
Early diagnosis, extensive surgical release is a rare and can be associated with irreducible and scalable orthopedic deformities. Its location is a foot rarely reported.

Aim of study Describe the clinical and anatomical deformity of the foot and ankle in children with linear scleroderma and chat with a functional rehabilitation and equipment. Observation An 8-year-old boy followed for Linear morphea was addressed to the consultation of physical medicine and rehabilitation for rehabilitation care and casting of a deformation of the right foot. Physical examination found skin lesions in the thigh and right ankle, a paretic right lower limb, an inequality of length of 3 cm lower right limb, with stiffness in his right ankle. Walking is done with lameness and attack the forehead, the review found podoscopic grade hollow legs [1] with calcaneal valgus more pronounced on the right. The management consisted of a background treatment with corticosteroids, a functional rehabilitation and equipment.

Introduction Linear scleroderma morphea is a subtype of localized scleroderma which mainly affects children and is sometimes complicated by bone and joint deformities. Its location at the foot is rarely reported.

Aim of study Describe the clinical and anatomical deformity of the foot and ankle in children with linear scleroderma and chat support, from a clinical case and a review of the literature.

Observation An 8-year-old boy followed for Linear morphea was addressed to the consultation of physical medicine and rehabilitation for rehabilitation care and casting of a deformation of the right foot. Physical examination found skin lesions in the thigh and right ankle, a paretic right lower limb, an inequality of length of 3 cm lower right limb, with stiffness in his right ankle. Walking is done with lameness and attack the forehead, the review found podoscopic grade hollow legs [1] with calcaneal valgus more pronounced on the right. The management consisted of a background treatment with corticosteroids, a functional rehabilitation and equipment.

Discussion/conclusion Scleroderma focal length of the child’s foot is a rare and can be associated with irreducible and scalable orthopedic deformities. Early diagnosis, extensive surgical release in the event of severe and progressive orthopedic deformation, followed by physical therapy and extended equipment, represent the main elements of the management.

Keywords Linear morphea; Strain; Rehabilitation; Equipment

Disclosure of interest The authors have not supplied their declaration of conflict of interest.


Further reading