomy

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