

## Reference source

- CSP Evidence Note 01, Talipes: Physiotherapy Management of Positional Talipes Equinovarus. August 2009
- Sandwell and West Birmingham Hospitals NHS Trust, Positional Talipes: Information and advice for Parents and Carers. September 2014

## Notes

## 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

# Talipes Equinovarus

## Physiotherapy Department

### 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.

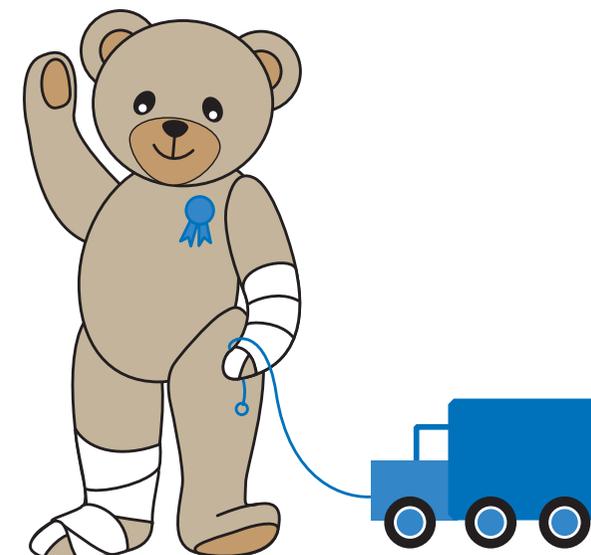
**Telephone:** 01483 402757

**Email:** rsc-tr.pals@nhs.net

**Opening hours:** 9.00am–3.00pm  
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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## Patient information leaflet

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

## What is Talipes Equinovarus?

Talipes Equinovarus is a common condition affecting your baby's foot position when they are born. There are two types of Talipes Equinovarus: 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 inwards and point downwards. They should actively kick out of this position and have flexible feet that you can move. Your baby should have full range of movement in their feet.

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.

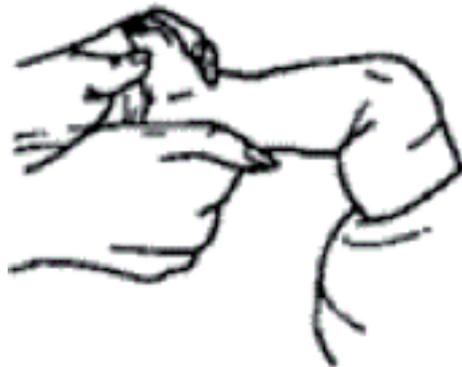
## What is the treatment?

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

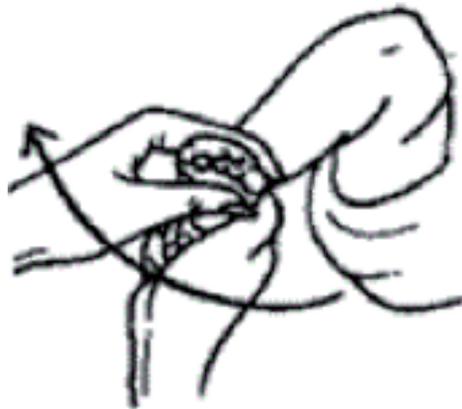
you have gone home. The physiotherapist will show you how to do stretches for your baby's foot. These stretches will bring the foot out of its resting position and into a neutral foot position.

## How do I do the exercises?

1.

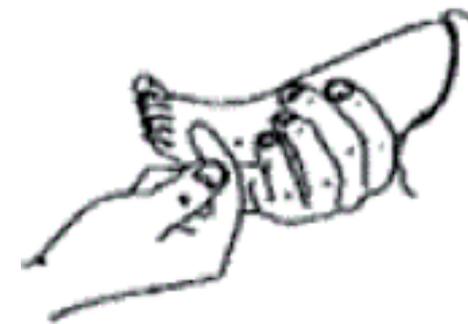


- a) Hold your child's heel with your right hand, keep the knee bent and in line with the body. Holding the foot with your left hand, bring the foot upwards towards the shin.
- b) Now rotate the foot outwards while keeping the foot pointing upward. (Think clown's feet!)



- Hold the position for 30 seconds. Let go of the foot.
- Do this 2 times at nappy changes.

2. Tickling the outside of baby's foot can help encourage active foot movement.



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 Positional Talipes more quickly.

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

## 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