Scoliosis Patients Improve Pulmonary Function with Schroth Best Practice® at Scoliosis 3DC

Dr. Marc Moramarco's new research from his outpatient scoliosis-specific back school entitled "The Influence of Short-Term Scoliosis-Specific Exercise Rehabilitation on Pulmonary Function in Patients with AIS" was recently published in Current Pediatric Reviews.

Woburn, MA (PRWEB) November 24, 2015 -- The subjects of this recent research participated in Dr. Moramarco’s Schroth Best Practice® program which he first introduced to the U.S. in 2007. More and more parents are choosing conservative scoliosis exercise treatment for their children. At Scoliosis 3DC, patients are instructed over the course of five to seven consecutive days, the most effective way to learn the Schroth Method.

Short-term results from the group of 36 patients with adolescent idiopathic scoliosis (33 females, 3 males) participated. Overall, patients showed a statistically significant improvement in forced vital capacity, forced expiratory volume in one second, chest expansion, and angular trunk rotation.

As scoliosis progresses over time, surgery is often recommended in skeletally immature patients with a Cobb angle of 45° or more because of the long-term threat of reduced pulmonary function. Yet, program participants who declined scoliosis surgery reported that they had never been tested for vital capacity or chest expansion prior to enrollment in Dr. Moramarco’s program.

During the Schroth Best Practice® Program, the newest evolution of the Schroth method from Germany, patients learn three-dimensional curve-pattern specific exercises for scoliosis. The multi-faceted program includes physio-logic® exercises, mobilizations, activities of daily living (ADLs), 3-D Made Easy®, and Schroth method exercises. Power Schroth exercises are one program component which differentiates Schroth Best Practice® from other Schroth method courses. Power Schroth exercises are advanced 3D scoliosis-specific corrective exercises that help engage core muscles and utilize the special Schroth method breathing technique known as rotational angular breathing (RAB).

Rotational angular breathing supports the improvement of angular trunk rotation and is the core component of Schroth therapy. The process provides the patient with proprioceptive reinforcement of the sensation of spinal derotation and is the essential component which helps a patient improve vital capacity. The subjects involved in this study achieved a wide range of results. This was expected due to the individual nature of idiopathic scoliosis. Several factors play a role in the treatment success of a conservative scoliosis treatment program including spinal flexibility, scoliosis curve pattern, body awareness, muscle tone, program compliance and more.
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