

# Evaluation of the Rigo classification system for brace design

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# BACKGROUND

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# King classification system



Type I



Type II



Type III

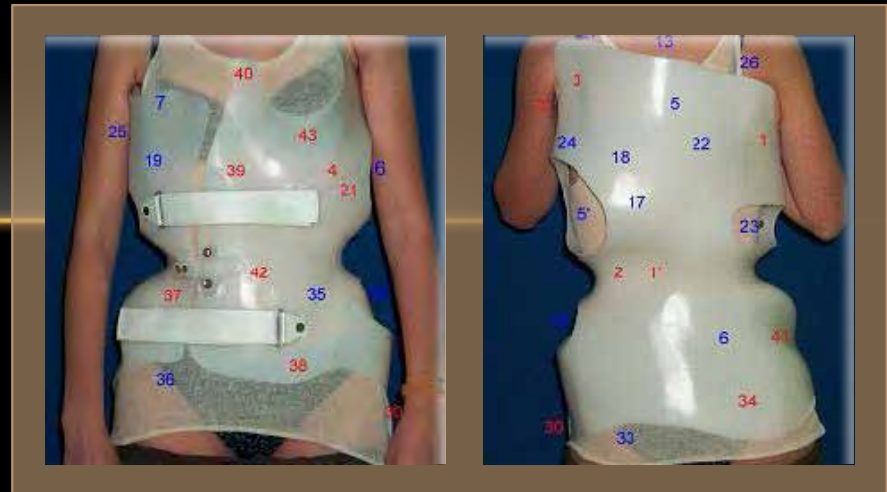
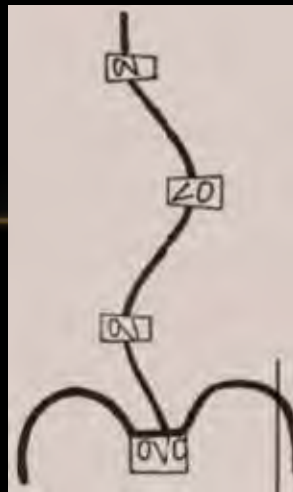
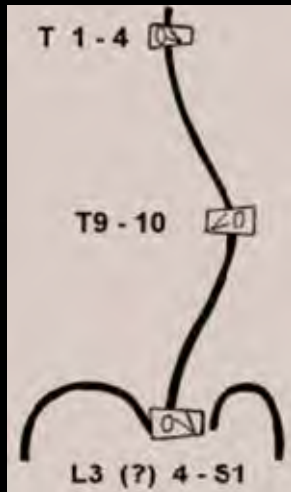


