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AFO TYPES AND CONSIDERATIONS						
AFO/Description	Benefits	Considerations that May Limit Success	Key AFO Design Considerations	Examples		
Solid or Rigid Provides rigid support of ankle in desired position that has implications for knee control	 ↑ DF in swing Adjustability of stiffness by changing trimlines ↑ stance phase knee flexion or extension by restricting ankle motion ↓ equinovarus in stance Possible ankle control with PF spasticity ↑ static balance 	 Desire to allow volitional muscle activation ↓ ankle PROM Bulk & weight of AFO Desire for allowing ankle DF during functional mobility 	 Material strength provides ↑ motion restriction & ankle control ↑ AFO stiffness may lead to ↑ knee flexion at IC Anterior trimlines ↑ ankle control & AFO rigidity AFO set in DF leads to knee flexion in stance AFO set in PF leads to knee extension in stance ↑ AFO stiffness may ↑ knee flexion at IC 	 Solid AFO Anterior trimlines Thicker materials Fixed at ankle in slight PF, neutral, or DF based on control needed 		
Ground Reaction Provides knee stability through a posteriorly directed force on the proximal tibia	 ↑ DF in swing Strong stance phase knee flexion control Possible↑ gait speed if a soft heel or rocker sole is added to the shoe ↑ static balance 	 Genu recurvatum Strong hyperextension thrust in stance Quadriceps spasticity Bulk & weight of AFO 	 Anterior proximal contact of AFO leads to stance phase knee extension ↑ AFO stiffness may ↑ knee flexion at IC AFO set in PF leads to knee extension in stance 	Ground Reaction AFO • Fixed at ankle in slight PF • Anterior shell for added tibial control • Carbon or plastic options		
Semirigid Provides varying degrees of rigidity based on design & materials used	 ↑ DF in swing Adjustability of stiffness by changing trimlines ↑ stance phase knee flexion or extension by limiting ankle motion ↑ gait speed if AFO has fewer restrictions to movement May ↑ dynamic balance based on design 	 PF spasticity (≥MAS 3) ↓ strength or control of the ankle or knee muscles Equinovarus 	 Material property choices restrict or allow motion AFO set in DF leads to knee flexion in stance AFO set in PF leads to knee extension in stance Anterior trimlines ↑ ankle control & AFO rigidity Posterior trimlines ↓ ankle control & AFO rigidity 	 Semirigid AFO More posterior trimlines Ankle in slight PF, neutral, or DF based on control needed Some ankle motion allowed based on material thickness and flexibility 		

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Flexible/ Posterior Leaf Spring Provides varying degrees of flexibility based on design & materials used	 ↑ DF in swing Lightweight Pre-fabricated options ↑ gait speed 	 PF spasticity (≥MAS 3) ↓ strength or control of the ankle or knee muscles ↓ dynamic balance 	 Material properties allow motion Posterior trimlines ↓ ankle control & AFO rigidity 	 Posterior Leaf Spring AFO Most posterior trimline More ankle motion allowed due to material flexibility Minimal to no mediolateral ankle support Minimal to no effect at the knee 	www.neuropt.org
Articulating Provides varying degrees of motion at the ankle through hinges with optional stops to limit ROM if desired	 ↑ DF in swing Adjustable as patient's needs change Allows for volitional muscle activation ↑ stance phase knee flexion or extension by allowing or restricting ankle motion ↓ equinovarus in stance with design that encompasses more of the ankle ↑ gait speed if AFO has less motion restrictions ↑ static balance if AFO has more motion restrictions 	 PF spasticity ≥MAS 3) ↓ ankle PROM Bulk & weight of AFO ↓ medial/lateral ankle stability 	 Hinges allow motion Stops restrict motion AFO set in more DF leads to ↑ knee flexion in stance AFO set in more PF leads to ↑ knee extension in stance 	 Double Metal Upright AFO DF & PF stops set by adjusting screws/bars in each channel Springs can be added for DF assist Good option with edema & to allow modifications with recovery Articulating Plastic AFO Many options for hinge types DF & PF stops achieved by straps, hinge types, and/or materials abutting Good option to allow modifications with recovery 	
Dynamic Enhances or resists ankle motion while allowing some motion and/or energy storage	 ↑ DF in swing ↑ Push-off force Allows for volitional muscle activation Possible ↑ stance phase knee flexion or extension by supporting sagittal plane ankle motion Possible ↓ equinovarus in stance with design that encompasses more of the ankle ↑ gait speed 	 PF spasticity (≥MAS 3) Equinovarus Knee buckling Genu recurvatum ↓ ankle PROM 	 Material property and/or spring choices assist, restrict or allow motion AFO set in DF leads to knee flexion in stance AFO set in PF leads to knee extension in stance 	 Carbon fiber AFO Stores & releases force for push-off Minimal medial/lateral support at ankle Minimal to no adjustability Articulating AFO, DF assist Free DF with some DF assist from this hinge PF stop created by contact of shells posteriorly Pin or longer shells can be used posteriorly for more PF restriction 	

