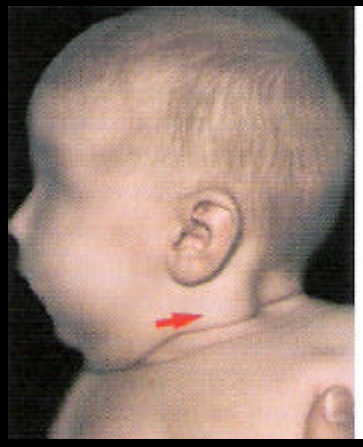
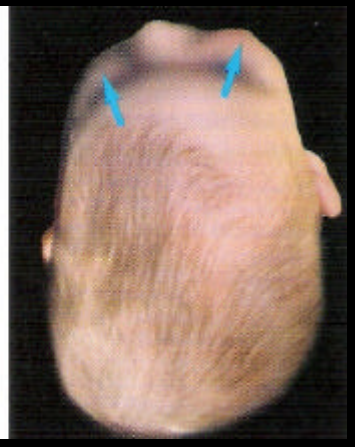
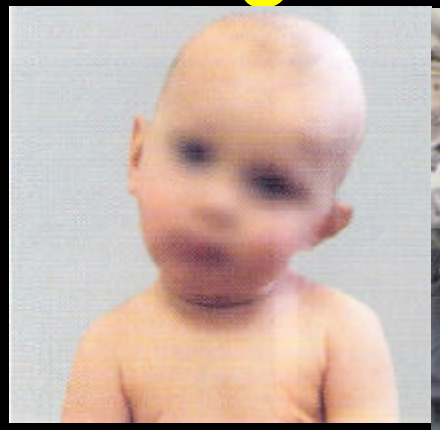
Coluna Vertebral

Torcicolo congênito



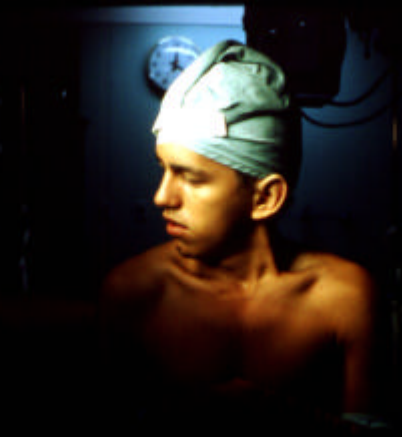


Plagiocefalia



Manipulação

Deformidade Facial

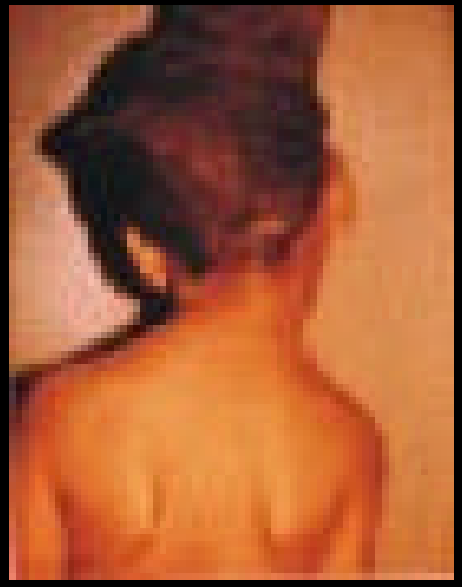


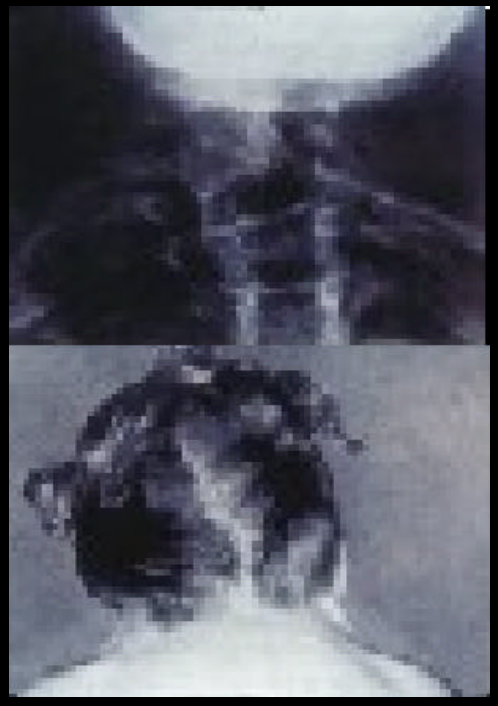
Cirurgia

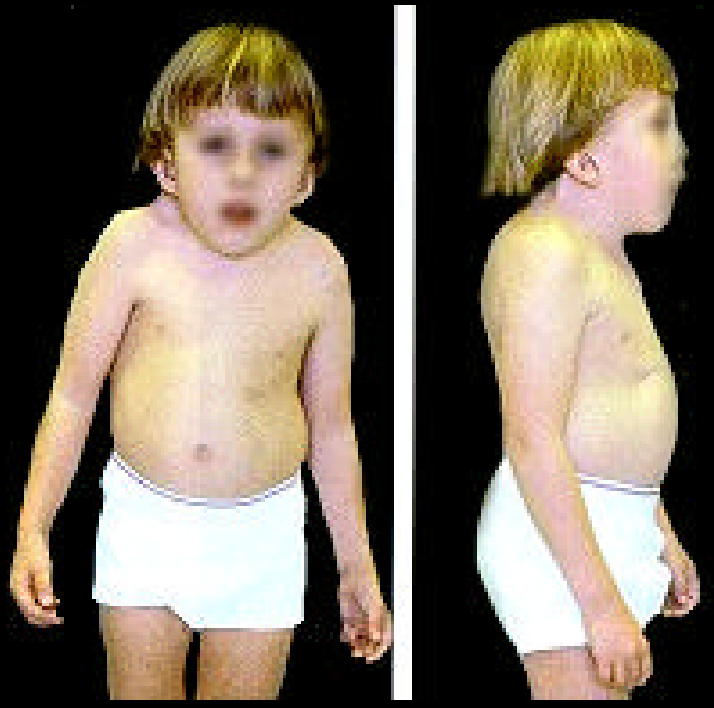
ORT PED

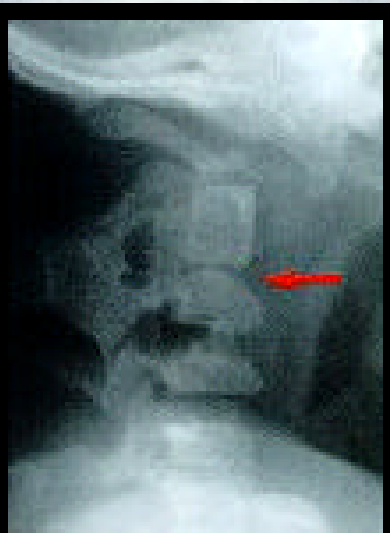
Klippel - Feil

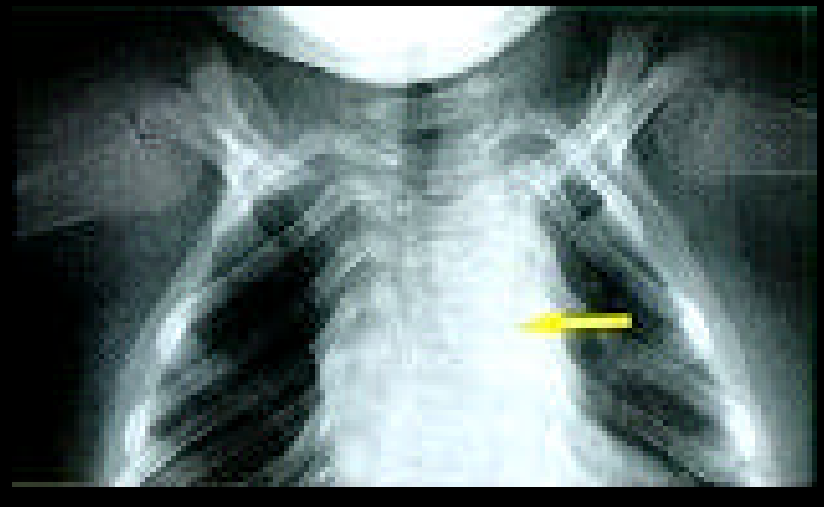
torcicolo









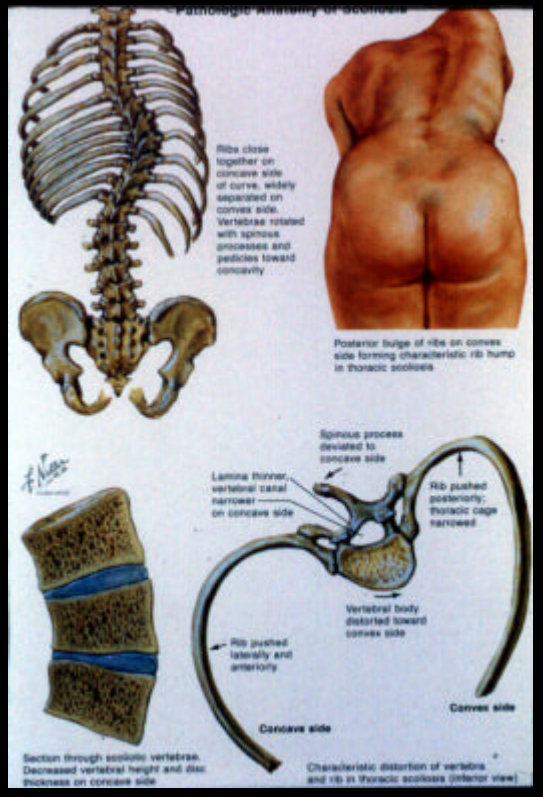


ESCOLIOSE

CAUSAS:

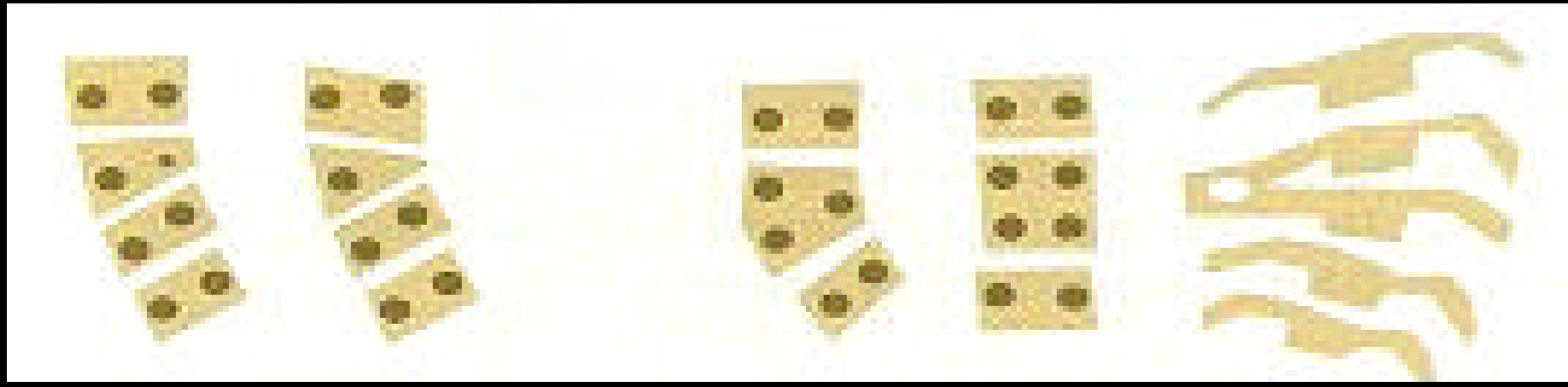
- Congênita
- Postural
- Desnivel Pélvico
- Tumoral
- Infecciosa
- Neurológica
- Antálgica
- Emocional
- **Idiopática**