Type IV

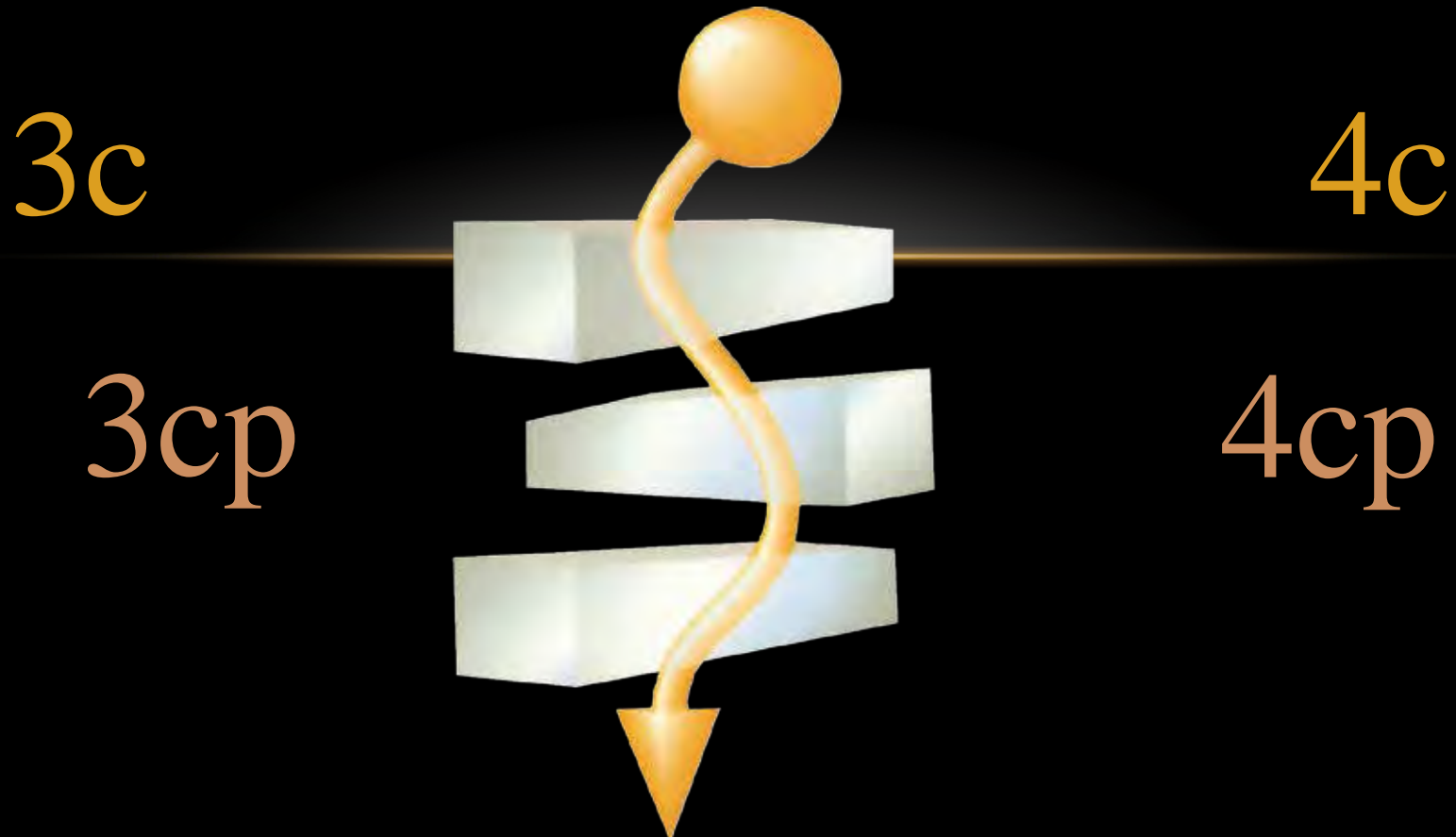


Type V

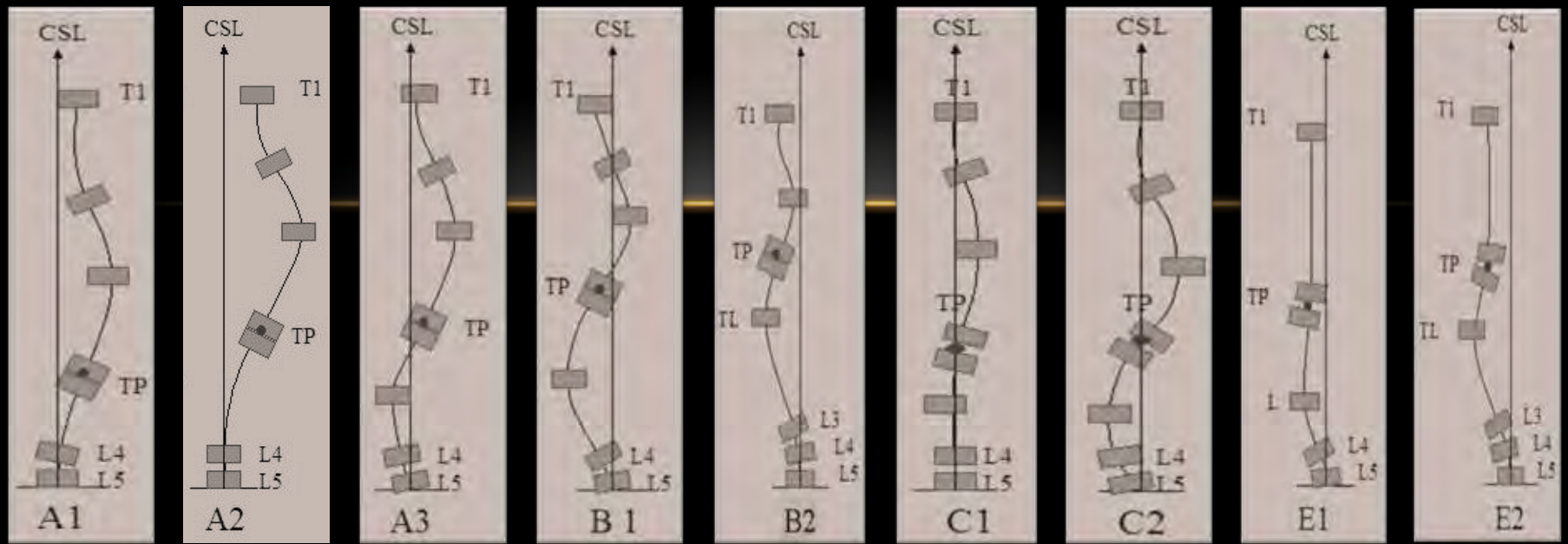
# Cheneau brace Concepts



# Lehnert – Schroth classification



# Rigo classification





# AIM

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# Evaluation of the Rigo Classification for fabrication of braces for Scoliosis

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# DESIGN

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# Duration

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27 months

July 2011 - October 2013

243

patients with AIS

220 Females

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23 Males

# AGE

5y – 17y average 13.3y

# Cobb angle

Thoracic average  $35^{\circ}$  ( $15^{\circ}$  -  $78^{\circ}$ )

Lumbar average  $29^{\circ}$  ( $12^{\circ}$  -  $71^{\circ}$ )

# Treatment Plan

Rigo – Cheneau Brace 21/24h  
+  
exercises (Schroth + SEAS)



# METHODS

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# Inter and Intra observer reliability

- In every case individually
- For the total of the cases

# EVALUATION TEAM

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1 - Orthopaedic surgeon (also CPO certified)

2 - Physiotherapist (Schroth and SEAS certified).

# Evaluation methods

- Patient Examination every 3 months
  - Posture and Cobb angle by Formetric 4D
  - Brace adjustments
  - Posterior-anterior pictures for aesthetic evaluation
- One in – brace X-ray

