



UNDERSTAND THE CONDITION - KNOW THE NEXT STEP

Adult Scoliosis

Adult scoliosis is a side-to-side spinal curve that may persist from adolescence or develop with age-related degeneration. It can cause back pain, leg symptoms, imbalance, or reduced walking tolerance. Many people are treated without surgery; reconstruction is reserved for progressive deformity or substantially limiting symptoms.

What you may feel

- Uneven shoulders, waist, or hips, back pain, fatigue, or difficulty standing upright.
- Leg pain, numbness, weakness, imbalance, or reduced walking tolerance when nerves or alignment are affected.

How it is evaluated

- Posture, walking, strength, sensation, reflexes, and the effect on daily function are evaluated together.
- Full-length standing X-rays show the curve and overall alignment; MRI and CT are used selectively for nerves and bone.

How treatment typically progresses

1 Treatment usually starts without surgery

- Physical therapy, strength and flexibility work, activity modification, and pain-management strategies may improve function.
- Treatment targets the symptoms and functional limits that matter to the patient rather than the X-ray alone.

2 When surgery enters the discussion

- The deformity is progressing or pain, imbalance, nerve symptoms, or loss of function remain substantially limiting.
- The potential benefit of reconstruction is weighed against its complexity, recovery, and individual risk.

Emergency: go now

- Seek emergency evaluation for new loss of bladder or bowel control, inability to urinate, saddle-region numbness, or rapidly progressive leg weakness.

Contact the office promptly

- Contact the office for quickly worsening walking or balance, new leg weakness or numbness, repeated falls, or a major functional decline.

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This handout provides general education and does not diagnose a condition or replace individualized medical advice, examination, imaging review, or emergency care.



greenbergspinemd.com/adult-scoliosis/

FOR THIS VISIT

Your plan today

Your care team has checked the items below that apply to you. Keep this with you and bring it to your next visit.

**Medications
started today**

- ☐ muscle relaxant ☐ anti-inflammatory (ibuprofen/naproxen) ☐ acetaminophen (Tylenol)
☐ gabapentin / pregabalin ☐ steroid taper (Medrol) ☐ duloxetine ☐ other: _____

Imaging ordered

- ☐ MRI ☐ CT ☐ X-ray (flexion/extension) ☐ standing films ☐ CT myelogram

→ scheduling: ☐ you'll schedule ☐ our office / imaging center will call you

Other studies

- ☐ EMG / nerve conduction ☐ DEXA bone density ☐ vascular study (ABI) ☐ labs: _____

**Physical therapy
& activity**

- ☐ PT - convenient location; order sent ahead ☐ home exercise program
☐ activity restrictions: _____ ☐ assistive device (cane/walker) ☐ TENS unit

Bracing

- ☐ none needed ☐ lumbar (LSO) ☐ cervical collar ☐ as directed: _____

Injection

- ☐ Ordered - referral to a pain-management specialist → ☐ they will call you ☐ you will call them

Surgery

- ☐ To be scheduled - our surgical scheduler will call you. If you haven't heard within 5 business days, call (260) 484-1400.

**Before surgery
clearance & prep**

- clearance: ☐ primary care ☐ cardiology ☐ neurology ☐ pre-op labs ☐ smoking cessation
☐ stop blood thinners as directed

Referrals

- ☐ Bone Health Clinic (osteoporosis) ☐ weight / nutrition ☐ pain management (medication)
☐ other: _____

**Work / activity
status**

- ☐ work / school note ☐ off work until _____ ☐ modified duty ☐ FMLA / disability forms

Follow-up

in _____ weeks ☐ after your MRI / injection / EMG ☐ as needed

Notes & questions for your next visit
QUESTIONS OR NEW SYMPTOMS

Call us

Office · (260) 484-1400 · Scheduling · (260) 484-1400 · After hours · (260) 484-1400