

Name of Child: _____ Date: _____

Clubfoot Correction: Cast Care

How is clubfoot treated?

At Phoenix Children's Hospital, we treat clubfoot with the Ponseti Method. Here are the steps:

1. Beginning in the first week of life, the baby's foot is stretched for about a minute toward the normal position.
2. The baby's leg is put in a cast from the toes to the groin. This holds the foot in place.
3. Each week, the cast is taken off and the foot is stretched a little more. Then a new cast is put on the leg to hold the foot in position.
4. Over about 6 weeks, the foot is slowly stretched to the normal position.
5. Often, before the last cast is put on, the baby has a small operation to make the heel cord longer.
6. When the last cast is taken off, the baby will wear a leg brace for three months.
7. Then, for the next 3 to 4 years, the child wears the leg brace when sleeping,

How do I take care of my baby in the cast?

Check the position of the toes in the cast.

- If the toes seem to disappear into the cast, the cast has slipped and is not holding the foot in the proper position. This can cause pressure sores on the leg or foot. A new cast must be put on the leg as soon as possible.
- If you think the foot has slipped in the cast, call the orthopedic clinic right away at 602-933-5252.

Check blood flow often.

How

- Gently press and release each toe.
 - The toes will turn white then quickly return to pink if the blood flow is good. This is called blanching.
 - If the toes do not turn from white to pink, the cast may be too tight.
 - If the toes are dark and cold, the cast may be too tight.
- If you think the cast is too tight, take your child to the emergency room or your doctor's office.

When

- Check the blood flow to your baby's foot every hour for the first 6 hours after the cast has been put on.
- After the first 6 hours, check the blood flow every time you change his or her diaper.



Check blood flow often.

Keep the cast clean and dry.

- Do not put the cast in water.
- If it gets dirty, wipe the cast with a slightly damp cloth.
- When the baby is on his or her back, put a pillow under the cast so the heels hang off the pillow. This keeps sores from forming on the baby's heel.
- Use disposable diapers.
- Change diapers often so the cast stays clean.
- Keep the top of the cast out of the diaper so urine and stool do not get into the cast.

Call your nurse or doctor if you notice any of these:

- a bad smell or drainage coming from inside the cast
- red or sore skin at the edges of the cast
- toes that don't turn from pink to white to pink when you press on them
- toes that are cold and dark
- toes slipping back into the cast (not sticking out as far as they used to)
- a fever of 101.3 or higher, without any reason (such as a cold or virus)

How and when is the cast taken off?

- Each week, you will bring your baby back to clinic to change the cast. The cast will be removed with a special tool, your baby's foot will be gently stretched again, and a new cast will be put on.

How long will the treatments last?

- Most babies need between 4 and 7 casts to fix the clubfoot.
- The casting treatments usually last from one to two months.
- Very stiff feet may need a few more weeks of treatment.

Will my child need surgery?

- Most babies will have a small operation before putting on the last cast. Your surgeon will make a small cut in your child's Achilles tendon (heel cord). This is called a heel cord lengthening.
- After the heel cord lengthening, your baby will get his or her last cast. This cast will stay on for 3 weeks.
- By the time the last cast is taken off, the heel cord will have healed at the right length and strength. This allows for normal foot position and motion.

Will my child's foot look normal after the last cast is taken off?

- When the last cast is taken off, the foot should look a little flatfooted. It will look more normal in a few months.

Will the foot stay in its normal position once the casts are done?

- No, clubfoot tends to come back.
- To keep the foot in its new position your baby must wear a brace after the last cast is removed. The brace is called a **foot abduction brace**.
- The foot abduction brace has high top, open toed shoes connected to an aluminum bar. The brace holds the feet pointing outward.



The brace must be worn 23 hours a day for at least 3 months.

- The brace must be worn 23 hours a day for at least 3 months.
- After 3 months, the brace only needs to be worn when the child is sleeping.
- Your child will continue to wear the brace at night and for naps for 3 to 4 years.

Now that you've read this:

- Tell your nurse or doctor how to check if the foot is getting enough blood flow. (Check when done.)
- Tell your nurse or doctor what you would do if your baby's toes are not sticking out of the cast as much as they did when the cast was first put on. (Check when done.)
- Tell your nurse or doctor when would you call the doctor or clinic. (Check when done.)



- If you have any questions or concerns,
- call Karla Shapiro, LPN at 602-933-5252
 - email Dr. Lee Segal at lsegal@phoenixchildrens.com
 - email Paula Stufflebeam, PA at pstufflebeam@phoenixchildrens.com

If you want to know more about child health and illness,
visit our library at The Emily Center at Phoenix Children's Hospital
1919 East Thomas Road
Phoenix, AZ 85016
602-546-1400
866-933-6459
www.phoenixchildrens.com

Disclaimer

The information provided at this site is intended to be general information, and is provided for educational purposes only. It is not intended to take the place of examination, treatment, or consultation with a physician. Phoenix Children's Hospital urges you to contact your physician with any questions you may have about a medical condition.

Thursday, December 22, 2011 • DRAFT to family review
#1161 • Written by Susan Segal, PT



The Emily Center

Clubfoot Correction: Cast Care

Procedure/Treatment/Home Care
Este folleto se encuentra traducido al español.
Solicítelo al enfermero o médico.

Name of Health Care Provider: _____ Number: 1161
For office use: Date returned: _____ db nb

Family Review of Handout

Health care providers: Please teach families with this handout.
Families: Please let us know what you think of this handout.

Would you say this handout is hard to read? Yes No
easy to read? Yes No

Please circle the parts of the handout that were hard to understand.

Would you say this handout is interesting to read? Yes No

Why or why not?

Would you do anything differently after reading
this handout? Yes No

If yes, what?

After reading this handout, do you have any
questions about the subject? Yes No

If yes, what?

Is there anything you don't like about the drawings?

Yes

No

If yes, what?

What changes would you make in this handout to make it better or easier to understand?

Please return your review of this handout to your nurse or doctor or send it to the address below.

Fran London, MS, RN
Health Education Specialist
The Emily Center
Phoenix Children's Hospital
1919 East Thomas Road
Phoenix, AZ 85016-7710

602-546-1395

flondon@phoenixchildrens.com

Thank you for helping us!