Surface Topography and Body Deformity

Proceedings of the 5th International Symposium September 29 – October 1, 1988 Wien

Edited by Hermann Neugebauer and Gerhard Windischbauer

4 colour-plates, 191 figures and 26 tables



Comparison of side moiré topographs of children in standing, sitting and bending positions

S. A. Kamal¹, N.Bukhari² and M. Akram¹ Department of Physics¹, University of Karachi, Karachi Institute of Physics and Technology², University of Sind, Jamshoro (Sind), Pakistan.

Abstract

Moiré topography is being increasingly used in the study of scoliosis. For a child suffering from scoliosis moiré topographs on the two halves of the back are not similar. Since scoliosis a lateral curvature of the spinal column it should also effect moiré topographs of the side. The effect is expected to be more prominent when the child is examined in the forward bending position. This paper reports an ongoing study which will include side moiré topographs of one hundred normal, healthy eight to ten years old boys studying in a local school in Hyderabad.

Introduction

Different noninvasive methods used for the documentation of spinal deformity have helped a lot in understanding the nature of diseases like scoliosis and kyphosis. Moiré topography is now routinely used in the screening of scoliosis in many countries. Most of these studies are concerned with the topographs of the back. However, with the interest in scoliosis there is suddenly an interest in kyphosis and sagittal plane deformities. Moreover, spinal deformity is a threedimensional problem. Three-dimensional models of spine have been developed by various groups (e.g. Hierholzer and Lüxmann 1982; Kamal 1982; 1983; 1987). Some studies have already included side topographs (Suzuki, Armstrong and Armstrong 1981; Kamal and El-Sayyad, 1981).

There is a need for a detailed study of side topographs of healthy children to provide reference for scoliotic patients. With the interest in comparing back moiré topographs of children (Kamal, Bukhari and Akram 1988) it is of interest to compare also the side moiré topographs of children in the standing and sitting positions. During the forward bend test the level of scapula does not remain same for a scoliotic patient. Bulging on one side or the back would also have

a prominent effect on the side topograph taken during the forward bending position. Therefore there is a need of studying side topographs of children in the standing, sitting and forward bending positions.

Experimental

We are studying side topographs of children in the standing, sitting and forward bending positions. The moiré set up is described elsewhere (Kamal, Bukhari and Akram 1988). The children are 8 to 10 years old boys studying in a local school in Hyderabad. The children come from a representative group of children in an urban population in Pakistan. Each child is given a bending test and marked on side. With a skin marker two marks are made, one at the level of nipples and the other at the level of naval. The child is asked to stand relaxed looking straight ahead with arms held in front and his moiré photograph is taken. Then the child is seated with arms held in front and his picture taken. Finally the child is asked to touch (or try to touch) his tows behind the moiré screen and his moiré topopraph is obtained. These three moiré photos for each child are compared to find any significant changes in these positions in normal, healthy children.

Conclusions

This study involving side topographs of healthy children will provide a database to compare with side topographs of scoliotic patients. During the sitting and standing positions, the forces on the spinal column are almost same and so the side topographs are not expected to be very much different. However, in the bending position the

structure changes significantly and so the side topographs are expected to be different. Rounding at shoulders should increase the density of moiré fringes in that area. Further studies in this area could involve side topographs in the sitting forward bending position, bending in the other direction, side topographs with hands held above the head and side topographs of children in the hanging position. These studies would help improve the existing models of the spinal column.

Acknowledgement

The authors would like to thank Shamsuddin Usmani, Principal, Latif Niazi Memorial School, Latifabad, Hyderabad for providing facilities in the school premises to conduct the study.

References

-Hierholzer E. and Lüxmann G. (1982), Three dimensional shape analysis of the scoliotic spine using invariant shape parameters. J. Biomechanics 15: 583-598.

Kamal S.A. (1982), Moiré topography for the measurement of angle of spinal curvature in three dimensions. Bull. Amer. Phys. Soc. 27: 301

(poster presentation).

-Kamal S.A. (1983), Determination of degree of correction of spinal deformity by moiré topographs. In: Moiré Fringe Topography and Spinal Deformity, Proceedings of the 2nd International Symposium. Ed.: Drerup B., Frobin W., Hierholzer E.; Gustav Fischer Verlag, Stuttgart - New York: 117-126.

-Kamal S.A. (1987), Moiré topography for the study of multiple curves of spine. In: Surface Topography and Spinal Deformity, Proceedings of the 4th International Symposium. Ed.: Stokes I.A.F., Pekelsky J.R., Moreland M.S.; Gustav Fischer Verlag, Stuttgart - New York: 43-50. -Kamal S.A., Bukhari N. and Akram M. (1988),

A comparison of back moiré topographs of children in the sitting and standing positions. In: Surface Topography and Body Deformity (this

volume)

-Kamal S.A. and El-Sayyad, M.M.(1981), The use of moiré topographs for the detection of orthopedic defects in children of age group four to seven years. Med. Phys. 8: 549 (presented by

title).

-Suzuki N., Armstrong G.W.D., Armstrong J. (1981), Application of moiré fringe topography to spinal deformity. In: Moiré Fringe Topography and Spinal Deformity, Proceedings of the First International Symposium. Ed.: Moreland M.S., Pope M.H., Armstrong G.W.D.; Pergamon Press, New York:225-240.