

Fig. E1-A



Fig. E1-B

Figs. E1-A through E1-D Long standing radiographs of a seventy-one-year-old man in the primary group with kyphoscoliosis. **Fig. E1-A** Preoperative anteroposterior view showing a thoracolumbar scoliosis of 84°. **Fig. E1-B** Preoperative lateral view showing a lumbar lordosis of 17°.

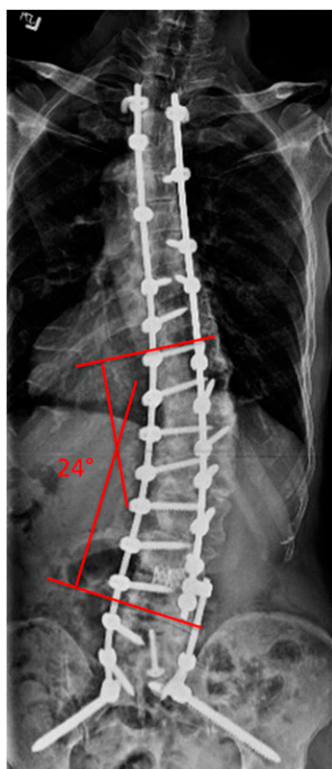


Fig. E1-C

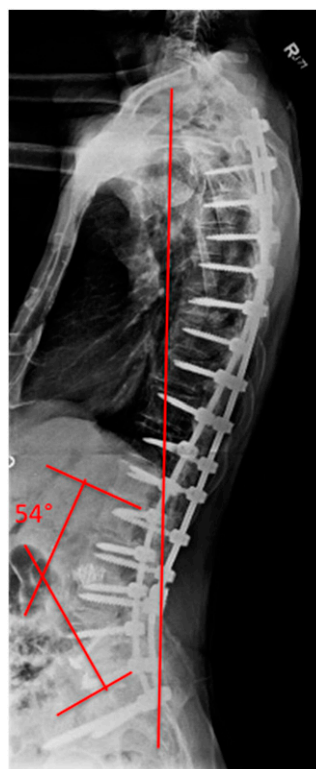


Fig. E1-D

Fig. E1-C Postoperative anteroposterior view showing a correction of scoliosis to 24° with posterior spinal instrumentation and arthrodesis from T3 to S2.

Fig. E1-D Postoperative lateral view showing a correction of lumbar lordosis to 54°.

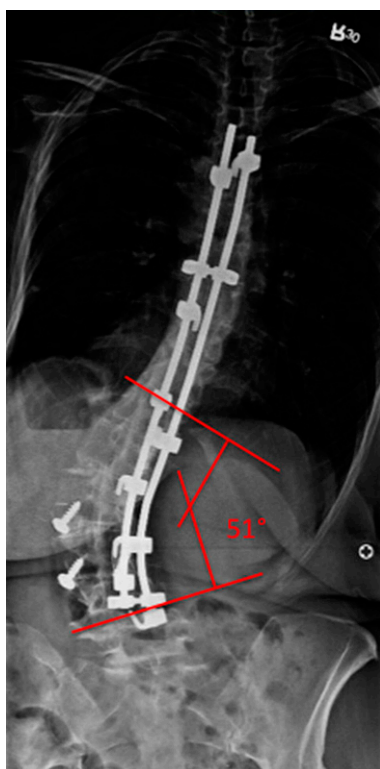


Fig. E2-A

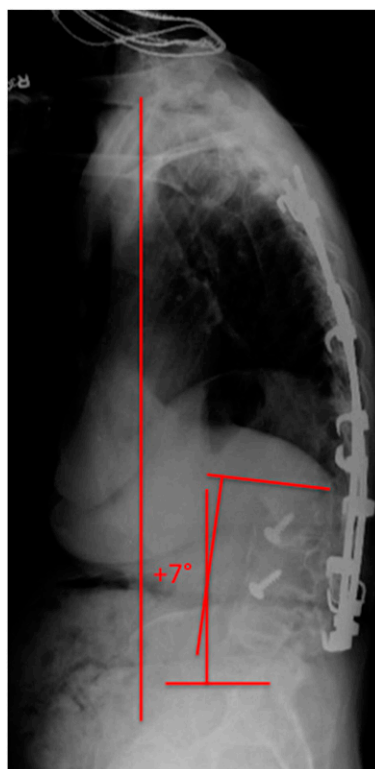


Fig. E2-B

Figs. E2-A through E2-D Long standing radiographs of a sixty-eight-year-old woman with scoliosis who had multiple previous surgical procedures, including a posterior arthrodesis. **Fig. E2-A** Preoperative anteroposterior view showing substantial coronal imbalance. **Fig. E-2B** Preoperative lateral view showing a lumbar kyphosis of 7°.

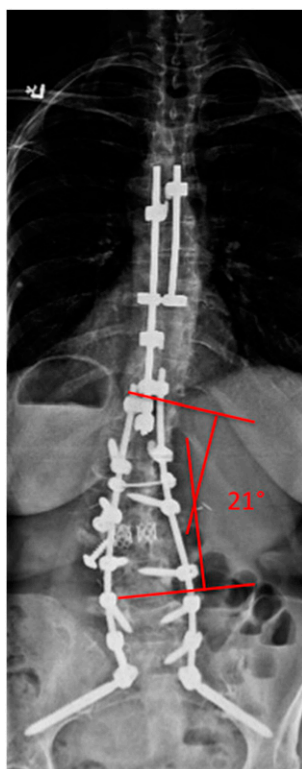


Fig. E2-C

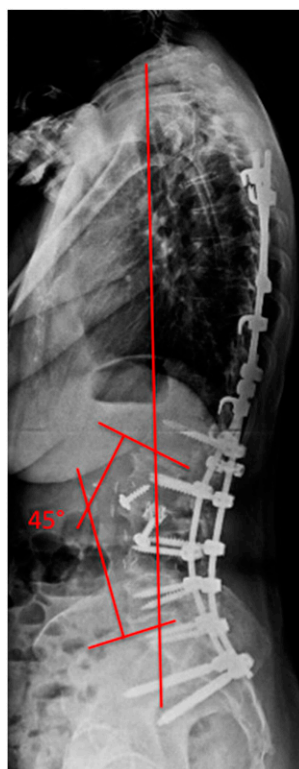


Fig. E2-D

Postoperative anteroposterior (**Fig. E2-C**) and lateral (**Fig. E2-D**) views showing good coronal and sagittal balance obtained via extension of the arthrodesis to the pelvis with an extended pedicle subtraction osteotomy performed at L3.

*The values are given as the mean and range.