Desvio lateral da coluna



Com rotação vertebral

Escoliose congênita

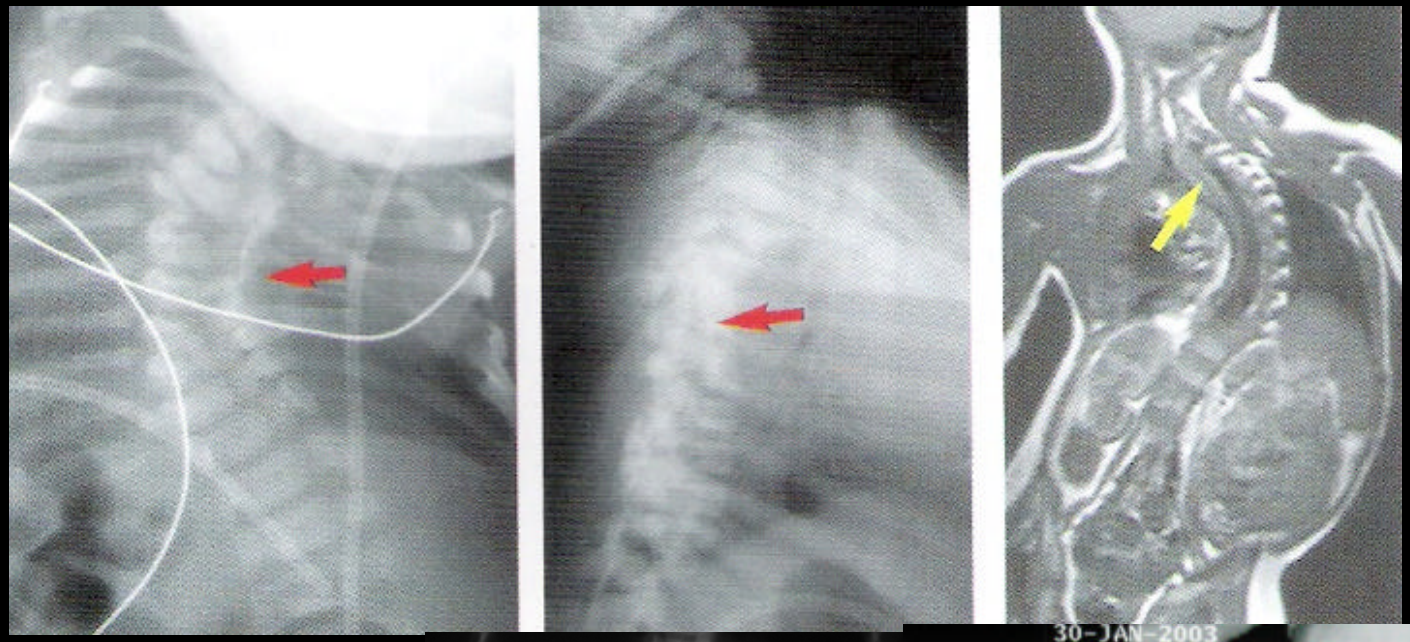


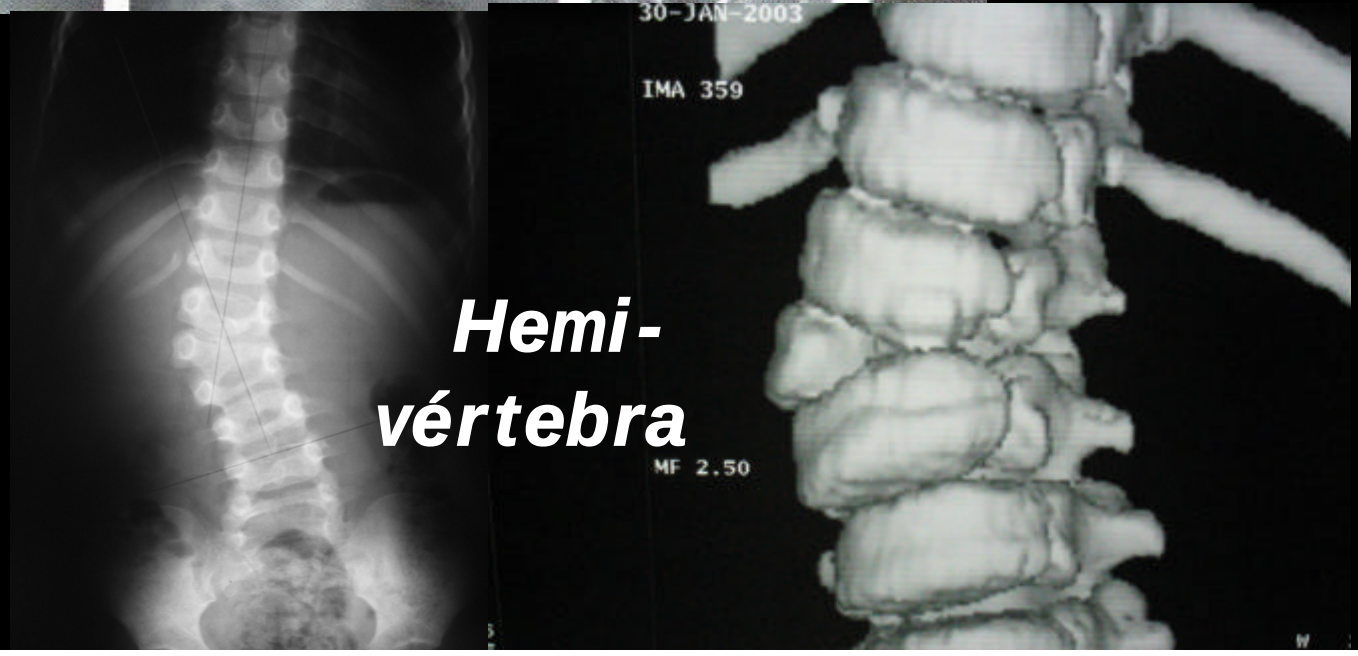
Defeito de formação

Defeito de segmentação

Escoliose congênita

Malformações complexas



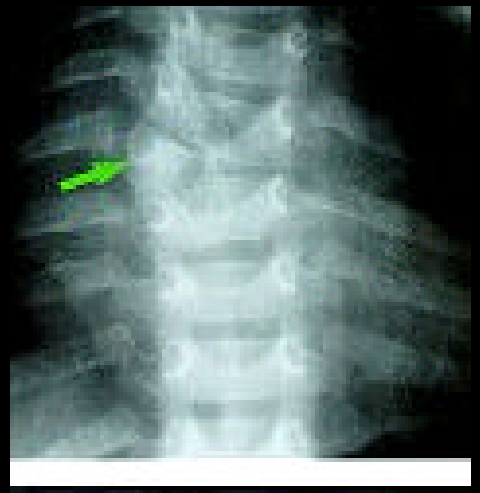


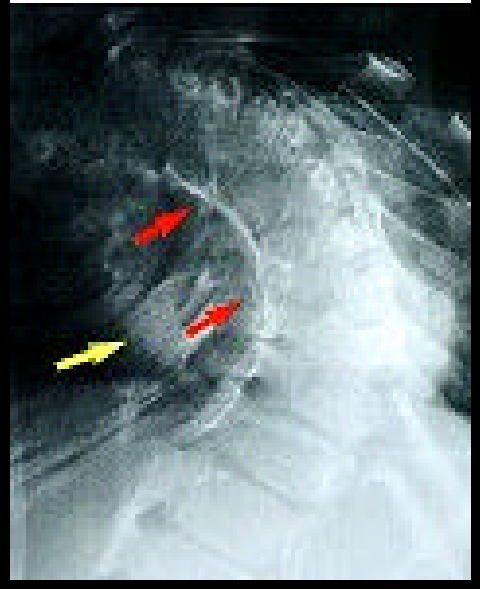
Hemi-vértebra

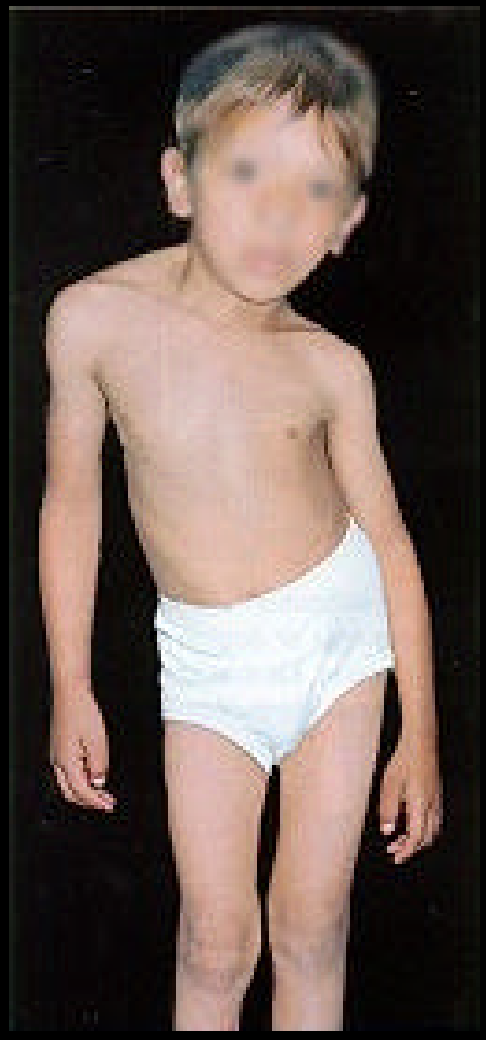
Escoliose congênita

Fisioterapia
Ativ. Física
Observação

Trat. Cirúrgco





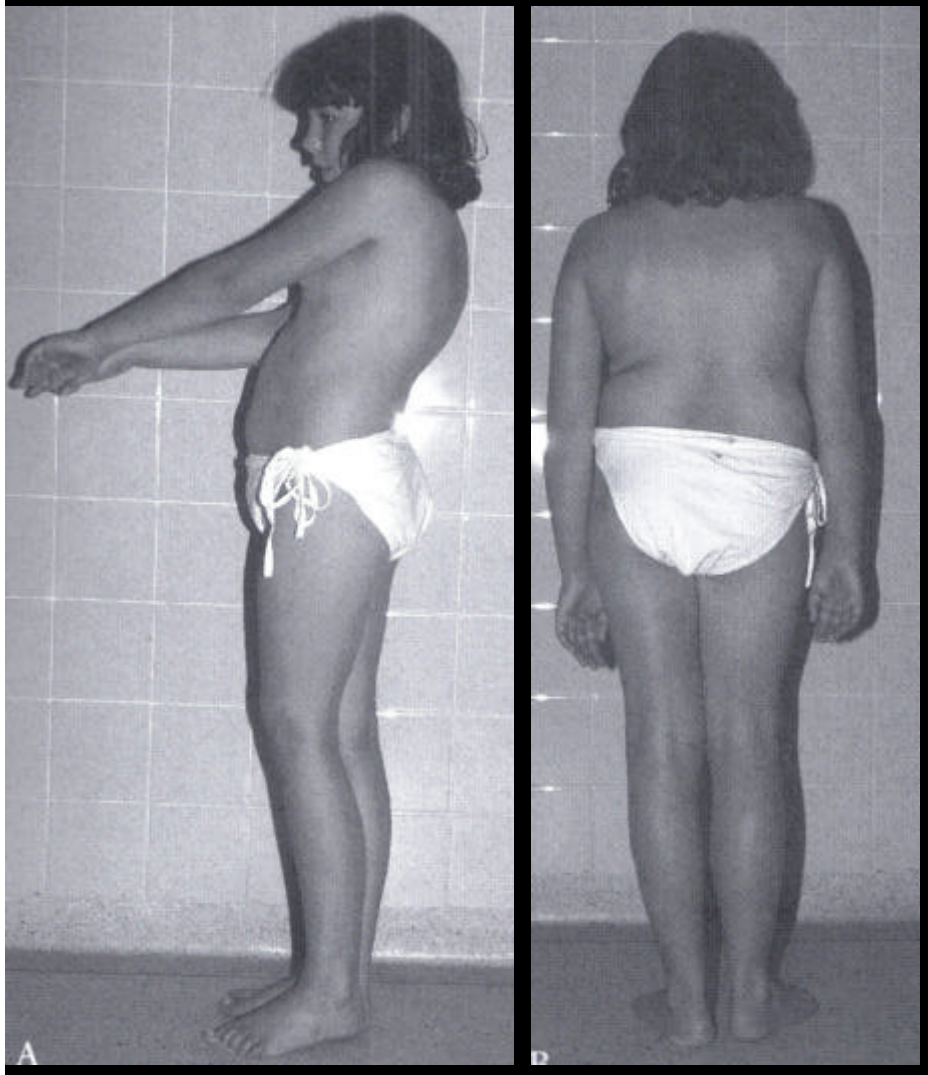


**** Não usar colete***

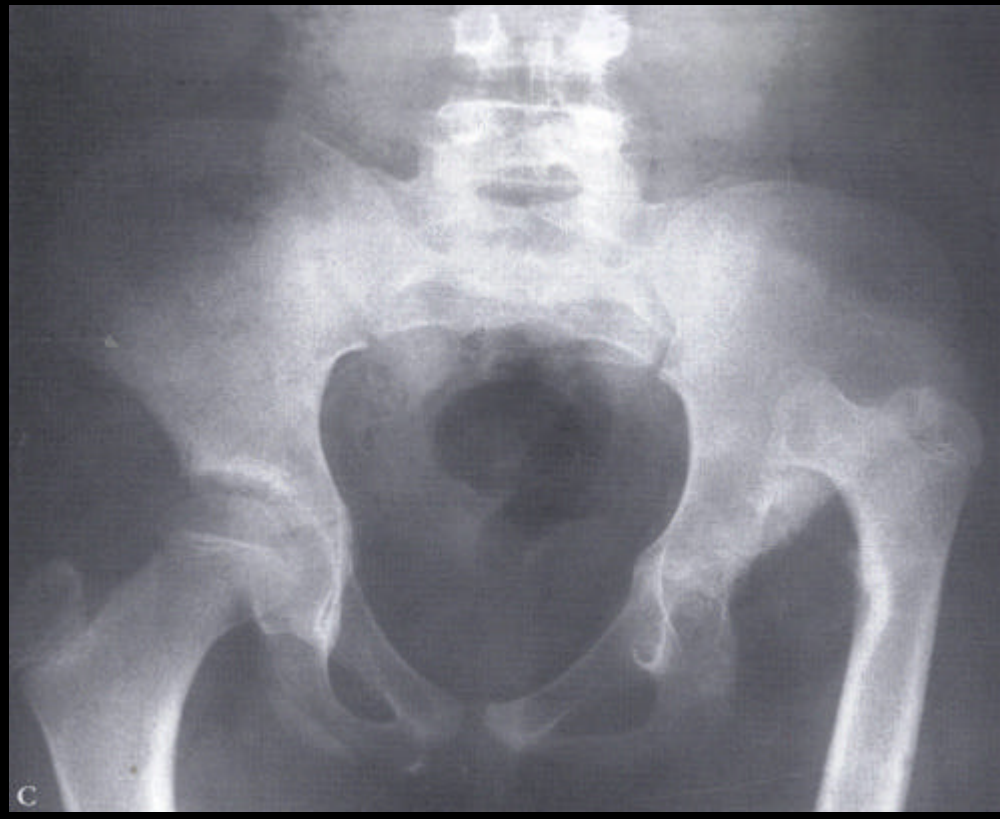
Inspeção Estática

Assimetria da pelve

Desalinhamento do tronco



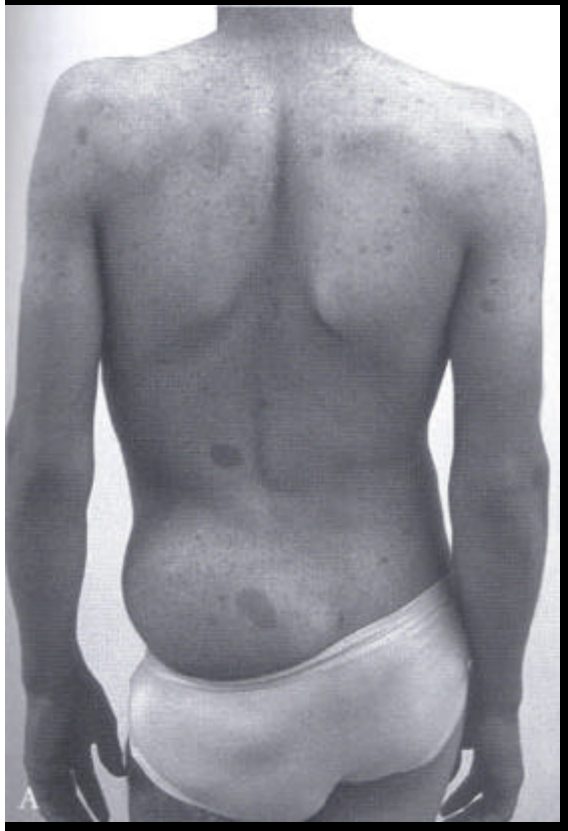
Desnível pélvico

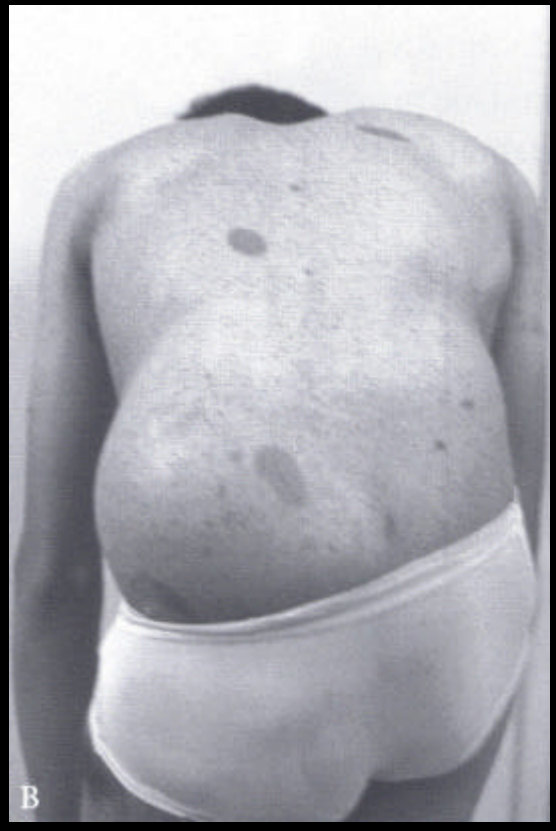


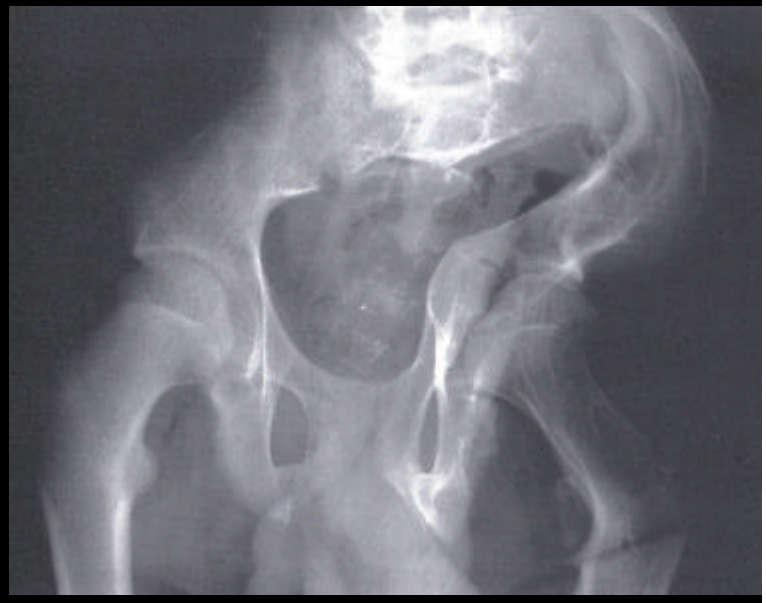
Por encurtamento do membro inferior, provocado pela - luxação congênita do quadril à direita

