

In-toeing in children

In-toeing is common in infants and young children. The feet are turned inwards and are noticeable when the child walks. Most children outgrow this condition without any treatment. Children may be observed to trip and fall more frequently but often this is more related to overall coordination skills. The common causes of in-toeing are described below.

Metatarsus adductus (banana feet)

In metatarsus adductus the feet curve inwards (Fig. 1). In infants if the feet are flexible they usually improve without treatment by the age of two years. Gentle stretching exercises may help in the first few months. In severe cases where the feet are stiff, a short period of casting by a paediatric physiotherapist may be required.

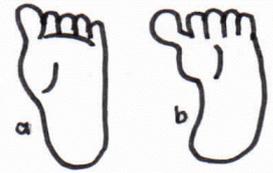


Fig. 1 a) Normal foot
b) Metatarsus adductus

Internal tibial torsion (inward twist of the shin bones)

Internal tibial torsion is where the shin bone (tibia) of the leg twists inwards between the knee and foot (Fig. 2). This is usually due to the positioning in the womb. The bone usually untwists as the child grows and is usually self-corrected by school age.

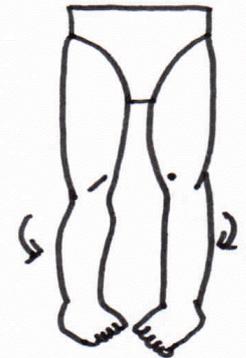


Fig. 2 Internal tibial torsion

Internal femoral torsion (inward twist of the thigh bone)

Internal femoral torsion is where the thigh bone is twisted inwards between the hip and knee. This is normal in children and usually corrects itself gradually by the age of 12 years.

Treatment

Special shoes, splints, bracing and exercises do not affect the untwisting of the shin or thigh bone and are not required. Some children may have this condition throughout adulthood and the majority do not have any problems.

Summary

- > Toe walking is common in children who begin walking and usually resolves by the age of three years.
- > Casting, bracing and other surgical options can be discussed with your orthopaedic specialist or physiotherapist.
- > In-toeing is a normal stage of a child's development that corrects over time.
- > In-toeing only requires treatment in severe cases or it exceeds the normal age range. Special shoes or braces DO NOT help internal tibial torsion or internal femoral torsion.

Visit your child's doctor for a specialist referral if:

- > The child has a limp or pain in their legs
- > Only one leg is affected
- > In-toeing is considered severe and not improving over time
- > The feet are stiff and not improving with time.

This fact sheet is intended to assist, not replace discussion with your doctor or health care professional. It is intended as a guide only. SA Health do not accept any responsibility and will not be liable for any inaccuracies, omissions, information perceived as misleading, or the success of any treatment regimen detailed in this fact sheet.

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