

1 Introduction

A deformity of foot which consists mainly of equinus and varus positions of the hindfoot and adductus of the forefoot and is called clubfoot, is quite common. It was first described by Hippocrates (1).

The deformity can appear in an idiopathic form, be a part of a complex anomaly or be of acquired type.

The cumulative literature on clubfoot is as abundant as have been the methods of treatment. In a sense the history of clubfoot and attitudes to it seem to form a circle. It begins with Hippocrates' demand for instant and gentle treatment, continues with forceful conservative and operative techniques in the 19th and early 20th century, and seems these days to be returning to Hippocrates' principles. Sophisticated anaesthetic and operative techniques have created one, merely practical difference: the gentle care of the newborn, recommended by Hippocrates, is today increasingly regarded to be operative.

Present views on the treatment of clubfoot are, however, far from uniform. Questions arise as to timing, degree of radicality, and the details of operations as well as pre- and postoperative care. Individual, "tailor-made" treatment, based on the actual situation, has also been strongly suggested (2,3,4).

The principles and methods for the evaluation of results of treatment seem to be variable, and as the long term results of modern methods have been beyond reach, it has not been easy to arrive at a general appraisal of the present state. Nevertheless, the results cannot be regarded as entirely good, since at least hypoplasia of foot and calf, sometimes even worse deformities, resist any kind of treatment even today.