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Information for Patients

'Bowleg' and 'Knock Knees'

Physiotherapy Service

Bowlegs and knock knees are a normal part of the growing and development of every child. Only a very small number of children need treatment. During growth, the majority of children normally go through a period of having some degree of bowlegs and knock knees. Having bowlegs and knock knees will not affect a child's ability to crawl, walk, run or play. The symptoms of bowleg or knock knees seen in most children will correct, as they will naturally outgrow it.



The following is the normal growth and development for children, from infancy to the age of 10:

- From infancy to 18 months, a child's legs are initially bowlegged, causing toddlers to often walk with their knees wide apart.
- When the child is between 1 ½ and 2 ½ years, the legs have usually straightened.
- By age 3 to 4 years, the child's legs typically grow into a knock knee position.
- By age 8 to 10 years, the child's legs have straightened again to what is likely to be their adult position.

Bowlegs

- Bowlegs (genu varum) is when the child's knees go outwards and the ankles touch.
- This is common in babies and toddlers, especially when they are early walkers or overweight.
- It usually corrects itself by the age of 2 ½ years.
- Sometimes, children with bowlegs can walk with their toes pointing inwards (in-toeing), trip more or appear clumsier than other children of their age.
- Bowlegs are usually painless and do not cause any problems.

When to seek advice?

- If only one leg bows.
- If the bowing worsens over time.
- If the child starts to limp.
- If the child complains of pain in their hip or knees.
- If the problem hasn't resolved by the age of 3.
- If there is a family history of Rickets or Blount's disease.
- If the child is very short for their age (under the 5th percentile).



What treatment will the child need?

- The child will usually not require any treatment for bowlegs.
- There are no restrictions on any activities if the child has bowlegs.
- Occasionally the child may be referred to an orthopaedic consultant if there are any other concerns.

Knock knees

- Knock knees (genu valgum) is where a child's knees appear to go inwards and there's a large gap between their ankles.
- A child can become knock kneed from age 3 years of age but most common at around age of 4.
- It usually corrects itself by the age of 8-10.
- The knees are usually painless and do not cause any problems.
- Knock knees usually correct themselves without any treatment, there is no evidence that braces, special shoes or exercises are helpful.

When to seek advice?

- If the gap between the child's ankles is more than 7 cm when they stand with their knees together.
- If the child is experiencing pain regularly.
- If the child is limping.
- If the issue is getting worse.
- If only one leg is affected.
- If the child is age 1 when they develop knock knees.
- If the problem hasn't resolved over the age of 8-10.
- If you have concerns about the child's function.



What treatment will the child need?

- The child will usually not require any treatment for knock knees.
- There are no restrictions on any activities if the child has knock knees.
- Occasionally the child may be referred to an orthopaedic consultant if there are any other concerns.

Sources:

Children's Orthopaedics and Scoliosis Surgery Associates, LLP
(<https://www.chortho.com>)

Normal Variant of Gait in Early Years; Cardiff and Vale University Health Board

Pictures: all courtesy pictures

**This document is available in Welsh / Mae'r ddogfen hon ar gael yn
Gymraeg**