Discussion and conclusion.– The management of the BU associate (rifampicin and streptomycin) and surgery consisting of resection of necrosis or granuloma Mycobacterium ulcerans with a skin graft. The children go without follow with heavy disabilities and poor function of the members requiring surgical treatment and rehabilitation.

References
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P078-e
Infrared thermograms: Orthopedic diagnostics support
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Aim.– To quantify the preparatory residual fault of strephenopodia by using Infrared Thermography (IRT) and plantar pressure platform. IRT showed local increases in tissues temperatures that are observed as hot points or non-homogeneity zones on the thermal cartography, which could be used as a new assessment tool for a variety of medical clinical problems studying [2].

Materials.– An Infrared camera (Infratec VarioCAM-hr) [precision: ±2%;] was used in order to measure the cutaneous temperatures. Besides, a Zebris platform (sampling frequency: 90 Hz, precision: ±5%) allowed plantar pressure repartitions (PP) in standing position as well as center of pressure (CoP) parameters.

Methods.– Three boys suffering from unilateral strephenopodia were assessed before surgery (tibial muscle transfert).

Results.– StaticPP were 37% for the forefoot and 63% for the backfoot. Mean CoP was 17 ± 1 mm right and 13 ± 1 mm left which corresponds to 15,3° in the strephenopodia side. Only anterior-posterior CoP displacement in static condition and during 30s standing were significant (p<0.01). Significant temperature differences between healthy foot and strephenopodia were reported only post-effort (TAF = 0.82°C; TAF = 0.80°C; TAF = 0.96°C).

Discussion.– The significant correlation obtained between thermal zones, PPs and CoPs shows the possibility of quantification and follow-up of pathologic-related locomotor dysfunction. This study showed that IRT is not only a reliable tool but also a complementary analysis to posturography for pre-surgery orthopedic assessment and post-surgery strephenopodia follow-up.

References
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P080-e
Quality of life of adolescents with brace-treated idiopathic scoliosis
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Keywords: Idiopathic scoliosis; Chêneau brace; Quality of life

Introduction.– Brace of idiopathic scoliosis can have a psychological and physical negative impact specially with adolescents. The main objective is to determine the influence of treatment by Chêneau brace on the quality of life (QoL) of adolescents with idiopathic scoliosis.

Materials and methods.– This is a cross-sectional study performed on 36 scoliotics divided into two groups. The first one included 18 brace-treated adolescents, the second 18 patients just rehabilitated. We evaluated their QoL by using “the Quality of Life Profile for Spine Deformities” scale (QLPSD) of Climent, SRS-22 scale and visual analogue scales (VAS) ranging from 0 to 100 mm.

In a second step we studied the correlation between QoL and correction angle, duration of brace wearing, age, Risser index and sex.

Results.– It’s about 16 boys and 20 girls, the average age is 14 (10 to18). The QoL of patients without brace is significantly better than that of brace-treated patients for the overall score using the three scales. We had scores of 42, 83 and 35 for QLPSD, SR-22 and VAS against 61,78 and 55 for brace-treated.

In a second step we studied the correlation between QoL and correction angle, duration of brace wearing, age, Risser index and sex.

Discussion and conclusion.– Even though the brace does not influence back pain in idiopathic scoliosis at teenage, it’s obvious that wearing the Chêneau