



FAMILY FOOT AND ANKLE CLINIC

SPECIALISTS AND SURGEONS

At Family Foot & Ankle Clinic, we are committed to providing you with the highest quality of care and ensuring you have all the information you need to make informed decisions about your health.

If you have any questions or concerns, please don't hesitate to reach out to us. You can contact our office directly at 763-421-7300. Additionally, you can visit our website at <https://familyfootmn.com/> for more resources and information about our services.

Thank you for choosing us for your healthcare needs!

What is Pediatric Flatfoot?

Flatfoot is common in both children and adults. When this deformity occurs in children, it is referred to as a “pediatric flatfoot,” a term that actually includes several types of flatfoot. Although there are differences between the various forms of flatfoot, they all share one characteristic – partial or total collapse of the arch.

Flatfoot can be apparent at birth or it may not show up until later years, depending on the type of flatfoot. Some forms of flatfoot occur in one foot only, while others may affect both feet.

Types of Pediatric Flatfoot

Various terms are used to describe the different types of flatfoot. For example, flatfoot is either *asymptomatic* (without symptoms), or *symptomatic* (with symptoms).

Most children with flatfoot have no symptoms, but some children have one or more symptoms. When symptoms do occur, they vary according to the type of flatfoot. Some signs and symptoms may include:

- Pain, tenderness, or cramping in the foot, leg, and/or knee
- Outward tilting of the heel
- Awkwardness or changes in walking
- Difficulty with shoes
- Reduced energy when participating in physical activities
- Voluntary withdrawal from physical activities

Other terms used to describe the different types of flatfoot include *flexible* or *rigid*. *Flexible* means that the foot is flat when standing (weight-bearing), but the arch returns when not standing. *Rigid* means that the arch is always stiff and flat, whether standing on the foot or not. Several types of flatfoot are actually categorized as *rigid*, the most common being:

- **Tarsal Coalition** – this is a congenital condition (exists at birth). It involves an

abnormal joining of two or more bones in the feet. Tarsal coalitions may or may not produce pain, but if and when pain does occur, it usually starts in preadolescence or adolescence.

- **Congenital Vertical Talus** – Because of the foot’s rigid “rocker bottom” appearance that occurs with this condition, this condition is apparent and usually diagnosed in the newborn. Symptoms begin at walking age, since it is difficult for the child to bear weight and wear shoes.

Diagnosis

In diagnosing flatfoot, the Foot & Ankle specialist examines the foot and observes how it looks when the child stands and sits. The podiatrist also observes how the child walks and evaluates the range of motion of the foot. Because flatfoot is sometimes related to problems in the leg, the podiatrist may also examine the knee and the hip. X-rays are often taken to determine the severity of the deformity. Sometimes sand MRI or CT scan and blood tests may also be ordered.

Treatment

Non-Surgical Approaches

If a child’s flatfoot is asymptomatic, treatment is often not required. Instead, the condition will be observed and re-evaluated periodically. Custom orthotic devices may be considered for some cases of asymptomatic flatfoot. In symptomatic pediatric flatfoot, treatment is required. The patient’s foot and ankle surgeon may select one or more approaches, depending on the child’s particular case. Some examples of non-surgical options include:

- **Activity Modifications.** The child needs to temporarily decrease activities that bring pain as well as avoid prolonged walking or standing
- **Orthotic Devices.** Provider may prescribe custom orthotic devices that fit inside the shoe to support the structure of the foot and improve function.
 - **Superfeet** – Men (Green / Blue), Women (Green/ Berry)
 - Green tends to have slightly higher arch than the latter option
 - REI, Dicks Sporting, Schuler Shoes, Amazon



- **Physical Therapy.** Stretching exercises, supervised by the podiatrist or physical therapist, can help provide relief in some cases of flatfoot.
- **Medications.** Non-steroidal anti-inflammatory medications (NSAIDs), such as Ibuprofen, may be recommended to help reduce pain and inflammation.
- **Shoe Modifications.** Your podiatrist may advise you on footwear characteristics that are important for the child with flatfoot.

When is Surgery Needed?

In some cases, surgery is necessary to relieve the symptoms and improve foot function. Podiatrists perform a variety of techniques to treat the different types of pediatric flatfoot. The surgical procedure or combination of procedures selected for your child will depend on his or her particular type of flatfoot and degree of deformity.

Adapted from ACFAS Literature &

<https://www.annapolisfootandankle.com/docs/handouts/handout-pediatricflatfoot.pdf>