

INTRODUCTION

Congenital talipes equino varus C.T.E.V mentioned in an old indian prayer book , yajur - veda from the 10th century B.C , (Reimann , 1967) . C.T.E.V is one of the commonest congenital deformities of the foot , it occurs in approximately 1:1000 live births , (Wynne . Davies , 1972)

The word talipes is derived from the Latin talus (ankle bone) and pes (foot) , equinus meaning horse like (The heel is planter flexed) and varus meaning inverted and adducted , The clinical diagnosis of C.T.E.V is by observation of the three basic deformities which are :

- Fore foot adduction and Inversion
- Heel inversion .
- Hind foot equinus .

A universally accepted method of classification of the severity of the deformity is lacking and no standardized method of evaluating the result of treatment has been developed yet , (Cummings , 1988) .

Most authors still agrees that all congenital clubfoot should be treated initially non operatively , (McKay , 1982) .

The non operative treatment of C.T.E.V should begin soon after birth and consists of manipulation and immobilization either in adhesive tapes or plaster of Paris .

The best time to do the operative procedure is debatable , but most orthopedic surgeons delay surgical intervention until the infant is approximately four to six months old , (Simon , 1985) .

The operative procedures that are currently in use can be divided into three basic groups : Those that involve soft tissue , those that involve soft tissue and bone . No single monograph can review all aspect of this complex disorder .

The aim of this work is to discuss the normal anatomy of the foot , aetiology , pathogenesis , pathoanatomy , diagnosis and management planning of C.T.E.V .