A RARE CASE OF PRE AXIAL POLYDACTYLY OF FOOT

Hanif WO, Saifullah AH, Iylni MN

DEPARTMENT OF ORTHOPAEDIC, HOSPITAL SULTAN ABDUL HALIM, SUNGAI PETANI, KEDAH, MALAYSIA

INTRODUCTION

Polydactyly is the congenital presentation of foot and is characterized by the presence of supernumerary toes (digit or metatarsal). The duplication may appear at the distal and middle phalanges or at the whole digit and metatarsal. Polydactyly may be divided based on location of extra digit: postaxial polydactyly (lateral ray), preaxial polydactyly (medial ray) and central polydactyly. Despite the high prevalence of hand and foot polydactyly in newborns, preaxial polydactyly of the foot is rare. Preaxial polydactyly of the foot is a rare malformation and clinicians are often unfamiliar with the associated malformations and syndromes.

CASE REPORT

In this case report we describe an otherwise a healthy two month old baby girl presented with partial duplication of big toe of left foot since birth. No other abnormalities or syndromic features is seen. Further observation and follow up was given for further assessment later until skeletal development had occurred within the affected rays so that accurate anatomic assessment is possible.





DISCUSSION

About 15% of children born with polydactyly have other congenital anomalies, usually as part of a defined syndrome. This is true for about 10% of children with postaxial polydactyly, 20% of those with preaxial polydactyly, and more than 50% of those with rare polydactylies. Unless there is a clear family history of isolated polydactyly, any newborn with polydactyly should be investigated for the presence of associated anomalies.

The management of polydactyly ranges from shoe modification to complex surgical procedures. Surgery is usually performed when the patient is aged approximately 1 year, so that the effect on development and walking is minimal. Generally, surgery should be delayed until skeletal development (ossification) has occurred within the affected rays so accurate anatomic assessment is possible.

REFERENCES:

- Venn-Watson EA. Problem in polydactyly of the foot. Orthop Clin North Am. 1976 Oct. 7 (4):909-27
- Chiang H, Huang SC. Polydactyly of foot: manifestations and treatment. J Formos Med Assoc. 1997;96(3):194-8