# RESULTS

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# Patients Classification

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A1 13 patients

A2 9 patients

A3 41 patients

B1 66 patients

B2 28 patients

C1 20 patients

C2 26 patients

E1 22 patients

E2 18 patients

# Constant **Inter-observer** evaluation before construction. MD versus PT

Constant INTER - OBSERVER Kappa coefficient: MD versus PT

		PT										
		A1	A2	A3	B1	B2	C1	C2	E1	E2		
MD	A1	7	0	0	0	0	1	0	0	0	0	6
	A2	7	3	0	0	0	0	0	0	0	0	10
	A3	8	1	28	0	0	0	6	8	0	0	51
	B1	0	0	0	52	2	1	10	3	2		70
	B2	0	0	0	18	6	0	2	1	1		31
	C1	2	0	4	0	0	9	1	0	1		17
	C2	0	0	6	1	1	0	10	1	0		19
	E1	0	0	0	2	2	0	0	13	4		21
E2	0	0	0	0	4	0	0	4	8		16	
		24	4	38	73	15	10	31	22	15	243	

Kappa coefficient:

**0.4904**

$$P_c = \frac{0,7901 + 0,1646 + 7,9753 + 21,0288 + 2,4238 + 1,1193 + 2,4238 + 1,9012 + 1,0534 + 38,8803}{243} (=) 0,1600$$

$$P_o = \frac{7+3+28+52+9+9+10+13+8}{243} = 139 (=) 0,5720$$

$$K = \frac{P_o - P_c}{1 - P_c} = \frac{0,4120}{0,8400} (=) 0,4904$$



# Last Inter-observer evaluation.

# MD versus PT

Last INTER-OBSERVER Kappa coefficient MD versus PT

		PT									
		A1	A2	A3	B1	B2	C1	C2	E1	E2	
MD	A1	8	1	2	0	0	2	0	0	0	13
	A2	0	9	0	0	0	0	0	0	0	9
	A3	0	0	39	0	0	0	0	3	1	43
	E1	0	0	0	63	0	0	0	3	0	66
	E2	0	0	0	0	27	0	0	1	0	28
	C1	0	0	0	0	0	11	0	0	0	11
	C2	0	0	0	1	1	1	0	18	0	20
	E1	0	0	0	2	1	0	0	19	0	22
	E2	0	1	0	2	1	0	0	0	14	18
		8	11	39	71	28	15	20	25	15	243

Kappa coefficient:

