

## WHY IS MY CHILD'S LEG NOT STRAIGHT?: POST TRAUMATIC TIBIA VALGA

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**Introduction:** Posttraumatic tibial valgus is a complication of proximal tibial metaphyseal fractures in children. It has an insidious onset and is usually detected on subsequent follow ups. We revisit a unique complication to this fracture pattern, and management by close observation and watchful waiting.

**Discussion:** A 2-year-old boy sustained left leg pain following an injury where his left leg was traumatically rotated as the child attempted to descend down a slippery slide. The child was unable to bear full weight and very fretful on attempts to palpate the proximal left leg. Clinically there was effusion of the proximal leg and knee region with no open wounds. The initial radiographs show an undisplaced fracture of the left proximal tibial metaphysis. Patient was treated with an above knee cast that was removed after 6 weeks. Serial radiographs were satisfactory with evidence of healing. Despite fracture union, the patient was still under close observation in our unit. At 12 months following the trauma, an insidious onset of genu valgum with mechanical axis deviation was noted. The parents did not notice any difficulty or clumsiness in ambulation. We continued with an expectant course of treatment and continued close follow up for this child. At 24-months post injury plain radiographs demonstrated an improved lower limb alignment with correction of the mechanical axis. Clinically a left sided genu valgum is still apparent despite improving angulation as seen radiologically.

**Conclusion:** It is quite difficult to predict the progression and degree of spontaneous resolution of the angulation for this type of fracture. We recommend follow-up for a year following injury to document the possibility of valgus overgrowth. Watchful waiting and expectant management is an acceptable approach, with highest regards to the child's daily activity and functional condition. Surgical intervention should be reserved for patients who have symptoms secondary to the malalignment.