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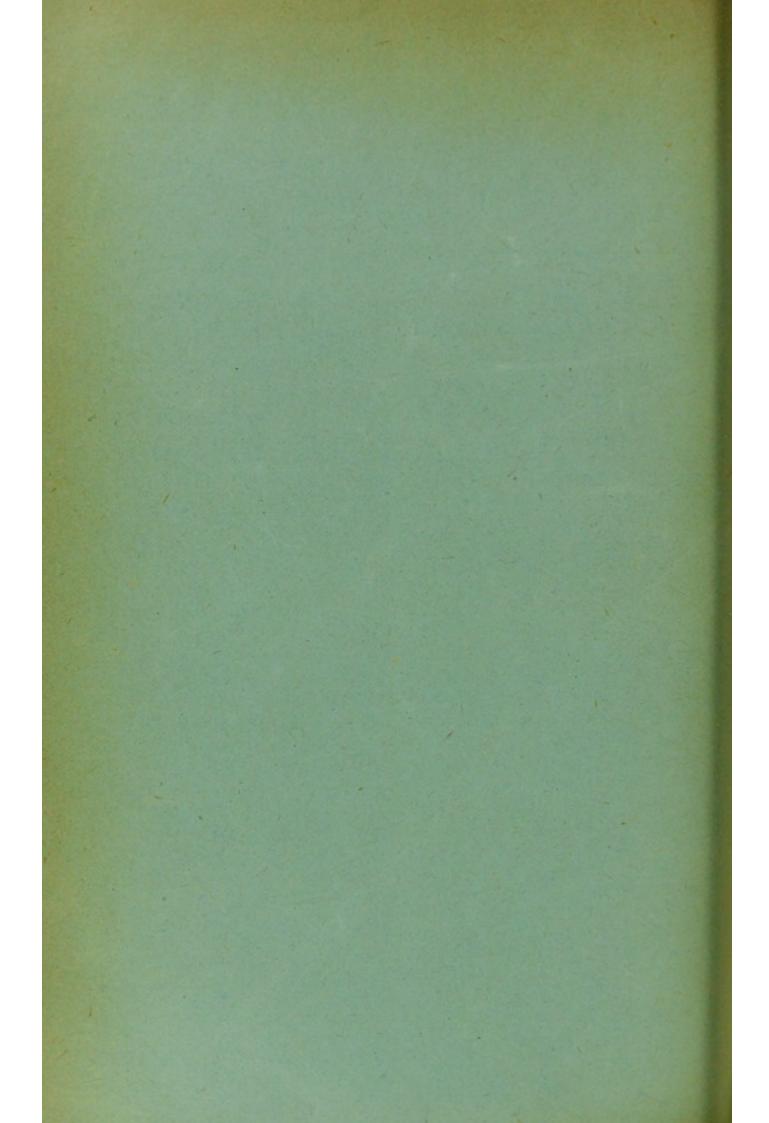


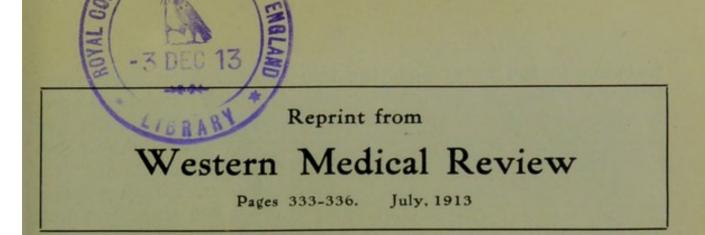
A Report on the Abbott Method for the Rapid Complete Correction of Lateral Curvature of the Spine.

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A Report of the Abbott Method for the Rapid Complete Correction of Lateral Curvature of the Spine.

*By H. WINNETT ORR, M. D., Lincoln.

Curvature of the spine, scoliosis, or rotary lateral curvature has been transferred in the last two years from the list of incurable to the list of curable diseases. This has been one of the vexed problems of orthopedics and there is hardly an expedient, whether of massage, exercises, braces or even surgical operation which has not been suggested and exhausted in the effort to correct these crooked spines.

About two years ago a new treatment was worked out, since known as the Abbott method, the principles underlying which were enunciated by Dr. E. G. Abbott of Portland, Maine. This has placed in the hands of orthopedists for the first time a method by means of which anatomical correction of this deformity can be obtained.

To secure correction of scoliosis by the Abbott method it is necessary to adopt exactly the same procedure as we have been accustomed to use in correcting deformities of the extremities. That is to say, the existing deformity must not only be corrected but it must be over-corrected and the affected parts must be maintained for a time at least in a state of over-correction. This establishes what may be called the normal range of motion and provides against recurrence of the deformity when treatment is discontinued.

