

picking up marbles with the toes, walking on the toes, taken regularly night and morning, are most valuable.

Parents are beginning to bring their children periodically to the family physician or the child specialist to see that they are physically fit. They are fast coming to believe in *keeping well*, not *getting well*, and that the slogan must be *health*, not *disease*.

They are anxious to make sure that the child's eyes, ears, nose, and throat are all right, realising the importance of this in his future welfare, hence the regular trip once or twice a year to the dentist, oculist, and nose and throat specialist is made as a matter of course, but it rarely occurs to them that the feet of the child also need regular supervision and periodic examination, because of abnormal conditions which may arise through faulty foot care, hygiene, faulty shoes, too short stockings, overweight, weakness, caused by illness, etc.

The care of the feet is left to the judgment of the shoe clerks, the large majority of whom have no knowledge of the anatomy and physiology of the foot, and whose business it is to make as many sales as possible, and not to render wise advice (an office for which they are neither qualified by training nor for which they are hired). The feet of many horses are shod with far greater care than the feet of many children. When we consider that the contours of the feet vary in the individual as much as any other part of our anatomy we cannot but feel that our present mode of buying shoes for children, without advice from someone who has made a study of the foot, is a most unscientific procedure. One of the greatest needs in connection with shoe stores to-day is the employment of trained men and women who have made the study of the feet their life work—who are interested not only in making a sale, but are backed by their employers in a wish to render actual scientific service. "It is a science to fit feet," and when scientific measures are taken a great deal of discomfort and inefficiency will be prevented.

There are comparatively few physicians to-day who give consideration to a somewhat abnormally acting foot commensurate with the seriousness of the condition, especially when the child does not complain of pain in the foot, although he may have pain in other parts of his body due to the foot condition.

Small foot weaknesses, which result in abnormal position of the foot, are often looked upon as of no consequence—something which will be outgrown later on. Too often this does

not happen, and the child becomes the innocent sufferer of a serious fallacy. For instance, *congenital weakfoot*. In this condition the foot at rests looks normal, but assumes an abnormal attitude as soon as weight is borne on it. This may be very easily overlooked.

Symptoms of *congenital weakfoot* are as follows:

The peculiar manner in which the child places his foot in walking (toeing in or toeing out), never walking with his feet parallel as he should. In a large number of cases a child walks with its feet pronated "pigeon toed," and because of this is brought for examination. He stumbles, falls down easily, his faulty posture is increased, and the lower spine is curved, with corresponding projection of the abdomen. Knocked knee also is not an infrequent condition in these cases. The child may complain of "growing pains," looked upon by many parents as something all children must have. He may show lack of ability to walk far, tire easily, want to sit down, or be carried all the time, have night cries, wake up complaining of legs aching, &c. All these conditions noted go to show the need and importance of periodic foot examinations from infancy up, in order that we may be able to prevent instead of cure.

This article is written with the hope of calling the attention of parents to the feet of their children very early in life, and urging them to see that periodic foot examinations be given the same as those of the mouth, eyes, ear, nose, throat. Such examinations, with proper foot hygiene, exercises, stockings, and a properly built shoe, will prevent these conditions nine times out of ten. Our boys and girls are entitled to every care which will tend to their development as sturdy, wholesome, straight-limbed men and women.

—The Public Health Nurse.

NUTRITION OF MOTHER AND CHILD.

Dr. C. Ulysses Moore, in the introduction to the "Nutrition of Mother and Child," just published by J. B. Lippincott Co., Philadelphia and London, claims that nutrition surpasses in importance all other health considerations, and is the one in which failure is most common. One-fifth of all deaths occur in the first year of life, and more than half of these are directly due to nutritional disturbances. Also death in later life is so often traceable to improper feeding in childhood that we cannot afford to ignore the value of proper nutrition.

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