

The Ponseti Technique

4. Foot abduction braces

Contents

- The Steenbeek Foot Abduction Brace (SFAB)
- Suggestions to help with compliance
- Instructions to parents on using the SFAB

The Steenbeek Foot Abduction Brace

- Maintains correction
- 3 months full time
- 2-4 yr. night time
- Bar as wide as shoulders
- Externally rotate 70 degrees
- Dorsiflex 10-15 degrees
- Heelcup
- Failure to wear is the most common cause of recurrence
- 50% of recurrences within 6 months of stopping brace



Suggestions on helping compliance

- The brace should be fitted on the day the last casts are removed.
- The child will therefore not have a chance to get used to having the feet free and will cry less.
- The importance of the brace must be explained to the parents.
- Parents have to teach the baby to kick both feet simultaneously while playing with the baby.
- The children should be followed every 3 to 4 months for the first couple of years, and then every 6 months until age 5 to 7, then annually, increasing to biannually.

Instructions to Parents on how to use the SFAB

- Fit the SFAB the same day the POP is removed.
- First fit the most difficult foot, i.e. the affected side if the child had only one clubfoot. When both feet were affected, first fit the foot that seems to be the least flexible.
- Gently push the foot up/dorsiflex the foot as much as possible. Hold it in that position with one hand and then push the foot (heel first) in the SFAB. Close the tongue of the shoe and check whether the heel is still in the correct position by looking through the inspection hole. Keep the foot in position with the same hand and lace the shoe with the other hand. Now fit the other foot in the same way.

Instructions to Parents on how to use the SFAB

- Consistent usage will make for a compliant child / Intermittent usage will make for a child that fights the brace
- The SFAB is to be worn full time for three months and then at night time until the child is three to four years old.
- When the child cries more than usual, check the feet for red spots or blisters. In that case the SFAB might be getting too small for the child.
- When the child is about to outgrow the SFAB go back to the clinic/workshop for a bigger size.