Escol. na Neurofibromatose

Manchas café com leite

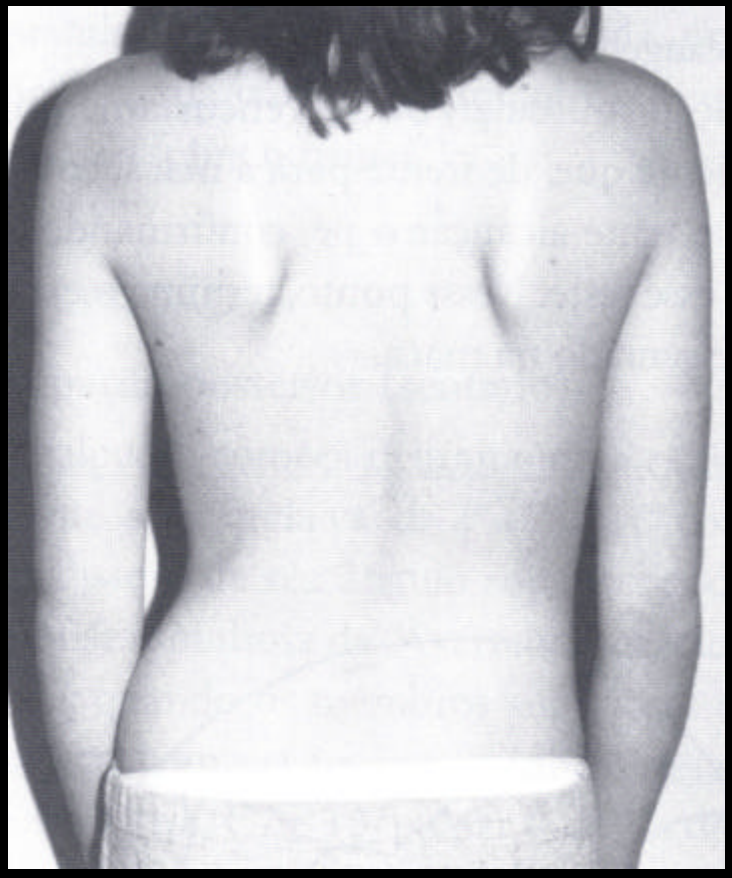


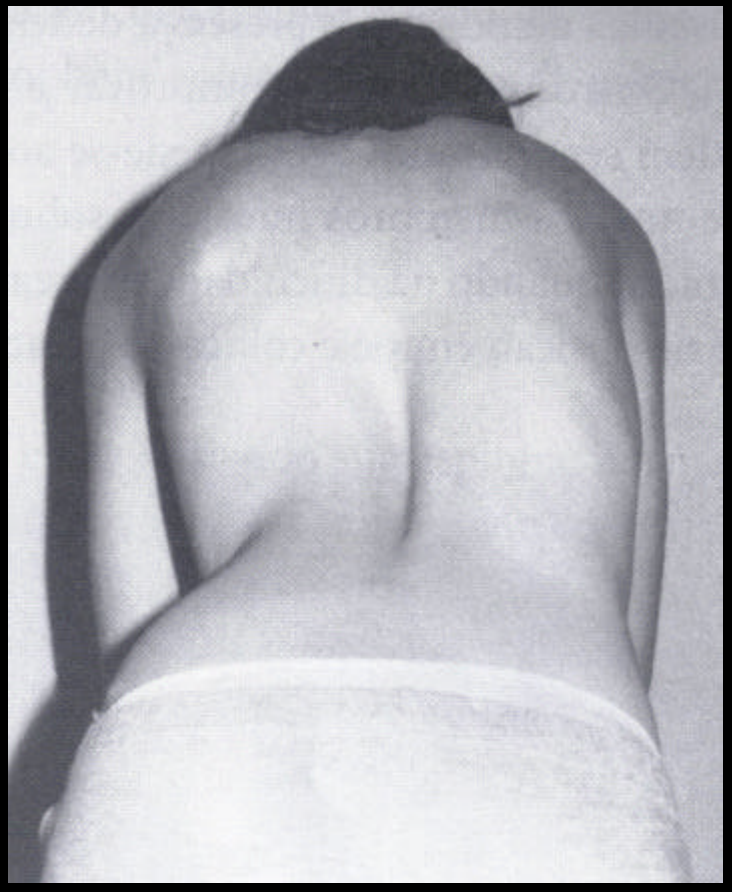




Deformidades na coluna vertebral e bacia

ESCOLIOSE ANTÁLGICA

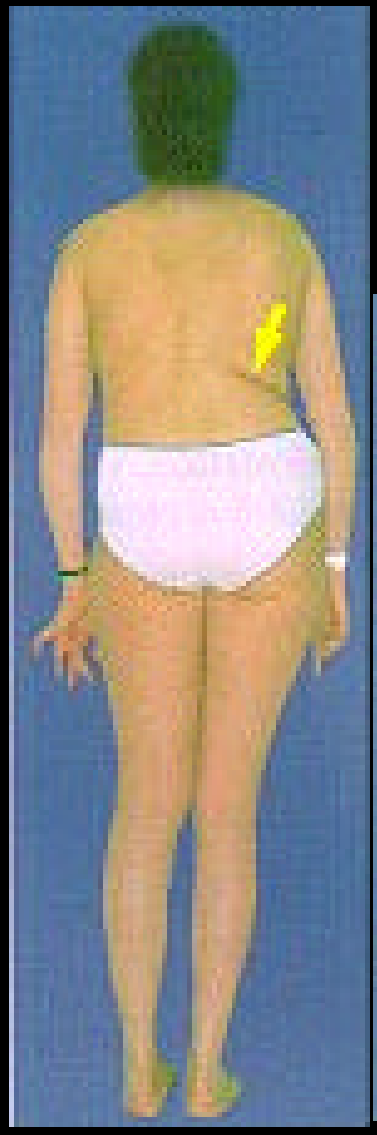


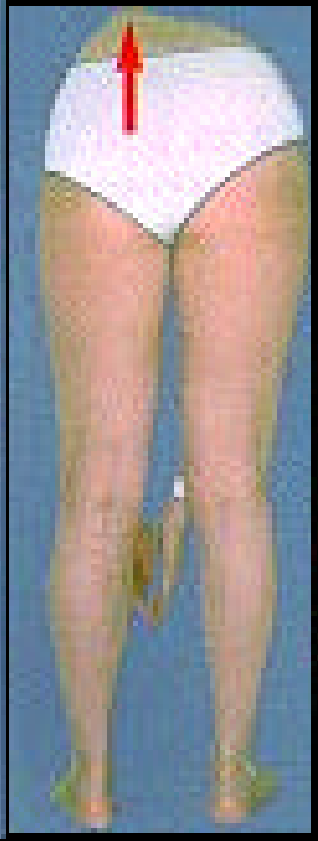


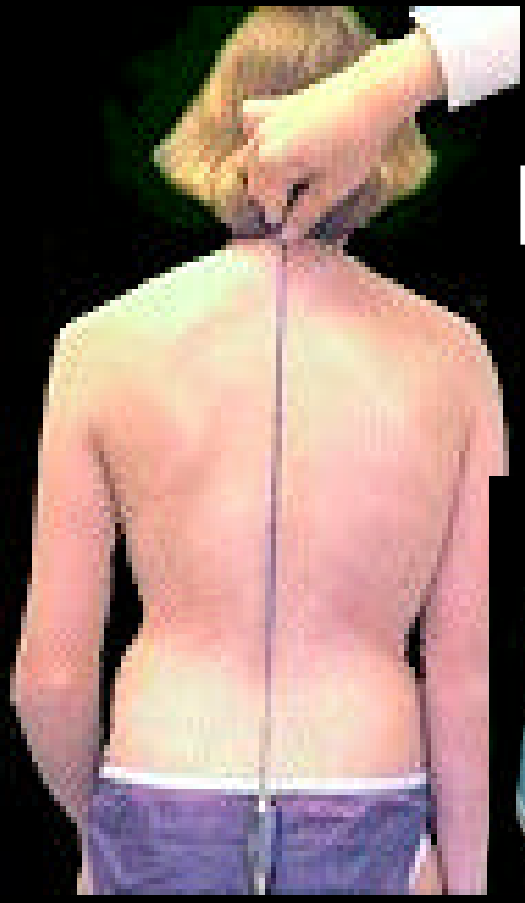
Limitação da flexão, dor, rigidez

Coluna Vertebral

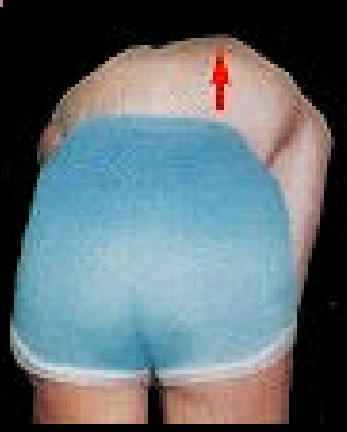
Escoliose

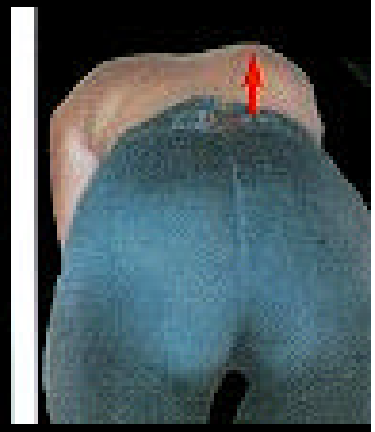




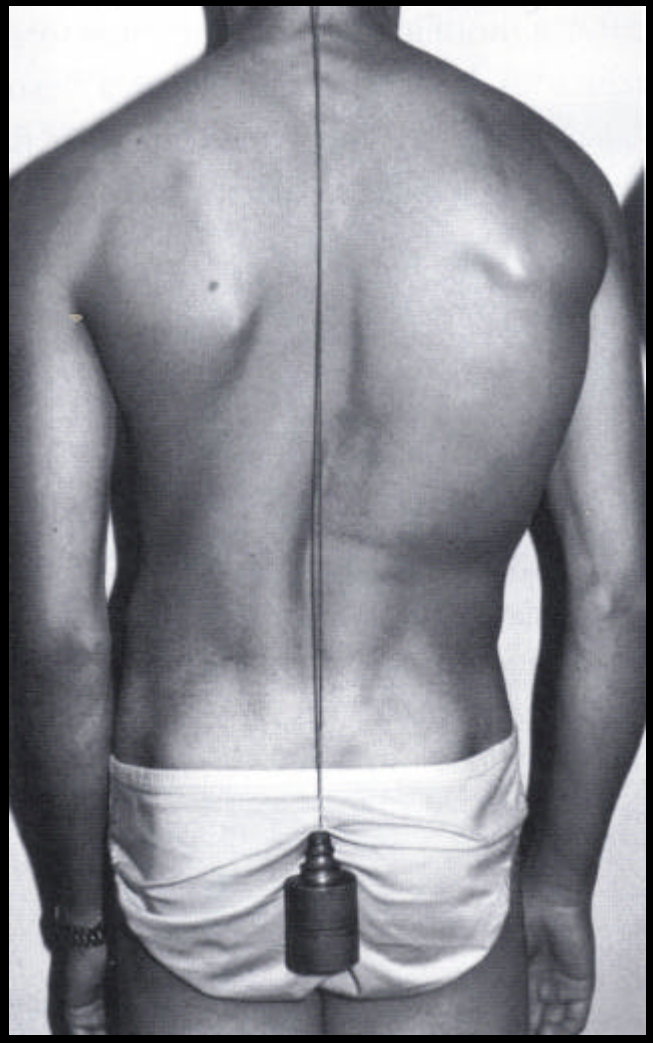


Escoliose familiar

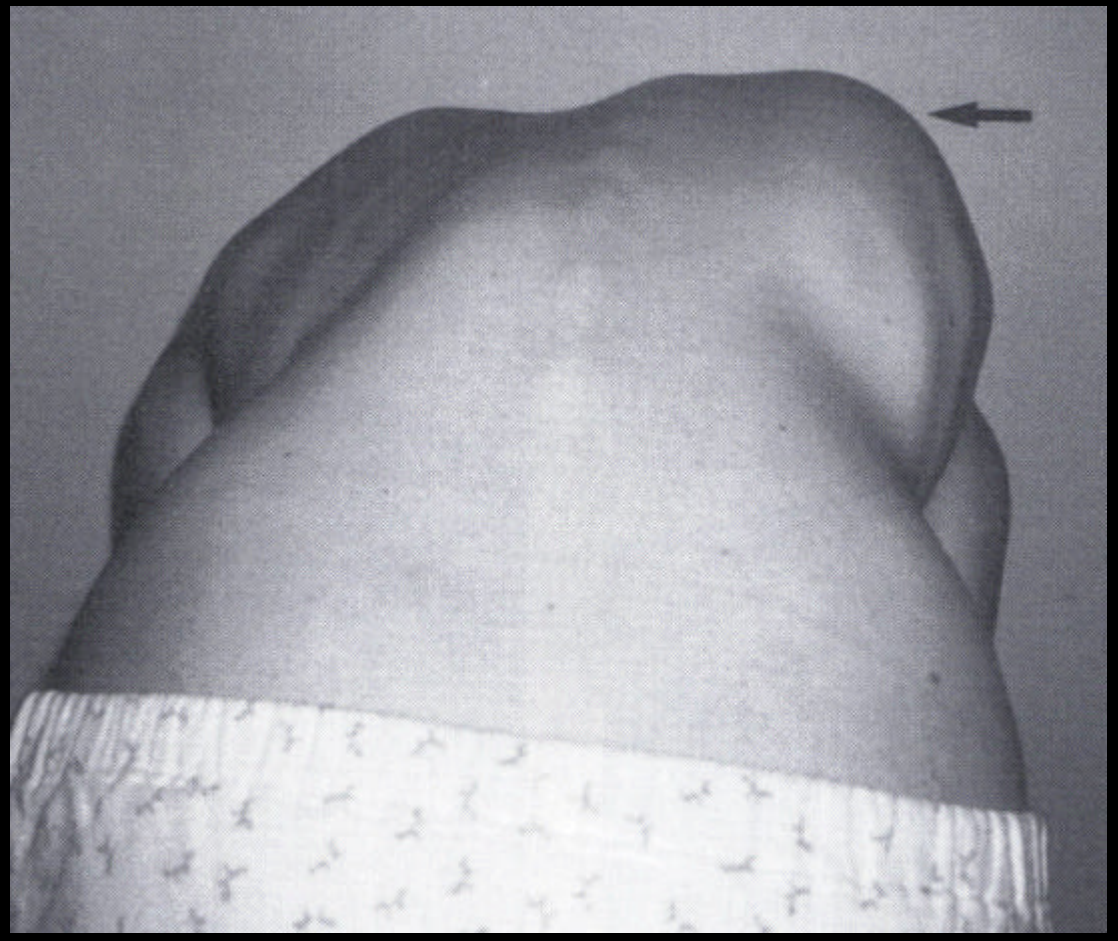




Escoliose IDIOPÁTICA

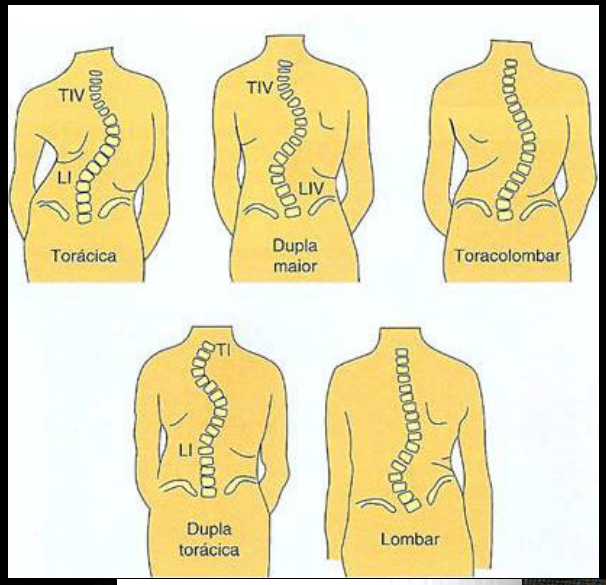


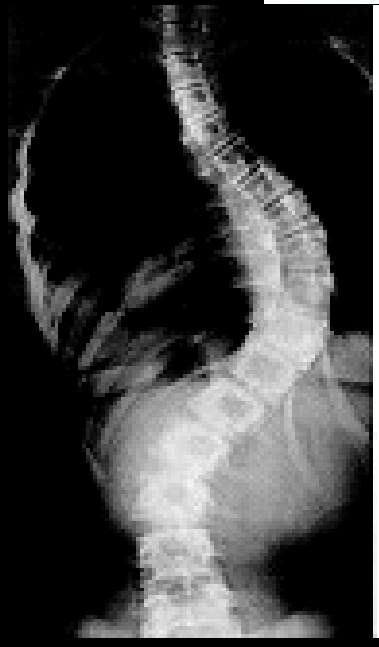
Giba escoliótica

