

Bow legs and knock knees in young children

Information for patients, parents and guardians

This factsheet has been developed to provide information about bow legs and knock knees which are terms used to describe the angle of the leg at the knee.

Bow legs: when standing with the ankles together there is a gap between the knees.

Knock knees: when standing with the knees together there is a gap between the ankles.

The medical name for bow legs is genu varum, and knock knees is genu valgum.

It is normal for a baby's legs to be bowed at birth. This becomes more noticeable when they begin standing and walking. In normal development your child's legs will become straighter by the age of about two years. At the age of about three, the knee angle may change and knock knees may be noticed.

Gradual correction occurs as your child grows, so that by the age of six years their legs look normal.

Children who walk early often have bow legs. Knock knees are sometimes more noticeable if a child is overweight.

At the hospital

Your child will be assessed to decide if their knee development is within the normal range.

A general assessment will be done, which includes measurement of the distance between the knees if your child has bow legs, or ankles for those with knock knees. This is recorded in the notes and allows us to check for improvements at future outpatient appointments.

You may find it useful to take photographs of your child's legs every three months, so that you can see the improvement for yourself.

Sometimes an x-ray of your child's hips and legs may be taken to rule out abnormal bone development.

A blood test may be taken to check your child has a normal vitamin D level. Vitamin D is important for bone development.

Is there any further action needed?

- Treatment is not normally needed for bow legs and knock knees, although this depends on your child's age and the assessment made by their healthcare professionals.
- Exercises, splints or shoe inserts have been proven not to help with the natural development and outcome of bow legs and knock knees in young children.
- Your child may be reviewed again in the clinic to check that the development of their legs is progressing normally. A further appointment will be made for your child if needed.

If you have any questions or concerns please contact:

Nurse practitioners on telephone: 023 8120 4991 or mobile: 07584 402438

Main hospital switchboard: 023 8077 7222 bleep no 2641

If you need a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone **023 8120 4688** for help.

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