

# Scoliosis, lordosis, kyphosis – analyse essay



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Scoliosis, kyphosis and lordosis are conditions in which the spine curves abnormally. In scoliosis, the spine curves sideward and away from the middle in an abnormal fashion. In kyphosis, the spine curves forward in an abnormal fashion, and is characterized by bowing of the back. The individual presents with a classic hunchback. In lordosis, the portion of the lower spine (lumbar spine) is curved excessively inwards, making the individual appear with prominent buttocks. The diagnosis of these conditions is made based on the history, physical examination, use of scoliometer devices, X-rays, CT scans and MRI scans (Rauch, 2006 & Joseph, 2006).

In scoliosis, the individual's spine appears curved towards the side. The shoulders and the hips appear uneven. The individual presents with back pain and tiredness on sitting or standing. Scoliosis can present at birth, due to certain neuromuscular problems or due to an unknown cause. Kyphosis can develop due to congenital problems, degenerative diseases, injuries, infections, tumors, etc. The spine tends to curve abnormally forward in the thoracic region, giving a hunchback appearance. The individual develops back pain, fatigue on standing or sitting, tenderness and spinal stiffness, breathing problems, etc.

In lordosis, the lower portion of the spine, tends to curve in excessively inwards. It can be caused due to several reasons including achondroplasia, spondylolisthesis, diskitis, etc. In the juvenile period, some amount of lordosis occurs, but it should get better with age (Rauch, 2006 & Joseph, 2006). Many of the abnormal curves of the spine that are mild may require no treatment and usually resolve with age. In moderate severity, conservative treatment such as use of braces (devices which help straighten

the spine), orthopedic appliances, medications and physical therapy, help to treat the condition.

In more severe cases, surgical correction is required. The outcome of treatment is good, if the condition is diagnosed and treated promptly (Rauch, 2006 & Joseph, 2006). One of the main exercises meant for scoliosis is with an exercise ball. In this the individual has to lie with the stomach on the ball. Slowly, he/she should move forwards such that the abdomen and chest is parallel to the ball. The hands and the feet should also be parallel to the ball. The individual should hold this position on a count of five, and should be continued ten times. This exercise strengthens the muscles of the back and the shoulders (Danek, 2005).

In kyphosis, studies have shown that exercises usually cannot help to correct the defective spine, but can help relieve the signs and symptoms. However, if started at an early age, stretching and relaxation exercises can help to correct the defective spine to a slight extent (Odom, 1997). For lordosis, the individual should get into a push-up position and tuck the hips inwards. The back should be kept straight at the same time. This position would apply pressure on the abdominal muscles, causing alleviation of pain. This exercise should be performed and repeated in front of the mirror (Bookspan, 2007).

#### Reference

<http://www.drbookspan.com/AbsArticle.html>

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