



A-Line
by Blatchford

A-Line Boot for the treatment of CTEV in conjunction with the Ponseti method
Incorporating Horton Technologies Adjustable Click Bar

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Boot Measuring Charts

Standard Fitting

| Size | Length | Joint Width |
|------|--------|-------------|
| 24 | 152mm | 60mm |
| 23 | 146mm | 59mm |
| 22 | 139mm | 58mm |
| 21 | 133mm | 56mm |
| 20 | 126mm | 55mm |
| 19 | 120mm | 54mm |
| 18 | 113mm | 52mm |
| 17 | 107mm | 51mm |
| 16 | 98mm | 50mm |
| 15 | 92mm | 49mm |
| 14 | 85mm | 47mm |
| 13 | 79mm | 46mm |
| 12 | 72mm | 44mm |

Narrow Fitting

| Size | Length | Joint Width |
|------|--------|-------------|
| 24 | 152mm | 56mm |
| 23 | 146mm | 55mm |
| 22 | 139mm | 54mm |
| 21 | 133mm | 52mm |
| 20 | 126mm | 51mm |
| 19 | 120mm | 50mm |
| 18 | 113mm | 48mm |
| 17 | 107mm | 47mm |
| 16 | 98mm | 46mm |
| 15 | 92mm | 45mm |
| 14 | 85mm | 43mm |
| 13 | 79mm | 42mm |
| 12 | 72mm | 40mm |

How to Order

A-Line Boot

Please specify required part number and size:

Part number: Standard 900WH/Narrow 905WH

Size range: 12-24 (European size)

e.g. 905WH12 is narrow fitting size 12

Horton Technologies Adjustable Click Bar

6"-8" Adjustable Bar: FR408

8"-12" Adjustable Bar: FR412

6"-8" Adjustable Bar with 10° Kicker: FR408-10

8"-12" Adjustable Bar with 10° Kicker: FR412-10

Blatchford is proud to offer the **A-Line Boot** and **Horton Technologies Click Bar** for the effective treatment of Congenital Talipes Equino Varus (CTEV), designed to work in conjunction with the Ponseti method of treatment.



Key Features

- Manufactured using softer leather giving greater comfort, tolerance and compliance
- Reversible padded tongue
- Increased calcaneal cupping and padding to secure the heel within the boot
- Posterior cut out facilitating accurate positioning and monitoring of the heel
- Elongated fastening strap incorporating clearly stitched markers
- Designed using professional clinical input and experience
- Narrow width fitting available.
- Works perfectly in conjunction with the Horton Technologies Click Bar

What is CTEV?

Congenital Talipes Equino Varus is the medical term for clubfoot; a disorder at birth whereby the feet point inwards and downward to varying degrees. It is the most common bone and joint deformity found in newborns yet very little is known about the cause.

What is the Ponseti Method?



The Ponseti Method of treating CTEV was developed over 40 years ago in Iowa, U.S.A. by Professor Ignacio Ponseti. The progress of patients has been followed through to adulthood with excellent results reported.

The first stage of the treatment should ideally begin within weeks of birth to achieve the best results. Initially, the foot undergoes a series of manipulations to gently rotate bones and stretch soft tissue. During the next stage the legs are cast from toe to groin every five to seven days. This is repeated for between six to ten casts until gradually the feet point outwards. Around 80-95% of children may require a tenotomy at this stage, a minor operation to lengthen the Achilles tendon.

The final stage requires the patient to wear boots and a bar to maintain the correction achieved from the earlier stages. Failure to do so can result in the requirement for further casting. **As a guide**, the boots and bar are worn continually, day and night, for three months and then only at night and during naps until around four years of age.

Fitting Tips

- The spreader bar should be selected to provide 20 degrees of hip abduction.
- Boots should be donned separately from the bar and the boot should extend medially to beyond the first metatarsal.
- When fastening the boots, secure the heel down at the back with the ankle strap. Fasten the laces firmly and check that the strap is still firmly holding the heel down. A-Line Boots have a posterior cut out to allow positioning to be easily checked.
- Boots should be set externally rotated by 70 degrees in affected limbs and 45 degrees for normal limbs.
- Explain the skin/nail bed circulation monitoring process to parents or guardians to enable them to carry it out confidently at home. This reduces the likelihood that the boots would be donned too loosely to be effective.
- If the circulation is compromised then the boots should be refitted. If this does not resolve the situation without altering the position of the foot, then the angle of external rotation may need to be reduced slightly to improve circulation.
- Socks are not usually advised due to the inability to monitor circulation and creasing within the boots.
- Do not mark the strap position for fastening as the leather strap will stretch somewhat. The foot will grow and sock thickness (if worn) can make a considerable difference. Explain and demonstrate to the carers how to fasten the boot correctly.
- The initial review at 1/12 or sooner.

Horton Technologies Adjustable Click Bar



The Horton Click Bar was designed by an orthotist who understood the need for a more user friendly device when treating a child with the Ponseti method.

The Click Bar allows feet to be rotated internally or externally and is easy to use. The shoes are fitted first, then clicked into place on the bar and adjusted to the required angle. This offers excellent foot positioning within the shoe and reduces the chances of the child kicking them off during fitting. Donning and doffing is much easier too; with just a click you can detach the bar from the shoes, change the child then click the shoes back on to the bar.

Available in two sizes and with the option of a 10 degree kicker bar. A Click Bar information leaflet is available, please contact Customer Services for details.

Available from