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References:

- 1. Folmar E, Jennings H, Lusardi MM. Chapter 9: Principles of Lower Extremity Orthoses. In: hui KK, Jorge M, Yen S-C. Lusardi MM. Orthotics and prosthetics in rehabilitation (4th ed). St. Louis, MO: Elsevier; 2020:220-258.
- 2. Fox JR, Lovegreen W. Chapter 22: Lower Limb Orthoses. In: Webster JB, Murphy DP, eds. Atlas of Orthoses and Assistive Devices (Fifth Edition). Elsevier; 2019:239-246.e1
- 3. Hou J, Fortson BD, Lovegreen W, Fox JR. Chapter 28: Lower Limb Orthoses for Persons Who Have Had a Stroke. In: Webster JB, Murphy DP, eds. Atlas of Orthoses and Assistive Devices (Fifth Edition). Elsevier; 2019:289-295.e1
- 4. Johnston TE, Keller S, Denzer-Weiler C, Brown L. A Clinical Practice Guideline for the Use of Ankle-Foot Orthoses and Functional Electrical Stimulation Post-Stroke. J Neurol Phys Ther. 2021 Apr 1;45(2):112-196. doi: 10.1097/NPT.00000000000347. PMID: 33675603.
- 5. May BJ, Lockard MA. Chapter 11: Examinations for Orthotic Prescription and Checkout. In: Prosthetics & Orthotics in Clinical Practice. McGraw Hill; 2011. Accessed April 12, 2022. https://fadavispt.mhmedical.com/content.aspx?bookid=1865§ionid=140943030
- 6. May BJ, Lockard MA. Chapter 12: Designing and Prescribing Orthoses. In: Prosthetics & Orthotics in Clinical Practice. McGraw Hill; 2011. Accessed April 12, 2022: https://fadavispt.mhmedical.com/content.aspx?bookid=1865§ionid=140943030
- 7. May BJ, Lockard MA. Chapter 14: Orthoses for Ankle Impairments. In: Prosthetics & Orthotics in Clinical Practice. McGraw Hill; 2011. Accessed April 12, 2022. https://fadavispt.mhmedical.com/content.aspx?bookid=1865§ionid=140943030
- 8. Rogati G, Caravaggi P, Leardini A. Design principles, manufacturing and evaluation techniques of custom dynamic ankle-foot orthoses: a review study. J Foot Ankle Res. 2022 May 19;15(1):38. doi: 10.1186/s13047-022-00547-2. PMID: 35585544; PMCID: PMC9118871.
- 9. Totah D, Menon M, Jones-Hershinow C, Barton K, Gates DH. The impact of ankle-foot orthosis stiffness on gait: A systematic literature review. Gait Posture. 2019 Mar;69:101-111. doi: 10.1016/j.gaitpost.2019.01.020. Epub 2019 Jan 15. PMID: 30708092.