

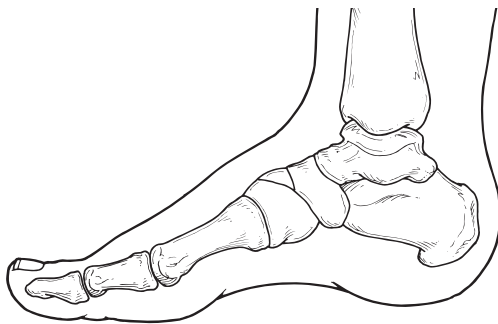
Cavus Foot (High-Arched Foot)



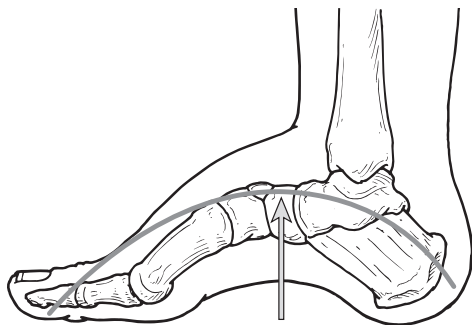
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What is Cavus Foot?

Cavus foot is a condition in which the foot has a very high arch. Because of this high arch, an excessive amount of weight is placed on the ball and heel of the foot when walking or standing. Cavus foot can lead to a variety of signs and symptoms, such as pain and instability. It can develop at any age, and can occur in one or both feet.



Normal Foot



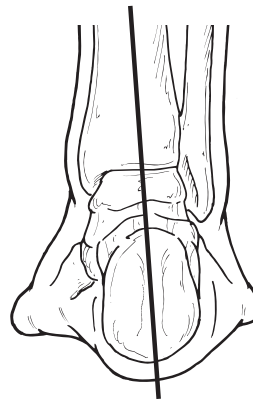
Cavus Foot

Causes

Cavus foot is often caused by a neurologic disorder or other medical condition such as cerebral palsy, Charcot-Marie-Tooth disease, spina bifida, polio, muscular dystrophy, or stroke. In other cases of cavus foot, the high arch may represent an inherited structural abnormality.

An accurate diagnosis is important because the underlying cause of cavus foot largely determines its future course. If the high arch is due to a neurologic disorder or other medical

condition, it is likely to progressively worsen. On the other hand, cases of cavus foot that do not result from neurologic disorders usually do not change in appearance.



Normal foot
(rear view)



Cavus foot with high arch
(rear view)

Symptoms

The arch of a cavus foot will appear high even when standing. In addition, one or more of the following symptoms may be present:

- Hammertoes (bent toes) or claw toes (toes clenched like a fist)
- Calluses on the ball, side, or heel of the foot
- Pain when standing or walking
- An unstable foot due to the heel tilting inward, which can lead to ankle sprains

Some people with cavus foot may also experience foot drop, a weakness of the muscles in the foot and ankle that results in dragging the foot when taking a step. Foot drop is usually a sign of an underlying neurologic condition.

Diagnosis

Diagnosis of cavus foot includes a review of the patient's family history. The foot and ankle surgeon examines the foot, looking for a high arch and possible calluses, hammertoes, and claw

Cavus Foot (High-Arched Foot) *continued*

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toes. The foot is tested for muscle strength, and the patient's walking pattern and coordination are observed. If a neurologic condition appears to be present, the entire limb may be examined. The surgeon may also study the pattern of wear on the patient's shoes.

X-rays are sometimes ordered to further assess the condition. In addition, the surgeon may refer the patient to a neurologist for a complete neurologic evaluation.

Non-Surgical Treatment

Non-surgical treatment of cavus foot may include one or more of the following options:

- **Orthotic devices.** Custom orthotic devices that fit into the shoe can be beneficial because they provide stability and cushioning to the foot.

- **Shoe modifications.** High-topped shoes support the ankle, and shoes with heels a little wider on the bottom add stability.
- **Bracing.** The surgeon may recommend a brace to help keep the foot and ankle stable. Bracing is also useful in managing foot drop.

When is Surgery Needed?

If non-surgical treatment fails to adequately relieve pain and improve stability, surgery may be needed to decrease pain, increase stability, and compensate for weakness in the foot.

The surgeon will choose the best surgical procedure or combination of procedures based on the patient's individual case. In some cases where an underlying neurologic problem exists, surgery may be needed again in the future due to the progression of the disorder. ■



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This information has been prepared by the Consumer Education Committee of the American College of Foot and Ankle Surgeons, a professional society of over 6,000 foot and ankle surgeons. Members of the College are Doctors of Podiatric Medicine who have received additional training through surgical residency programs.

The mission of the College is to promote superior care of foot and ankle surgical patients through education, research and the promotion of the highest professional standards.

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