

## Pigeon Toed is Not Normal

Hey Pat,

My nine-year-old grandson is pigeon toed. I can see the way his feet turn in as he walks and he trips a lot, although his brothers are fine. His pediatrician doesn't seem concerned but I am. Would you be worried and what would you do?

Jim

Dear Jim,

Thanks for asking. You made me remember my childhood. My right foot rolled inward, from the ankle so I walked on the outside of the foot, and was pigeon toed. I was quite small, probably aged 3 – 5, but still remember how I hated the braced shoes I had to wear to bed. I also had to wear sturdy, supportive shoes, instead of the popular sneakers the other kids wore, until 6<sup>th</sup> grade.

I am incredibly grateful that my mother was tough enough to make me do that! I am sure it was hard for her to tolerate my crying and screaming. I remember hiding those braces time after time. Once I even buried them under the trailer we lived in, but my Mother made me get them that night, with a switch. My feet straightened out and today, when I see an adult walking clumsily pigeon-toed, I send a mental thanks to Mom. I think I'll call her and thank her again, now.

I did some internet research. The most common medical opinion I found is that this is normal in toddlers and small children and is not a concern because it straightens out on its own. However, nine would seem to me to be past the "small child" age so I would be worried and seek another opinion with a podiatrist or orthopedic physician.

I think it is sensible to get second opinions about important medical issues. I also think it is extremely important to educate myself as much as possible before going to a doctor so that I can ask sensible questions and understand the answers. To that end, I am including some excerpts from some web sites that you may want to go to for more information.

This site, selling custom orthotics, [www.podometrics.com](http://www.podometrics.com), is one you might want to look at. There is a lot of educational material about foot problems. Here are some quotations:

"...We can help the child's foot grow as normally as possible. If your foot problem is amenable to orthotic control, and thank goodness most are, then orthotics can help remove your pain and help you to walk farther, faster, with less pain and aching, and to stand longer, as well, and do this with much less pain...The force on the sole of the foot is transiently three times the body weight -- with every step...Orthotics stand up to the

pressure and last for years...Club foot is a deformity in which the front part of the foot turns toward the big toe, and the victim tends to walk on the outside of the foot...The younger the individual is when treated the better. In this deformity, the front part of the foot is in-toed, so kids who have it tend to trip a lot...If the deformity is not too severe (like a child who walks in-toed), then orthotics can really help change the forces; in kids where the bones have not stopped growing yet, orthotics can even help straighten the feet.”

Here is excerpt from [www.drgreene.com](http://www.drgreene.com) with some specific things to look for.

“Gravity and muscle-use patterns sculpt our bodies over time. Most children begin life with moderate in-toeing. When a child begins walking, both the femur (the large bone in the thigh) and the tibia (the large bone in the calf) undergo a gradual process of external rotation. This remodeling continues for at least 6 months after the child has been walking fully. If an internal or pigeon-toed gait of 30 degrees persists beyond this point...a 'torsional deformity' exists...Look at the bottom of your son's foot while he is lying on his stomach. If the outside edge is curved (convex), he has metatarsus adductus. If the foot is flexible, and the curve can be straightened, this needs no other treatment than gentle stretching exercises. If the forefoot is rigid, and cannot be straightened, your son should see an orthopedist to evaluate him for casting or, rarely, surgery.”

This quotation from [www.defectiveshoe.com](http://www.defectiveshoe.com) explains how, shoe damage can show how the foot behaves.

“If your foot excessively turns in (pidgeon-toed), you are a supinator. Your feet do not absorb shock well. You can tell if you are a supinator if an old pair of shoes tilt to the outside. The outside of the midsole will be compressed and soles will be worn along the outer edges. Your arches are probably high. The outside of your foot needs to be supplied with more shock absorption by your shoe so you'll need a shoe to compensate for this...Either way, your shoe, when placed on a level surface should not be biased in or out.”

In conclusion, Jim, I think a responsible parent should do everything possible to insure that his/her children grow into healthy and productive people. Standing, walking and running, confidently and without pain, are essential to that goal. I suggest you learn all you can and then take your grandson to a podiatrist or orthopedic for an examination and further discussion.

Pat