Bowlegs
(Genu varum)

Sometimes a child's legs bend outward (*bow*) from the knees to the ankles. When standing, the knees do not touch, even if the feet and ankles are touching. When this is the case, the child is said to have bowlegs or to be bowlegged. The medical term for this condition is genu varum.

Bowlegs are common in infants and toddlers. Babies are often born with bowlegs, because they have been folded up inside their mothers' wombs. Usually, their legs will straighten between the ages of 18 and 24 months. Sometimes, a child's legs will only begin to straighten as the child begins to walk. However, something else might be the cause if:

- The child is older than 2 years of age.
- Only one leg is bowed.

Still, some children are 5 to 8 years old before their bowlegs correct.

CAUSES

- Curled position in the womb.
- Genetics. If parents had bowlegs, their offspring might also.
- Rickets disease. This condition causes soft, weak bones.
  - Rickets usually results from lack of vitamin D or calcium. Vitamin D comes from the sun and from food (dairy products). It is also added to some cereals (fortified cereals). Breast milk is not high in vitamin D. Calcium comes from dairy products and leafy green vegetables. It is also added to some foods.
  - One form of rickets is inherited (*passed down through families*).
  - Another form of rickets is the result of some types of kidney disorders.
- Blount's disease. This is a growth problem with the shinbone (*tibia*). Unusual growth just below the knee makes the bone curve out sharply. Instead of getting better as the child develops, the condition gets worse. It usually shows up at about age 2. But, it can occur at any age, sometimes at age 11 or older.
- Bone dysplasia. This means abnormal bone growth.

SYMPTOMS

- A wide space can be seen between the knees, when the child is standing with feet and ankles together.
- The child's toes point inward when walking.
- The child trips often.

DIAGNOSIS

- A caregiver will examine the child's legs and hips.
  - This may include measuring the distance between the knees. This can indicate how serious the condition is.
  - The child may also be asked to walk back-and-forth.
  - The caregiver will probably ask about symptoms (when the bowlegs were first noticed, how the condition has changed recently).
- X-rays may be ordered. They can give a picture of the bones' shape.
- In severe cases, a blood test may be ordered. This will show if the child has enough vitamin D and calcium. Too little could indicate rickets.

TREATMENT

Bowlegs often correct on their own. As the child grows up, the legs straighten. If this happens, no treatment is needed. If it does not happen, or if the bowlegs are extreme, the condition can be treated. The type of treatment will vary, depending on the cause. Options include:

- Supplements. Vitamin D, calcium, or both may be recommended. This is used to treat rickets.
- Diet changes. The child may need to eat more green vegetables, and eat or drink more dairy products. This also helps treat rickets.
- Leg braces. They can help straighten the legs.
- Special footwear. Special shoes that force the feet to turn out may help children, if their toes point inward.
- Surgery. This can correct the alignment of the bones. Children with Blount's disease or bone dysplasia may benefit from surgery. Surgery is usually only recommended for older children or teens.

PROGNOSIS

For most children, the condition will correct without treatment, as they grow up. For those who need treatment, bowlegs usually can be corrected. The legs should look normal and work properly after successful treatment.

HOME CARE INSTRUCTIONS

- If supplements are prescribed, make sure your child takes them. Follow all directions carefully.
- If your child needs to eat more of certain foods, make sure this happens.
- If braces or special shoes are prescribed, make sure your child wears them correctly. Follow the caregiver's directions about when and how long they should be worn.
- If surgery is done, find out what your child should or should not do while recovering.

SEEK MEDICAL CARE IF:

- Bowlegs seem to develop suddenly after age 2.
- Bowlegs seem to get worse, even after treatment.
- Your child has trouble with any braces or special shoes.
- After surgery, you notice blood, pus, or increased swelling at the site of the cut (*incision*).
- Your child has an oral temperature above 102° F (38.9° C).
- Your baby is older than 3 months with a rectal temperature of 100.5º F (38.1° C) or higher for more than 1 day.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your child has an oral temperature above 102° F (38.9° C), not controlled by medicine.
- Your baby is older than 3 months with a rectal temperature of 102º F (38.9º C) or higher.
- **Your baby is 3 months old or younger with a rectal temperature of 100.4º F (38º C) or higher.**

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