**0.8408**

$$P_c = \frac{0,4279 \quad 0,4074 \quad 8,6419 \quad 19,2839 \quad 3,4567 \quad 1,2345 \quad 2,0576 \quad 2,0823 \quad 1,1111 \quad 38,7033}{243} \quad (=) \quad 0,1592$$

$$P_o = \frac{8+9+39+63+27+13+18+19+14}{243} \quad 210 \quad (=) \quad 0,8641$$

$$K = \frac{P_o - P_c}{1 - P_c} = \frac{0,7049}{0,8408} \quad (=) \quad 0,8312$$

# Last Intra-observer evaluation.

# MD versus MD

Last INTRA-OBSERVER Kappa coefficient: MD versus MD

	A1	A2	A3	B1	B2	C1	C2	L1	L2	
A1	13	0	0	0	0	0	0	0	0	13
A2	0	9	0	0	0	0	0	0	0	9
A3	0	0	41	0	0	0	0	0	0	41
B1	0	0	0	66	0	0	0	0	0	66
B2	0	0	0	0	28	0	0	0	0	28
C1	0	0	0	0	0	20	0	0	0	20
C2	0	0	0	0	0	0	24	0	0	24
L1	0	0	0	0	0	0	0	20	0	20
L2	0	0	0	0	0	0	0	0	17	17
	13	9	41	66	28	20	24	20	17	243

Kappa coefficient:

**0.9756**

$$P_c = \frac{0,6954 \quad 0,3333 \quad 7,0864 \quad 18,1893 \quad 3,4567 \quad 1,6460 \quad 2,5679 \quad 1,8106 \quad 1,2592 \quad 37,0448}{243} (=) 0,1524$$

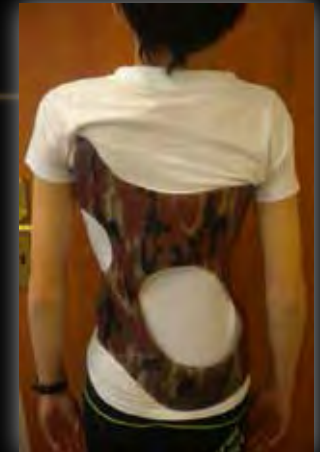
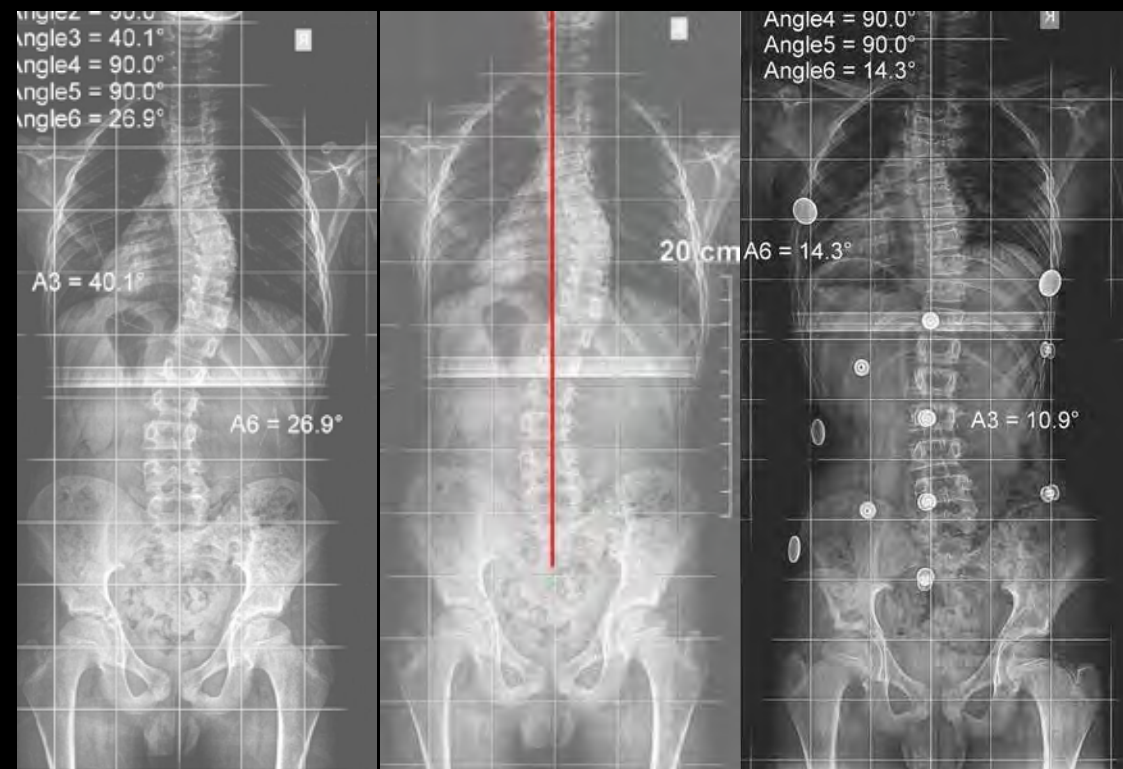
$$P_o = \frac{13+9+41+66+28+20+24+20+17}{243} = 238 (=) 0,9794$$

