# **ORAL PRESENTATION**



**Open Access** 

# Clinical measurement of sagittal trunk curvatures: photographic angles versus rippstein plurimeter angles in healthy school children

Łukasz Stoliński<sup>1\*</sup>, Dariusz Czaprowski<sup>2</sup>, Mateusz Kozinoga<sup>1</sup>, Tomasz Kotwicki<sup>3</sup>

*From* 11th International Conference on Conservative Management of Spinal Deformities - SOSORT 2014 Annual Meeting Wiesbaden, Germany. 8-10 May 2014

Wessbaden, Germany. 6 16 May

# Background

Digital photography is a simply method to calculate quantitative photographic parameters of the body posture in the frontal and sagittal plane.

# Aim

The aim of the study was to determine the correlation between the measurements of the sagittal trunk curvatures carried out with two diagnostic tools: photography and Rippstein plurimeter.

# Design

This is a reliability study.

# Methods

Sixty-one asymptomatic children (31 girls, 30 boys) aged 7-9 years (mean 7.9  $\pm$ 0.8) were assessed once by one observer for the sagittal curvatures of the trunk: thoracic kyphosis (TK), lumbar lordosis (LL) and sacral slope (SS) first with digital photography and with Rippstein plurimeter. Statistical analysis was performed using paired Student t-test, Wilcoxon matched-pairs and Pearson correlation coefficient.

#### Results

There was no significant difference regarding the measurement of TK performed with photography versus plurimeter (43.3° ±8.8 vs. 43.0° ±8.4, p=0.47). Differences were found for LL (39.8° ±8.2 vs.38.3° ±8.5, p<0.0001) and SS (23.3° ±6.0 vs. 22.7° ±6.4, p=0.024). Significant correlation between measurements performed with photography

<sup>1</sup>Rehasport Clinic, Spine Disorders Unit, Department of Pediatric Orthopedics and Traumatology, University of Medical Sciences, Poznań, Poland Full list of author information is available at the end of the article versus Rippstein plurimeter were observed: TK (r=0.949, p<0.0001), LL (r=0.951, p<0.0001) and SS (r=0.944, p<0.0001).

### Conclusions

Although significant difference for LL and SS were found, the difference between measurements is small, so it seems that photography and Rippstein plurimeter can be used for assessment of sagittal trunk curvatures in the clinical assessment.

#### **Competing interests**

There was no conflict of interest in relation to this study.

#### Authors' details

 <sup>1</sup>Rehasport Clinic, Spine Disorders Unit, Department of Pediatric Orthopedics and Traumatology, University of Medical Sciences, Poznań, Poland.
<sup>2</sup>Department of Physiotherapy, Józef Rusiecki University College, Olsztyn, Poland. <sup>3</sup>Spine Disorders Unit, Department of Pediatric Orthopedics and Traumatology, University of Medical Sciences, Poznań, Poland.

#### Published: 4 December 2014

#### References

- Ferreira EAG, Duarte M, Maldonado EP, Burke TN, Marques AP: Postural assessment software (PAS/SAPO): validation and reliability. *Clinics* 2010, 65(7):675-81.
- Stoliński Ł, Kotwicki T, Czaprowski D: Active self correction of child's posture assessed with plurimeter and documented with digital photography. *Progress in Medicine* 2012, 25(6):484-490.

#### doi:10.1186/1748-7161-9-S1-O15

**Cite this article as:** Stoliński *et al.*: **Clinical measurement of sagittal trunk** curvatures: photographic angles versus rippstein plurimeter angles in healthy school children. *Scoliosis* 2014 **9**(Suppl 1):O15.



© 2014 Stoliński et al; licensee BioMed Central Ltd. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited. The Creative Commons Public Domain Dedication waiver (http:// creativecommons.org/publicdomain/zero/1.0/) applies to the data made available in this article, unless otherwise stated.