

## Contact us

### Children's Physiotherapy Direct

Tel: **0300 421 6980**

**www.ghc.nhs.uk**

0-16 years (or 16-18 in full-time education)

Open Mon-Fri (excluding bank holidays) 9am-12pm.

Your views are important to us. If you need advice or have feedback on a community hospital in Gloucestershire, or on our community health and adult social care services, you can contact one of the advisers from our Service Experience team.

All enquiries are completely confidential. You can contact us between 9am-5pm, Monday to Friday.

This leaflet can also be supplied in braille, audio format, PDF, large print, easy read and other languages on request.

**Telephone:** **0300 421 8313** (answerphone available outside office hours)

**Email:** **experience@ghc.nhs.uk**

**Write to:** **Patient and Carer Experience Team,  
Gloucestershire Health and Care  
NHS Foundation Trust, Edward Jenner  
Court, 1010 Pioneer Avenue, Gloucester  
Business Park, Brockworth,  
Gloucester GL3 4AW**



**Gloucestershire  
Health and Care**  
NHS Foundation Trust

## Knocked Knees



## Information for patients

## Introduction

A child with knocked knees has a large gap between their feet when they're standing with their knees together. Many young children have knocked knees, which tend to be most obvious at around the age of 4.

It's almost always just a normal part of their development, and their legs will normally straighten by the age of 6 or 7.

## The facts

- In normal childhood development both legs will look similar
- No physiotherapy treatment is required as this usually resolves as part of typical development
- Knocked knees will not affect a child's normal mobility
- A small gap between the ankles is normal. Young children with knocked knees can have a gap up to 8cm (3inches).

## When to contact your GP (doctor)

Knocked knees in children aren't usually a cause for concern and should improve as your child gets older.

## However, visit your GP if:

- the gap between the ankles is greater than 8cm while standing with the knees together
- there's a big difference between the angle of the lower legs when standing compared with the upper legs
- the problem seems to be getting worse for a child under the age of 2 or over the age of 7.
- only one leg is affected
- there are other symptoms, such as knee pain or difficulty walking
- you have any other concerns about the way your child stands or walks.

Your GP will examine your or your child's legs, ask about any pain or walking difficulties, and may take some measurements.