

## ADVICE FOR PARENTS:

Problems noticed at birth will not always disappear by themselves. You should not wait until the child begins walking to take care of a problem you've noticed earlier. It is best to take action when the child is a toddler to ensure a better response to conservative treatment options.

- Remember that lack of complaint by a youngster is not a reliable sign. The bones of growing feet are so flexible that they can be twisted and distorted without the child being aware of it.
- Walking is the best of all foot exercises, according to podiatric physicians. They also recommend that walking patterns be observed carefully. Does the child toe in or out or have knock knees or other gait abnormalities? These problems can be corrected if they are detected early.
- With the exception of infants, children should not go barefoot. Walking barefoot on dirty pavement exposes children's feet to a variety of dangers including sprains, fractures, and infection from wounds. Another potential problem is plantar warts, a condition caused by a virus that invades the sole of the foot through cuts and breaks in the skin. Warts require extensive treatment and can keep children from school and other activities.
- Be careful about applying home remedies to children's feet. Preparations strong enough to kill certain types of fungus can harm the skin.



## FIVE SHOE-BUYING TIPS FOR CHILDREN:

1. **Take your child shoe shopping.** It's important to have your child's feet measured before buying shoes. Every shoe fits differently. Letting a child have a say in the shoe-buying process promotes healthy foot habits down the road.
2. **Shop for shoes later in the day.** Feet tend to swell during the day; it's best to be fitted when they are larger.
3. **Buy shoes that do not need a "break-in" period.** Shoes should be comfortable immediately.
4. **Always buy for the larger foot.** Feet are seldom precisely the same size.
5. **Have your child try on shoes with socks or tights,** if that's how they'll be worn.



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# FIRST STEPS

KEEPING KIDS' FEET  
HEALTHY AND HAPPY



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**WHETHER IT IS A PRECIOUS BABY'S FIRST STEPS OR A QUICK-MANEUVERING TEENAGER'S WINNING SOCCER GOAL, HEALTHY FEET AND SURE-FOOTEDNESS MAKE MILESTONES IN A CHILD'S LIFE POSSIBLE. STARTING AT BIRTH, PAY CLOSE ATTENTION TO YOUR LITTLE ONE'S FEET FROM PROPER GROOMING TO GAIT. YOUR ATTENTION WILL ENSURE A SOLID FOUNDATION AS YOUR YOUNGSTER GROWS. AFTER ALL, THEIR FEET ARE MEANT TO LAST A LIFETIME!**

## **YOUR BABY'S FEET**

The human foot—one of the most complicated parts of the body—has 26 bones, including an intricate system of ligaments, muscles, blood vessels, and nerves. Because the feet of young children are soft and pliable, abnormal body forces can cause deformities.

A child's feet grow rapidly during the first year. For this reason, podiatric physicians, also known as podiatrists, consider this period to be the most critical stage of the foot's development.

## **WALKING WARNING SIGNS**

Once your baby is on the move, assess your child's walking pattern or gait. It is not uncommon for little ones to walk on their toes. However, persistent **toe-walking** is not normal. An APMA podiatric physician can examine a child to make a proper diagnosis and determine the best treatment option. Abnormal walking, including toe-walking, can lead to foot and ankle problems later in life. Flat footedness beyond the early years can lead to bunions, hammertoes, heel pain, and tendon problems. Children with a family history of foot problems should see a podiatric physician once the child begins walking to ensure the feet are developing normally.



**TOE-WALKING**

Other common childhood walking irregularities include **in-toeing** and **metatarsus adductus (MTA)**. In-toeing occurs when one or both feet point toward the other due to a rotation in the foot, leg, thigh, or hip. Often children will sit on their legs in a W-shaped position, which can also cause feet to point inward. Excessive tripping, like many walking irregularities, can often reveal a more serious condition such as in-toeing. Ways to combat in-toeing at home include having the child stand in ballet's first position with heels touching and feet pointing outward, as well as sitting with legs "crisscrossed."

**Because it should never be assumed that a child will grow out of a foot condition such as in-toeing, an APMA podiatric physician can prescribe more aggressive treatment options such as a cast or brace.**

Metatarsus adductus, a bending of the foot inward at the instep resembling the letter "C," is also prevalent among beginning walkers. Tripping is also a warning sign of MTA. In addition, parents need to pay close attention to their child's foot formation and walking pattern. An APMA podiatric physician can diagnose and treat MTA with a series of casts and, in more serious cases, surgery.

Because not all children are quick to tell their parents when they are experiencing foot pain, parents should pay attention to unspoken signs such as a child's limping, tripping, or taking their shoes off frequently, or unevenly worn footwear. The feet of young children may be unstable, which can make walking difficult or uncomfortable. A thorough examination by an APMA podiatric physician may detect an underlying condition, which may require immediate treatment or consultation with another specialist. To find a podiatrist in your area, visit [www.apma.org](http://www.apma.org).



**METATARSUS ADDUCTUS (MTA)**