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## Feet Turning In During Childhood

Some of the problems that are often associated with a child's feet turning in are normal and tend to become corrected as a child grows older. For example, inward curvature of the feet is present to some degree in as much as 70 percent of all newborns, but it usually straightens out on its own by 3 months of age. Typically, the curvature is due to the pressure that was applied in the uterus before birth. Sometimes heredity plays a roll, too.

However, a child's feet can turn inward because of problems with the feet themselves, the hips, or the legs.

Here are some guidelines to help you tell if your child's feet are developing in a normal manner.

As your child grows older, the outer border of the bottom of the foot should be straight, not C shaped. The inner border should be slightly curved due to the arch. Therefore, after three months of age, the front part of the foot should not curve inward when compared with the rear part of the same foot. Foot specialists call this condition "intoeing."

Intoeing may also be caused by the thigh bone being twisted inward at the hip level. This condition is usually not evident until 3 to 4 years of age. When the child walks toward you, his or her kneecaps point somewhat toward each other instead of pointing straight ahead, and the entire lower legs and feet follow by pointing inward. By the age of 8, most children outgrow this condition and walk straight.

If the bottoms of the feet are straight, however, and not C shaped—yet the entire foot seems to still be turned inward—the child may have an inward twisting of the lower leg bones. The way to evaluate this is to have your child lie on his or her back on a bed so that the legs hang over the side. With the kneecaps facing straight ahead and the knees bent at a 90 degree angle, you may see the feet turning inward toward each other rather than straight ahead.

It should be noted that most children have some inward twist of the lower leg bones during the first year of life, and 95 percent of these cases take care of themselves by two to three years of age. Usually, by the time the child begins to walk, the leg bones have grown and rotated outward, and the child walks with the feet pointing straight ahead or even slightly outward.

If foot curvature is severe at birth, your medical professional will recommend corrective treatment. This typically involves stretching the foot and putting a cast on for approximately six weeks—with the cast being changed every one or two weeks. Once the correction is obtained with the cast, braces or special shoes will usually need to be worn for two to three months. Without treatment, foot curvature may result in persistent problems throughout life, such as difficulty walking, bunions, or problems with shoes fitting properly.

If the child has hip problems that cause the feet to turn in, parents should encourage the child to sit cross-legged. This helps to reverse the deformity and to resolve the problem. At any rate, the condition will usually improve over a period of several years. Expensive corrective shoes, braces, and cables have not been shown to correct this condition and may in fact be harmful.

Finally, while early treatment is helpful and necessary for deformities of the feet, treatment for the inward twisting of the large leg bones is usually not possible. As mentioned, however, a great deal of improvement usually occurs with normal growth.

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