



Preface



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Editor

Dr. Frederic Wood Jones affirmed from his work as an anatomist that “*every detail of the structure and function of the parts of the foot must be studied and realised for its own sake*”.¹ He stressed the significance and value of anatomic structures and function of the foot. This attention to detail is especially appreciated when it comes to evaluation of the flatfoot deformity.

Since the early work of Goldner et al,² Mann and Specht,³ and Banks and McGlamry,⁴ our understanding has evolved with classifications that have provided a framework for diagnosis and treatment of the condition. As our attention to anatomic structures has progressed, we continue to gain greater clarity in the diagnosis and treatment of flat-foot deformity.

To that end, the authors of this issue have contributed to further progress the scientific knowledge of flatfoot deformity. I extend heartfelt gratitude and appreciation for the

time, commitment, and expertise they so graciously shared in current concepts of flat-foot deformity in adults and children.

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