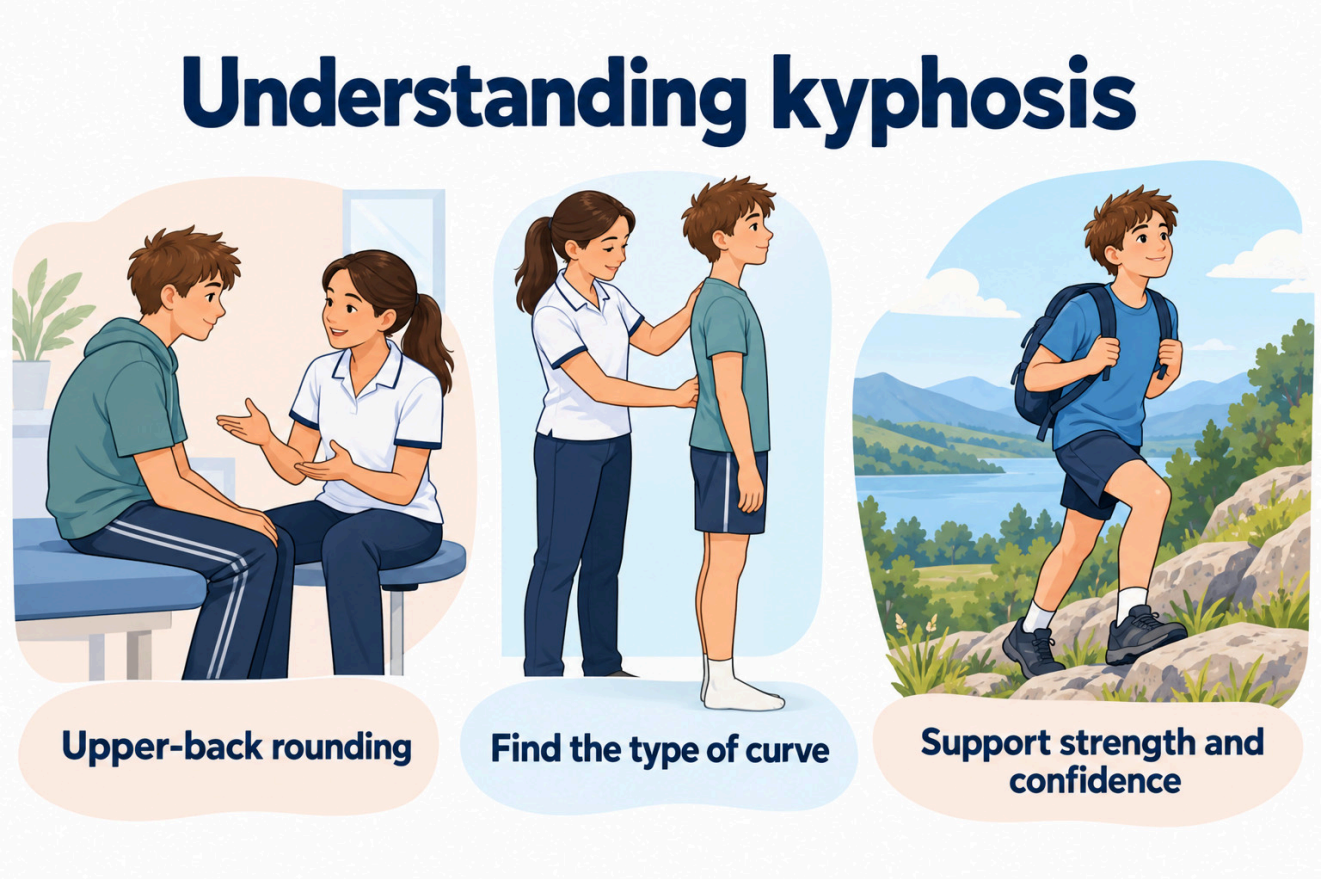
Kyphosis in Children

Information for children, parents and carers

Kyphosis in Children

A guide to symptoms, treatment and recovery



Understanding the condition

Kyphosis describes forward rounding of the upper back. A small thoracic curve is normal; a more pronounced curve may be called hyperkyphosis. The type of curve guides assessment and treatment.

Supporting your child

Many children have mild curves and function normally. Postural curves and structural curves need different plans. Physiotherapy, monitoring and sometimes specialist treatment support comfort and confidence.

Symptoms and assessment

Understanding the cause and when to seek help

Postural kyphosis

A flexible rounded posture, often noticed in teenagers, may improve when standing more upright. Muscle weakness and long periods slouching can contribute. It often causes little or no pain.

Scheuermann’s and congenital kyphosis

Scheuermann’s is a structural condition involving wedge-shaped vertebrae during growth; its curve is more rigid. Congenital kyphosis relates to spinal development before birth and needs specialist care.

Possible symptoms

A rounded upper back, stiffness, tiredness with sitting or standing, mild pain after activity or tight hamstrings may occur. Some children feel self-conscious about the shape of their back.

How is it assessed?

The clinician checks spinal flexibility, posture and muscle strength. X-rays may measure the curve and help identify its type, especially when a structural cause is suspected.

When to request review

Seek advice for an increasing or rigid curve, persistent pain, numbness, tingling or weakness, walking or coordination changes, or breathing problems. New neurological or breathing symptoms need prompt assessment.

