

A Case Report of a Nine Toes Mirror Foot and Literature Review

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Abstract

Mirror foot is an uncommon abnormality and considered as a form of congenital duplication. Only few cases are published. We report a case of a 6-month-old patient with preaxial mirror left foot. The wedge surgical resection of the three duplicated rays was performed. After four years of follow-up, the cosmetic and functional result was good. Surgical treatment must be required before walking age and has both functional and aesthetic implications and gives fewer complications than that of the equivalent of upper limb.

Keywords: Mirror foot, Classification, Surgical treatment

Introduction

Preaxial mirror polydactyly of foot, also called "Mirror Foot" is a rare congenital anomaly. In the literature, we found less than 40 cases reported till now, and only for few cases, the surgical treatment was performed [1-3]. Mirror Foot has a controversial definition: Some called Mirror Foot as "a mirror-image polydactyly", but the true mirror image was shown only in few cases [3]. Mirror Foot may occur as an isolated deformity [4,5] or as part of a syndrome of multiple congenital abnormalities [1,3]. The functional and cosmetic discomfort of this condition usually requires surgical treatment. We reported an isolated left Mirror Foot surgically treated with a good outcome.

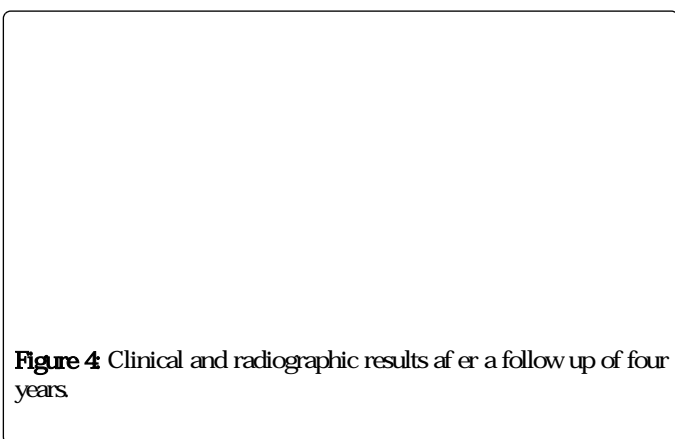
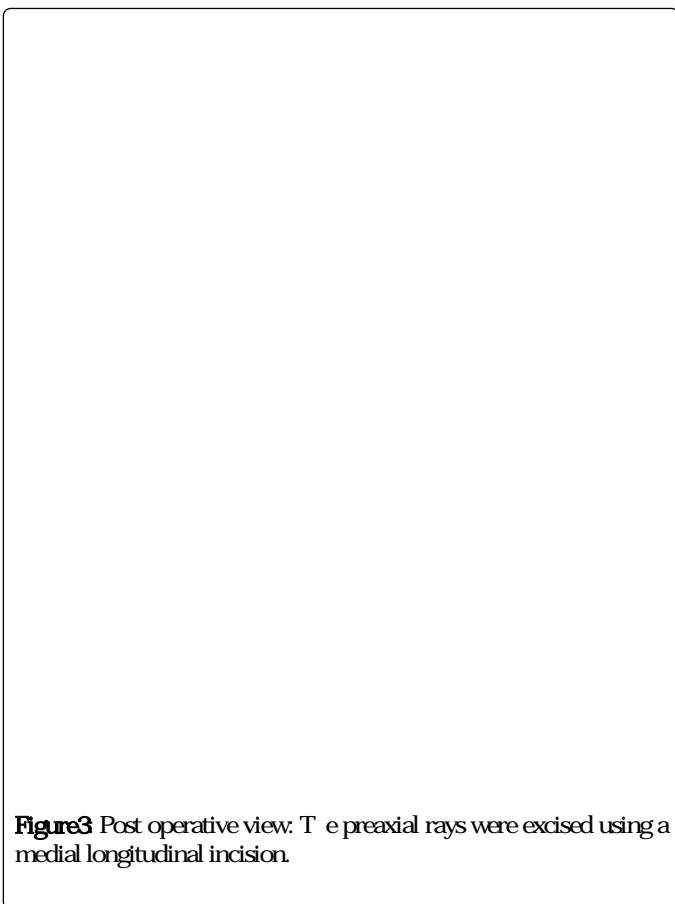
Case Report

A 6-month-old child with preaxial polydactyly of the left foot was referred to our out-patient department. He was born at full term out of a non-consanguineous marriage. Antenatal history was eventful and family history was negative. He was born with macrosomia. No other abnormality was detected.

Clinically, there were nine toes with a duplicated hallux (Figure 1). Tibia, fibula, and ankle were normal. The radiograph showed no supernumerary tarsal bone, there were eight metatarsals with hypoplastic 8th metatarsal and 9 phalanges. Only the phalange of the hallux was duplicated (Figure 2).

Surgical excision and reconstruction was performed under general anesthesia and tourniquet control. The medial three rays were excised by a medial longitudinal approach (Figure 3). Excised accessory tendons were used to reinforce the ligaments of the medial arch.

After a follow up of 4 years, the child was without any discomfort while walking or wearing shoes and the parents are satisfied by the



Discussion

Preaxial Mirror polydactyly is still without strict definition [1,3].
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