



PODIATRY
MACKAY

Plantar Fasciitis – aka ‘Heel Pain’

What is it?

Plantar Heel pain is the most common injury that Podiatrists treat. Contrary to the common belief that the pain is a Heel Spur, it is often discomfort/irritation of the Plantar Fascia. The Plantar Fascia is a band/fascia of connective tissue that runs from the heel to the base of the toes. This fascia is the main supportive structure through your arch and takes most of the load whilst you are walking.

Why did I get it?

Plantar Fasciitis can be caused by many factors and is most seen in the active middle-aged population (women > men). Most patients with Heel pain can often relate to many of the following signs, symptoms & risk factors:

- Pain when rising (especially in morning)
- Incorrect footwear
- Tight Calf muscles
- Flat & High - arched feet
- Prolonged standing especially on hard surfaces
- Sudden increase in weight
- Sudden change or increase in activity levels



Symptoms:

- Heel Pain – can be described as bruising
- Pain and stiffness in the morning that gets worse as the day progresses
- Pain which would get worse when climbing stairs or standing on toes
- Pain after standing for long time

How is it diagnosed?

A thorough Clinical examination will most commonly diagnose Plantar Fasciitis. Depending on severity of symptoms, you may/may not be referred for an ultrasound. If a heel spur is present it will rarely change the treatment protocol's as approximately 70% of the population live with undiagnosed spurs which are pain free.

Possible Treatments?

- Padding & Tapping
- Calf stretches
- Footwear advice
- Custom Orthotics
- Neuromuscular Needling
- Rest
- Night Splints
- Rolling foot on a frozen bottle
- Cortisone injections
- Compression

Prognosis:

Although Plantar Fasciitis is extremely painful, approximately 95% of cases respond to conservative treatment. This may take up to 6 months depending on how long the inflammation has been present & how severe the pain has become. Surgery is very rarely recommended, however is an option for chronic cases that show no improvement to conservative treatments.