THE SOLDIERS' FEET AND FOOTGEAR.

Dr. Cecil Webb Johnson, Captain R.A.M.C. (T.F.) and Hon. Secretary of Naval and Military Medicine and Surgery Section at the Annual Meeting of the British Medical Association, 1914, has contributed to the British Medical Journal a most valuable and practical paper on the above subject, from which we quote in part:—

THE SOLDIERS' FEET.

The soldier's foot has not only to support the whole weight of the body, but also to act as a buffer, and prevent shocks being transmitted to the knee and hip joints when jumping or doubling over rough ground.

It must be capable of standing the strain of long marches without becoming incapacitated by pain and loss of power. The medical officer should reject as unfit any recruit who suffers from the following conditions in a bad form:—
(1) Flat-foot, (2) hallux valgus, (3) hammer toe,

(4) ingrowing toenail, (5) corns, (6) bunions. Some of these conditions can be cured so as to give a man a serviceable foot, but with others it is quite impossible. In the former case a recruit should not be accepted *until* he has undergone treatment and been cured, while in the latter he should be unconditionally rejected.

After dealing with flat-foot and hallux valgus Dr. Johnson refers to hammer toe, on the top of which there is generally a corn. At the end of the toe, where it presses on the boot, another corn is often found, and these corns become exquisitely painful, and prevent a man from marching.

Ingrowing Toenail.—This is an extremely painful condition, caused by wearing boots with narrow toes. In a slight case, the boots having been corrected, the nail should be cut square and a wedge-shaped piece taken from the centre, or the centre of the nail should be scraped and filed down, and the pressure relieved by packing plugs of cotton-wool under the free ends and sides of the nail. If this does not relieve the symptoms the nail should be removed by one of the recognized methods.

Corns.—Hard corns, caused by the pressure of tight boots, are most commonly found on the sides of the toes, under the tread, and on the heel. Soft corns, caused by dirt and sweat, are usually found between the toes. Corns are more painful in wet than in dry weather, and are said to "shoot," a condition due to a sudden increase of activity in the vascular and sensitive papillæ on the approach of damp weather. The treatment of corns may be divided into palliative and radical, but it should

be remembered that if the boots fit properly without undue pressure, the soldier should be free from them. If no chiropodist is at hand the corns may be rubbed down daily with pumice stone, and, if tender, protected with a piece of stockingette plaster, stretched over the corn with a good margin. For the radical cure the area of corn is painted with tincture of iodine, and all the thickened epidermis is cleared away with a scapel, this being facilitated by making the skin tense with the left fingers. Then the concentrated apex or ridges, which are the actual cause of the pain, are lifted out with a sharp-pointed, straight scalpel. Often there is a small adventitious bursa, which should also be removed, and an antiseptic dressing placed in the cavity. Circular plasters are seldom effective, as the portion on the distal side of the corn may press back in walking, and irritate, but it is advisable to pad with a crescent-shaped piece on the posterior aspect of the wound, and cover with a stockingette plaster.

Bunions are generally associated with hallux valgus, and, if accompanied by synovitis, prevent marching. To alleviate the pain a wedge-shaped felt pad should be worn between the great and second toes at the base, and, in addition, a crescent-shaped adhesive felt pad on the metatarsal aspect, posterior to the joint.

SORE FEET.

The disabilities of the foot already mentioned, although coming under the general heading of sore feet, as used in military parlance, do not constitute the ordinary variety met with after a march. Sore feet are of several varieties and degrees of severity, and, if promptly and properly treated, may be quickly cured. When the skin of the foot is irritated by the boot or sock either pressing or rubbing on it, or when, through lack of cleanliness, sweat and various germs collect on it, the foot becomes hot, swollen, and tender. If the condition is not suitably and quickly treated, blisters form, especially under the heel and above it, at the sides of the feet, between the toes, and at the anterior roots of the toes. If this in turn is neglected, there is a danger of the hard, horny skin being rubbed off, and the tender deep layer of the true skin being exposed, and if this is not treated there is every possibility of the deeper tissues being involved, and of an ulcer forming.

Dr. Johnson believes that practically all the causes of sore and blistered feet after a march can be avoided if it is seen that:—

- (a) The boots and socks fit properly.
- (b) They are periodically inspected.

previous page next page