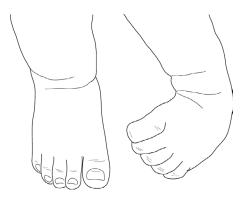
## What is clubfoot?

Clubfoot is a disorder that affects the ligaments, tendons, and muscles in the foot and calf. The foot tilts inward and downward at the ankle. Clubfoot can affect one foot (unilateral) or both feet (bilateral). Clubfoot may also be called talipes or talipes equinovarus.



Clubfoot is one of the most common birth defects and it is not caused by anything that the mother did or did not

do during pregnancy. There is currently no way to prevent clubfoot, but it can be corrected. The recommended treatment for correcting clubfoot is the Ponseti method.



# Clubfoot CARES

Clubfoot CARES is a US-based, nonprofit advocacy group created by moms who have children with clubfoot. We promote public awareness of clubfoot and the Ponseti method of treatment, and we work to educate and empower patients and their families.

#### Email: Hello@clubfootcares.org www.clubfootcares.org



Photos courtesy of We are the Artist Photography, Kiss Me Again Photography, and MD Orthopaedics. Illustrations from *The Parents' Guide to Clubfoot* courtesy of Betsy Miller.

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# Your Child and Clubfoot



It's not your fault. You're not alone. Your child's foot can be corrected.

### How is clubfoot treated?

Doctors use the Ponseti method to treat clubfoot without surgery. The Ponseti method is highly effective.

Clubfoot treatment begins very early, often when a baby is a few weeks of age. First, your baby's foot is corrected, and then they wear a brace to keep the clubfoot from coming back.

When your child is diagnosed with clubfoot, you are referred to a specialist for your child. It is important to choose a doctor who is experienced with clubfoot treatment.

Some hospitals and clinics have clubfoot centers with doctors who see many patients with clubfoot.



### Correcting the foot

Your baby visits the doctor weekly. At each visit, the doctor gently stretches your baby's foot so that it is straighter and then applies a cast. The cast holds your baby's foot in its new, better alignment. Most babies wear 3 to 8 casts.



Most babies or children with clubfoot need a tenotomy because their Achilles tendon is short and tight. This tendon is located

at the back of the ankle and is sometimes called the heel cord.

For a tenotomy, the doctor cuts the Achilles tendon. This procedure lets the child's foot flex and allows the heel to drop down. The child wears a cast while the tendon grows longer so that the foot can continue to flex.

### Bracing to prevent relapse

After your child's foot is corrected, they must wear a clubfoot brace to keep the clubfoot from coming back. When clubfoot comes back, it is called a relapse.

A clubfoot brace includes special shoes or boots, and a bar that connects the shoes. The brace only works after a child's foot has been corrected. The child must wear the bar and the shoes together—wearing the shoes without the bar is not effective. Your child's brace might look different from the brace shown in this picture.

Right after your baby's foot is corrected, your baby will wear a brace almost all the time. As your baby grows, the doctor will

let you know when your baby can spend more time out of the brace.

By the time they are old enough to walk, children only need to wear the brace at night. Most children with clubfoot wear a brace at night until they are four or five years old.

