

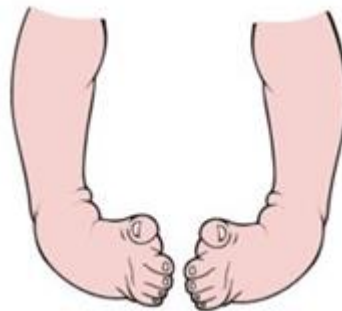
Patient information

Positional talipes equinovarus

What is positional talipes equinovarus (PTEV)?

This is a condition which can affect one or both feet and is present at birth. The affected foot has an abnormal appearance – it is usually bent down and turned inwards. The bones are normal but the muscle and soft tissues in the inside and back of the leg might be tight.

In some cases, the position of the foot is due to the way the baby was lying in the womb and the deformity can be easily corrected by pushing the foot up into a normal position. This is **positional talipes equinovarus**.



The usual position of a PTEV foot

PTEV is different to congenital talipes equinovarus (CTEV) commonly known as 'Club foot'. Here the foot is rigid and cannot be corrected easily. The muscles and ligaments may be very tight and in more severe cases there may be some bony abnormality. Stretches alone will not correct a CTEV, this will require orthopaedic intervention.

What happens when a baby is born with positional talipes?

If possible, your baby will be seen on the ward within the first few days of birth. If this is not possible your baby will be referred for an outpatient physiotherapy appointment.

A paediatric physiotherapist will examine your baby's feet and will discuss the treatment process with you. This will include a series of stretches to correct the position of the foot. Your physiotherapist will show you how to do these. They will need to be done regularly everyday, usually at every nappy change. Your physiotherapist will demonstrate these to you.

Do each exercise three times.

1 To stretch the muscles on the back of the ankle



With the hip and knee bent to 90° (right angle) gently move your baby's foot up towards their shin.

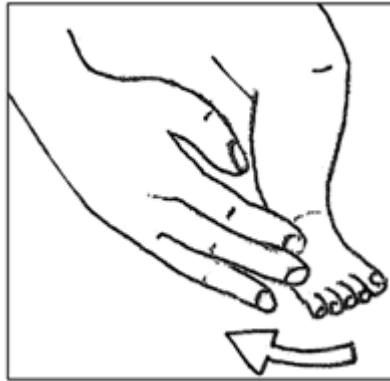
Hold for 5 seconds.

2 To stretch the muscles on the inside of the ankle



With the hip and knee bent 90° (right angle) gently move your baby's foot outwards.
Hold for 5 seconds.

3 To strengthen weak muscles



With hip and knee at 90°, use your finger to briskly stroke the outside of the foot and leg, working from toes towards the knee approximately half way up the leg. This can help to stimulate the muscle to work, encouraging the foot to move into a better position.

Usually only exercises / stretches are needed to correct your baby's foot. Very occasionally some type of soft splint may be required if the foot is very stiff. This would gently stretch the tight muscles. Your physiotherapist will discuss this with you if it is felt to be necessary.

Contacts

Remember your physiotherapist is always available for help and advice should you have any further concerns or queries about your baby.

Contact the therapies department on: **01284 713300**.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (formerly DisabledGo)

<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>

