Ashford and St. Peter's Hospitals NHS
NHS Trust

WOMEN'S HEALTH AND PAEDIATRICS
PAEDIATRIC DEPT

Physiotherapy Referral for Lower Limb Conditions

Amendments			
Date	Page(s)	Comments	Approved by
Dec 2014 March 2018	New Guideline	Whole document review – no changes	Paediatric Guideline Group

Compiled by: Linda Berwick and Karen Daly, Physiotherapy

In Consultation with:

Ratified by: Paediatric Guidelines Group

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Target Audience: Doctors, nurses and support staff working in Paediatrics

Impact Assessment Carried Out By:

Comment on this document to: Linda Berwick and Karen Daly, Physiotherapy

Physiotherapy Referral for Lower Limb Conditions

Flat feet/Pes Planus

It is normal for babies and toddlers to have 'flat feet' due to the presence of fatty tissue on the soles of the feet. This is normal up to the age of 4 years. Studies in America have shown that insoles and arch supports do not help the arches of the foot develop. Without treatment, 96% of children will have normal arches by the age of 14 years.

Refer to physiotherapy if:

- Flexible or hypermobile flat feet in children > 6 years only if painful or having functional problems
- Flexible flat feet with a short Achilles tendon
- Rigid flat foot where the arch does not form on tiptoe or Jack test

Pes Cavus

This is when the arch is extremely pronounced. It is rarely seen and is usually indicative of a neurological cause therefore the most appropriate treatment is a referral to a paediatrician.

Curly/Crossed Toes

Minor toe variations are common. This condition often runs in families. These toes rarely cause problems and are never the reason for late walking in children. If the toe causes no pain and there is no restriction in movement, there is no need for treatment. Strapping the toe or toe spacers do not correct toe shape.

Intoeing

Intoeing is a variation of normal and is common in toddlers and is usually outgrown by the age of 8 years. Causes:

- Metatarsus Adductus – Normally resolves spontaneously however if tight or stiff and persists it may require treatment and you can refer to physiotherapy for stretches.
- Tibial Torsion – Internal rotation is normal in babies and will gradually resolve as the child grows. Rarely seen after 4 years.
- Femoral Anteversion – Inward twisting of the femur which can get worse between the ages of 2-4 years but spontaneously resolves by the age of 8 years. Refer to physiotherapy if restricted hip movement and/or pain and/or functional problems.

Bowlegs and Knock Knees

In normal development infants will have bow legs and will become increasingly knock kneed by 2 ½ to 3 years. With further growth the legs will become straight.

Further investigation may be needed if it is severe, occurs only on one side or runs in the family especially if there is a history of short stature.

Please do not hesitate to contact either Linda Berwick or Sarah Chambers based in the Physiotherapy Outpatient Department if you wish to discuss any concerns regarding a patient. 01932 722813; Bleep 5157