

Non-Ambulatory ADM resolves treatment problems for 2 year old with Unilateral Talipes



Patient details

Initials: MRA
Age: 2 years
Gender: Male

Background

MRA was born with Left Talipes Equinovarus. After following the Ponseti Method of serial casting and a tenotomy at 2 months old, he was immediately placed in the traditional boots and bar for nighttime wear only.

It was noted at 16 months of age that the non-affected right foot turned out dramatically to the right and dragged when attempting to walk. After consulting with his doctor it was determined that the angle of the Denis Browne type brace was set too high causing the unaffected foot to become overcorrected.

MRA could not walk without his unaffected foot dragging, he could not bend his knee properly or hold his body in an upright position.

MRA was provided with a small Non-Ambulatory ADM brace with sandal in standard spring strengths. He also was referred to a physiotherapist.

Experience

Since using the Non-Ambulatory ADM his affected left foot looks well corrected and has maintained correct positioning. He can run, walk, jump and play without any limitations and he does not mind using the ADM. His right foot has now slowly started to correct itself simply by not being braced.

His mother explains, "Our experience with the ADM has been nothing short of wonderful. It really has changed our life for the better. Our son enjoys putting on his ADM and has no problems sleeping with it on as well. For us, getting his right foot out of the traditional Ponseti brace was number 1 and number 2 for us was comfort during sleep time. The ADM took care of both. With the other brace, our son was waking multiple times a night, however that is not the case with the ADM. Additionally, the ADM gives our son the support he needs to maintain his foot in the correct position without putting his knees and hips in compromising positions.

"On a personal note, as I am sure many parents of children with clubfoot can relate, it was a painstakingly emotional experience on the entire family to have to force our son to wear the traditional boots and bar. As parents, we knew he needed to for the proper treatment of his foot. However the sleepless nights, and turmoil we experienced as parents were overwhelming that when we found the ADM and started using it with success it was an answer to our prayers."

"The ADM is very user friendly. Our son loves his ADM! He calls it his "Super Boot!"

Conclusions

In the parent's opinion, MRA sleeps better at night, and the indications are that the brace is maintaining the affected foot in the correct position.

His mother says, "I think it is important to note that living in the US, the ADM is less recognised than the traditional Ponseti method... We supplied our son's doctor with as much research and information about the ADM as we could get our hands on, however the doctor is still very hesitant and has since increased the frequency of our son's checkups from 1 year to every 6 months. Having the ADM for treating unilateral Talipes has been a real life changer for us and I believe it would be extremely beneficial to others, especially in cases where the non-affected foot has been over corrected."

About the ADM

The ADM was launched in March 2014 and is a wholly new type of Ankle Foot Orthosis that includes two sprung-loaded mechanisms aligned to the sub-talar and tibio-talar joints. The ADM was originally developed as night-brace to abduct and dorsiflex the feet of clubfoot patients. When attached to daytime shoes the ADM can improve the gait, mobility and balance of those suffering from a range of conditions.

The ADM is developed and manufactured in by C-Pro Direct Ltd in the UK. C-Pro Direct welcomes enquiries from practitioners treating children with condition similar to those of MRA. The ADM is Patented in many jurisdictions worldwide. For Europe EP Patent No EP2637612 and Registered Community Design No 002238881-0001 apply.