Is there anything else I can do?

- Make sure baby’s clothes or blankets are not too tight around their feet
- Give your baby time to kick freely
- There is a small association between babies with talipes calcaneovalgus and hip problems. Therefore all babies with talipes calcaneovalgus are referred to routine hip screening. An appointment will be sent to you in the post in about 6 weeks.

Reference source

http://www.uhs.nhs.uk/Media/Controlleddocuments/Patientinformation/Childhealth/Talipescalcanecoevalgus-Patientinformation.pdf

Contact details

This leaflet was written by the Paediatric Physiotherapy Team. If you have any questions please do not hesitate to contact us.

**Telephone:** 01483 464153

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**Talipes Calcaneovalgus**

Royal Surrey County Hospital (RSCH) NHS Foundation Trust fully subscribes to the National Patient Safety Agency (NPSA) *Being Open* best practice framework, November 2010.

**PALS and Advocacy contact details**

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

**Telephone:** 01483 402757  
**Email:** rsc-tr.pals@nhs.net  
**Opening hours:** 9.00am–4.00pm  
Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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**Physiotherapy Department**

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This patient information leaflet is for parents of children who have been diagnosed with talipes calcaneovalgus. It provides answers to questions that you may have, and details of the exercises you will be taught by the physiotherapist.

What is Talipes Calcaneovalgus?
Talipes Calcaneovalgus is a condition affecting your baby’s foot position when they are born. There are two types of Talipes Calcaneovalgus: Positional or Structural. This leaflet will explain Positional Talipes, which is usually due to the baby’s position in the womb. It may affect one or both feet.

What is Positional Talipes?
When resting, your baby’s foot will turn outwards and point upwards. But they should actively kick out of this position and have flexible feet that you can move.

If your baby’s foot is slightly tight and more difficult to correct to a neutral position, you will be taught some exercises to do with your baby. It is important to do these exercises little and often to encourage their feet into a neutral position.

Your baby will grow out of this condition and it will not affect their development.

What is the treatment?
You will be referred to a Physiotherapist soon after your baby is born. They may see you on the ward or as an outpatient if you have gone home. The Physiotherapist will show you how to do stretches for your baby’s foot. These stretches will bring the foot out of its resting position and into a neutral foot position.

How do I do the exercises?
1. "Hold your child’s heel with your right hand, keep the knee bent and in line with the body. Holding the foot with your left hand, bring the foot downwards (pointing their toes)."
   b) Now rotate the foot inwards while keeping the foot pointing downward.

2. You can massage over the front of your baby’s feet and moisturise the skin.
   After doing the stretches, the aim is to get your child to actively correct the foot position themselves.

How often should I do the exercises?
You will usually be advised to complete these stretches regularly, for example at every nappy change. The stretches will not be painful for your baby and can improve your baby’s foot position more quickly.

Your baby may be monitored over a few months to check the foot is improving.