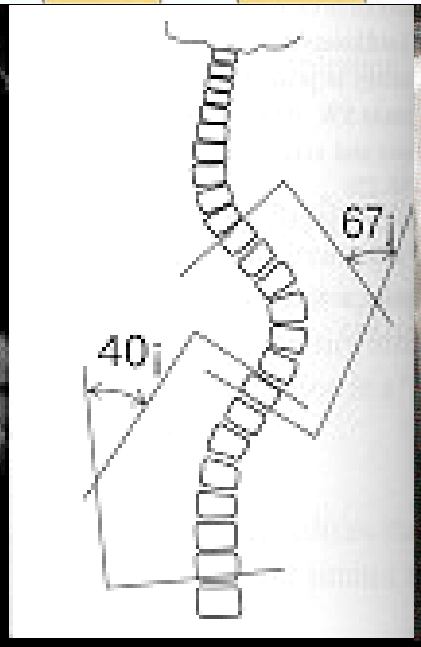


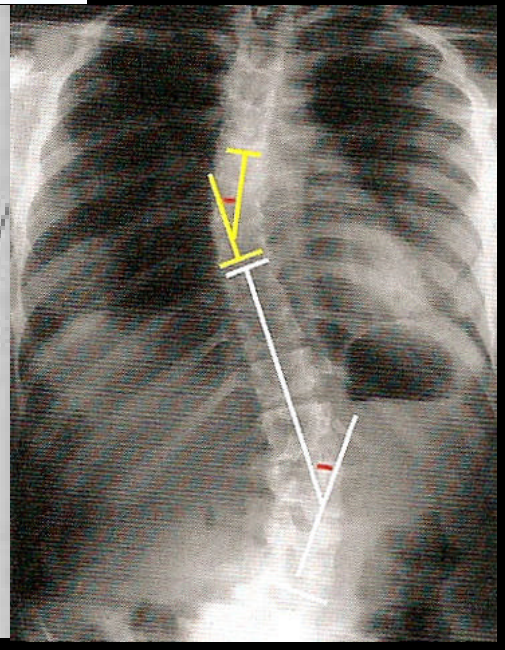
ESCOLIOSE – ÂNGULOS - MEDIDAS

CLASSIFICAÇÃO









Método de Cobb- Medida dos ângulos

TRATAMENTO

até 10º - **Atividade física**

de 10 a 25º - At. Física e **Fisioterapia**

de 25º a 45º - At. Fís., Colete e **Fisioterapia**

de 45º a mais – **Cirurgia**

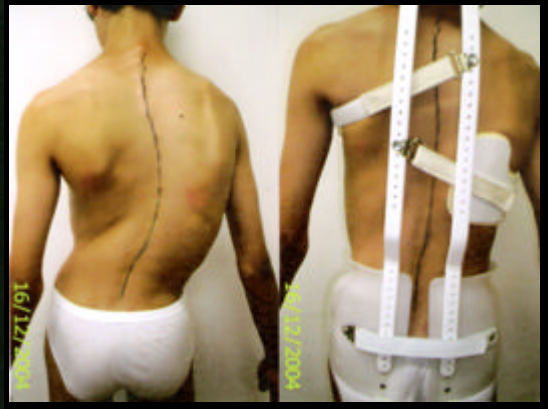
***A escol. Idiopática** inicia perto dos 8a de idade, e tende a piorar com estirão do crescimento

***Diag. Precoce**; as curvas dificilmente reduzem, fisioterapia e colete objetivo de impedir a piora até final do crescimento.

A partir daí, a **fisioterapia é importante** para melhora e manutenção da postura, mobilidade e equilíbrio muscular.

