

All About Crutches

Fitting

The proper crutch length is decided when the patient is standing. The top of the crutch, when placed directly under the arm with the crutch tip next to the ankle, should be about 2 inches below the level of the armpit (about the width of 2 fingers). The handgrip should be lined up at the level of the wrist when the arm is at the side.

Weight Bearing Status Definitions

Your doctor will prescribe one of these status levels:

- **Non-weight-bearing (NWB)** – hold the “bad” leg off the ground at all times.
- **Touchdown weight-bearing (TDWB)** – the foot of the “bad” leg may set on the ground without putting weight on it. You can also just touch your toes down for balance.
- **Partial weight-bearing (PWB)** – set the foot of the “bad” leg down and place a small amount of weight on it (about 30 pounds or as instructed by your doctor).
- **Weight-bearing as tolerated (WBAT)** – put as much weight on the “bad” leg as is comfortable. When you can walk without a limp, you can stop using your crutches unless instructed otherwise by your doctor.

Walking with Crutches

Think of this mantra...crutches, bad leg, good leg. Crutches, bad leg, good leg...

1. Crutches forward, slightly off to the sides.
2. Bring your “bad” leg up to the crutch line.
3. Put your weight on the crutches and bring your “good” leg up to the crutch line.
4. Repeat.

At first, don't try to go too fast or too far with each step. However, soon you will be advancing your “bad” leg and crutches at the same time followed by moving your “good” leg forward past your crutches.

Do not lean on the crutches with the armpits as nerve damage may result.

Various Crutch-Walking Patterns

- **Three-point gait:** Both crutches and the “bad” leg are moved forward at the same time. Then, the “good” leg is moved forward between the crutches while pushing down firmly on the hand grips using your arm strength to carry the load. The “bad” leg and crutches are advanced together followed by the “good” leg moving you forward.

When using the three-point gait, you may choose:

- **Swing-to gait** in which both crutches are moved forward together, and the legs are then swung forward to a position even with the crutches.
- **Swing-through gait** in which both crutches are moved forward together, and the legs are then swung forward to a position beyond the crutches.

Stairs with Crutches

Going up and down stairs with crutches can be challenging but becomes easier by following this rule of thumb: Up with the good; down with the bad.

Going upstairs, the “good” leg goes up first.

1. Stand close to the foot of the stairs.
2. Push down firmly on the handgrips of the crutches and lead up with the “good” leg.
3. Crutches and the “bad” leg are then brought up to the same level as the “good” leg.

Going downstairs, the “bad” leg goes down first.

1. Stand close to the edge with toes protruding slightly over the stair.
2. The crutches and “bad” leg are moved down together to the front half of the lower step. If weight-bearing status is “non-weight-bearing”, the “bad” leg is held forward over the lower step as the crutches are moved down. Otherwise, lower the “bad” leg and crutches at the same time to the lower step.
3. Push down firmly on both handgrips and lower the “good” leg to the level of the crutches and “bad” leg.

If there is a railing, you may use it instead of one of the crutches. Hold both crutches under one arm (with the hand holding both handgrips) and the railing with the other hand. If holding both crutches in this manner is difficult, hold just one crutch under the arm and the other one at a right angle to it. Hold on to both crutches with one hand. The second crutch is held by its frame rather than by its handgrip. Once both crutches are safely in hand, follow the provided stair-walking directions.

When first attempting stairs on crutches, have a spotter stand just below you to assist should you lose your balance.

If all else fails, it is okay to go up and down the stairs on your rump.