

talipes valgus. In the former case (the familiar club foot) the foot is inverted so that the sufferer walks on its *outer* edge chiefly. The latter, a valgus or splay foot, is everted so that the patient walks on the inner ankle. In the normal foot the great toe is on a line with the heel; we tread on the ball of the foot, and the elasticity of the step depend a good deal upon the strong ligament of the heel called the tendon Achilles. The beauty of the foot consists in the perfection of the tarsal arch, called the instep. Congenital defects of the feet are of course manifest at birth, and this leads us to the practical part of the matter—the treatment of *minor* defects. Though the same in character, they are of much less severity, and should at once be brought under careful management.

We are all born "pigeon-toed," that is, the feet turn inwards. Under ordinary circumstances, when baby has had time to stretch his limbs, the feet get straighter; but sometimes this is not so, and get more intumed every day, and, on the other hand, they may turn outwards, or one or both feet may be drawn too much upwards towards the leg. Now, if any of these defects be overlooked or neglected, the future shape of the foot may be interfered with, and, in due, the *gait*, which often remains a permanent evidence of early neglect. Now, what shall we do in these cases? Bearing in mind that in infancy the animal portion of the bone is in excess, and hence they are pliable and soft, we must turn that fact to account by using gentle, constant, and *well applied friction*, or rubbing to the feet with our hands, not only daily, but many times a day. I have emphasized *well applied friction*, because a great deal goes to *how* you rub; for want of a little thought in the matter the writer has seen the little foot constantly *turned* when rubbing in the *wrong* direction!

Place baby in a sitting position on your knee so that the legs and feet hang down by the side of your lap, and notice which way the feet turn. If *inwards* (varus), take the foot into your left hand, and, with a *firm* but light touch, press it *outwards* and rub along the *inner* edge of the foot. If the feet turn *outwards*, press them *inwards* with your right hand and rub along the *outer* edge of the foot. When the feet turn up too much, press them *downwards* by closing one or other of your hands over it. These simple manipulations, if persisted in, will serve to mould the foot into shape and remedy slight defects that, if neglected, are apt to increase. In fact, we may say that under all circumstances, judicious rubbing of the baby feet prepares the way, both as regards bones, ligaments

and muscles, for that great epoch in infantile life—learning to walk.

And here I must diverge somewhat out of our department of duty, though *we* (Nurses) begin the task to earnestly advise mothers and nurses *not* to hurry on that important process (at the almost certain risk of bow legs), but reverently watch Nature's wise and patient way of bringing it about. You know the old Greek conundrum: What animal walks on *four* legs in the morning, *two* in the afternoon, and *three* in the evening? "Our" baby begins in the morning by crawling on all fours, and this most salutary and natural action straightens the lower limbs and strengthens the dorsal muscles, and really prepares the way for walking on *two* legs in the "afternoon." And let us note how cautiously this upright position is attained, principally by falling down! (This holds good in other things besides learning to walk.) The little limbs cannot support the weight of the body, and our baby gets a "tumble" when he tries to get hold of chair or table, and all we have to do is to take it does him no harm. As he gains strength, future efforts are followed by more enduring results, and the child stands up longer at a time without a "tumble." And here I must remind my young readers that *supporting* baby on his legs by holding him up under the arms does not strengthen the limbs and feet. Strength will come in due time. Do not force on walking. At last "our little toddlin wee thing," having learned to stand on his feet, attempts *walking*, and here he wants a gentle helping hand to encourage him in this important step in life.

Before leaving this subject, I must give a word of caution against "go-carts." For a little child who can walk, they may be an amusing toy; but as a means of teaching him to walk they are a mischievous delusion. They overtask the strength of the limbs; they do away with that instinct of self-preservation or reliance on his own powers by which alone a child can acquire a good gait and carriage so graceful in children, and which will even abide when, in the fulness of time, he walks upon *three* legs in the "evening."

In infantile weakness of the feet and ankles, bathing the joint with salt and water is a popular remedy; but I do not advise this course without medical sanction. The sooner defects or deformities of the feet are put under surgical skill the better the chance of rectification.

(To be continued.)

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