



Department of Orthopaedics and Trauma Club Foot

Information for Parents and Carers

Introduction

This leaflet has been produced to give you some information about a condition known as Club Foot and the treatments available.

What is Club Foot?

Club Foot is an abnormality of the foot. Sometimes the foot and part of the lower leg points downwards and inwards and will not easily return to a normal position. Club Foot occurs in 1 out of 1000 children in the UK and the condition is more common in boys than girls. Both feet are involved in about half of affected children. There is increased risk of having Club Foot if there is a family history of the condition.



Photograph of a child with Club Foot

What causes Club Foot?

Club Foot has been known for thousands of years and it occurs all around the world. However, the cause of this condition is unknown. Several factors have been associated with Club Foot and there may be a genetic or hereditary component (Wynne-Davies). Also the position of the foot in the womb may have an affect (Brown D). The vast majority of children with a Club Foot do not have any other medical conditions and are otherwise medically fit. Club Foot can, in some cases, be associated with other conditions, so your doctor will examine your child thoroughly.

Will the examination hurt?

Even though as parents you may be distressed at discovering your baby has Club Foot, your baby will not find the condition painful. That's not to say he or she won't protest strongly when being examined!

How will I cope?

When a diagnosis of Club Foot is first made, you may well experience an emotional reaction. Every parent responds differently but most parents experience fear, resentment and anguish to varying degrees. This is a natural reaction when a condition such as Club Foot affects the one you love, but many children have been affected in the past, and there are lots of other parents who have been in the same situation and have seen their children grow up to lead full, active lives.

Will my child require treatment?

Mild cases of Club Foot may not require active intervention but more severe forms will. In the past, when Club Foot was left untreated, the growing child would not be able to place their foot/feet flat on the floor when walking. As years passed, a limp and severe foot deformity would develop.

What does treatment involve?

In many cases treatment will begin shortly after birth and the aim of the treatment is to achieve pliable, plantigrade and pain free feet. The involved foot may always look different and is often smaller and the calf muscle in the leg is thinner.

Types of treatment may include:

Gentle manipulation and maintenance of the corrected position using Plaster cast/special boots.

Serial plaster casts (Ponseti Method):

Treatment is usually started in first few weeks of life. This method involves gentle manipulation of the foot in plaster room and then a cast is applied. The plaster cast is changed every week for approximately 6-8 weeks. This is usually followed by surgical division of the tendon at the back of heel (Achilles tendon) under general anaesthesia, and plaster cast is applied for another three weeks.

After the plaster is removed, your baby wears special boots with a bar for 24 hours a day for three months followed by night/nap time use for about 3-4 years. Close monitoring and follow up by the doctor is essential. 10% of children may require a tendon (Tib. Ant.) transfer surgery at about 3-4 years of age.

Surgery

Operation: An operation is sometimes necessary if the deformity is not corrected fully using plasters or for recurrence. The operation involves releasing the tight tendons around foot and ankle under general anaesthesia.

How long will the treatment last?

Again there is no hard and fast rule, and in some severe cases, treatment may be continued until the child starts school. Sometimes further surgery may be needed as the child grows. No matter how successful the treatment is, relapse is a possibility which is why your child will continue to be checked throughout their growing years to ensure the deformity does not recur.

Your child may require special foot wear and they may be of different sizes, because of the difference in size of the two feet if Club Foot is unilateral.

How effective will treatment be?

The final outcome will depend on the severity of the deformity, and unfortunately not even the doctors treating your child can offer guarantees.

For the vast majority of children today, effective treatment means that they can do everything that children without Club Foot can do!

What are the benefits of treatment?

Nowadays, health professionals are becoming increasingly skilled in correcting Club Foot. With early effective treatment, there is every reason to believe there will be few long term side-effects for your child.

Are there any risks to the treatment?

The major risk is recurrence of the deformity which may require further treatment. The foot may always look slightly different, little bit stiffer and smaller.

Will my child be able to walk?

Your child should be able to walk at the usual age.

What should a parent or carer look out for once the child goes home?

Check the colour of the toes and make sure they are pink (not white or blue).

Make sure the toes are not cold and there is no swelling of the toes.

Check the skin around the plaster cast for any redness or blister, at least three times a day.

Who should a parent or carer contact for further information or if they are worried?

Contact the Plaster Room between 9am to 5pm on Monday to Friday. Their direct telephone number is: 0151 252 5754. Otherwise, attend the Accident and Emergency Department for any emergency and the on-call Orthopaedic Team will be happy to see your child.

Other sources of help and information

STEPS is a voluntary organisation which support the care of children with lower limb abnormalities.

Contact details

STEPS Helpline Tel: 0871 717 0044

www.steps-charity.org.uk.

Other web sites:

www.ponseti.org.uk

www.vh.org/pediatric/patient/orthopaedics/clubfeet/index.html.

This information gives only general information. You must always discuss the individual treatment of your child with the appropriate member of the hospital staff. Do not rely on this leaflet alone for information about your child's treatment.

This information can be made available in other languages and formats if requested.

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