

In-Toeing

What is In-Toeing?

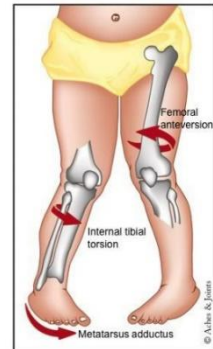
In-Toeing means that the feet are turned inward instead of straight ahead when standing or walking. It is commonly referred to as “pigeon toed”.

In-toeing is common in young children. Most of the time, it is not a problem and resolves as the child grows. It usually doesn't cause any pain or long-term problems with bones, muscles, or joints. Most children do not need special shoes, braces, casts or specialized treatment. Children who in-toe may walk or run a little differently and might trip more often, but this usually improves with time.



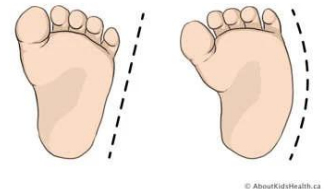
What Causes In-Toeing?

There are three main reasons why children in-toe. These often happen because of the way the baby was positioned inside the uterus before birth.



Metatarsus Adductus

- The outer border of the foot curves inward, toward the middle of the body
- It is usually seen at birth and often happens because the baby was tightly positioned in the uterus
- Ninety-five percent of children outgrow this by the age of 4, usually much sooner
- Stretches may be suggested. If the foot does not straighten on its own, a cast or brace may be recommended



Internal Tibial Torsion

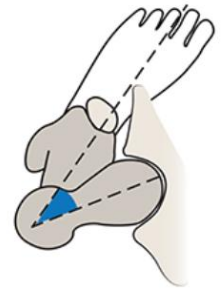
- This refers to an inward twist in the lower leg bone (the tibia)
- This is usually noticed in children between 1-3 years old and almost always resolves by the time they turn 4 or 5
- This condition does not require any stretching, bracing, casting, or special treatment



An example of a child with tibial torsion.

Femoral Anteversion

- This is when the thigh bone (the femur) turns inward, which makes the knees and toes point inward too
- Children with femoral anteversion will often sit in a “W” position
- This is common in young children, and usually improves naturally over time by the age of 8-10 years old
- Most children outgrow this without any special treatment
- Braces, special shoes, and exercises do not change the course of this condition



When Should You Ask for Advice?

- The in-toeing only happens on one side
- Your child's legs feel stiff when you move them
- It is not getting better in the expected amount of time
- Your child has trouble participating in age-appropriate activities
- Your child has pain or limping related to their in-toeing

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