THE HINDFOOT RESTRAINT BRACE (HRB): STREAMLINED DESIGN AND COMFORTABLE FIT INCREASED COMPLIANCE

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TM Patent Pending
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My disclosure is in the Final AOFAS Program Book. I have a potential conflict with this presentation due to:

- Board of Directors, Wilson-Janisse Group, LLC
- Pres./CEO, National Pedorthic Services, Inc.
Common Hindfoot/Midfoot Problems

- Midfoot arthritis
- Lisfranc injuries
- PPTD, stages 1 & 2
- Pes Cavus
- Metatarsus adductus
- Skew foot
- Charcot foot
- Plantar fasciitis
- Tarsal coalition
- Amputations
Many people suffer from painful foot and ankle problems like arthritis, tendinitis, and overuse injuries. Often people refuse to utilize traditional bracing systems as they are bulky, hard to hide under clothes and draw attention to themselves. This brace helps to alleviate pain due to various hindfoot, midfoot and ankle conditions while being streamlined, simple to use and easy to fit in a shoe and out of sight.

A study of 25 patients with Charcot-Marie-Tooth disease with one or multiple foot and ankle disorders had a low compliance rate in using AFOs of only 20%. This was attributed due to the brace highlighting the patient’s disability. (Vinci)
Biomechanical studies have demonstrated significant improvement in foot kinematics while brace being utilized. Kulig and colleagues found custom-made orthoses improved osseous relation at the talocalcaneal articulation by radiographic evaluation. (Kulig) Neville and Houch evaluated foot and ankle alignment through radiographic evaluation of foot orthoses and found corrective hindfoot position while wearing the brace. (Neville)
The HRB works by providing total contact support for the midfoot and hindfoot via a thin layer of thermoplastic vacuum-formed over an exact model of the patient's foot. The molded leather inner boot provides an intimate fit and form-fitting, comfortable interface. The custom lacer system locks into the desired and reinforces the strength and overall effect of the device.
16 Y/O female, Pes planovalgus
74 Y/O male, PTTD
81, Y/O male, Pes cavus, Post polio
65 y/o male, Flexible Planovalgus foot

WITHOUT HRB

WITH HRB
