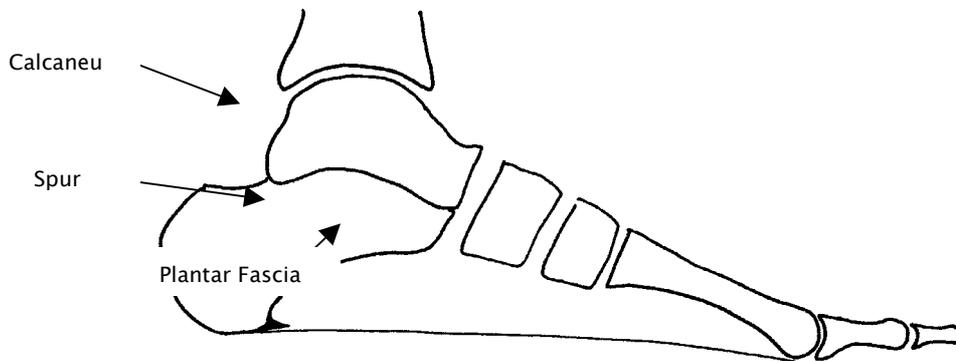


Plantar Fasciitis

Dr Gavan White

What is Plantar fasciitis?

Plantar fasciitis is the development of pain in the bottom of the heel due to injury to where the plantar fascia joins onto the heel bone (Calcaneum). This condition is often called "Heel Spurs". This is not really accurate, as many people will have pain from plantar fasciitis without having a heel spur. It is more likely that the reaction that causes the plantar fasciitis also causes the heel spur over time.



What are the symptoms?

Most people start to develop a pain in the bottom of their heel as if the area has been bruised. This pain is often only present when the person is standing on hard ground or after a long walk or run. Unfortunately, the pain tends to get worse with time and later is present all the time, even at rest. The heel feels swollen and this is most apparent when you get out of bed in the morning, where the heel feels puffed up and very painful to walk on. Often, this swelling and pain reduce after walking a few paces.

For some people the pain may come on quite suddenly or may follow an injury. In these situations, there may be a tear of the plantar fascia.

Who gets Plantar Fasciitis?

It is rare to see this condition in young adults or children. In a situation like tennis elbow, the ligament and its attachment to the heel bone tends to degenerate with age and overuse. This makes the ligament more liable to injury and tear.

This condition often occurs to people in their 40s and upwards, being more common with increasing age. Conditions and activities that overstress the ligament make people more prone to this condition.

Recognised risk factors for this condition include flat feet, being overweight, running on hard surfaces and possible diabetes.

Will this condition get better by itself?

The majority of people who have had plantar fasciitis for more than 3 months will probably not get better without treatment, at least in the medium term. It is very common to see people who have these symptoms for more than 2 years!

Are tests needed?

It is generally wise to have simple x-rays performed of the heel bone. Rarely, the pain can be caused by arthritis, bone tumours or infection. An ultrasound is required if a tear of the plantar fascia or a ganglion are thought possible.

What treatments are available?

If this condition is diagnosed within 6–8 weeks of the onset, then rest, ultrasound from the physiotherapist and calf muscle stretches and plantar fascia stretches may fix the problem. Almost everybody with plantar fasciitis should be considered for the use of orthotics.

For symptoms that have been present for more than 3 months, or where the above treatments have failed, then more active therapy is needed. Again, all people should be considered for the use of orthotics.

Steroid (cortisone) injections are often highly effective at reducing the pain and allowing people to walk normally. This may give people a pain free period of time so that physiotherapy can be used. Unfortunately for many, the injection often does not last very long. It may last anything from 2 weeks to 3 months, but the pain often recurs.

Radial Shock Wave Therapy uses shock waves to treat the area where the fascia and the bone join. It improves blood flow and promotes healing. The success rate for this form of treatment is 85–90%. This means that the majority of people will become pain free or nearly so, such that they can exercise once more. The down side of this treatment is that it takes up to 8 weeks to work. The upside is that the success is long standing. So, in comparison to a steroid injection, this starts to work more slowly but has a long lasting effect.

Radiation therapy is used to treat difficult cases of plantar fasciitis. It uses x-rays in the same way as they are used to treat bone cancer. The success of this treatment is fair and makes this an alternative to other therapies.

Surgery is used to treat cases of plantar fasciitis that have not responded to other therapies. The success rate of this is quite high but the disability during the healing time is quite high.

It is prudent to trial a course of radial shock wave therapy prior to contemplating surgery.