

Clubfoot

What Is Clubfoot?

Clubfoot is a condition that affects infants at birth, and results in the following physical characteristics:

- The ankle points downward.
- The toes pull in toward the inner leg.
- The bottom of the foot faces inward instead of downward.

One out of every 1,000 children is born with clubfoot deformity, which affects more males than females. Some children have one affected foot, while others experience the condition in both feet. In mild cases, the foot might be quite flexible. In more severe situations, the foot is more rigid.



What Causes Clubfoot?

Not all experts agree on congenital clubfoot causes. Some believe clubfoot develops because of an abnormally shaped anklebone. Others think clubfoot happens because of abnormal nerve function in the leg, or because of abnormal tissues in the muscles and tendons of the foot.

Although it might be a genetic condition, most families show no clear medical history of clubfoot.

Many of the complex conditions treated by Gillette Children's Specialty Healthcare are associated with clubfoot, including:

- [Arthrogryposis](#).
- [Cerebral palsy](#).
- [Developmental dysplasia of the hip \(DDH\)](#).
- Skeletal dysplasias.

- [Spina bifida](#).
- [Torticollis](#).

Clubfoot Symptoms and Effects

If left untreated, clubfoot can cause children to develop an unusual walking pattern (also known as gait). Children who have clubfoot typically place weight on the side of their foot, rather than on the sole. As a result, they develop painful calluses, weakened calf muscles and other complications. However, most cases of clubfoot get treated before these types of problems develop.

Clubfoot Diagnosis and Treatment

In some cases, ultrasound technology detects clubfoot before birth. By 24 weeks, providers can diagnose about 80 percent of clubfoot cases. Orthopedic specialists offer prenatal consultations to help educate parents about their baby's treatment options.

An expert clinical exam within the first couple weeks of a child's life can confirm a diagnosis before complications can arise. Early diagnosis and treatment also increases the chances that nonsurgical treatments will work effectively. Treatment that begins in the first weeks of your child's life leads to the best outcomes.

Although clubfoot can't be prevented, treatments can correct foot alignment and improve range of motion. For example, a series of casts can gradually stretch and straighten the foot. Splints, braces or special shoes can also help prevent a relapse of clubfoot.

Primary clubfoot treatment options include:

- [The Ponseti method](#): A nonsurgical method often used along with an outpatient procedure to lengthen the Achilles tendon and help the foot move more easily.
- [Surgical correction](#): Clubfoot surgery is necessary for cases in which the Ponseti method doesn't work. If your child has spina bifida or other neurological conditions, they might also have stiff or rigid feet, and might require additional surgery.

Regardless of the treatment, a child who has clubfoot will eventually need splinting, a clubfoot brace or special shoes to help prevent a relapse as they grow. Making sure your child gets regular follow-up care throughout childhood can help prevent further complications later in life.

Integrated Care

If your child has clubfoot, the nationally and internationally recognized specialists in [pediatric orthopedics](#) at Gillette will help create a treatment plan specific to your needs. Our experts specialize in the [Ponseti method](#), as well as in surgical treatments for clubfoot.

Your child will also be tested and treated as necessary for conditions related to clubfoot, such as [developmental dysplasia of the hip \(DDH\)](#), [cerebral palsy](#) and [spina bifida](#). Our core care team typically includes specialists in:

- [Orthopedics](#).
- [Orthotics](#).
- [Physical therapy](#).
- Casting.
- Nursing.

Depending on your child's needs, providers who specialize in different types of [rehabilitation therapies](#) might also be part of your care team. We welcome the involvement of primary care providers, teachers, and school and community therapists. Working together, we help your child feel the best they can.

[Make An Appointment](#) [651-290-8707](#) [Refer a Patient](#) [651-325-2200](#)

This information is for educational purposes only. It is not intended to replace the advice of your health care providers. If you have any questions, talk with your doctor or others on your health care team.

If you are a Gillette patient with urgent questions or concerns, please contact Telehealth Nursing at [651-229-3890](#).