

ORAL PRESENTATION

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Trunk Appearance Perception Scale (TAPS) discrepancy between scoliosis children and their parents influence the SRS-22 score

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Background

The Trunk Appearance Perception Scale (TAPS) is a valid instrument to assess self perception of trunk deformity [1]. The SRS-22 has been widely used to measure Health Related Quality of Life in scoliosis population but it is not clear which factors can influence its final score [2-4].

Study

Trunk deformity can be perceived differently by children and parents [5,6]. The aim of this study was to check whether different perception of the trunk deformity between patients and parents is a factor influencing the SRS-22 or not.

Materials and methods

Prospective study including 71 (62 F, 9 M) patients with idiopathic scoliosis (treated and non treated), attending the clinic with their parents. Mean age $17 \text{ y} \pm 5.7$. Mean Cobb angle $37^\circ \pm 15^\circ$. All patients completed the SRS-22 and the TAPS. Parents completed the TAPS assessing trunk deformity of their children. A coefficient of discrepancy (TAPS-CD) was defined. Statistical analysis was performed by using SPSS to compare TAPS, TAPS-CD and SRS-22.

Results

Results showed a negative correlation between TPAS-CD and the total SRS-22 ($p < .05$) and treatment satisfaction ($p < .05$). A significant positive correlation was found between patients TAPS, self-image and pain and between parents TAPS, function and treatment satisfaction in the

SRS-22. Two groups were created according to the SRS-22 score. Patients with higher score in the SRS-22 showed a higher TAPS-CD ($P < .05$).

Conclusion

Discrepancy in Trunk Deformity Perception between children and parents influence the SRS-22 of the children. Patients' perception and parents' perception of trunk deformity influence the SRS-22 differently.

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