

Clubfoot and the Ponseti method: Boots and bar stage

This leaflet is for parents of children diagnosed with clubfoot. It explains about the use of foot abduction brace (boots and bar) which are used in the final stage of the Ponseti method.

Boots and bar

Your child is now in the last stage of Ponseti treatment! A member of the team will fit the boots and bar the same day that the final casts are removed. When the casts are removed, your baby's legs and feet might look swollen. The swelling will begin to go down within a few days.



Why are the boots and bar important?

Your child's feet are now in a corrected position. The boots and bar hold the feet in this position to prevent the muscles and ligaments from becoming tight again. Compliance during this stage is vital. Failure to use the boots and bar may lead to a recurrence of the clubfoot deformity.

Will my child need any other special equipment?

No, your child can continue to use his or her pushchair, car seat, or high chair without any special equipment. As long as the strap that goes between the child's legs is detachable, it can be threaded between the bar and legs. Your child's pants will need to have snaps or buttons between the legs.

Who fits the boots and bar?

Immediately after the final casts are removed, a member of the medical team will perform the first fitting. Then you will be taught how to apply the boots and bar. The boots are set at the correct angle on the bar, and this angle must not be altered by anyone other than a member of the team. Normal setting is 40° and the clubfoot setting is 60°.

How are the boots fitted?

The clubfoot is fitted first. When both feet are affected, the least flexible foot is fitted first and then the other foot is fitted. The removable bar is fitted last to position the feet at the correct angles.

It is very important to make sure that the heel is placed against the back of the boot and is held firmly in place by the tongue and middle strap. Once the heel is in place, the buckles can be fastened.

You can use a pen to mark on the boots the farthest position that the toes reach while they are in the boot. If the toes move back, it usually means that the heel is not flat in the boot.

Your baby's feet might be swollen when the boots are initially fitted, so you might need to tighten the strap after the child has worn the boots for a few days. A strap that fits snugly is very important because blisters might occur if your child can move his or her foot in the boot.

Will my child be comfortable in the boots and bar?

Your child will probably be upset when he or she has the boots and bar fitted. However, this is not because it is painful. Your child might feel frustrated initially when he or she cannot move each leg independently. You can help your child learn how to bend his or her hips and knees at the same time. The more time that the child spends in the boots and bar, the sooner he or she will get used to moving both legs together.

If you notice that your child is crying more than usual, check to see if the boots are fitted correctly and check for rubbing or blisters. If a blister develops, please contact the medical team because your child will need to be seen in the clinic.

If my child is uncomfortable, can I remove the bar and use only the boots?

The boots by themselves do not prevent recurrence of clubfoot. The bar maintains the correction by keeping the feet in the corrected position.

How can I prevent my child from getting blisters?

To prevent blisters, it is important that the child breaks in the boots and bar during the first few days that they are worn. After the boots and bar have been worn for the first time for one hour, remove your child's boots and socks and check for red spots or rubs on the feet and heels. Socks should always be worn when wearing the boots. If there are no areas of concern, put the boots and socks back on and check again after 2 to 3 hours. Continue to increase the amount of time between checking your child's feet. By the second or third day, your child should be comfortable in the boots and bar for 23 hours a day.

How long will my child have to wear the boots and bar?

The boots and bar are to be worn 23 hours a day for the first three months of the treatment. They should be removed only for bathing and dressing. You may remove the boots and bar for one hour each day: either a half hour twice a day or one hour once a day. After three months, the boots and bar are worn at night-time and during naps only until the child is five years of age.

How often will my child need to be seen in the clinic?

After the boots and bar have been fitted, your child needs to return to the clinic one to two weeks later for an examination. If the child does not experience any problems, you will then need to return for an appointment in another three weeks and then three months. After the medical team has approved wearing the boots and bar for sleeping only, the child will need to be seen in the clinic every three to six months.

Can I use other brands of the boots and bar?

Several companies make the boots and bar. We generally use the Mitchell brand because it works well for most children. They can only be ordered directly from the manufacturer.

You must contact the hospital if:

- You have difficulty applying the boots and bar yourself.
- Your child's skin looks sore or blistered.
- Your baby is escaping from the boots by himself or herself.
- You think that the boots and bar look too small or are damaged.
- You are concerned about your child's feet.

If you do not apply the boots and bar as advised, the clubfoot deformity is likely to recur.

References:

Ponseti et al, 2003, Clubfoot: Ponseti Management Second edition. Global-HELP.OrganiZation.

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This document can be made available in other languages and formats upon request.

Produced by Physiotherapy Department, Royal Berkshire NHS Foundation Trust, April 2018
Review due: April 2020