

Hallux valgus in children

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This article has been translated from WikiSkripta; ready for the **editor's review**.

Hallux valgus (bowed toe) occurs more rarely in childhood than in adulthood. It arises on the basis of heredity or later as a result of weakening of the fibrous and muscular apparatus of the foot (associated with the decrease of the longitudinal + transverse arch).

Clinical manifestations

- pain in the area of the meta-tarso-phalangeal joint of the thumb, a feeling of early **fatigue** in the forelegs.
- thumb deviated from its axis towards the 2nd finger,
- a flat medial prominence is formed on the head of the first metatarsus and a painful bursa above it.
- gradually, arthritic changes develop in the metatarsophalangeal joint and there is a decrease in the longitudinal and transverse Arch of the foot.

X-ray image

- valgus position of the thumb, varus position of the first metatarsal, medial prominence and arthrotic changes.

Therapy

- orthopedic insoles, bunion correctors,
- surgery in young patients – **corrective osteotomy** of the base (or close to the head) of the 1st metatarsus, associated with the release of soft tissues (e.g. Austin's operation), in older patients and arthritic patients resection surgery **according to Keller** – resection of a third of the base of the base of the thumb, relief of the exostosis on metatarsal head.



Hallux valgus

Links

related articles

- Congenital limb defects
- Dog planolgas

References

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