

Conservative Care

Orthotics (case #12336)

Ankle-Foot Orthosis (AFO)

Keywords: Post-polio syndrome, stance stability, dorsiflexion, plantarflexion, anterior tibialis and quadriceps weakness, unequal stride length, ankle-foot orthosis (AFO), articulating ankle joints.

Patient: 79-year old female presents with right lower extremity post-polio syndrome and unstable gait. She reports having difficulty weight-bearing on her right leg because occasionally her knee gives out. Gait analysis reveals dorsiflexion weakness, unequal stride length and a lack of coordination. She received a comprehensive assessment by a physical therapist who asserted her gait imbalance and right knee weakness.

Service: Right, custom molded polypropylene AFO with dorsiflexion assist ankle joints, posterior knee flexion control strap and padded foot section.

Rationale: Dorsiflexion assist joints to compensate for the anterior tibialis weakness and allow uninhibited swing-through during gait cycle. The ankle joints allow free plantarflexion, enabling a more equal stride length. The posterior adjustable control strap provides enhanced knee stability to prevent sudden knee flexion.

Note: Patient has not used an AFO for over 20 years. Considering the patient's post-polio status, we expect that maintaining as much motion as possible will allow her to walk without inducing muscle atrophy.



Stepbystep