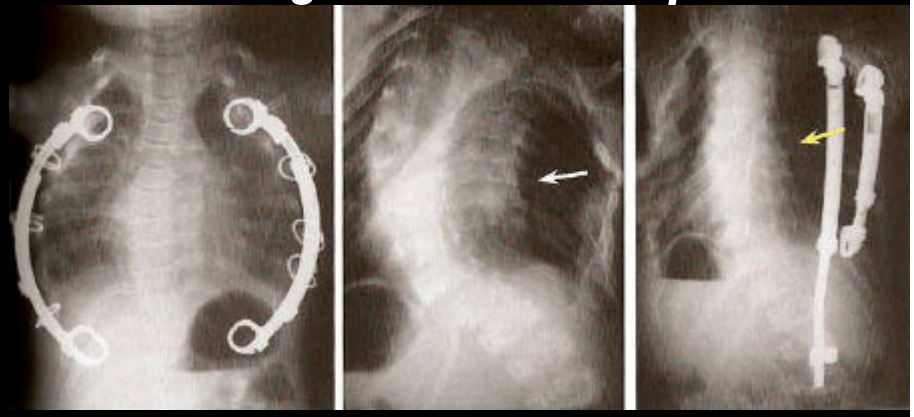
Tratamento conservador

Órtese tóracolombar

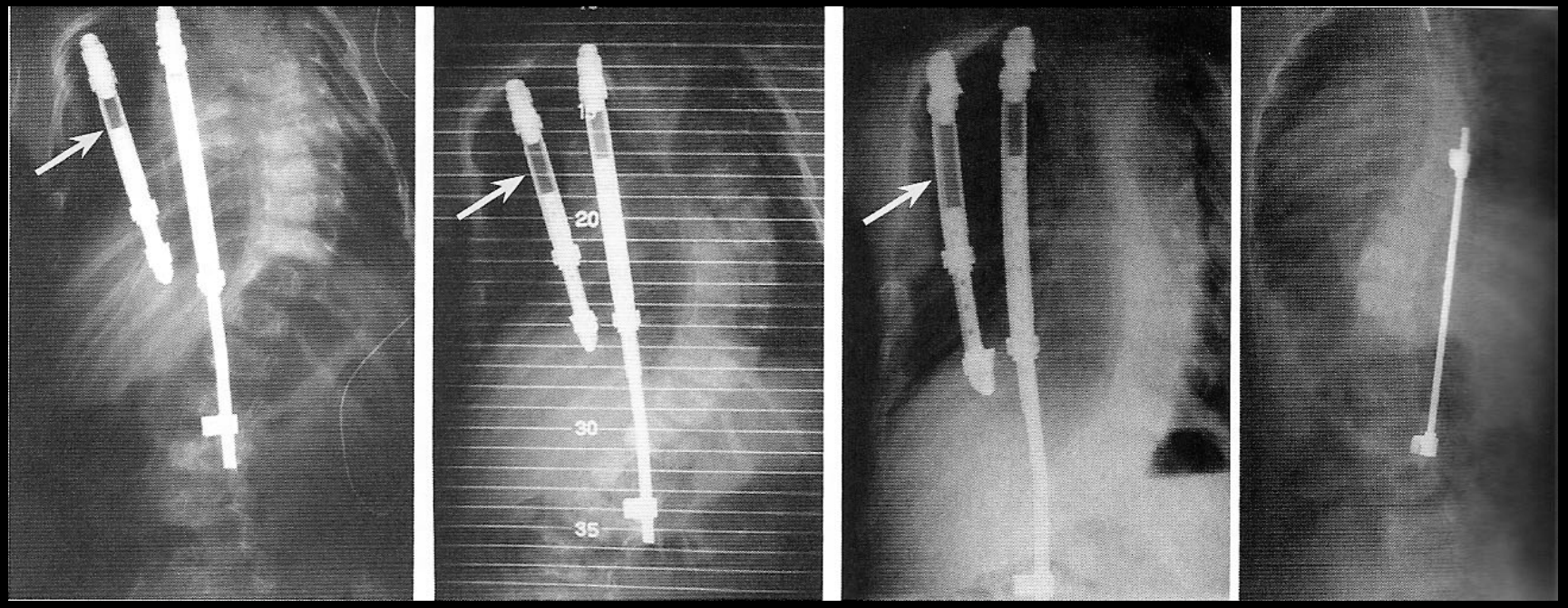


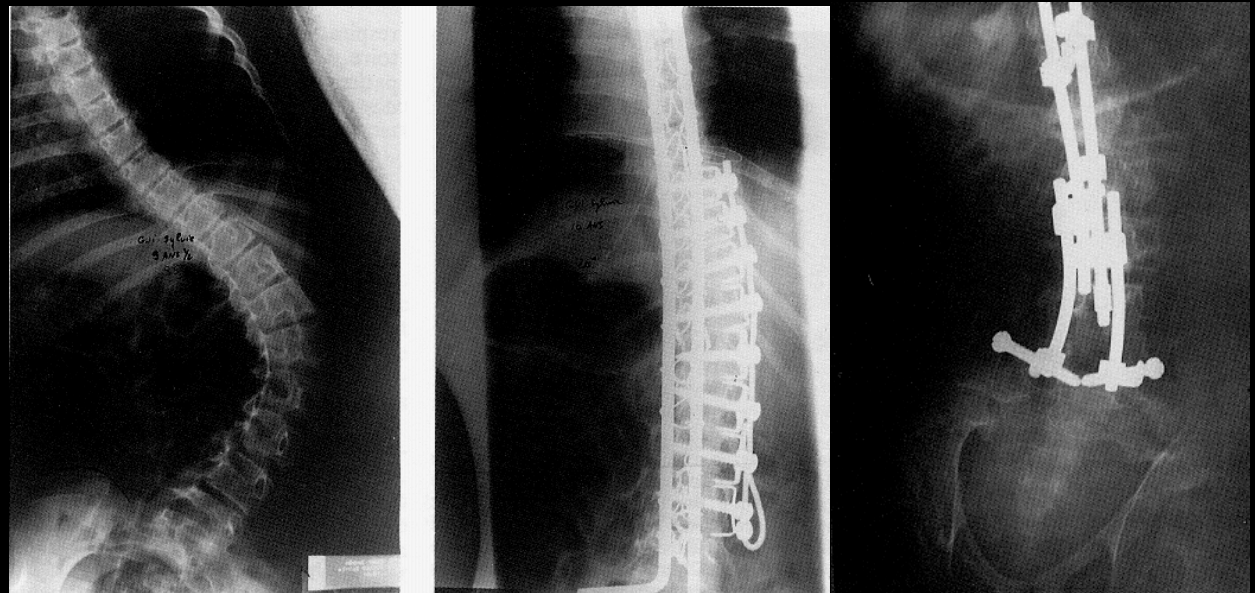
Colete de Miwakee

Trat. Cirúrgico - hastes espansíveis

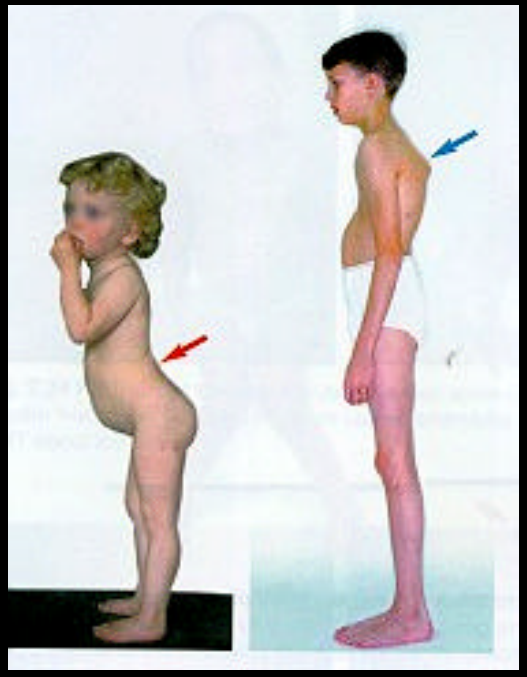


TRATAMENTO CIRÚRGICO

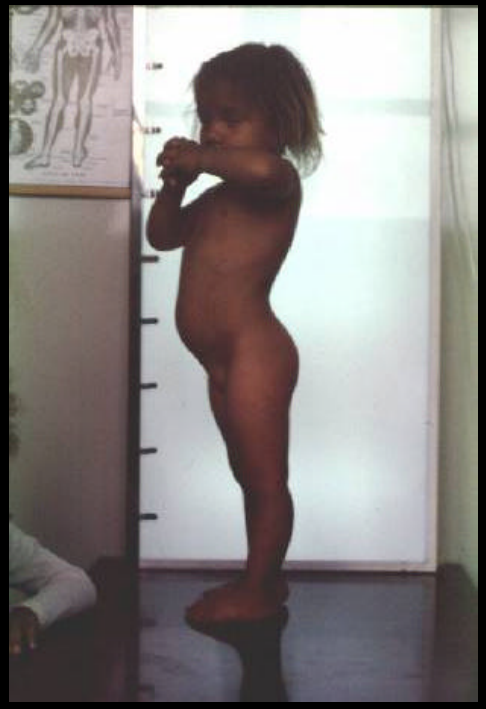




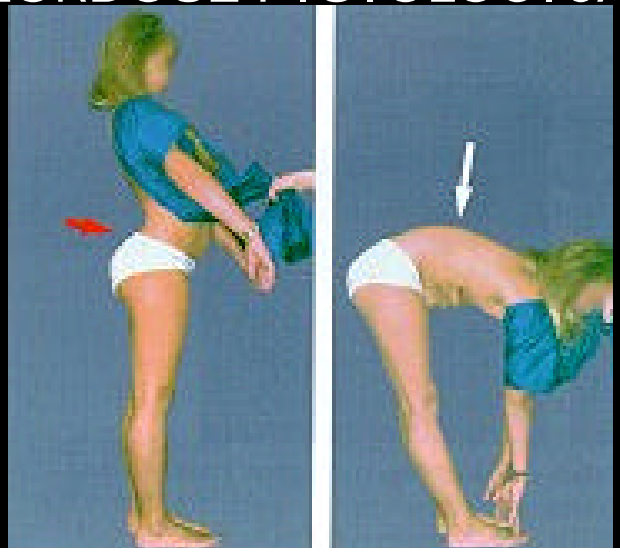
LORDOSE CIFOSE



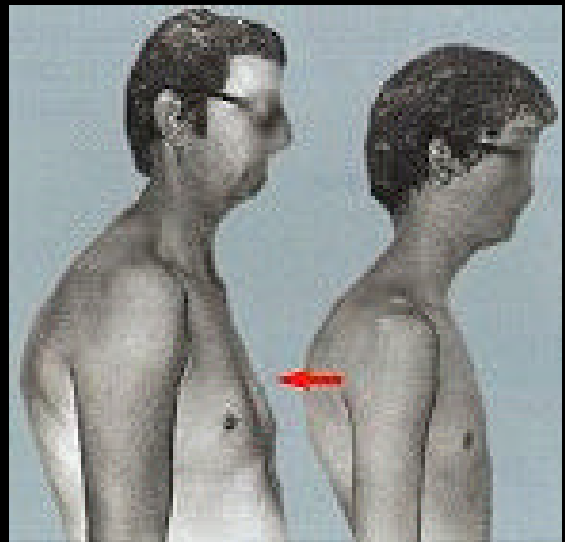
FLACIDEZ LIGAMENTAR



LORDOSE FISIOLÓGICA

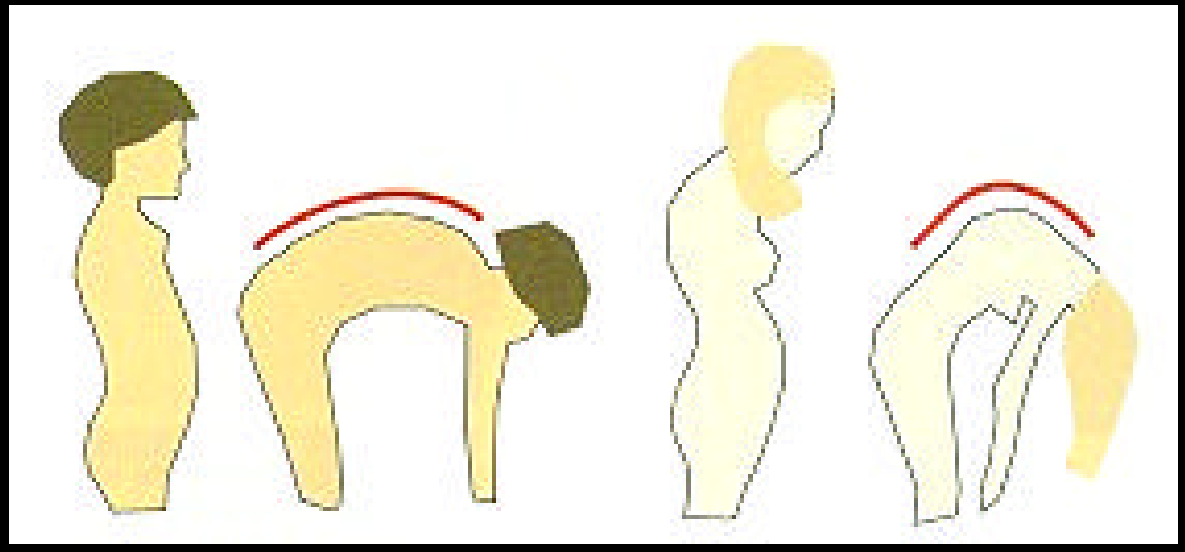


CIFOSE FAMILIAR



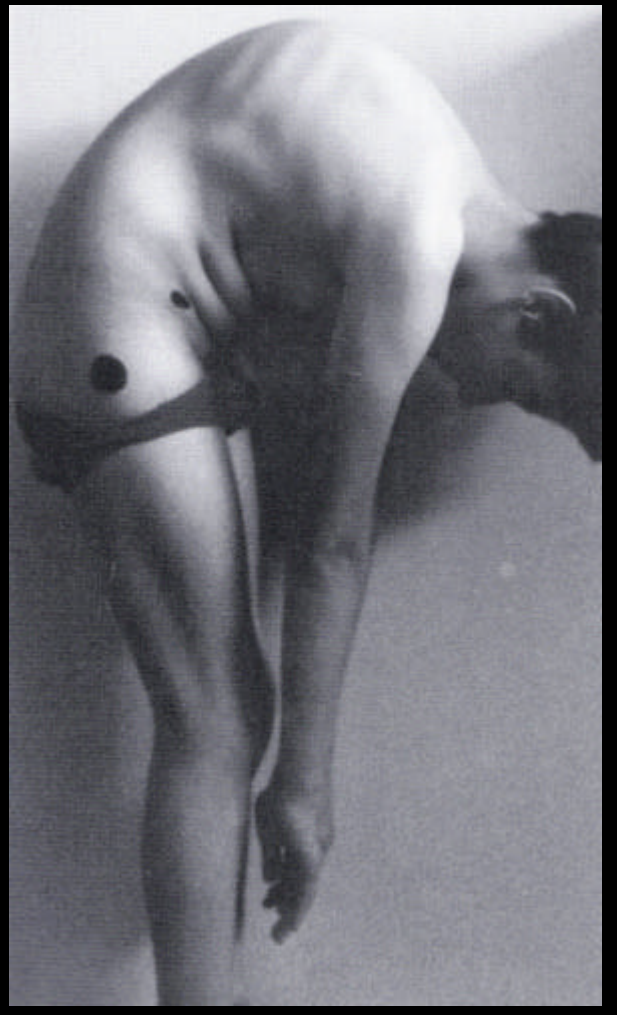
ORT PED

Cifose



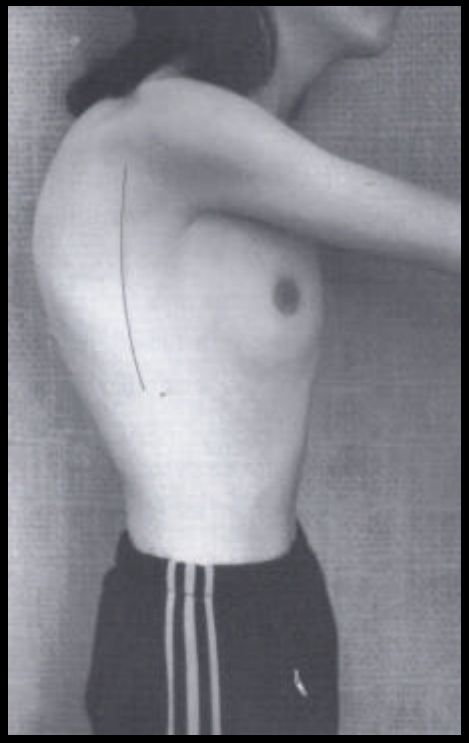
