Knock Knees and Bow Legs

As all children develop, their legs change shape and position. All infants have some degree of bow legs which usually resolves by the age of 2. By the age of 4 they begin to develop knock knees and this usually resolves to straight legs by the age of 8. A slight degree of bowing or knocking is normal.

Bow Legs (or genu varum)
When a child stands with their feet together and there is a gap between their knees. This is particularly noticeable when a child starts walking but resolves spontaneously with normal child development.

Knock Knees (or genu valgum)
- When a child stands with their knees together and there is a gap between their feet. Knock knees usually resolve spontaneously although a mild degree of genu valgum is normal and persists into adulthood.

Treatment
Splints, insoles and exercises do not have any effect on knock knees or bow legs. It will resolve with normal development. Physiotherapy may only be helpful for children who have associated pain in their legs.

If a child has asymmetrical knock knees or bow legs where one leg is significantly worse than the other, severe or worsening deformity or a history of trauma or infection, then a referral to an orthopaedic consultant may be required.