

Patient Success Story: Jacobe's Mini Scoliosis Surgery

JACOB was first diagnosed with a spinal curve at age 13 when she was in the 7th grade. Jacobe's mom Janice wanted an opinion from a surgeon who specializes in only scoliosis. "We did extensive research and talked to multiple parents whose children had successful scoliosis surgeries performed by Dr. Geck. He came highly recommended," Janice remembers.

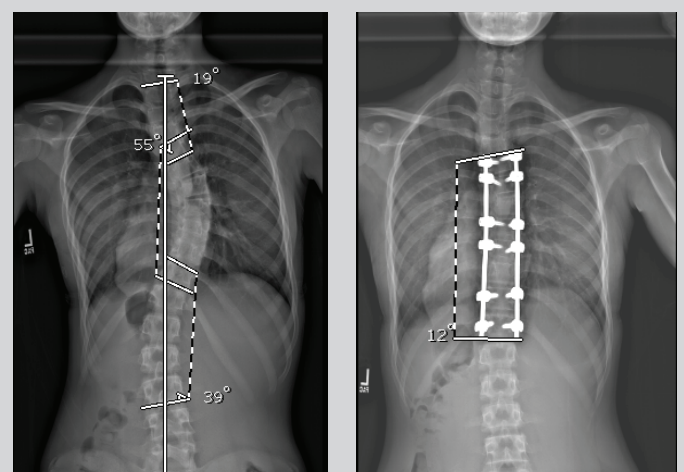
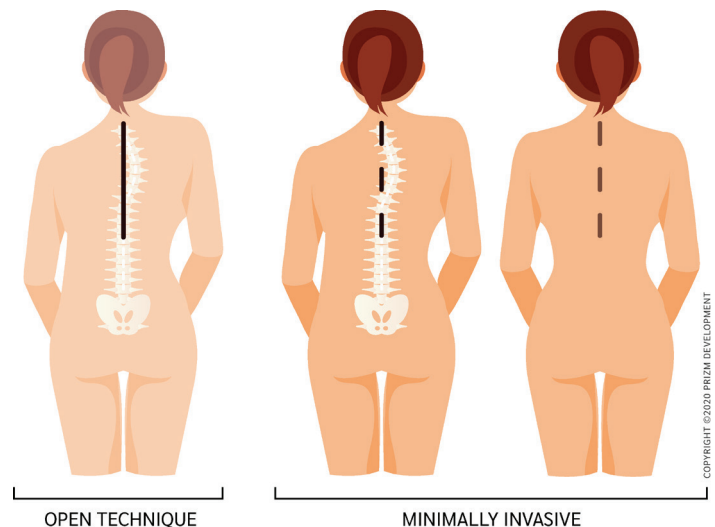
Dr. Geck at the time recommended that she wear a brace. She subsequently wore a Boston Brace for 18 hours a day for one and a half years. But follow up X-rays revealed that Jacobe's curve was worsening at an alarming rate to almost 50 degrees.

"We felt we were likely headed toward surgical correction for Jacobe, so we focused in on a surgeon who could perform mini scoliosis surgery. That was a huge decision factor for our child. When Dr. Geck assessed Jacobe, we were pleased that he felt she would be a candidate for the mini scoliosis surgery approach. Mini scoliosis surgery would involve less blood loss with the three smaller incisions rather than one large one."

The decision to proceed with Jacobe's surgical correction at age 14 was a serious one for Jacobe and her parents. "I didn't feel any back pain, the only thing we noticed was that my ribs were tilted out," remembers Jacobe. "So it was a serious decision to go forward with an elective surgery when I didn't have pain symptoms. But we visited with several pediatric orthopedic surgeons, and all the surgeons confirmed that I

would need surgery at some point — just a question of when. They all emphasized that the key was to perform the surgery sooner rather than later. By doing surgery while I was in my teens, my spine would be more flexible and my recovery would be faster and less traumatic."

Jacobe's mom Janice recalls the family decision process: "There is never a good time to have a major surgery. Because she had no pain symptoms, it was a difficult decision to go forward with an elective surgery. We were told that once the curve progressed past 50 degrees, it would worsen at least one degree per year. We were therefore worried she would be very deformed and the curve would impact her



In Minimally Invasive Scoliosis Surgery 3 smaller incisions are made instead of a long 10 inch incision. The smaller incisions speed return to activity. Jacobe's thoracic curve had worsened to 55° (left) making surgical correction necessary. After surgical correction, her curve was reduced to 12° (right) with only three small scars. She returned to her favorite activity — creative dance.

internal organs, impact her quality of life and compromise her lifespan.”

