

Ponseti Method - Overview

What Is The Ponseti Method?

The Ponseti Method for the correction of Talipes or clubfoot was developed over 50 years ago by Professor Ignacio Ponseti in Iowa. The method uses manipulation and casting, followed by the wearing of boots with a bar to hold and encourage the feet to grow in their corrected position. Although the Ponseti Method is often referred to as a non-surgical method 80% - 95% of children may need a small operation to lengthen the Achilles tendon (a tenotomy) which is typically tighter in a clubfoot child than in a non-clubfoot child.

The Ponseti Method is ideally started within a few days of the birth, however this method has been successfully used in older children as well. This method may not be suitable for your baby if he/she has already had more extensive surgery, however you should discuss your options with your child's Doctor.

What Does The Ponseti Method Involve?

The method requires a series of precise manipulations, gently rotating the bones and stretching the soft tissue. Your baby will not find it painful, though some will object to being held in the same position. Distracting your baby with a dummy, a bottle of milk or some enthusiastic singing may help them remain calm during the casting process. A plaster cast from the toes to the groin is then applied. The casts are changed every 5 - 7 days and most children need between 5 - 10 casts. The position of the feet gradually improves until they are pointing outwards. It is when this degree of correction has been obtained that your surgeon will look at the tightness of the heel. Many babies still have a tight heel cord (Achilles tendon) so will require a small operation called a tenotomy to lengthen it. This requires a small cut (approximately 3mm) a little above the back of the heel. Many surgeons do this under a local anesthetic. The baby's foot and leg are then put in a cast which is worn for 2 - 3 weeks, during which time the Achilles tendon will repair itself.

What Happens Next?

When this final cast is removed both feet are put into boots that are connected by a metal bar. This helps to maintain the correction.

These boots are usually worn for 23 hours a day for 3 months. After this the boots are worn at night and "nap" time until your child is approximately 4 years old. During the day ordinary well-fitting shoes can be worn.

Many parents feel this is the most difficult part of the treatment. Babies can become distressed when they are first put into the boots with the bar. It is vital to persevere, as this is a very important part of the treatment. Not persevering with the wearing of the boots with the bar nearly always results in the child requiring more treatment with plaster casts or repeat surgery.

A small number of children may need surgery, involving a tendon transplant around the age of 4-7years.

There are many highs and lows through out the treatment and many challenges along the way. But you are not alone! Join our online forum and meet other parents facing the same challenges (and joys!) as you and discuss and share in our open and friendly environment.