Standing on their own two feet

Mothers play a central role in childcare, as they are often the ones who know what is best for their babies and are willing to fight for it, writes Omshekie Nalolo. She chatted to Steps Charity founder Karen Moss, who is responsible for bringing the non-surgical treatment of clubfoot to South Africa.

The Ponseti method is available at several hospitals in KwaZulu-Natal, including: Nigwekweze Hospital, empgeni. Dr Paul Rollinson (Orthopaedics) Telephone: 035 951 7050 Fax: 035 794 1684 Westville Hospital Durban Dr Robert Fraser Tel: 031 265 2914/5 www.drbobfraser.co.za King Edward VIII Hospital Durban Dr Mohamed Rasool (Orthopaedics) Phone: 031 360 5220 Fax: 031 206 1457

Karen Moss explains the Ponseti method of correcting clubfoot with a five-cast model.

Karen Moss – is now 10 years old.

The boy at the heart of the story – Alex Moss – is now 10 years old. "He runs, plays sport, climbs trees like any other active boy," says his proud mother.

A disavantage of the intense focus on dread diseases is that many other conditions fall by the wayside. Clubfoot is surely one of them. Few would know that it is one of the most common musculoskeletal birth deformities, affecting 200 000 babies each year.

Studies report that the southern and eastern African population has almost twice the world average incidence of clubfoot. There are about 11 000 children born with clubfoot in southern Africa every year, about 2 000 of them in South Africa.

Clubfoot is a disorder of the foot and ankle that affects children to be born with one or both feet turned inward or upward. Without treatment, the top of the foot is where the bottom should be, and the foot becomes fixed in this position, which makes walking either impossible or very painful.

When Karen Moss gave birth to her son Alex in 2003, she was told he would have to undergo surgery for bilateral clubfoot (both feet) at the age of three months.

He had his first casts when he was one week old, followed by eight more to stretch his feet. Desperate to avoid the surgery, his mother did what many others would – she searched the web relentlessly for an alternative.

"I came across a link called ‘nosurgery4clubfoot’ for an online parents’ support group that had been started a few months before. The link was on a page of the University of Iowa Children’s Hospital. This is where Moss found the Ponseti method. Developed in the 1950s by Dr Ignacio Ponseti, this is a gentle and effective way of treating clubfoot without major surgery.

"Amazingly, Ponseti was still practising at the age of 89. He had since passed on but I was lucky enough to meet him as he encouraged my husband and I to bring Alex to Iowa for treatment. He was just 10 weeks old and after 16 days with just three casts, his feet were straight."

Moss says the technique Ponseti used was different to what they had experienced before.

"Alex was on my lap while his feet were manipulated; he fell asleep while the casts were applied. These were full-leg and bent at the knee instead of the half-leg cast we were accustomed to seeing."

"With just the first casts I saw a vast improvement. I didn’t understand why, after 50 years, South African doctors weren’t doing it."

"According to studies, we have one of the highest rates of clubfoot in the world, second only to Polynesia. Many older children live with the burden and stigma of neglected or relapsed clubfoot. Neglected clubfoot has a long-term impact on a child’s quality of life. Children in rural areas or depressed socioeconomic conditions are more affected by the lack of access to adequate care or information. These children face a life of disability."

"Ponseti told me we were the first South Africans at his clinic and that he hadn’t trained any South African doctors."

"Taken aback, Moss took it upon herself to make a change at home."

"I started by visiting private orthopaedic surgeons and gradually the word spread and a few doctors started to use the Ponseti method."

"It wasn’t enough to cover the country though, so Moss formed Steps Charity in 2005 and began the first Ponseti training workshops in South Africa in 2006."

"The next year we focused on state health facilities and I also brought a specialist team from Uganda to train doctors to make low cast braces that retain the position of the foot and prevent it from turning in again."

She says since then more than 5 000 braces have been made at Chris Hani Baragwanath Hospital workshops in Johannesburg, which has helped to prevent relapse in hundreds of patients.

"The Ponseti method is now endorsed by the South African Paediatric Orthopaedic Society (Sapos) and taught at the major medical schools and training hospitals. It is said to be more than 95 percent effective when properly applied by a trained healthcare provider."

"This year Steps expanded into a regional organisation with endorsements and partnerships from the ministries of health in Botswana and Namibia to introduce Ponseti in those countries and help to implement a national clubfoot programme. Moss is also talking to practitioners in Swaziland."

"We have also launched a clubfoot clinic support programme, thanks to financial support from Miraclesfoot, a UN NGO supporting clubfoot treatment, focusing on parent education, brace supply and data collection to ensure successful treatment," says Moss.

"Hundreds of children have been given the gift of pain-free walking without disability sinceSteps started."

The boy at the heart of the story – Alex Moss – is now 10 years old. "He runs, plays sport, climbs trees like any other active boy," says his proud mother.

Karen Moss, executive director of Steps Charity which supports babies and children with clubfoot, with her son Alex, aged 10, who was born with bilateral clubfoot which has been corrected using the Ponseti method of treatment.

PICTURES: IAN LANDSBERG