

## FOOT CARE

# Uneven shoe wear is a trouble sign

By **BRIAN A. ROTHBART, D.P.M.**  
Copley News Service

**Q.** My 5-year-old boy hates to wear shoes, and when he does wear them, he always wears them on the outer borders of the heel and the outer sole. My neighbor tells me that means there is something wrong with the way he walks. What do you think?

**A.** A child's aversion to wearing shoes and the uneven shoe wear you describe are early warning signs of impending foot problems. Normally, a child should be comfortable in shoes. In a normal gait pattern, the weight of the body is distributed evenly across the bottom surfaces of the feet. A structural or muscular problem within the lower limb can alter this distribution of weight and shift it to one small area of the foot. If this shift is toward the outside of the foot, we see excessive heel and sole wear on the outer margins of the shoes.

these are observed, the child should be evaluated for possible foot disease by the family doctor or Podiatrist (foot specialist).

1. Arches that fall during walking.
2. Severe foot and leg fatigue.
3. Child's aversion to wearing shoes.
4. Weak ankles or repeated ankle sprains.
5. Excessive intoeing or out-toeing of the feet.
6. Uneven wear on the bottom of shoes.

**Q.** My grandmother has diabetes. She insists on cutting her own toenails. However, she has terrible eyesight and can barely see her feet, let alone the nails. I heard somewhere that diabetics should be very careful not to cut themselves. Isn't it dangerous for my grandmother to cut her own toenails?

**A.** Absolutely! Diabetics who cut their own toe nails must be

## FOR WOMEN ONLY...

by **LINDSAY R. CURTIS, M. D.**

**DEAR DR. CURTIS:** Is it normal to fear intercourse following the birth of a baby? After the doctor gave me my six-week check-up, he said everything was fine, that my husband and I could resume normal relations.

Well, my husband was very gentle and considerate, but the experience was terribly painful--worse, if anything, than our wedding night. Even now, more than three months after delivery, I'm fearful over the prospect of love making, and it still hurts, believe me, L.

**DEAR L.** Many people have intense, though irrational fear of pain--to the point where they become over-protective of the slightest injuries--a tiny cut on the finger, for example, even after healing is complete.

Something of this kind may be at work in your own case, and I suspect the pain is largely emotional. In consequence, it might help you to recall those times before your delivery when sex was not painful.

Prior to and during your love making, concentrate on those previous unions that were most pleasurable and satisfying. Also avoid rushing into actual coitus. Both of you should give adequate attention and time to foreplay, enough to insure your complete arousal.

Initial penetration should then be gradual and gentle, helping, along with the other procedures, to create a sense of emotional and physical fulfillment. The result should be a completely satisfying climax. And orgasm, more than anything else, will help banish your fear.

If the above suggestions don't solve the difficulty, consult your doctor. He can provide added advice and perhaps refer you to an expert in marriage and sex counseling.

**DEAR DR. CURTIS:** I need an honest answer but know

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