

In Summary

Habitual tip-toe walking usually causes no long term difficulties and improves well with treatment. When walking improves, children can still show a tendency to tip-toe walk, for instance when they become tired or excited. If your child seems to be experiencing any pain or discomfort or is struggling to stand upright, a visit to your GP is advisable.

We hope that this leaflet will have helped to reassure you about your child.

Contact Details

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For further information and advice please visit our website:-
www.poole.nhs.uk/physio and find '[childrens physiotherapy](#)'



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Information for parents and children about....

Toe-walking in children



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Introduction and causes

A tip-toe walking pattern is commonly seen when children are learning to walk. This is a **normal** part of development and the majority of children will grow out of it. However, some children will continue tip-toe walking for a prolonged period of time until an older age. When there is no underlying medical cause, which will be assessed by your doctor or physiotherapist, this is known as habitual or idiopathic tip-toe walking.

Habitual tip-toe walking usually affects both feet. Children can be predisposed to this if other family members have tip-toe walked or if they spent prolonged periods in baby walkers or door bouncers. Children's tip-toe walking can become more prominent when they are barefoot, tired or excited.



Gastroc Stretch



Soleus Stretch



Hamstring Stretch

Idiopathic tip-toe walking generally does not cause children any pain, although some children can complain of achy legs and feet. It does not affect their development; however children may lose their balance or fall over more than usual. Children will still be able to run, jump and hop and participate in activities/sports.

Some children will be intermittent tip-toe walkers, sometimes being able to place their feet flat on the floor whilst standing or walking. This can be difficult if prolonged tip-toe walking occurs, this can cause tightening of the calf muscles and shortening of the heel (achillies) tendon, which will likely increase the amount of time your child spends of their toes.

Treatment

Treatment will vary depending on the age of your child, the cause and severity of their tip-toe walking. Usually this will begin with physiotherapy:

- If the muscles are tight they will begin with stretches
- Games and activities will be advised to encourage children to place their feet flat on the floor
- Advice will be provided regarding footwear and strategies to reduce tip-toe walking



Passive gastroc Stretch

The correction of tip-toe walking does take time, usually over several months, as the body has to retrain patterns of movement. However, sometimes other treatment options are considered alongside physiotherapy:

- **Orthotics:** insoles to prevent children being able to raise up onto their tip-toes in their shoes
- **Serial casting:** walking plaster casts below the knees which will place a sustained stretch on the calf muscles to help lengthen them. Children are still able to walk in these but not run/jump around. The casts are usually changed every 2 weeks and total length is approximately 6 weeks. Orthotics will likely be used following this to help maintain the calf length.
- Referral onto an orthopaedic consultant: if none of the above methods have improved your child's tip-toe walking and your child has a significant shortening of their achillies tendon and they are in pain, then this referral may be discussed. The consultant can then complete an assessment and discuss appropriate interventions.

