

Oral presentation

Open Access

## Spontaneous resolution of a Chiari I malformation and cervicothoracic syrinx in a 9 years old girl with a 47° scoliosis responding favourably to bracing

Manuel Rigo<sup>\*1</sup> and Luis Manuel González Martínez<sup>2</sup>

Address: <sup>1</sup>E. Salvá Rehabilitation Institute, Barcelona, Spain and <sup>2</sup>Neurosurgeon, Zaragoza, Spain

\* Corresponding author

from 5<sup>th</sup> International Conference on Conservative Management of Spinal Deformities  
Athens, Greece. 3–5 April 2008

Published: 15 January 2009

Scoliosis 2009, 4(Suppl 1):O58 doi:10.1186/1748-7161-4-S1-O58

This abstract is available from: <http://www.scoliosisjournal.com/content/4/S1/O58>

© 2009 Rigo and Martínez; licensee BioMed Central Ltd.

### Background

Pediatric case reports support the spontaneous resolution of Chiari I and syrinx. We present a case of a 9 years old girl with a spontaneous regression of a cervico-thoracic syrinx and a complete spontaneous resolution of the Chiari I malformation after one year of bracing to treat her scoliosis.

### Case report

An 8 years old girl was first diagnosed with JIS. She presented a right thoracic single curve (Apex at T10) of 36° Cobb and ± 10° rotation. Normal sagittal configuration. MRI demonstrated a Chiari I malformation and a cervico-thoracic syrinx (C4 to T9-10). She attended our clinic later showing a rapid progression of the Cobb angle to 47° Cobb. Absent superficial abdominal reflexes was the only neurological sign. Bracing with a RSC was indicated. After one year of treatment (in brace correction 47%) the scolometer value reduced from a total value of 9.5° to 6°. Back asymmetry has dramatically improved. A second MRI showed a reduced syrinx and no Chiari I malformation.

### Discussion and conclusion

This is a first report of a case showing a temporary improvement of a conservatively treated scoliosis coinciding with a spontaneous resolution of a Chiari I malformation and a related cervico-thoracic syrinx. The mechanism of such a resolution is not clear. However this case supports the idea that the resolution of the Chiari I and its

related syrinx would improve the prognosis of the associated scoliosis.

### References

1. Morcuende JA, Dolan LA, Vazquez JD, Jirasirakul A, Weinstein SL: **A prognosis model for the presence of neurogenic lesions in atypical idiopathic scoliosis.** *Spine* 2004, **29**(1):51-8.
2. Sun PP, Harrop J, Sutton LN, Younkin D: **Complete spontaneous resolution of childhood Chiari I malformation and associated syringomyelia.** *Pediatrics* 2001, **107**(1):182-4.
3. Kyoshima K, Bogdanov EI: **Spontaneous resolution of syringomyelia: report of two cases and review of the literature.** *Neurosurgery* 2003, **53**(3):762-8. discussion 768-9.
4. Guillen A, Costa JM: **Spontaneous resolution of Chiari I malformation associated syringomyelia in one child.** *Acta Neurochir (Wien)* 2004, **146**(2):187-91.
5. Coppa ND, Kim HJ, McGrail KM: **Spontaneous resolution of syringomyelia and Chiari malformation type I in a patient with cerebrospinal fluid otorrhea. Case report.** *J Neurosurg* 2006, **105**(5):769-71.