

Plantar Fasciitis (Heel/Foot Pain)

Management Options

Brief Decision Aid

There are **three** options for the management of plantar fasciitis:

- **Simple measures, including insoles.**
- **Specific exercises.**
- **More intensive options** - usually when simple things have not worked. These include:
 - steroid injections
 - extracorporeal shockwave therapy
 - surgery

Most, but not all plantar fasciitis will be gone in a year whatever you do. Around 80 in every 100 people will be much better at a year whatever you do. Some treatments may reduce length of the symptoms although the evidence for anything other than insoles (orthoses) is weak.

Benefits and risks of simple measures, including insoles

Treatment Option	Benefits	Risks or Consequences
Resting, avoid running, excessive walking or standing. Use supportive footwear, heel pads and arch supports. Use pain relief such as paracetamol or ibuprofen.	There is definite evidence that these measures will help, with insoles (particularly if made for you) being the most likely to help. Readily available and something you can do for yourself. Analgesia (pain relief medication) can help.	It may be hard to avoid walking and standing for prolonged periods. If the problem is more severe, these measures may not be enough. Sometimes insoles can make things worse

Benefits and risks of exercises

Treatment Option	Benefits	Risks or Consequences
Regular gentle stretching of your Achilles tendon and plantar fascia Support from a physiotherapist. (More detailed description of exercises overleaf).	These exercises may help. They can be used in addition to simple measures. In one study, 72 in 100 people had improvement at 8 weeks. They can be done at home and have no side effects. Stretching AND using insoles may be slightly more effective.	They may not help. 28 in 100 people may not see an improvement at 8 weeks. Exercises need to be done regularly. Some people find this form of treatment too slow to produce results or are not motivated enough to do exercises.

Benefits and risks of more intensive options

Treatment Option	Benefits	Risks or Consequences
Steroid injections Done in the GP surgery, often called cortisone injections. Injection is into the heel itself.	Can relieve the pain within a few days. Not clear how often it will be successful. May last a few weeks and sometimes longer.	Painful to have done. Does not often cure the problem. May need to be repeated. Rupture of the plantar fascia. In one study this happened to 10 out of every 100 people.

<p>Extracorporeal shock wave therapy Uses a machine to deliver shock waves to the heel.</p>	<p>Not clear how well it works because no large research trials done, but it may stimulate healing.</p>	<p>Bruising and redness of skin have been reported.</p> <p>In theory it could also damage the fascia.</p> <p>Not always available.</p>
<p>Surgery This involves releasing the plantar fascia, usually under general anaesthetic.</p>	<p>Can be considered if you have had the problem for more than a year.</p> <p>75 to 95 in every 100 people report long term improvement.</p>	<p>Not always successful. 12 to 27 in 100 still report moderate to significant pain after operation.</p> <p>It can cause complications such as increased pain, infection, injury to nerves or rupture of the plantar fascia, and it can take 4 to 8 months to recover from the operation.</p>

The following exercises can be used to help treat plantar fasciitis:

1. Stand about 40 cm away from a wall and put both hands on the wall at shoulder height, feet slightly apart, with one foot in front of the other. Bend your front knee but keep your back knee straight and lean in towards the wall to stretch. You should feel your calf muscle tighten. Keep this position for several seconds, then relax. Do this about 10 times then switch to the other leg. Now repeat the same exercise for both legs but this time, bring your back foot forward slightly so that your back knee is also slightly bent. Lean against the wall as before, keep the position, relax and then repeat 10 times before switching to the other leg. Repeat this routine twice a day.
2. Stand on the bottom step of some stairs with your legs slightly apart and with your heels just off the end of the step. Hold the stair rails for support. Lower your heels, keeping your knees straight. Again you should feel the stretch in your calves. Keep the position for 20-60 seconds, then relax. Repeat six times. Try to do this exercise twice a day.
3. Sit on the floor with your legs out in front of you. Loop a towel around the ball of one of your feet. With your knee straight, pull your toes towards your nose. Hold the position for 30 seconds and repeat three times. Repeat the same exercise for the other foot. Try to do this once a day.
4. Sit on a chair with your knees bent at right angles and your feet and heels flat on the floor. Lift your foot upwards, keeping your heel on the floor. Hold the position for a few seconds and then relax. Repeat about 10 times. Try to do this exercise five to six times a day.
5. For this exercise you need an object such as a rolling pin or a drinks can. Whilst sitting in a chair, put the object under the arch of your foot. Roll the arch of your foot over the object in different directions. Perform this exercise for a few minutes for each foot at least twice a day.

Brief Decision Aids are designed to help you answer three questions: **Do I have options? What are the benefits and risks of these options, (and how likely are they)? How can we make a decision together that is right for me?**