Genu Varum “in children”

- Genu Varum ( Bow Legs ) is when the legs curve outward at the knees while the feet and ankles touch. Infants and toddlers often have bow legs. Sometimes, older kids do too.

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### **What Are the Signs & Symptoms of Bow Legs?**

Bow legs don't usually bother young children because the condition doesn't cause pain or discomfort. Parents might worry about the appearance of their child's legs, or an awkward walking pattern. But bow legs don't affect a child's ability to crawl, walk, or run.

Sometimes, kids with bow legs may walk with the toes pointed inward (called intoeing, or pigeon-toes) or they may trip a lot and appear clumsy. These problems generally resolve as the child grows.

If the condition lasts into teenage years, it may cause discomfort in the ankles, knees, or hips.

### **What Causes Bow Legs?**

When babies are born with bow legs it's because some of the bones had to rotate (twist) slightly when they were growing in the womb to fit into the small space. This is called **physiologic bow legs**. It's considered a normal part of a [child's growth](https://kidshealth.org/en/parents/childs-growth.html) and development.

As a child starts walking, the bowing might increase a bit and then get better. Children who start walking at a younger age have more noticeable bowing.

In most kids, the outward curving of the legs corrects on its own by age 3 or 4. The legs might even look curved inward (knock-knees). The legs usually straighten by age 7 or 8.

Rarely, bow legs can be caused by a more serious medical condition, such as:

- rickets, a bone growth problem due to lack of vitamin D or calcium. It's more common in developing countries where children don't get enough foods fortified with [vitamin D](https://kidshealth.org/en/parents/vitamin-d.html). Sometimes rickets can run in families due to a genetic problem that affects how the body uses vitamin D.

- [Blount disease](https://kidshealth.org/en/parents/blount-disease.html), a growth disorder that affects the bones of the legs

- conditions that may affect bone growth around the knee including injury, infection, or a tumor

### **Who Gets Bow Legs?**

Most infants and toddlers have at least some physiologic bowing of their legs.

Bow legs in older children usually is because of Blount disease or another medical condition. Blount disease is more common in kids who:

- are [overweight](https://kidshealth.org/en/parents/overweight-obesity.html)

- started walking at an early age

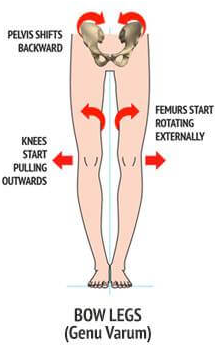
- have a family member who had the condition

### **How Are Bow Legs Treated?**

- Physiologic bow legs does not need treatment. It usually corrects itself as the child grows.

- A child with Blount disease may need a brace or surgery.

- Rickets usually is treated by adding vitamin D and [calcium](https://kidshealth.org/en/parents/calcium.html) to the diet. Rickets due to a genetic condition may need more specialized treatment by an [endocrinologist](https://kidshealth.org/en/parents/bow-legs.html) (a doctor who treats diseases of the [endocrine system](https://kidshealth.org/en/parents/endocrine.html)).

Genu Varum “in adult”

#### Varus knee is a condition that’s commonly referred to as genu varum. It’s what causes some people to be [bowlegged](https://www.healthline.com/symptom/bow-legged).

#### It happens when your tibia, the larger bone in your shin, turns inward instead of aligning with your femur, the large bone in your thigh. This causes your knees to turn outward.

What are the symptoms?

#### The most obvious symptom of varus knee is being bowlegged. Adults may feel some pain on the inner aspect of the knee. Young children with varus knee may not have any symptoms.

#### Over time, untreated varus knee can cause joint pain, especially when walking. It also causes unusual wear and tear on the cartilage in your knee, which can lead to [osteoarthritis](https://www.healthline.com/health/osteoarthritis).

# What causes it?

Varus knee is common among newborns. Their knee joints are still developing and many of their bones haven’t yet moved into their permanent position. However, some young children develop varus knee as a result of [rickets](https://www.healthline.com/health/rickets), a disease associated with [low levels of vitamin D](https://www.healthline.com/nutrition/vitamin-d-deficiency-symptoms) that causes soft bones.

In adults, osteoarthritis can be both a result and cause of varus knee. If the cartilage on the inside of your knee joint wears down, it can cause your leg to bend outward. In addition, the longer your tibiofemoral alignment is off, the more damage you’re likely to do to your knees.

Other possible causes of varus knee include:

- [bone infections](https://www.healthline.com/health/osteomyelitis)

- [bone tumors](https://www.healthline.com/health/bone-tumors)

- injuries

- Paget’s disease of the bone

- [brittle bone disease](https://www.healthline.com/health/osteogenesis-imperfecta)

- [achondroplasia](https://www.healthline.com/health/achondroplasia)

- Blount’s disease

**How is it treated?**

Treating varus knee depends on the cause. If it’s caused by rickets, your child may simply need to take vitamin D or calcium supplements if the disease is still in its early stages. Sometimes, supplements are enough to strengthen the bones and improve the condition.

Most other causes, including more advanced rickets, require surgery. For mild cases that don’t cause much pain, physical therapy and weight training can help to strengthen the muscles surrounding your leg bones. However, they won’t straighten your bones.

The most common type of surgery used to treat varus knee without significant osteoarthritis, particularly in younger patients, is a high tibial osteotomy. This procedure realigns the tibia by cutting into the bone and reshaping it. This relieves the pressure on your knee caused by poor tibiofemoral alignment.

If you have varus knee, osteotomy surgery can also help to prevent, or at least delay, the need for total knee replacement surgery down the line.

Following a high tibial osteotomy procedure, you’ll need to wait three to eight months before getting back to your usual level of activity. You’ll also need to wear a brace for at least a month or two. If this recovery period sounds daunting, keep in mind that [total knee replacement surgery](https://www.healthline.com/health/total-knee-replacement-surgery/rehabilitation-timeline), which an osteotomy surgery can sometimes prevent, often requires up to a year of recovery.