

# 'Toe-walking' more common in kids with mental woes: study

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Many healthy children also adopt this stance, which can lead to posture problems, experts say.

(HealthDay) -- As many as one in 20 children may predominantly walk on their toes in early childhood. Youngsters who have developmental delays or neuropsychiatric disorders, however, are more likely to walk on their toes, according to a new study from Sweden.

Toe-walking is a condition where [children](#) walk on their [toes](#) instead of using a typical [gait](#). Certain conditions, such as [cerebral palsy](#), can cause toe-walking, according to background information in the study. But, sometimes, toe-walking occurs in children who appear to be healthy otherwise. This is called idiopathic, or habitual, toe-walking.

In the Swedish study, at 5.5 years old, more than 40 percent of children

with [developmental delays](#) or neuropsychiatric disorders, such as an autism spectrum disorder, were currently or had been toe-walkers.

Although the number of children with "a neuropsychiatric disorder in this study is too small for conclusions," the authors reported, the study "confirms earlier findings that toe-walking has a high prevalence among children with a cognitive [or mental] disorder."

And, they noted that toe-walking in otherwise healthy children often resolves on its own. By 5.5 years, "more than half of the children have spontaneously ceased to walk on their toes," they concluded.

Results of the study were released online July 23, in advance of publication in the August print issue of *Pediatrics*.

To get an idea of the prevalence of toe-walking, and the natural course of the condition, Drs. Pahr Engstrom and Kristina Tedroff of the Karolinska Institute in Stockholm reviewed data on 5.5-year-old children living in Blekinge County, Sweden.

There were almost 1,500 [youngsters](#) included in the study, including 35 children who were seen at a clinic for children with special needs. Seventeen of these children had developmental delays or neuropsychiatric disorders.

Thirty (20 boys and 10 girls) of the otherwise healthy children were current toe-walkers. That represented about 2 percent of all the children. Another 40 children (22 boys and 18 girls) had previously walked on their toes. That means about 5 percent of the county's 5.5-year-old children had a history of toe-walking.

Most of the children, but not all, started walking on their toes. Eleven children developed toe-walking during their first year of walking,

according to the study.

Of the 17 children with developmental delays or neuropsychiatric disorders, seven boys (41 percent) had a history of toe-walking. About half of these children started walking on their toes. In two children, toe-walking started during the first year of walking, and one youngster started toe-walking during the second year of walking, the researchers found.

Left untreated, toe-walking can cause damage to the structures in the legs, ankles and heels. It can also create a social stigma, according to the study authors.

Commenting on the study, Dr. Pete Richel, chief of [pediatrics](#) at Northern Westchester Hospital in Mt. Kisco, N.Y., said: "Although many of these cases are labeled idiopathic, which means without a known cause, as clinicians and parents, I think we have to consider whether there is an organic cause that may be so subtle it's not always evident." He said some toe-walking children may have sensory issues that don't meet the level for diagnosis of an [autism spectrum disorder](#), but still might benefit from treatment.

Occupational therapist Chantell D'Avignon, from Ft. Lauderdale, Fla., added that "every child is different and every treatment is different, but early intervention is key. The brain from zero to 3 years old is much more pliable."

Colleen Harper, a physical therapist and director of developmental, rehabilitative and child life services at La Rabida Children's Hospital in Chicago, agreed that early treatment is important.

"Many issues are easy to fix at 18 months, but very hard at 5 years," said Harper.

For example, kids who walk on their toes often walk with their stomachs forward, and part of treatment has to include moving that center of gravity back. And, the longer that posture has been practiced, the longer it will likely take to correct.

Harper noted that while the Swedish study didn't address this cause, in the United States, spending too much time in a baby walker is a common source of toe-walking. She said that pediatricians and physical therapists advise parents not to use these devices because they're generally unsafe, and toe-walking can be an unintended consequence.

All three experts advised parents to bring up toe-walking with their child's pediatrician, who can determine if further treatment is necessary. And, Richel pointed out that while children with developmental delays and neuropsychiatric disorders may have higher rates of toe-walking, toe-walking on its own doesn't necessarily mean your child has one of these conditions.

Because while the study uncovered an association between toe-walking and developmental delays or [neuropsychiatric disorders](#), it did not prove a cause-and-effect relationship.

**More information:** Learn more about toe-walking in children from the [Seattle Children's Hospital](#).

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