

Ankle Foot Orthoses (AFOs)

Information Sheet



What is an AFO?

Ankle-foot orthoses (AFOs) are among the most commonly prescribed lower limb orthoses at the Royal Children's Hospital. They are custom made for each individual to include the foot, ankle and leg, finishing just below the knee. AFOs may be prescribed to patients who have muscle weakness, joint instability or high muscle tone.

What do they aim to achieve?

- Prevent deformity
- Increase mobility
- Increase independence
- Protect and support a healing injury following surgical intervention
- Reduce pain

Putting the AFO on correctly

- Ensure the skin is clean and dry
- Wear long socks underneath the AFOs so there is no direct contact between the plastic and the skin (this can cause skin breakdown).
- Ensure the socks are smooth rather than textured and there are no wrinkles present.
- When putting the AFOs on, it is very important that the heel is sitting down in the heel cup. To do this, bend the child's knee and push the heel down and back into the heel section of the AFO.
- Firmly tighten the ankle strap (If the strap is loose, skin problems are more likely to develop from rubbing). Then tighten the calf strap.
- Always wear shoes with the AFOs (unless AFOs are used for night time only). Runners are ideal shoes as they are wide and deep and the insole can be removed to provide extra room to accommodate the AFOs.
- Failure to wear shoes with the AFOs will result in damage to the AFOs requiring replacement. Parents will be required to pay the replacement cost.

Wearing Regime

AFOs provided after surgery

Following a surgical procedure the AFOs should be worn day and night. Unless otherwise advised by a surgeon, the AFOs should only be removed for hygiene and to check the skin condition.

Standard wear

Your child may require time to adjust to wearing the AFOs. It is important to gradually increase the wearing time of AFOs by at least an hour each day. It is expected that within 2 weeks your child is wearing the AFOs as recommended (If your child is not expected to wear the AFOs full time, your Orthotist will discuss with you at your fitting appointment your child's expected wearing time).

Skin Care

- It is very important to check your child's skin every day after AFO wear to monitor any potential problems e.g. blisters and sores.
- It is expected that there will be some redness on the skin after removal, however this should not be lasting.
- **If your child is experiencing pain, redness or blistering due to the AFO, it is important to contact the Orthotics department and book a review appointment.**

Care and Maintenance of AFOs

- The AFOs should be regularly cleaned by wiping with a damp cloth and soapy water. They should be completely dry before being reapplied. Do not use a heat source e.g. hair dryer to dry the AFOs. Instead towel and/or air dry.
- Try not to wet the straps when washing the AFOs. If required towel dry straps only.
- Check straps routinely for wear and tear and that they fasten securely. It is not uncommon for straps and padding to become worn and then break. If the straps are of concern contact the department as these are minor repairs and can generally be replaced quickly.
- Don't cut, file, heat or damage your AFOs.
- If you think your child is outgrowing the AFO please contact the department for a review appointment. You will need to bring your child's current AFOs to this appointment.

PLEASE ENSURE YOU BOOK IN ADVANCE AN ORTHOTIC REVIEW APPOINTMENT FOLLOWING YOUR DOCTOR'S APPOINTMENT ON THE SAME DAY.

PLEASE CONTACT YOUR ORTHOTIST IF YOU HAVE ANY QUESTIONS OR CONCERNS REGARDING YOUR CHILD'S TREATMENT WITH AFOs

Your Orthotist is _____

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