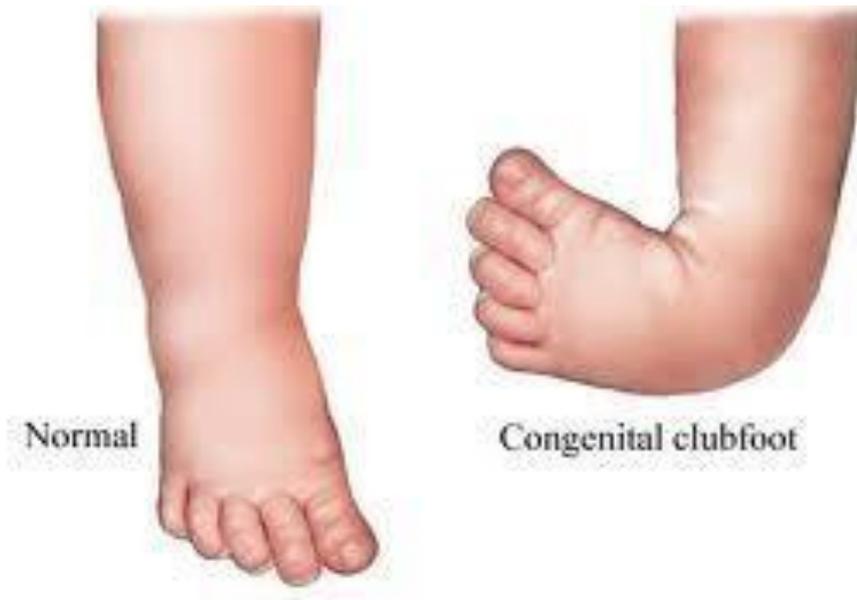


Clubfoot (Congenital Talipes Equinovarus)



What is Clubfoot?

Clubfoot is a condition present at birth where one or both feet are turned inwards and downwards. It can affect one foot (unilateral) or both feet (bilateral).

How Common is Clubfoot?

- Clubfoot affects about 1 in every 1,000 babies.
 - Boys are more commonly affected than girls.
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- Most cases are isolated (not associated with other conditions), but sometimes it can occur with other syndromes.

Causes

- The exact cause is not fully understood.
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- It is thought to be due to a combination of genetic and environmental factors.
 - It is **not caused by anything the parents did or did not do during pregnancy**.

Signs and Symptoms

- The foot appears twisted inwards and downwards
 - The heel is small and underdeveloped
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- The calf muscles on the affected leg may be smaller
 - The foot may feel stiff and hard to move

Diagnosis

- Clubfoot is usually diagnosed at birth through a physical examination.
- Sometimes it can be detected before birth with an ultrasound.

Treatment

Early treatment is very important for the best outcome. The most common treatment is the **Ponseti method**, which includes:

1. **Gentle stretching and casting** ○ The foot is gradually moved into
the correct position.
 - Casts are changed every 1–2 weeks.
2. **Achilles tendon release (if needed)** ○ A small procedure to
release tight tendon at the back of the heel.
3. **Bracing**
 - After the foot is corrected, a brace (boots and bars) is used to maintain the
correction.
 - Worn full-time at first, then at night for several years.

Other treatments (less common) include surgery in severe cases.

Prognosis

- With early and proper treatment, most children can walk and run normally.

- Some feet may need long-term monitoring or occasional treatment adjustments.
- Untreated clubfoot can lead to lifelong walking difficulties and pain.

Home Care and Support

- Parents are taught how to care for the casts and braces.
- Regular follow-up appointments are essential to monitor progress.
- Encourage normal play and activities as advised by your physiotherapist.

When to Seek Medical Advice

- If the cast becomes wet, loose, or damaged
- If there is redness, swelling, or pain in the toes
- If your child has difficulty moving their toes or foot

Key Points

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- Clubfoot is treatable and early intervention leads to excellent outcomes.
 - Most children treated with the Ponseti method can lead a normal, active life.
 - Regular follow-up and adherence to brace protocols are vital.

Remember: Clubfoot is common and treatable. With early care, your child can walk, run, and play normally.
