

Pediatric Orthopedics

Flexible Flatfoot



Most children are born with very little arch in the feet. As they grow and walk, the soft tissues along the bottom of the feet gradually take shape to form an arch. Children with flexible flatfoot often do not begin to develop an arch until the age of 5 or 6 years old. While parents often worry that an abnormally low or absent arch in a child's foot will lead to permanent deformity or disability, most children eventually outgrow the condition without developing any problems in adulthood. However there are various types of the condition that are not considered "normal" and early evaluation of a perceived problem is advisable. A more rare kind of pediatric flatfoot is called rigid flatfoot. With this condition, the arches do not reappear when the child sits or stands on tiptoe.

The misalignment and dysfunction of a poorly supportive foot can significantly contribute to changes in activity level and functional ability in childhood and be a precursor to chronic problems in adulthood aggravated over age and time.

There is a subset of cases of pediatric foot flat that warrant various levels of treatment from conservative to surgical that require evaluation by a foot and ankle specialist with the experience, insight and ability to determine when and what treatment if any is necessary. Subtle manifestations may go unnoticed as children are prone to under report symptoms without pain. However a painless flat foot does not imply an asymptomatic flat foot. Children often express their symptoms without reporting any pain. They may frequently ask to be carried, prefer sedentary activities or have trouble keeping up with playmates and participating in family activities.

After initial evaluation children with presenting symptoms or structural variations should be monitored at the discretion of the attending podiatric physician.