Key message

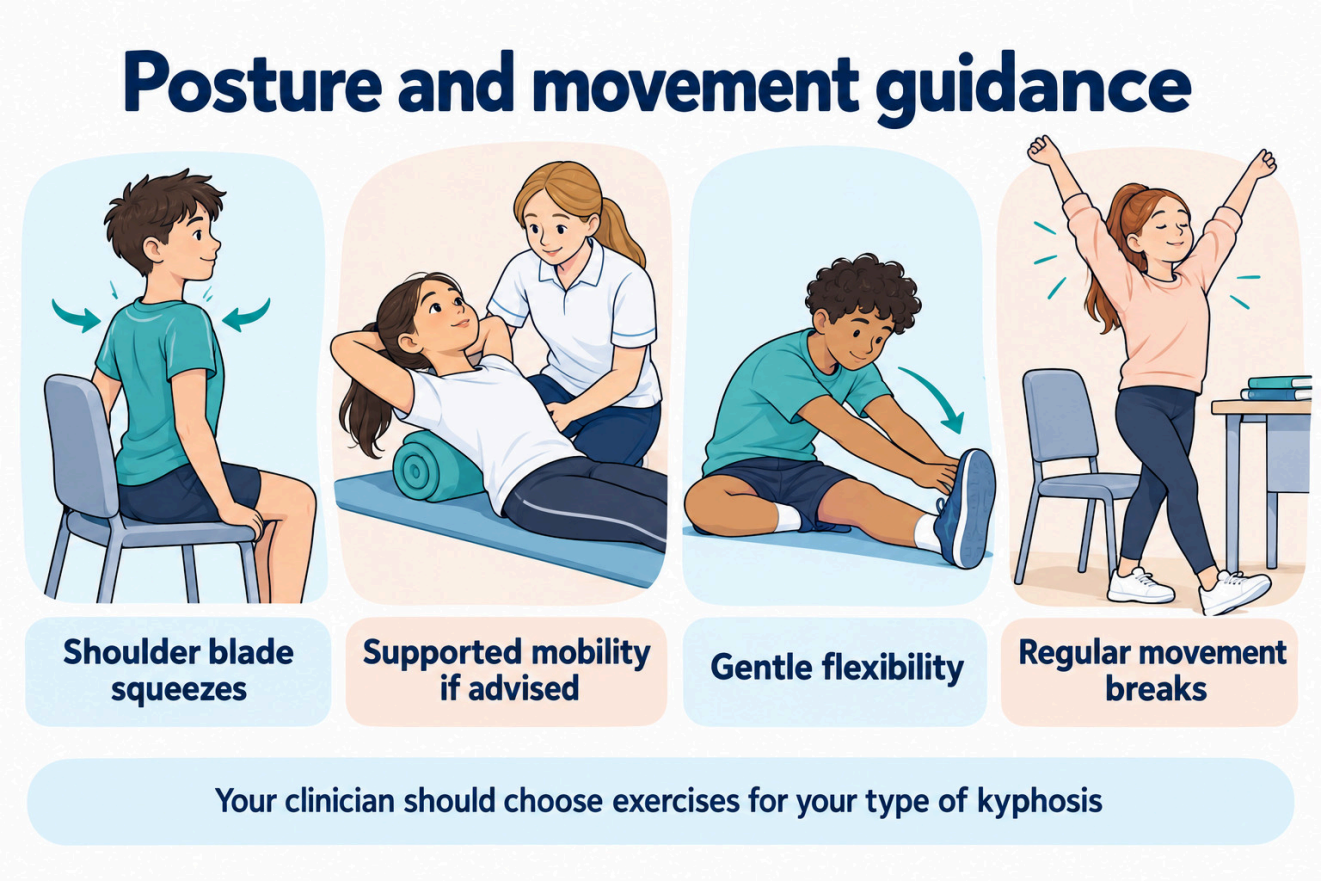
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Exercises and rehabilitation

Activity guided by your child's healthcare team

Before starting activity

Your clinician should identify the curve type before choosing exercises. These are examples for an individual programme, not a way to correct every structural curve.



Activity guidance

Shoulders: gentle shoulder blade squeezes if advised.
Upper back: supported extension over a rolled towel if taught.
Flexibility: gentle hamstring stretching and core work as prescribed.
Habits: interrupt prolonged slouching with movement breaks.

Important precautions

Do not force the spine straight or use painful movements. Ask for review if the curve increases, pain persists, or weakness, altered sensation, walking changes or breathing problems develop.

Treatment and next steps

Caring for your child and finding support

Postural curves

Physiotherapy may combine back and core strengthening, flexibility and posture advice. Regular movement breaks and reducing long periods of slouching can help. Support confidence and avoid blame about appearance.

Structural curves

Scheuermann's care depends on curve size, symptoms, growth and age. Physiotherapy, monitoring or a brace may be recommended; surgery is reserved for selected severe cases. Congenital kyphosis needs specialist growth monitoring.

Support at home

Take screen breaks every 30-45 minutes, use a supportive chair with feet flat and encourage suitable active play. Avoid heavy backpacks and use both straps. Reassurance helps children who feel self-conscious.

Questions or concerns?

Arrange review for a worsening or rigid curve or persistent pain. Seek prompt advice for numbness, tingling, weakness, altered walking or coordination, or breathing problems. Keep any specialist follow-up plan.

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