Physiologic Genu Valgum – Knock Knees

What is Physiologic Genu Valgum?
When some children stand, run, or walk, their knees seem very close together (or even touch each other) and their ankles are further apart. This condition is called knock knees or genu valgum. In the first 12-18 months of life, children often have some leg bowing. The legs straighten as the baby/toddler grows. By age 3-4, it is common to see the child become knock-kneed, and then by age 7-10 the legs have usually straightened. For most children, knock knees is ‘physiologic’ or part of their normal development. In some cases, the knock knees are due to trauma to the growth areas in the knee, a bone condition, or a previous bone or joint infection.

How is Physiologic Genu Valgum Diagnosed?
Your physician will ask you about your child’s health, growth and development and examine his/her legs. If the genu valgum is only on one side, is very severe, or if your child is very small for his/her age, your physician may want to take an x-ray of the legs.

What is the Treatment of Genu Valgum?
For normal (physiologic) genu valgum, the treatment is generally observation. Physiologic genu valgum tends to resolve or get much better by age 7. In cases of genu valgum which results from past injury or infection, your doctor may recommend surgery to realign the legs. Patients who are older than 10 years of age who have persistent genu valgum and have pain with activities may be candidates for corrective surgery.

Answers to Commonly Asked Questions:

1. Will special shoes, casting or bracing help my child’s knock knees?
   No, knock knees generally straighten over time without the aid of any device or special shoes.

2. Will my child have completely straight legs as an adult?
   Many adults have a small amount of bowing or knock-knees. This generally does not cause pain or limit participation in sports.

3. Will my child be able to play sports and have a normal life?
   Even if your child ends up with a small amount of knock knees as an older child or adult, he/she should still be able to play sports and lead a normal life. Occasionally, children have significant genu valgum that causes pain and gets in the way of their activities. When this occurs, children may need a small corrective surgery after the age of 10.

4. What should I do if my child’s knock knees continues to get worse or does not improve?
   We recommend a return visit to the pediatric orthopaedic clinic if the bowing has not resolved or significantly improved by age 10, especially if your child is having leg pain or difficulty with physical activities.