

Modern Theory of the Development of Adult Acquired Flat Foot and an Updated Spring Ligament Classification System

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Abstract

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tight gastrosoleus/ tendoachillies and failed spring ligament. These components need to be identified and assessed individually. These can be evaluated clinically and a recent clinical test has also been described for the assessment for the spring ligament complex [8].

Towards a New Theory of Plano Valgus Foot

The authors believe the spring ligament is the most important issue in Acquired Adult flat foot and tibialis posterior synovitis occurs as a secondary synovitis. It is most likely the primary failing structure in the AAFD. Biomechanical factors may influence (poor collagen state and obesity and pre-existing planovalgus foot) its early failure. This then drives a mechanically overload of the tibialis posterior leading to its synovitis/dysfunction. This is akin to peroneal overload/dysfunction in pes cavus where peroneous brevis tendon becomes synovitic due to biomechanical overload. We therefore believe that stage 2 flatfoot-

early stage have probably had no effect on the natural history of the disease. Bony fusion is effective but is associated with a loss of dynamic movement in the hind foot and increased pressure on adjacent joints leading to further degenerative changes. The emphasis should be