Our treatment of scoliosis heretofore has aimed at the application of all the extension of the spine and lateral pressure to the trunk that the patient could stand. We either were taught or assumed that to correct the rotation of the vertebrae which exists in lateral curvature, was difficult or impossible and that therefore the rotation was to be disregarded. Dr. Abbott's

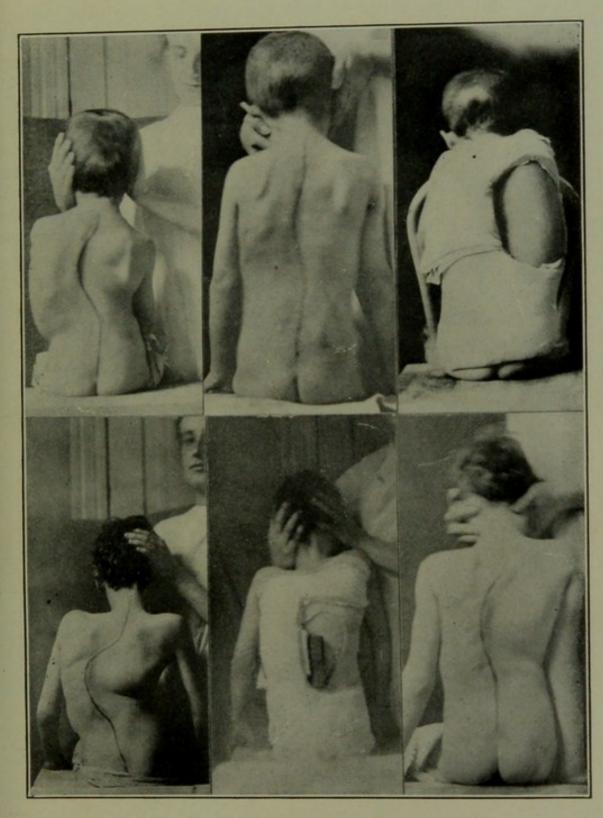
^{*}Read before the Nebraska State Medical Association, Omaha, May 13-15, 1913.

teaching brings us at once the two revolutionary suggestions that in the treatment of scoliosis both extension and lateral pressure are unnecessary and that flexion of the spine with pressure applied in such a way as to produce rotation are the elements necessary to secure correction of the deformity.

Dr. Abbott, by means of a long series of X-Ray pictures on normal and deformed spines and by a number of experiments, worked out the relation of the rotation of the vertebrae to the different types of curvature. From these observations he concluded that all the rotary lateral curvatures are primarily twist deformities and that the twisting takes place always with the spine in flexion. He concluded very naturally then that correction must be a process of untwisting and that the vertebrae must return to their former position with the spine in flexion—and through the same arc as that through which they went as the deformity was produced.

The technique employed by Dr. Abbott is to put the patient into a plaster jacket with the spine in flexion, and by means of a special apparatus partially untwist the deformity as the jacket is applied. With this jacket finished, windows are cut in it over the concave (or hollow) portions of the deformity. Then for a period of weeks or months the untwisting of the deformity is continued by the forcing in of felt pads between the convex (or prominent) parts of the deformity, and the solid portions of the plaster jacket. With the shoulders and pelvis held firm this gradually corrects and in time over-corrects the deformity. Finally a removable celluloid jacket or brace is applied with the spine in over-correction; the patient has this removed daily for massage and special exercises and a permanent result is obtained. Moreover this is all accomplished in a few weeks or months instead of the patient remaining under treatment for vears as heretofore.

The technique employed by Dr. Abbott has been undergoing gradual change by himself and others ever since he first began his work. It is doubtful whether any of us who are using the so-called "Abbott method" can succeed in conforming exactly to his ideas in the application of jackets, etc. It is my purpose however, by the stereopticon slides shown herewith, to call your attention to a few of thirty patients treated by me during the past year and to show you that Dr. Abbott's method, even in the hands of one of the disciples, can be productive of results which seem miraculous as compared with our failures in this class of patients heretofore.



Method and Preliminary Results of New Abbott Method for the Treatment of Curvature of the Spine.

Upper row—R. O.; age 6; pictures taken in July, September and November. Lower row—W. M.; pictures taken in July, August and October, 1912. One surprising thing is that this method is applicable and gives us results not only in the fairly flexible deformities of young children but in fixed deformities of adults which have existed for a period of years. An interesting feature of the treatmentialso is the fact that the patients do not complain of more distress or discomfort in these jackets than they did when treated by the old method. The length of time necessary to effect a cure is comparatively short. A few weeks is often sufficient to secure correction of the existing deformity, while over-correction and the application of the final jacket may often be accomplished in from three to six months time. Much of course depends upon the type of deformity and much also upon the faithfulness of the patient in adhering to the after care.

Dr. Abbott has made a valuable and brilliant contribution to the mechanical side of orthopedics. Although papers are already appearing in the literature on "Improvements in the Abbott Technique," it is the opinion of the present writer that it will be a long time before anything more than minor details are added to the very thorough work already done by Dr. Abbott.