

Plantar Fasciitis (Heel Spurs)

A PATIENT'S GUIDE

Chronically painful feet are hard to ignore and sometimes even harder to return to a pain-free state. As a treating chiropractor, I have found that actively involving the patient in their care has made a big improvement in treatment success.

If your practice is similar to mine, you have many patients asking questions about the cause of their chronically painful feet and how to care for them. Surprisingly, it is difficult to find a concise compendium of information on painful feet suitable for patient use. I decided to create a brochure for our office that has become quite a hit with our patients.

Herewith are the important excerpts from our Patient's Guide to Plantar Fasciitis/Heel Spurs. The brochure is too long to print here, but use the following material as a template. Modify it as it suits your practice style and training. Here it is.

What Is Plantar Fasciitis?

Plantar fasciitis (pronounced PLAN-tar fashee-EYE-tiss) is an inflammation of the fascia (also called aponeurosis) on the bottom of the foot. It is often considered the same as, or seen with, heel spur.

(Insert your favorite picture of a heel spur here.)

What Causes Plantar Fasciitis and Heel Spurs?

Plantar fasciitis and heel spurs are conditions caused by such factors as:

- too much standing;
- unpadded shoes on hard ground;
- poor shoes (see below);
- repetitive stress;
- diets low in vitamin C;
- a change or increase in activities;
- being overweight;
- age-related shrinkage of the heel fat pad (a.k.a. fat atrophy);
- an injury.

Bad shoes are those that ... (add your own criteria if you wish)

- have poor or no arch support;
- do not have a raised heel;
- are worn out
- do not bend at the ball of the foot
- do not have any cushion and are worn on a hard surface

What Are the Symptoms of Plantar Fasciitis and Heel Spurs?

The pain is usually in the front and bottom of the heel. It can also be over the entire bottom area of the foot. The pain can be mild or debilitating. It can last a few months or a lifetime. It can go away by itself, only to return in a few weeks or months.

If you have heel pain at the inside, front and bottom of your heel, especially if it's in the morning or after sitting a long time, then you probably have plantar fasciitis (heel spur). When the pain is severe, it is believed to be the result of bone and/or nerve irritation that is the result of too much tension, inflammation or scar tissue in the fascia. The pain often increases with more walking and standing. The pain is usually where the fascia attaches to the heel, but it can be over the entire bottom area of the foot.

If the heel pain began concurrently with a change or increase in activity, or an increase in weight, then it can be considered more of a cause of plantar fasciitis (heel spur). A stress fracture where the fascia attaches to the heel is sometimes seen in bone scans. Fifty percent of the sufferers say the pain is constant. About 90 percent say it hurts when pressed deeply with a finger.

What Is the Treatment for Plantar Fasciitis and Heel Spurs?

The most successful treatments include gentle stretching of the calf muscles, decreasing or changing activities, losing weight, better fitting shoes (with an arch support and raised heel), shoe inserts that have good arch support (name your favorites), heel pads (1/2" or more when compressed -- many designs like Tuli cups are often too thin), applying ice for five minutes after activities, and anti-inflammatory medication such as aspirin, Aleve or ibuprofen (but not Tylenol).

Many sufferers swear by Birkenstock sandals (which provide good arch support similar to good inserts and custom orthotics). However, arch support is less likely to work if you have a high arch.

When constant foot pain is present, it is caused by inflammation (which may not be visible to the eye). The effects of the inflammatory process may be reduced by keeping the foot raised above the heart and/or compressed by wrapping the foot with ace bandages after long periods of being on your feet. (Add your preferred wrapping instructions here.) Trying to "walk through or ignore the pain" can cause a mild case to become long-term and debilitating.

Home Care Routines (add your favorite advice if you wish) the fascia, daily massage of the feet or ankles, and/or arch support are often the cure for plantar fasciitis.

1. Decrease activity or switch to exercises that keep the weight off of the feet such as stationary bike riding or swimming. Avoid or modify anything that causes an increase in pain. Be patient, it may take months of reduced activity. Increase activities very slowly. Complete rest is not good, as some activity is necessary for recovery.
2. Stretching. Stretching is often recommended. In the few cases where it is caused by a sudden injury, stretching and strengthening may not be necessary. Stretching can reinjure the traumatized fascia.
3. Taping can help to simply protect the fascia or enable a patient to walk again. The tape should be tight when you stand and the pain is immediately relieved (unless the pain is present 24 hours a day). If not, consider the "other causes" section.
4. Arch support and medial wedges. Certain shoes, inserts (name the type you recommend) or

custom-made orthotics can give more arch support. Heel pads can sometimes be worn under inserts.

5. Heel pads, 1/2" to 1" thick in both shoes. The waffle-bottomed Tuli cups or viscoelastic designs may not work as well because they are thin when compressed. Playing tennis or similar activity while wearing heel pads can cause a serious ankle injury.
6. Reduce inflammation with ice, anti-inflammatory medication, compression and elevation. The swelling may not be noticeable, but it is often there and causes pain by putting pressure on tissue in the area.
7. Ice immediately after activities or injury. Place ice on a towel, step on it and roll it under the feet for five minutes. Repeat every hour until bedtime.
8. Massage in the morning and evening.

When Will My Feet Get Better?

It is important for you to be active in the treatment of your foot problem. Poor compliance with home care or prescribed treatment means your treatment will take far longer than it should. If there is little improvement after a few weeks or months of proper treatment, our office will refer you to a podiatrist or another appropriate specialist. Those who delay seeking treatment, have it in both feet or are overweight are more likely to have it for a long time before they see improvement.

Enjoy!

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