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From the Editors

Neglected Clubfoot – A Distinguished Disease

The focus of this issue is on the clubfoot and specifically the aspect of neglected clubfoot. The awareness about clubfoot has grown in last few decades and ponseti technique has been used all across the globe for treatment of clubfoot. However even with a clinically effective ponseti treatment problems such as residual tibial torsion, discrepancy in foot size and calf girth do remain and are source of concern for the patients. In developing countries like India, lack of access to health care, lack of standardised plater technique, noncompliance with post ponseti bracing and neglect on part of parents and healthcare providers leads to a large volume of complex clubfoot cases. One such specific scenario of complex cases is neglected clubfeet where the presenting child is more than one year of age and has taken no prior treatment. The ponseti technique as a panacea, is optimally effective if the patient presents early in life around 3 months of age (although some authors may disagree). As the child grows the complexity of the disease increases with growing misaligned bones and tightening soft tissues and it may be challenging to achieve good, permanent results using ponseti technique. Other management strategies vary from soft tissue releases, osteotomies and external fixators. Use of these strategies depend on many factors like age of the child, the type of clubfoot (syndromic vs idiopathic), the size of the foot and severity of the deformity. A complete management algorithm does not exist and in most cases treatment is based on personal preferences and experience in the field and on the disease severity. Customised approach to managing these neglected older feet should aim at achieving a morphologically plantigrade and functional foot. One must realise that despite best efforts every clubfoot may not be radiologically and clinically perfect. However as long as it is painless and functional, the physician and parents should accept it as good result. In this issue we have tried to invite authors who have sizable amount of work in the field to share with us their experiences and evidence. We have included reviews as well as original articles in the symposium to make it more comprehensive. We believe such symposiums will help a lot of people in deciding treatment protocols for difficult and challenging cases.

In future we will try to bring together more such symposiums which will focus on such complex yet common problems. Another focus from next issue would be 'Training by Publishing' where articles like technical notes, frequently asked questions (FAQ's), video techniques and case studies will be included. More article formats will be included as per readers response and we believe together we can build a body of literature which is much more relevant to us. We would welcome articles from all over the world and we hope to be able to make it a practice driven Journal along with being evidence based.

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