Mr Chun Hong Tang

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Appointments:

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FLATFOOT IN CHILDREN

(PAEDIATRIC FLATFOOT)

What is flatfoot?

Flatfoot (also called **pes planus**) is when the arch of the foot is lower than usual, making the inside of the foot appear flat.

- It is very common in babies and young children.
- Most children **outgrow it naturally** as their arches develop by around age 6–8.
- In many cases, flat feet cause no pain or problems.

Types of flatfoot

- **Flexible flatfoot** (most common): the arch is visible when the child stands on tiptoes or when sitting, but flattens when standing normally.
- **Rigid flatfoot** (rare): the foot looks flat all the time and may cause stiffness or pain.

Is it normal?

Yes – flexible flatfoot is usually a **normal part of development**. Most children with flat feet do not need any treatment.

When should I be concerned?

Book a consultation with Mr Tang if your child:

- Has foot or ankle pain.
- Walks differently (limping, awkward gait).
- Tires easily when walking.
- Has one foot flatter than the other.
- Has a stiff, rigid flatfoot.
- Still has flat feet with symptoms after age 8–10.

How is it diagnosed?

- By a simple foot and walking examination.
- The doctor may ask your child to stand on tiptoes.
- X-rays may be needed, especially if the flatfoot is stiff or painful.

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Treatment options

Most children **do not need treatment**. If treatment is needed, it may include:

- **Reassurance and monitoring** – for children without pain.
- **Supportive shoes** – well-fitting shoes with a firm sole may help comfort.
- **Insoles/orthotics** – custom insoles may be given if there is pain.
- **Stretching/physiotherapy** – useful if tight calf muscles are contributing.
- **Surgery** – very rarely required, and only if severe, painful, and not helped by other treatments.

Benefits of treatment (if needed)

- Reduces pain or discomfort.
- Improves walking and activity.
- Provides reassurance for parents and children.

Risks and complications

- Insoles and orthotics do not "cure" flatfoot – they mainly reduce symptoms.
- Surgery has risks (infection, stiffness, need for further operations) and is **only for severe cases**.

Everyday care

- Encourage your child to stay active – walking, running, and playing all strengthen the feet.
- Avoid unsupportive shoes (like flip-flops) for long periods.
- Stretching exercises may help if your child has tight calves or Achilles tendon.
- Maintain a healthy weight to reduce pressure on the feet.

Long-term outlook

- Most children outgrow flexible flatfoot naturally.
- Symptoms, if present, usually improve with simple measures.
- Very few children need surgery.

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When to seek help

Contact Mr Tang's team on the details above if:

- Your child has pain or swelling in the feet/ankles.
- Walking is affected or uneven.
- The flatfoot is stiff or rigid.
- Symptoms persist despite supportive shoes or insoles.

Frequently asked questions

Will my child always have flat feet?
Most children's arches develop as they grow, but some adults have flat feet without problems.

Do insoles cure flat feet?
No, but they can help reduce pain and improve comfort.

Can my child do sports?
Yes – children with flat feet can usually take part in all activities.

If you have any further questions or concerns, book a consultation via the contact details above to discuss this further.