

# Toe walking

**This leaflet is for parents of children who walk on their toes. It explains about what toe walking is and why children do it. It will also explain some of the treatments that can be used for children who toe walk. This leaflet should be issued under guidance of a paediatric physiotherapist.**

## What is toe walking?

Toe walking is when the heel makes no contact with the ground during walking or standing. This is a normal part of development when children first begin to walk; however, they should quickly grow out of it after 2-3 months. If it persists, then it is called toe walking. Toe walking is relatively common – between 7 and 24 out of 100 children experience toe walking.



## What are the signs of toe walking?

Walking on tiptoes is the main sign, but occasionally a child may also:

- Suffer with discomfort or pain.
- Be more wobbly on their feet.
- Have a tendency to walk or run fast.
- Fall over more frequently.

## What causes toe walking?

There are many possible causes, but the following can cause toe walking in some children:

- Short calf muscles (lower leg muscles), causing the child to lift their heels up when walking to make it more comfortable.
- Weaker trunk muscles (muscles of the body excluding head and limbs).
- Habit (habitual toe walker or idiopathic toe walker) – a child may just get used to toe walking for no known reason, but over time, this can increase muscle tightness/shortening.
- Because they like the sensation of being on their toes, or dislike 'the sensation' of their feet touching the floor, this can be associated with autistic spectrum disorders if other signs/symptoms are present.
- Neurological (brain) problems.

Toe walking is more common in boys, premature babies and where other members of the family have walked on their toes.

## How is toe walking diagnosed?

Toe walking is diagnosed by an assessment, which involves looking at your child while they are standing and walking, and assessing their movement and strength.

## How is toe walking treated?

The treatment will depend on the specific symptoms and problems that your child has. Your child's physiotherapist will discuss this with you at the appointment.

Examples are:

- Stretches to lengthen any tight muscles.
- Activities and exercises to strengthen the calf, hamstring and/or trunk muscles.
- Encouraging your child to walk slowly and to walk with their heels down or feet flat.
- Activities to encourage your child to keep their heels down.
- Supportive, well-fastened footwear that can help your child maintain a good foot position and improve their walking pattern. Boots that come up over the ankle are often good.
- Serial casting – this is where your child's feet are put into plaster casts which are changed every week to slowly stretch out the muscles and increase the movement at the joints. This will be discussed in more detail if it is deemed appropriate; only children with very tight muscles will need it.

### **What are the benefits of the treatments?**

The above treatments can improve your child's walking and balance as well as their muscles' length and strength and other symptoms of toe walking.

### **What are the risks of treatment?**

There is a small risk with serial casting that your child could experience dry, itchy skin or rubbing on their skin. There are no risks or side effects to other treatments.

### **Are there any alternative treatments?**

Medical device prescription (i.e. splints or insoles) and surgery are other possible alternative treatments that your child can be referred for if appropriate. Generally, this will only be done if serial casting does not help, which is not very common.

### **What are the risks of not getting treatment?**

This normally does not cause any long-term difficulties but could delay your child's development if their trunk muscles remain weak and they have poor control of their movements. If they do not have treatment, they may continue to walk on their toes into adolescence and adulthood. Rather than walking on their toes, adults tend to have a 'bouncy' walk.

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