

الروابط وعوامل الخطر لانتكاس قدم القفداء مجهولة السبب عند استخدام طريقة بونستي.

Associations and Risk Factors of Relapsed Idiopathic Clubfeet when using Ponseti Method

Introduction: Identifying risk factors associated with relapse, is an important issue in predicting and anticipating the outcome during the management of idiopathic clubfeet using Ponseti Method.

Material: 258 feet of idiopathic clubfeet deformity in 165 children, were treated using the Ponseti technique. Patient prenatal, natal and family history were documented. Then foot abduction brace was used. Results were graded as fully plantigrade (good), not fully plantigrade (fair) and relapsed (poor).

Results: The mean follow up was 39.5 ± 21.9 months (range 3-78). Mean age at presentation was 72.1 ± 144.1 days (1 day to 44 months). 118 (71.5%) were males. In 31 (12%) feet the parents refused the Ponseti management and underwent open surgical release else were, and at their last follow up 10 (32.2%) feet were good, 14 (45.16%) feet were fair, 7 (22.5%) feet were poor. In the remaining Ponseti managed group of 227 (88%) feet at their last follow up, 137 feet (60.3%) were good, 74 feet (32.6%) were fair and 16 feet (7%) poor. Age at presentation ($p=0.246$) had no bearing on results. Relapse correlated positively with positive family history ($p=0.007$), and with noncompliance ($p=0.000$). Open surgical release was associated with 16 fold increased risk for relapse $p= 0.000$ (95% confidence interval lower limit 6.55 and upper limit 41.45).

Conclusion: Parents' compliance and devotion is a key factor for the successes of the Ponseti method. Open surgical release, increase the risk of relapse.