Fisiológica

Patológica



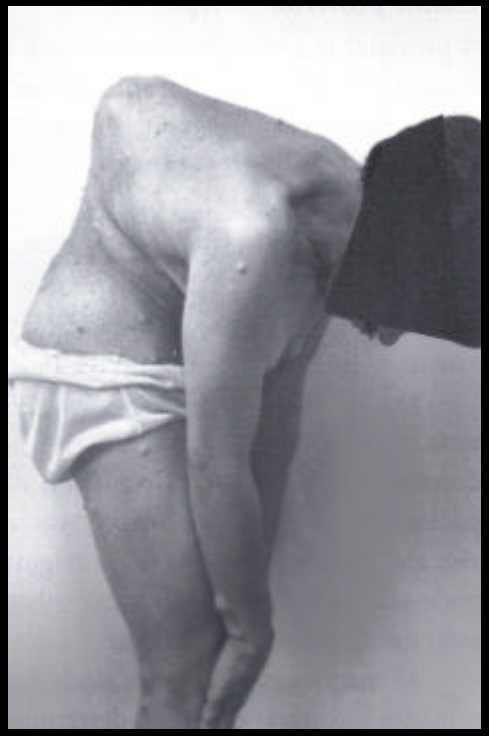
Retração isquitibiais

Cifose



Adolescente

Dorso curvo juvenil

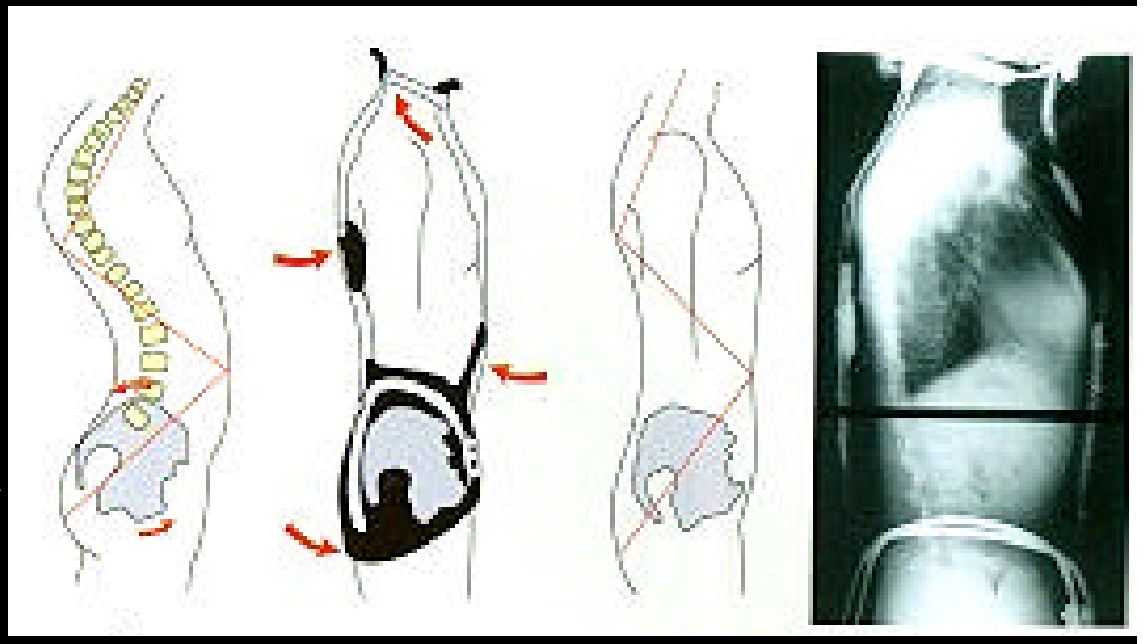


Neurofibromatose

Espondilite ancilosante

Tratamento

Fisioterapia
-Refôrço
Dorsiflexores
-Along. e Ref. M. cintura escapular
-Postura

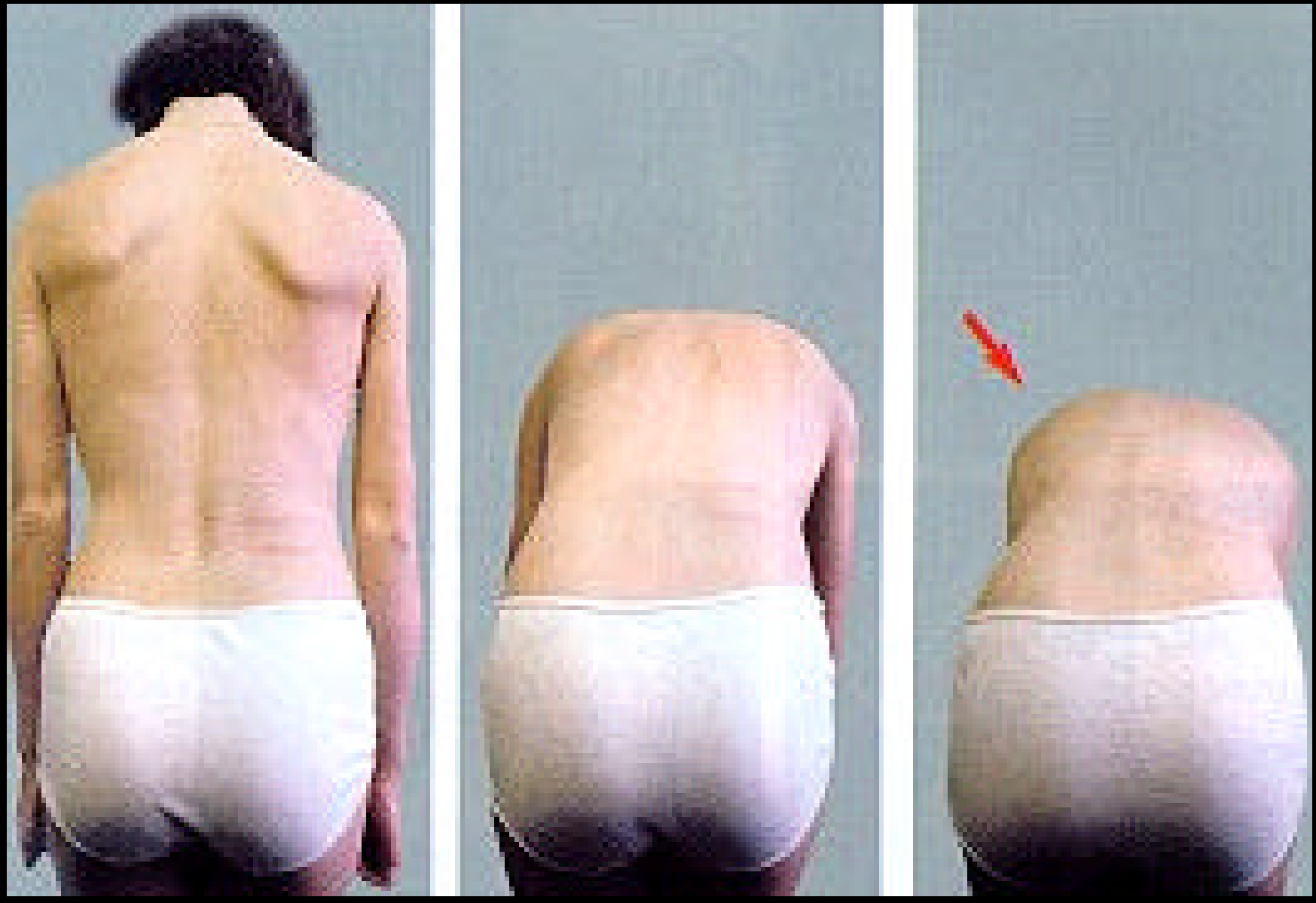


Colete - Cirurgia

Causas de dor nas costas

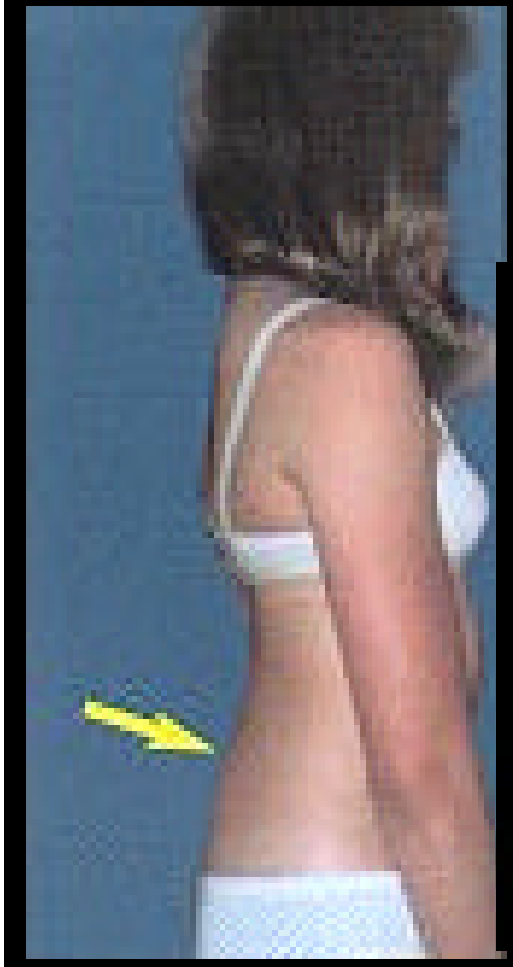
- Trauma
- Espondilolise-espondilolitese
- Doença de Scheuermann
- Nódulos de Schmorl
- Tumores
- Discite
- Espondilite reumatóide
- Sínd. Uso Excessivo
- Hérnia discal
- Osteoporose

