

A GUIDE TO FLATFOOT (PES PLANO VALGUS)

OVERVIEW

Often flatfoot is incorrectly considered an incidental finding and benign condition. If untreated the course is usually a steady progression with worsening of symptoms and deformity. In addition the structural and biomechanical dysfunction can lead to other pathology, including hallux valgus, hammer toes, heel pain, ankle and midfoot osteoarthritis, tendonitis, and knee, hip, lower back and neck pain.

APPEARANCE

- When viewed from behind the heel will exhibit excessive eversion in relation to the lower leg. (See photo to the right).
- The longitudinal arch of the affected foot normally seen while standing is absent or nearly absent.
- Other foot deformities may be present including bunions, hammertoes, ankle, lower leg and knee abnormalities
- The affected foot will also appear to have excessive motion in the midfoot and rearfoot joints.
- Swelling around the inside of the ankle is also common.

SYMPTOMS

- Aching, particularly in the heel or arch area with swelling on the medial side.
- Feet tire easily with prolonged standing.
- Heel and arch pain with post-static ambulation
- Children may avoid athletic activity or prefer to be carried rather than walk because of discomfort
- Lower extremity pain or fatigue in feet, ankles, knees, hips or back.
- Shin splints.
- Plantar fasciitis

DIAGNOSIS

- Biomechanical evaluation.
- X-rays are utilized to measure the cyme line, calcaneal inclination, talar declination, talocalcaneal, metatarsus adductus, talar 1st metatarsal angles and structural relationship of other bones and joints.
- Ultrasound is used to visualize soft tissue structures.

TREATMENT

Initial treatment involves biomechanical support of the foot and ankle.

- Functional foot orthoses are used to improve alignment and function of the foot. Even asymptomatic children should be treated with orthotics to avoid pain or the development of deformities
- Ankle braces.
- Physical therapy.
- Non-steriodal, anti-inflammatory medication.
- Steriod injections.

Surgery may be required for severe or recalcitrant cases. For most children and uncomplicated adult cases a joint arthroeresis procedure is performed improving joint position and function. Recovery time is minimal. More complicated cases may require tendon transfer, osteotomies, reconstruction and/or joint fusion.



Chicago Podiatric Surgeons is dedicated to providing the best possible podiatric care for your patients. This care includes answering patient questions and ensuring they understand their treatment options. Of course, the understanding of treatment options starts with you, the primary care physician. We hope that you find this overview of common podiatric disorders to be helpful in the care of your patients, and that you look forward to receiving future topics from us.

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