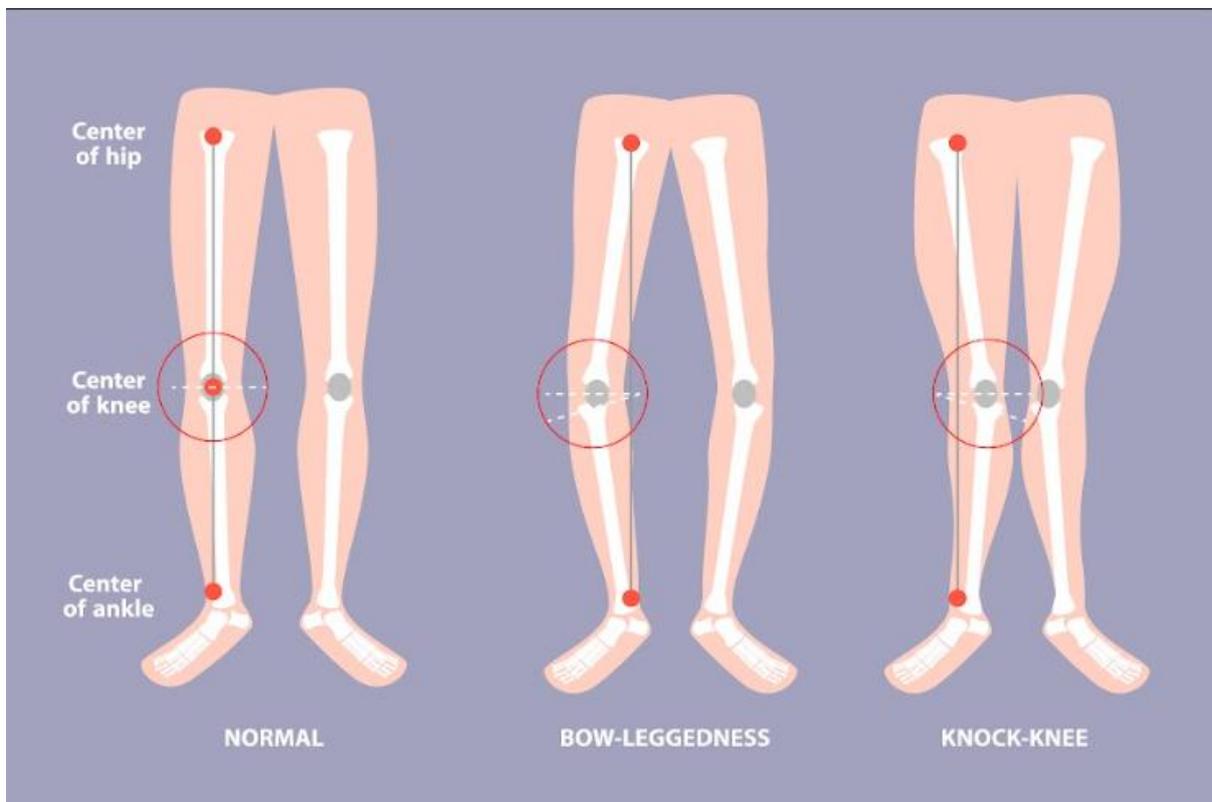


Bow Legs (Genu Varum)



What are Bow Legs?

Bow legs occur when the knees stay apart while standing with the feet together. This can give the legs a curved appearance, like a bow.

Bow legs are common in **young children** and often part of normal growth. Most children's legs straighten naturally by age 2–3.

Who is affected?

- Common in infants and toddlers.
- Usually **both legs are affected**, but sometimes only one.
- Rarely, bow legs may persist beyond age 3 or appear in older children, which may need further assessment.

Causes

1. **Physiological (normal) bowing** ○ Most common in toddlers under 3.
 - Usually corrects itself as the child grows.
2. **Underlying medical conditions (less common)** ○
 - Rickets (vitamin D deficiency) ○ Blount's disease (growth problem of the shin bone) ○ Bone dysplasia or other metabolic conditions

Signs to watch for

- Knees stay apart when standing with **feet together**.
 - Legs may **curve outward**.
 - Sometimes one leg curves more than the other.
 - Pain is **not usually present** in normal bow legs.
 - If bowing is severe, uneven, or develops later in childhood, it needs medical review.
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Diagnosis

- Usually **clinical examination** by a doctor.
 - X-rays may be taken if the bowing is **severe, worsening, or atypical**.
 - Blood tests may be done if **rickets or metabolic causes** are suspected.
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Treatment

Physiological bow legs (normal)

- Usually **no treatment is needed**.
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- Legs **often straighten by age 2–3**.
- Encouragement to **walk, play, and be active** is enough.

Abnormal or persistent bow legs

- Treatment depends on cause:
 - **Vitamin D supplementation** for rickets.
 - **Bracing** in some cases of Blount's disease.
 - **Surgery** may be required in rare cases if bowing is severe or worsening.

When to see a doctor

- Bowing is **severe, asymmetric, or appears after age 3**.
 - The child has **pain, limping, or difficulty walking**.
 - Any **other symptoms** like bone pain, weakness, or delayed growth.
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Prognosis

- Most children with normal bow legs **grow out of it naturally**.
 - Early identification of underlying conditions ensures **better outcomes**.
 - With treatment, abnormal bowing can often be **corrected fully**.
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Key Points

- Common in toddlers and usually **self-correcting**.
- Persistent, severe, or asymmetric bow legs **require medical evaluation**.
- Most children **lead normal, active lives** without long-term problems.

References:

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- NHS: Bow Legs (Genu Varum)
 - American Academy of Orthopaedic Surgeons – Patient Information **Bow Legs (Genu Varum) – Patient Information Leaflet What are Bow Legs?**

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