$$K = \frac{P_o - P_c}{1 - P_c} = \frac{0,9794 - 0,1524}{1 - 0,1524} = \frac{0,8270}{0,8476} (=) 0,9756$$

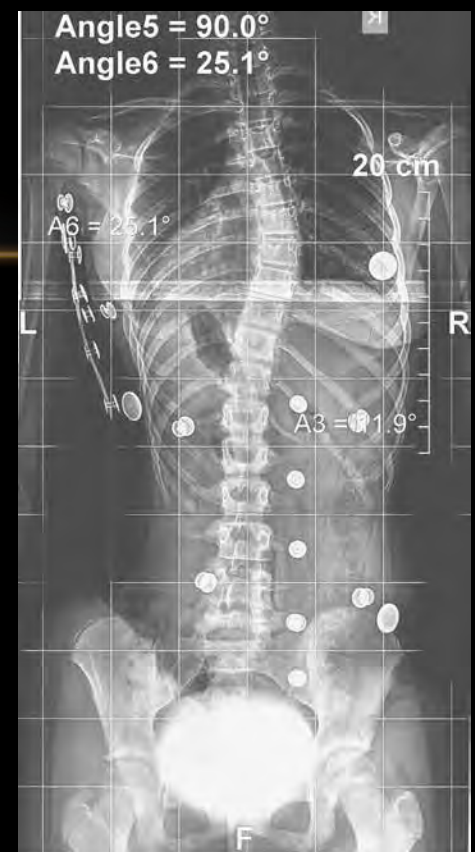
# Cobb in brace Correction

Thoracic correction average 39 %

# Thoracic maximum of correction 65 %



# Thoracolumbar maximum of correction even 78 %

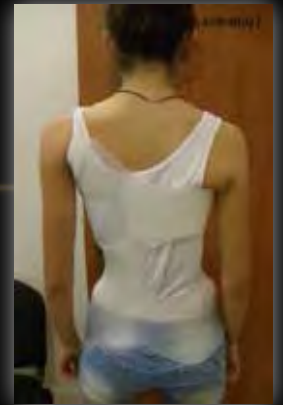
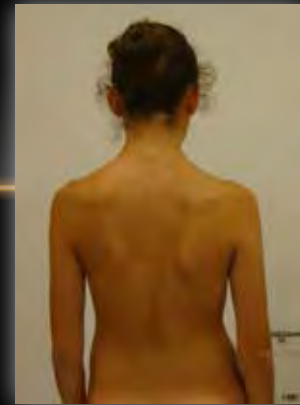


# Cobb in brace Correction

Lumbar correction average **46** %



# Lumbar Maximum of correction 91 %



# Aesthetic evaluation

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# TRACE

- Shoulders asymmetry
- Scapulae asymmetry
- Hump and hemi thorax asymmetry
- Waist asymmetry (pelvis inclination, rotation and deviation)



