

Birth Defect Fact Sheet

Birth Defect Research for Children

Congenital Kyphosis

What is Congenital Kyphosis?

Congenital Kyphosis is a spinal defect that occurs during the first six to eight weeks of embryonic development. The defect causes the spine to develop with a sharp forward bend as it grows. There are two types of kyphosis. 1) Failure of formation of one or more vertebral bodies and 2) Failure of segmentation which occurs when two more vertebrae fail to separate. The cause of Congenital Kyphosis is unknown, but there is no evidence that it is inherited.



**BIRTH DEFECT RESEARCH
FOR CHILDREN, INC**

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The two types of Congenital Kyphosis

Type I: Failure of formation – in this type of kyphosis, part of one or more vertebral bodies fails to form. This usually occurs in the thoracolumbar spine and worsens with growth. Type 1 Kyphosis is usually visible at birth as a lump or bump on the newborn's spine.

Type II: Failure of segmentation – this defect occurs when two or more vertebrae fail to separate. Type II Kyphosis is not usually diagnosed until after the child is walking.

What Causes Kyphosis?

A mistake in development during the first six to eight weeks of life causes the failure of formation (Type I Kyphosis) or failure of segmentation (Type II Kyphosis). Congenital kyphosis is not passed down through families so it is not thought to be hereditary. Kyphosis is more common in girls than boys.

How is Kyphosis Treated?

It is important to for a child with kyphosis to be evaluated and monitored because severe kyphosis can cause spinal cord compression. Some children who are late walkers may actually have spinal cord compression. Doctors will observe any changes in your child's kyphosis through periodic X-rays. If the condition progressive to a severe deformity associated with neurological weakness, surgery may be required to stop the progress of the kyphosis. The type of

surgery depends on the degree of the abnormality. Since kyphosis can be associated with other conditions, it is important for your child to be evaluated for other congenital defects.

Prognosis

Type 1 Kyphosis (failure of formation) can present with 30° - 60° degree deformities. With the rapid growth of the skeleton in the first year of life, progression is highly likely. Type II Kyphosis (failure of separation deformity) has a slower rate of worsening and may not require surgery until adolescence.

Fact Sheet by:

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