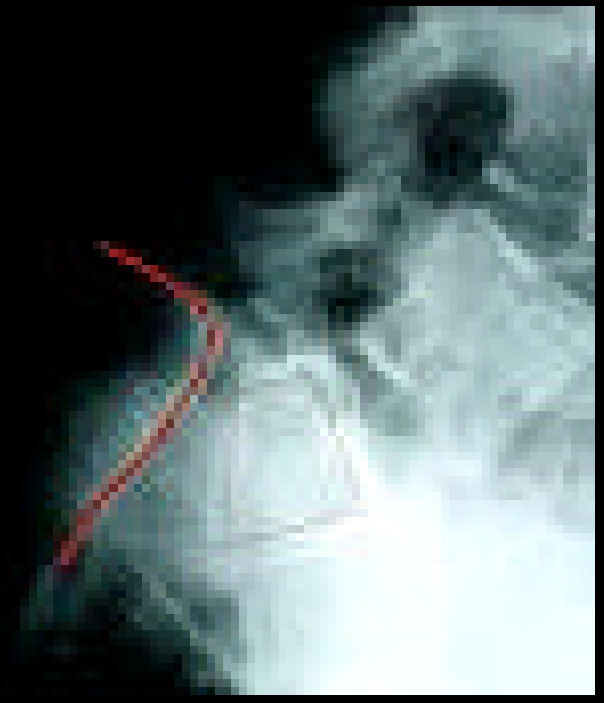
Dor na coluna



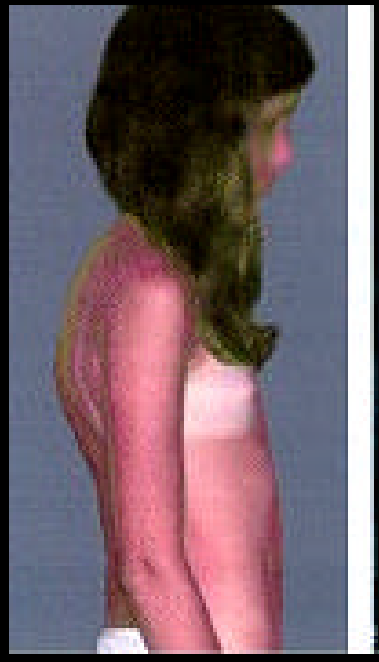
ORTOPED

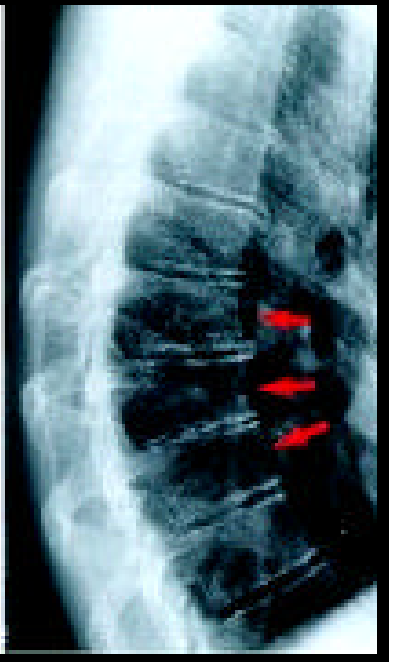
Espondilolistese



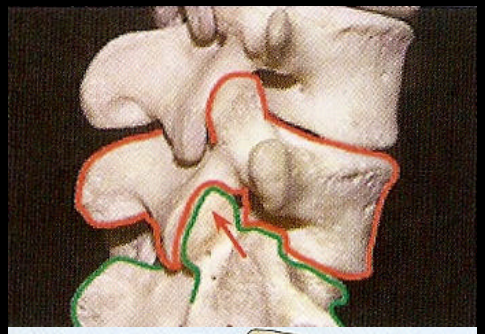


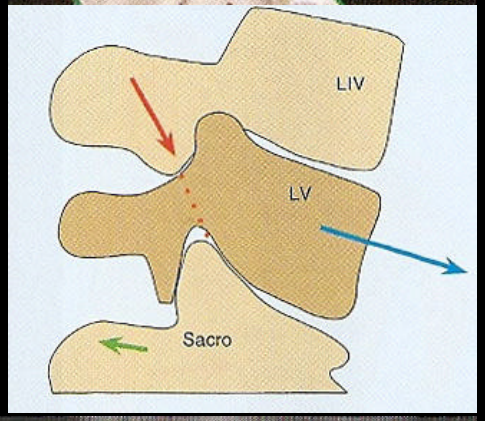
Scheuermann

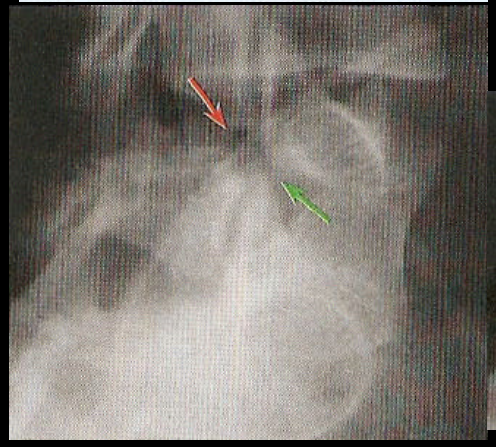




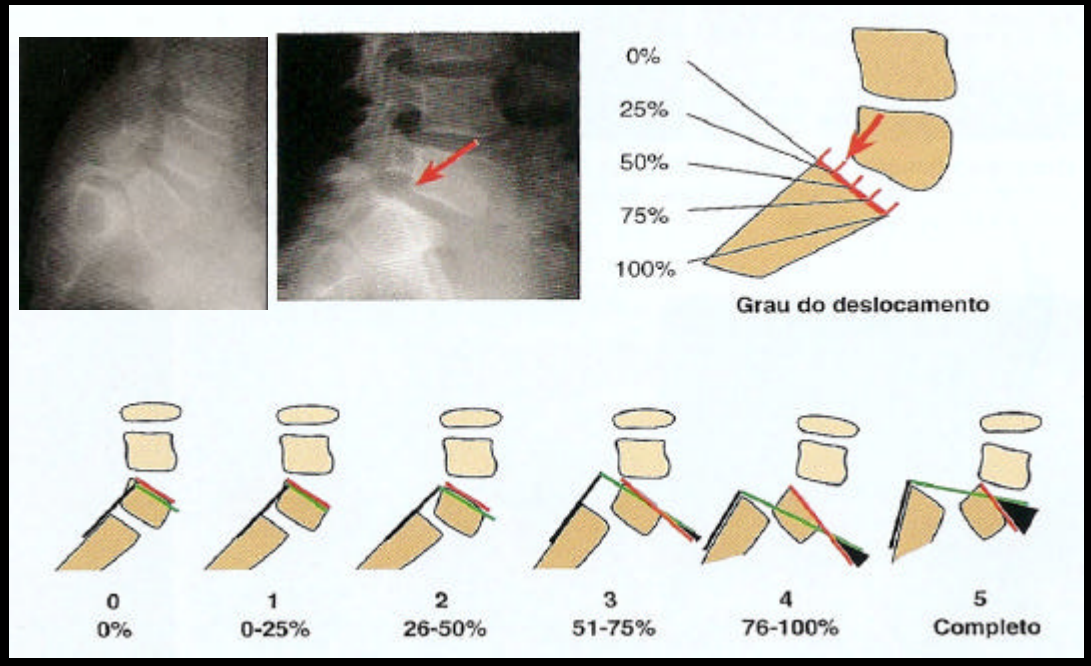
ESPONDILÓLISE - LISTESE



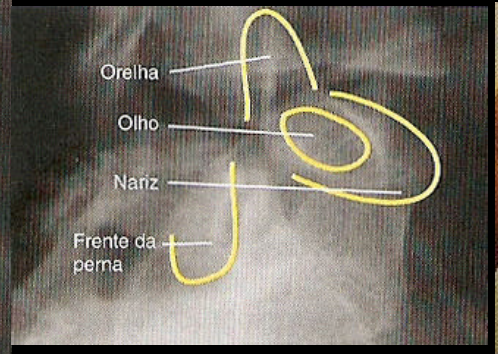


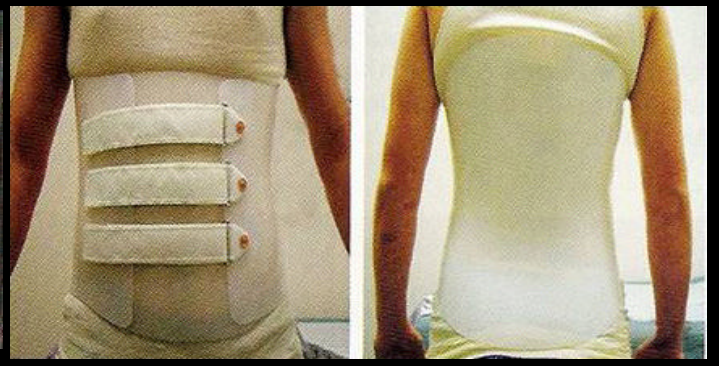


Grau de escorregamento

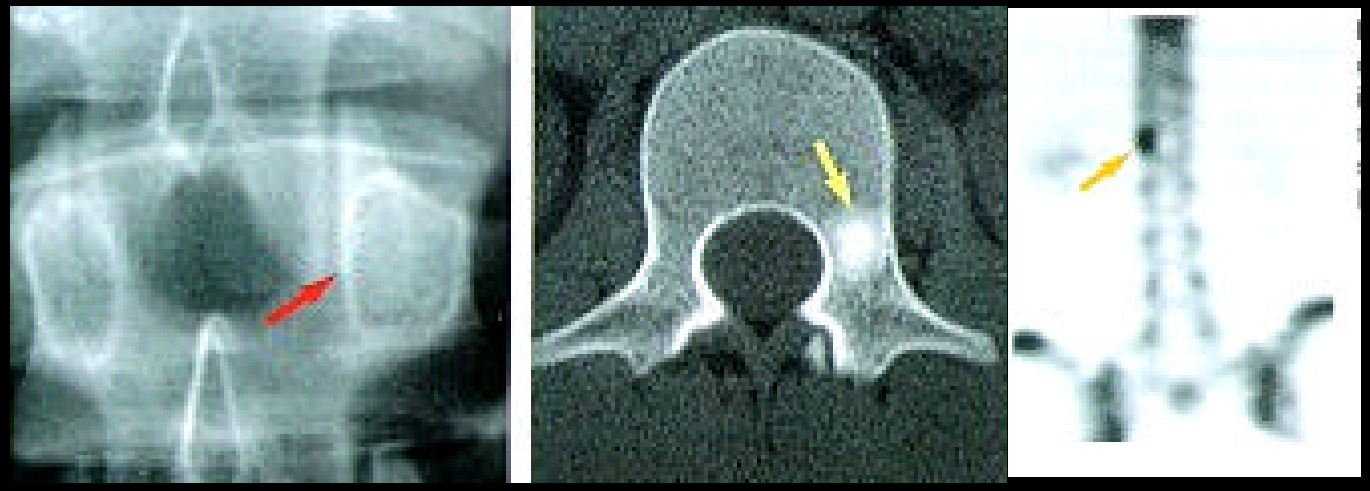


Brace - tutor

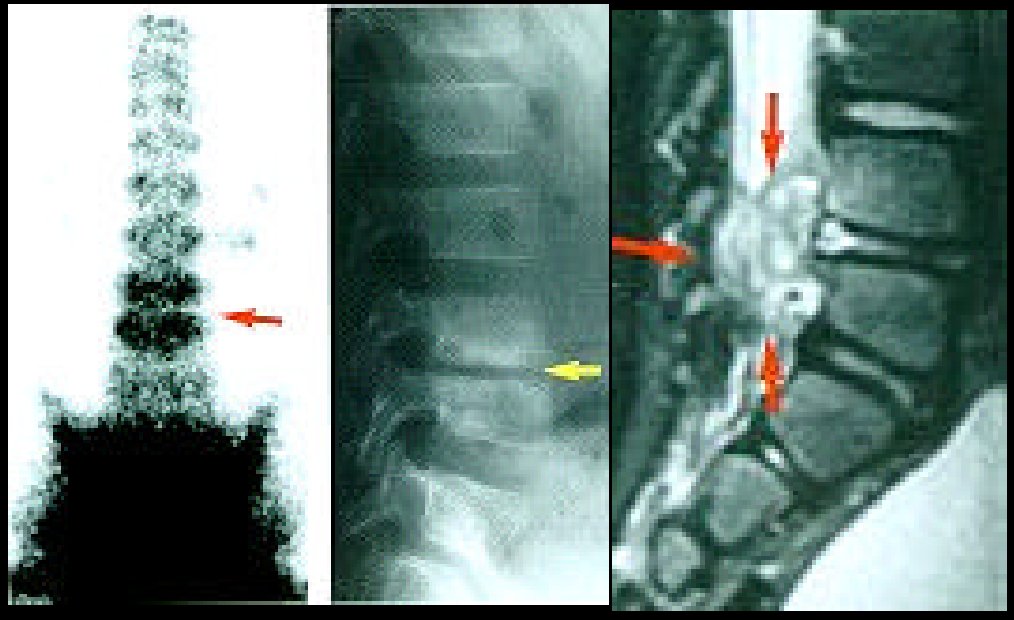




