Case Study Sever's Disease

Practice: Resonance Podiatry and Gait Labs **Patient:** 12 year old male rugby player

Sever's disease (also known as a calcaneal apophysitis) is one of the most common causes of heel pain in growing children, usually occurring between the ages of 8-15 years. It is an inflammation of the growth plate in the calcaneus (heel) caused by repetitive stress to the heel usually during a growth spurt. It is more likely to be seen in children who are active in sports such as football (soccer).

Current Situation

12 year old male, Rugby player. Extremely hard playing surfaces due to drought. Pain in the posterio-plantar aspect of calcaneus. The patient also presented with:

- Tibial valgum
- Negative Lunge test
- Low supination resistance
- Trendelenberg with single knee bend
- Thomas test negative
- · Anterior pelvic tilt
- Core weakness
- Tight hip flexors



Anterior assessment view
Proximal weakness is driving functional pronation moments.

Reduced calf/ Achilles length is traction at calcaneal apophysis.



Posterior assessment view

Assessment

- Clinical symptoms & gait pattern
- X-ray films to rule out other conditions
- · Calcaneal apophysitis 'Severs'



Patient x-ray films

Treatment

Formthotics

Formthotics dual density were selected to increase shock absorption, maintain fatty pad of heel under calcaneus. Increase weight bearing surface of foot, control excessive pronation and to increase cushioning.

A lateral forefoot post from styloid was also added to the Formthotics.

Other treatment modalities

- Ice
- Tuli Heel Cups
- Stretching & Strengthening Exercises calf complex

Results

- 80% improved
- Some soreness with rugby only, which settles quickly



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