

Anatomy of the plantar fascia

The plantar fascia is an inelastic, thick, fibrous band that originates at the heel, runs along the bottom of the foot, and fans out to the toes. It acts to support the arch of the foot when you are walking or running. Most commonly, patients develop pain and inflammation at the point where the plantar fascia attaches to the heel bone.

What are the symptoms?

Plantar fasciitis may start as a dull, intermittent pain in the heel before progressing to a sharp, persistent pain. The most common complaint is difficulty getting out of bed first thing in the morning. This is because as you sleep, your foot relaxes and the fascia tightens. Those first few steps out of bed are the stretching of this temporarily shortened and inflamed fascia. Pain near the toes and at the midsole as well as swelling are less common symptoms but may still occur.

How does my specialist diagnose it?

A discussion of your symptoms, a physical examination, and X-rays are useful for a diagnosis. Your specialist may recommend having an MRI scan as well.



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PLANTAR FASCIITIS

Plantar fascia stretches

When you are sleeping or sitting down, your plantar fascia tightens up because of the inflammation and micro-tears. When you start walking on this tightened plantar fascia, it causes new micro-tears and pain. To prevent this, it is important to do proper stretching of the plantar fascia.

The most important time to do your plantar fascia stretches is in the morning, before you take your first step. It is also important to do your stretches after long periods of rest, such as after you've been driving for a long time or sitting at a desk for a few hours.

- 1. Cross your painful foot over your other leg, so that your painful foot is resting above your other thigh.
- Use the hand on the same side as your painful foot, and pull all your toes back toward your shin. Also push your foot so it turns toward the ground. You should feel this stretch your plantar fascia so that it feels tight like a guitar string.
- 3. Use your other thumb to massage the area of your plantar fascia that hurts the most. This helps stretch the plantar fascia even more.
- 4. Hold each stretch for 10 seconds.







Shoe inserts

Simple, soft, over-the-counter inserts help provide cushion for your heels and support for your arch, which helps take pressure off the plantar fascia.

Some people find gel heel cups helpful as well. These can be purchased over the counter.

Anti-inflammation medication

Medications such as Advil, Motrin, ibuprofen, or Aleve can help decrease the inflammation and pain in your heel. Use these medications as directed on the package. Stop taking these medications if gastrointestinal symptoms develop.

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Achilles stretches

Start by standing in front of a wall or other sturdy object. Step forward with one foot and keep your toes pointed straight forward. Keep the leg behind you with a straight knee during the stretch.

REPEAT _____TIME(S)

COMPLETE ____SET(S)

PERFORM ____TIME(S) PER DAY



Other treatments

Night splints: Night splints help keep the plantar fascia stretched while you are sleeping. Some patients find the night splint to be very helpful, however others find it cumbersome and uncomfortable to sleep in. Another option is a Strassburg Sock. This is also designed to keep the plantar fascia stretched while you sleep. Some patients find the Strassburg Sock more tolerable for sleeping, however it is less rigid and may not work as well to keep the plantar fascia stretched. Night splints are available at Summit Orthopedics, while Strassburg Socks can be purchased relatively inexpensively online.

Injections: Scientific evidence is unclear about the role of injections in treating plantar fasciitis. Steroid injections may help relieve symptoms but are unlikely to alter the course of the disease. Additionally, steroid injections risk rupturing the plantar fascia, which can lead to problems with the arch of the foot. Steroid injections may be reasonable for significant symptoms prior to an important life event such as a wedding or vacation. Platlet-rich plasma (PRP) injections are not covered by insurance but may be another

option. PRP is a component of your own blood that is thought to promote healing. After your blood is drawn it is "spun down" to the component parts and injected into your plantar fascia. There is some evidence to support PRP for plantar fasciitis and it carries few risks. The downsides are cost and the blood draw required.

Cast: A cast can help calm down plantar fasciitis in severe cases. Casting can be inconvenient given the difficulty casting may impose on bathing. Furthermore, if the right foot is casted you will be unable to drive. If you drive a car with standard transmission, a cast on the left foot will also present a problem.

Surgery: Surgery is a last-resort option for plantar fasciitis. Success with surgery is not universal. And surgery exposes a patient to risks of nerve injury, infection, and arch problems related to release of the plantar fascia.



PLANTAR FASCIITIS

What does my specialist recommend for me?

Your foot specialist has developed a treatment plan based on your specific situation. His or her recommendation for you has been selected from the treatment options below.

TREATMENT	DESCRIPTION	MY NEXT STEP
SELF-CARE	Stretching: Perform gastroc and hamstring stretches. Footwear: Wear good, supportive shoes.	Contact us if symptoms do not improve (651) 968–5201
SUPPORTIVE INSERTS	Wear inserts prescribed to you. And if pain improves, inserts such as Spenco brand are available at any Foot Locker store.	Contact us if symptoms do not improve (651) 968–5201
ICE	Place a bag of ice directly on the plantar fascia for 20 minutes at the end of each day. Ice is an inexpensive, convenient treatment option and will help decrease pain and inflammation.	Contact us if symptoms do not improve (651) 968–5201
WELLNESS	Start with a free wellness consult to explore your goals and what tools are available to you.	Set up a wellness consultation (651) 968-5766
PHYSICAL THERAPY	A therapist can work with you to address the cause of your condition.	Set up a physical therapy appointment (651) 968-5600
SURGERY	If you fail to improve after nonsurgical care, your specialist may wish to intervene surgically. Your specialist can discuss the details of the surgery with you should it become necessary.	Set up a surgery appointment (651) 968–5201

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