53 % in Brace  
correction

11 months after



76 % in Brace  
correction

27 months after



17 months after

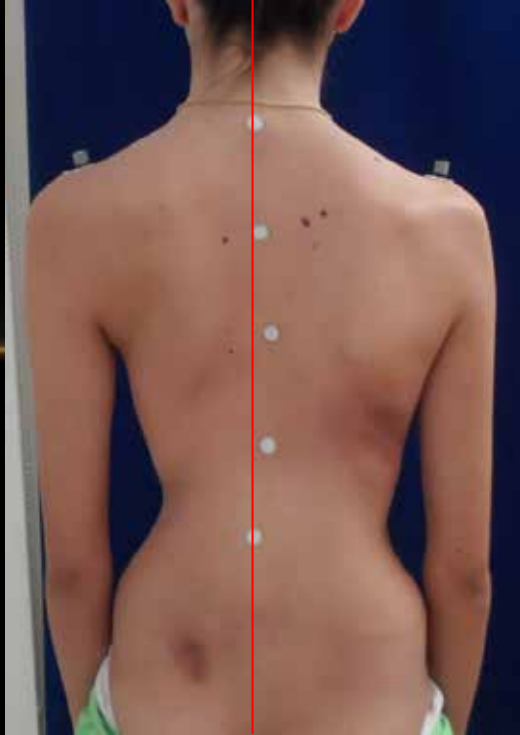
17 months after  
58 % Out of the  
Brace correction



49 % In brace  
correction

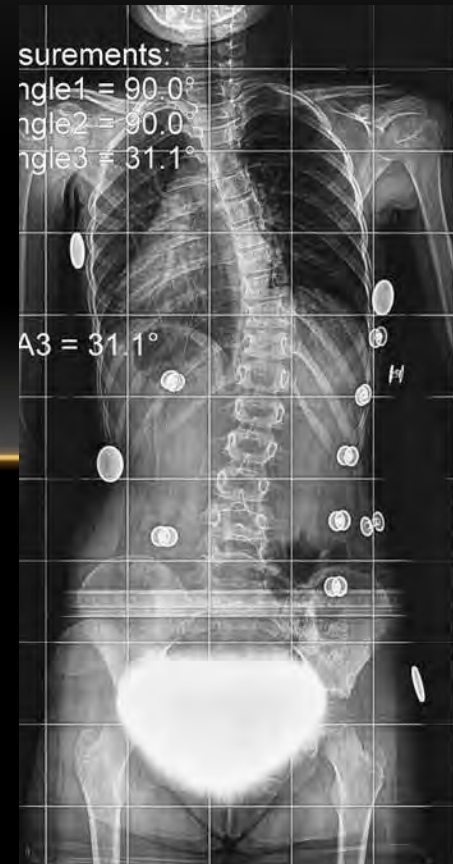
7 months after  
correction





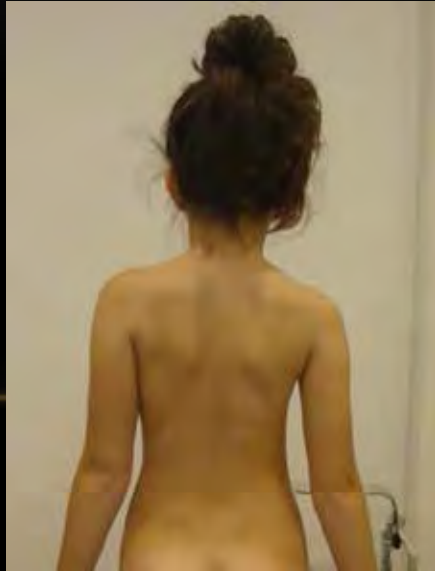
48 % in Brace correction

12 months after



1 week later  
43 % in Brace  
correction

18 months after  
69% Out of brace  
correction



33 months after

33 months after



33 months after



All the patients out of the brace had a  
better appearance, balance and  
aesthetics

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The percent of correction and the aesthetic appearance was depended not only from the brace

- the skeletal maturity
- the patient's compliance
- the performance of exercises

# CONCLUSION

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The Rigo classification system was verified  
in our opinion

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to be excellent for RSB brace fabrication  
and  
consequently for a successful treatment of  
scoliosis

Which was verified not only  
in the in - brace results

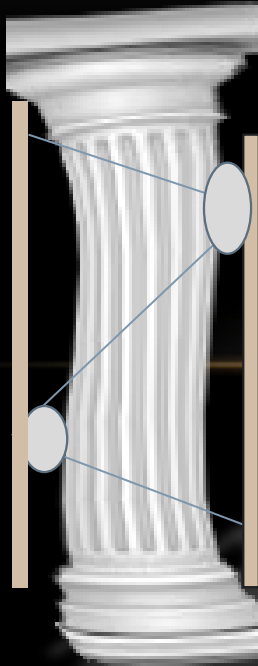
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But also in the  
out of the brace results

We don't know if it will be the same  
excellent for other brace types

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such as Boston, Sforzesco etc.  
as they used other techniques  
and principles



Thank you