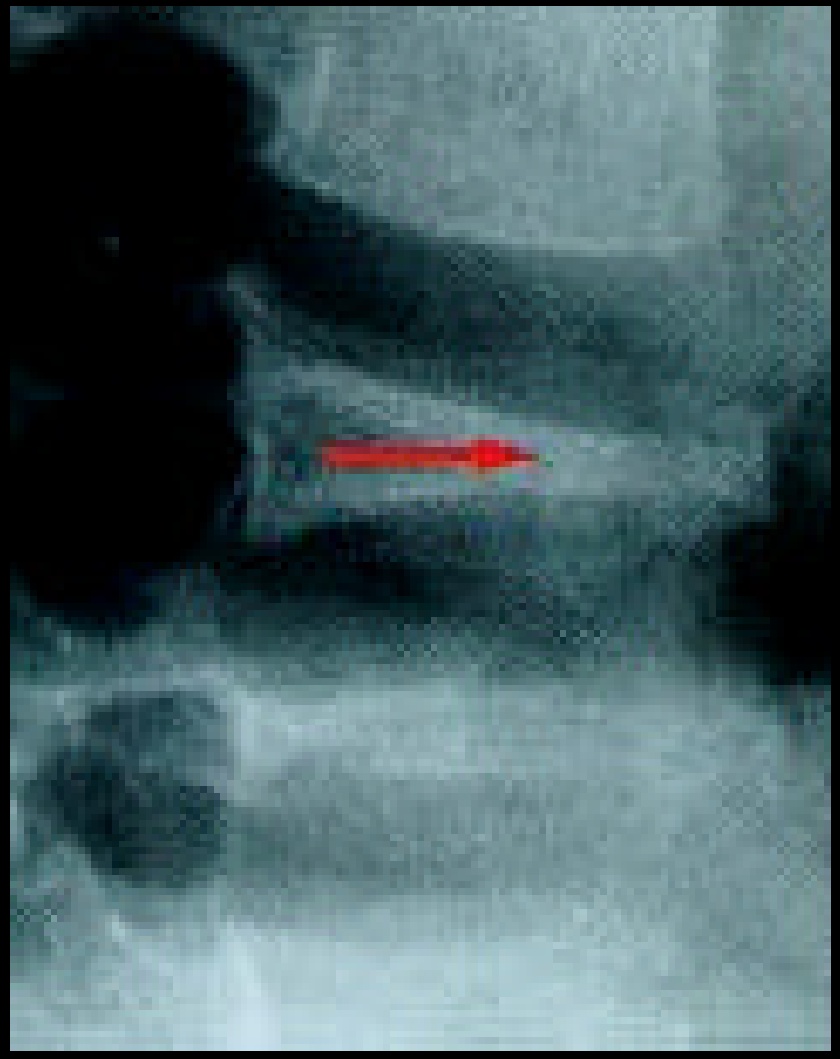
Osteoma osteóide



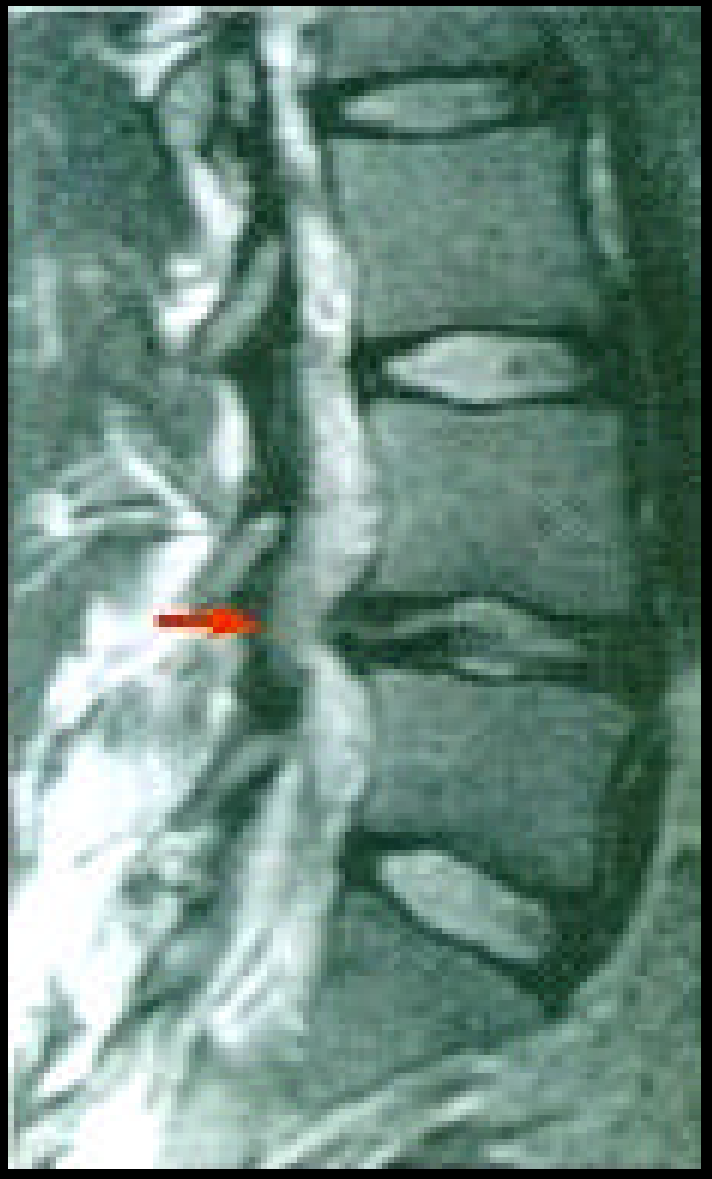
Discite



Granuloma eosinófilo

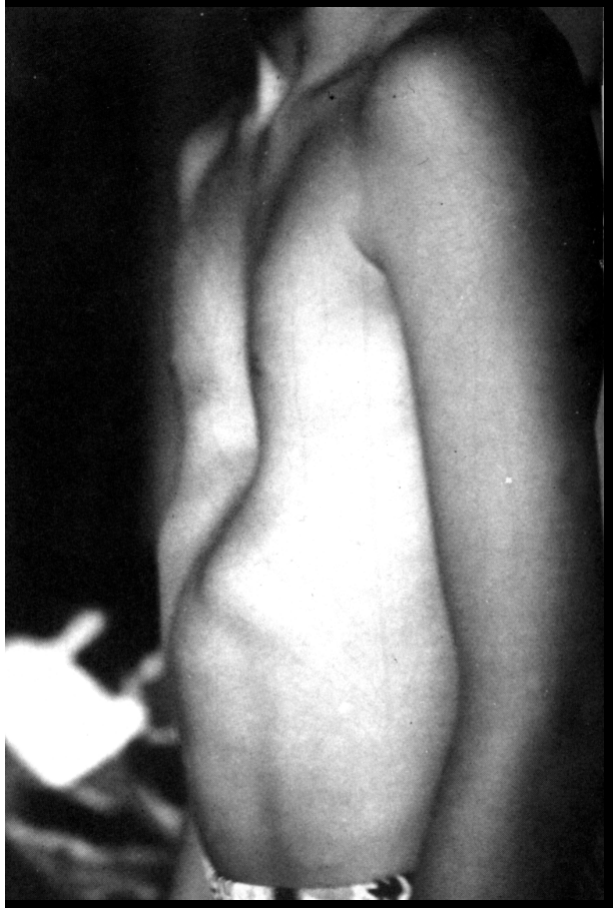


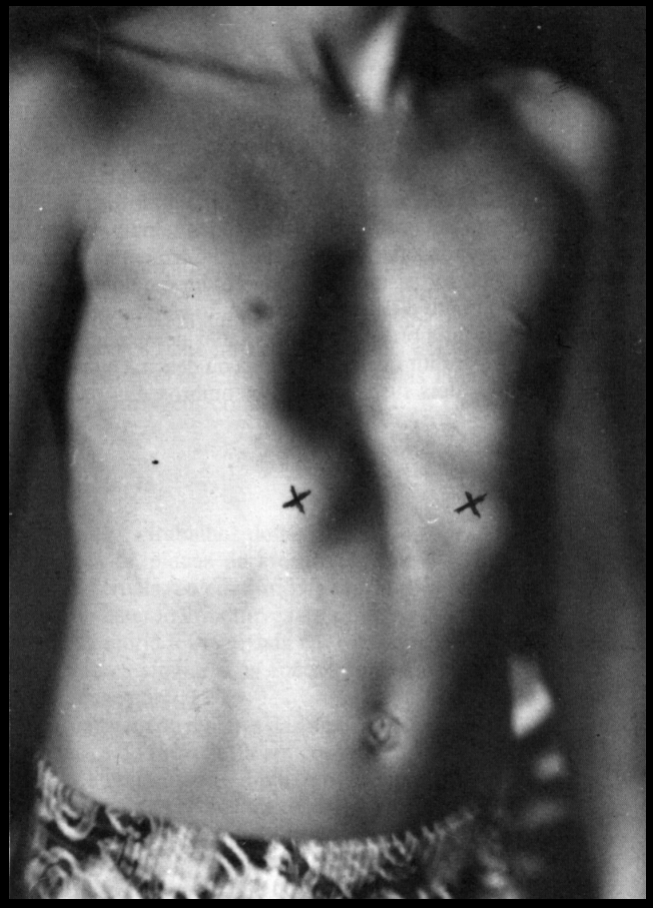
Hérnia de disco

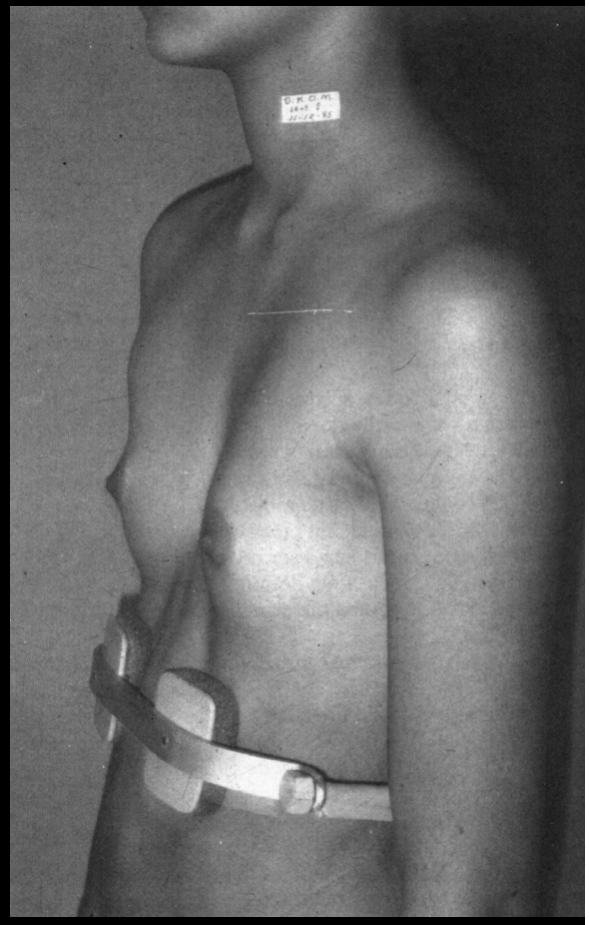


Toráx

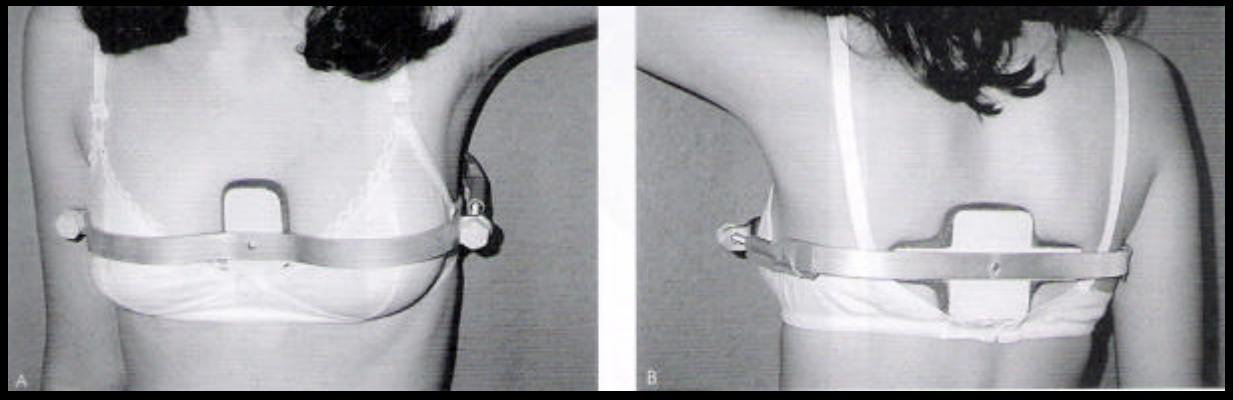
Peito escavado

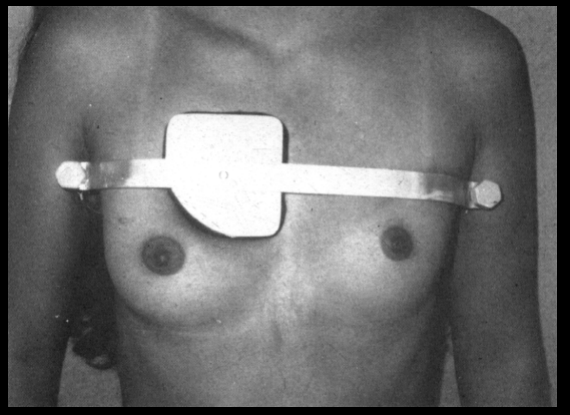




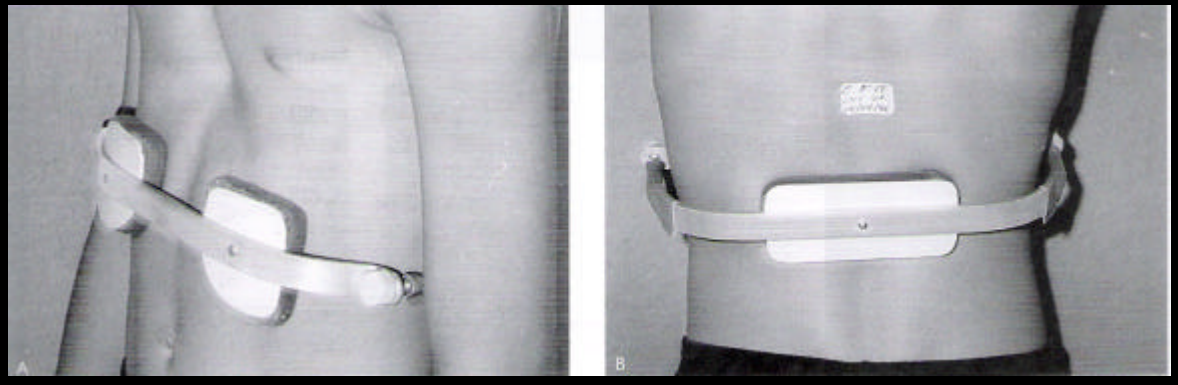


Peito carinado (peito de pombo)





Compressor Torácico Dinâmico



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