

Preface



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Guest Editor

The adult acquired flatfoot deformity remains one of our most complex clinical challenges. Evident by a seemingly endless stream of research presentations and publications, our understanding and treatment of this disorder continue to evolve at a rapid pace.

This issue of the *Foot and Ankle Clinics of North America* reflects this evolution. A refined and overdue classification system adds further detail to our categorization and treatment guidelines for the adult flatfoot. Nonoperatively, advances in bracing and orthotics reveal a greater understanding of the complex deforming forces present. Surgically, we now appreciate that, for many patients who have flexible deformities, a flexor digitorum longus transfer and calcaneal osteotomy are no longer enough.

I extend my sincere gratitude to the authors contributing to this issue. As our academic and clinical demands continue to grow, their time and effort are greatly appreciated. It has been my privilege to work with them.

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