The family concluded that a spinal correction surgery was inevitable and decided to move forward with Dr. Geck. At the time of surgery, Jacobe’s spinal curve had worsened

to about 55 degrees. Dr. Geck performed mini scoliosis surgery, making three smaller incisions rather than a long 12-inch incision to access the spinal vertebrae. Using instruments and screws that were installed into the vertebrae, Dr. Geck successfully de-rotated Jacobe’s spine

through the smaller incisions.

Janice notes that the surgery was successful in reducing Jacobe’s curve from 55 degrees at the time of surgery, to about 12 degrees, a minimal curve that is largely unnoticeable, and should not have any negative impact on her internal organs or lifespan.

“After surgery, Dr. Geck had a few limitations on my activity for a couple months while I was recovering,” remembers Jacobe. “But after that period, I have no limitations, and I can do everything I would normally do. I am on the high school drill team and I love dancing. Ironically, I tried out for the drill team the day before I was going to have surgery, and I made the team. So I just had to get through the three-month recovery period to rejoin the dance team. The recovery was very fast and it was great to get back to the team.”



PHYSICIAN BIO

MATTHEW GECK, MD

Board-certified Orthopedic Surgeon • Fellowship-Trained in Adult and Pediatric Spine Surgery

Specializing in Scoliosis & Spinal Deformity

Co-Chief, Ascension Texas Spine and Scoliosis Center, Austin Texas • Chief, Scoliosis and Complex Spine Program

Assistant Professor Dell Medical School Department of Surgery and Preoperative Care

Co-Founder, Co-Medical Director of SpineHope, a non-profit organization that transforms the lives of children with spinal deformities worldwide through surgery, education and research



Matthew J. Geck MD is a board-certified, fellowship-trained spine and scoliosis surgeon. Dr. Geck’s practice is exclusively focused on the niche of spine and scoliosis surgery. This includes patients with adult and pediatric scoliosis, kyphosis, failed surgeries, spinal cord compression, flatback syndrome from Harrington Rods and other complex spinal problems. His specialty spine practice has been based in Austin since 2002. Over the past 20 years, Dr. Geck has performed over 2,500 spine surgeries. His scoliosis practice receives patients from across Texas, surrounding patients and Mexico. He also performs surgeries in South America through his non-profit foundation SpineHope.

Dr. Geck’s focus is on pediatric and adult patients with scoliosis, kyphosis, spinal cord compression, failed previous surgeries, and other complex spinal problems. He is experienced in minimally invasive scoliosis surgery, spinal stapling and tethering (fusionless scoliosis surgery), complex spinal reconstruction, osteotomy surgery, and revision surgeries.

Dr. Geck was raised in Wisconsin. He performed his undergraduate work at the University of Wisconsin in the Medical Scholars program and graduated Phi Beta Kappa. He attended medical school at the University of Wisconsin School of Medicine and graduated Alpha Omega Alpha. Dr. Geck performed his orthopedic surgery residency at UCLA Medical Center. He then performed two spine fellowships in adult and pediatric spine surgery, the first at Jackson Memorial Hospital and a second in pediatric scoliosis and kyphosis surgery at Miami Children’s Hospital. He moved to Austin, Texas in 2002 where he started his spine deformity practice.

Dr. Geck has authored more than 80 scientific papers, book chapters, and abstracts for the journals Spine, The Journal of Spinal Disorders, Orthopedic Clinics in North America, The Spine Journal, and the Journal of the Scoliosis Research Society: Spinal Deformity, and presentations at the Scoliosis Research Society, International Meeting for Advanced Spinal Techniques, North American Spine Society, Cervical Spine Research Society, the Society for Minimally Invasive Surgery of the Spine, and the American Academy of Orthopaedic Surgeons.

Dr. Geck was certified by the American Board of Orthopaedic Surgery in 2004 and is a Fellow of the American Orthopedic Association, the Scoliosis Research Society, North American Spine Society, and the American Academy of Orthopedic Surgeons, the Society for Minimally Invasive Surgery of the Spine, and the Cervical Spine Research Society.

Dr. Geck also contributes his time as Medical Director for SpineHope which performs free spine surgery for children in poverty-stricken countries across South America and elsewhere. Dr. Geck has traveled to more than 20 international locations, performing spinal deformity surgeries at various hospitals across South America. He has supervised or performed over 200 spine surgeries in these locales, and has seen over 1,000 children with severe or neglected spinal deformities. Through SpineHope, Dr. Geck provides advanced training to local spine surgeons at these hospitals in the specialty of spinal deformity and scoliosis. To learn more about this foundation, visit SpineHope.org.