

What are littleSTEPS®?

littleSTEPS® are pre-fabricated foot orthoses specifically designed for kids. littleSTEPS® provide an affordable alternative to expensive custom foot orthoses while delivering a prescription based correction. This promotes earlier intervention and treatment of many musculoskeletal conditions common to children. Sizing ranges from a toddlers 5 through youth/adult size 8.5 (euro sizes 21-42), suiting all kids, toddlers to teens.

See the difference for yourself!



Before



After with littleSTEPS®

Here's what one parent told us:

"I am so pleased with the gains my three-year old son has made since he started using his littleSTEPS orthotics...his balance improved resulting in less falls, better coordination and he no longer complains of fatigue in his legs with walking and running. Best of all, his confidence has increased greatly!" -Melissa D.

What makes littleSTEPS® Unique?

littleSTEPS® provide the same functional foot control found in prescription foot orthoses. Some of these features are:

- ✔ An ultra deep 30 mm heel cup to maximize rearfoot control and realign the Achilles tendon.
- ✔ Excellent arch support with deep sidewalls to assure both comfort and correction.
- ✔ A unique thermoplastic compound which has a combination of strength and a "soft-edge" feel for patient comfort.
- ✔ littleSTEPS® are durable and easy to clean with soap and water.
- ✔ Fit in most standard athletic shoes.

Is there a break-in period?

Yes. Most patients should be able to gradually increase their wear time over a 7-10 day period. This begins with normal activity and gradually works towards more strenuous activities, such as sports. It is recommended that all foot orthoses be worn with socks to avoid blisters.

Should I consider additional pairs of littleSTEPS® orthoses?

Most often, one pair of orthoses will suffice; however, having additional pairs offers the convenience of not having to move them from shoe to shoe.

The Foot Institute

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littleSTEPS®

foot orthotics for kids



littleSTEPS® . . .Big Results!



The Foot Institute

Efren Buff De La Rosa, DPM,

F.A.C.F.A.S.
PODIATRIC SURGEON

Are you concerned about your child's feet?



You are not alone. It is not uncommon for parents to be concerned about their child's feet!

Consider Genetics! Many adults recognize that they have feet genetically similar to their parents, but many not realize that they might have passed on these same foot traits to their children! Help your children avoid acquiring your foot problems by having their feet screened by a qualified clinician who can help you determine if treatment should be considered.

Foot Facts:

- It is normal for a child's foot to appear flat up until about the age of 2 due to a thick layer of baby fat that fills the arch area. As long as the child is otherwise healthy, and the foot is flexible and free of pain, then no treatment is necessary.
- A child's arch becomes more apparent around the age of 3 when the fat pad begins to disappear. At this age it is normal to observe a good arch when the child is sitting or lying down. Upon standing however, the arch may look very low. In most cases, this may be completely normal.
- It is uncommon for children to complain of foot pain. Be aware that "Growing Pains" are not always normal and may be a sign that your child may have an unstable foot. Any child complaining of pain should be seen by their doctor to rule out a potentially serious condition and to determine if they are a candidate for foot orthotics.

Developmental Flatfoot

Developmental Flatfoot is one of the most common conditions affecting the musculoskeletal system of children and teenagers. When a child's arch is severely flat, coupled with an inward bowing of the ankles and Achilles tendon, they may have a true flexible flatfoot, also known as "developmental flat foot". This is a foot that has a normal looking arch when non-weight bearing and a flat arch in standing. Typically this condition is not painful, but may lead to postural concerns and poor muscle.



There is a tendency to under treat or ignore a child's flatfoot unless it is severe. Developmental flatfoot is the precursor to serious foot dysfunction and often results in some level of disability in the adult foot. Recognizing this anomaly early in life may protect joints and avoid musculoskeletal injuries later in life.

What Can Be Done?

There are many things that can be done to manage a developmental flat foot. Your healthcare provider can help diagnose the condition and recommend appropriate treatment. Intervention may include balance and coordination exercises, in addition to **littleSTEPS®** foot orthotics for kids.

littleSTEPS® Come in 2 Models:



littleSTEPS® foot orthotics:

- Support Flat Feet and Improve Posture
- Control Heel Pain/Sever's Disease
- Reduce Growing Pains
- Effective for Toe Walking



littleSTEPS® gait plates:

- Reduce In-Toeing
- Improve Hip & Lower Extremity Strength
- Reduce Destructive Torsional Forces
- Create a Straighter, More Normal Gait

The **NEXT BEST THING** to Custom!



Be Aware That Pain is Not the Only Factor When Determining if Orthotic Support is Right For your Child.

Consider littleSTEPS® When:

- Your child has poor balance or coordination, awkward gait, or tends to trip and fall.
- Your child habitually walks on their toes or walks with their feet turned in ("intoeing"). for no known medical reason.
- Your child fatigues easily and often wants to be carried.
- And Yes, If you child has any pain related to walking, or has frequent or severe growing pains.



Toe-Walking

It is normal for a child to walk on their toes for the first 2-3 months of walking. If your child continues to toe walk after this time, they should be examined to determine if they have tight heel cords (the tendon that connects to the back of the heel). Children who toe walk may simply require stretching of their heel cords or they could require other intervention. Although many children will continue to walk on their toes despite having normal heel cord flexibility, children with developmental flat foot may assume this position to gain more stability. Wearing supportive shoes in combination with a foot orthotic can help them.

