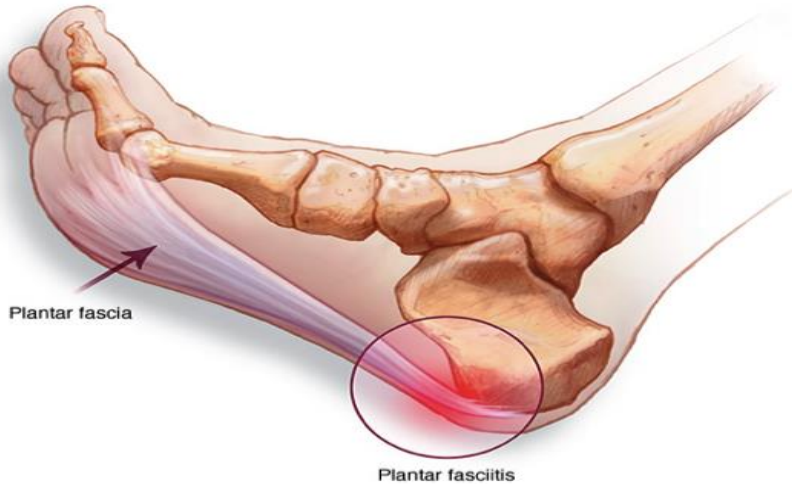


# Plantar Fasciitis



Plantar Fasciitis is a condition where the fascia band on the underside of the foot becomes aggravated. Pain may be long-standing and can last for some years, however, it often resolves over time with minimally invasive management. 80% show changes within 12 months.

## What Causes It?

It is thought to relate to 'tiny injuries' (known as microtraumas) to the plantar fascia. Over time these injuries can cause thickening and a gradual increase in pain, especially first thing in the morning or after a long period of standing. It can be triggered with a change in activity, footwear, or bodyweight. Severe pain and limited movement in this area is a sign that you should talk to your therapist.

## Non-Surgical (Conservative) Management

- Using supportive footwear with a fastening.
- Modify activity levels with rehabilitation to increase your general strength.
- Weight loss (if applicable).
- Cold pack (e.g. gel ice pack) for 20 minutes using skin protection.
- Pain relief including non-steroidal anti-inflammatory drugs (NSAIDs) if suitable.
- Strapping, insoles, and night splints.

## Other Treatment

- **Corticosteroid injections** (if pain fails to settle with conservative options.)  
The evidence for steroid injection shows that it may provide some short-term benefit. The evidence for its effectiveness in the long term is lacking. There are some risks associated with a steroid injection which your health professional can discuss with you. Sometimes ultrasound guidance is used alongside injections.
- **Extracorporeal shock-wave therapy and Autologous blood injections** are not offered in our area on the NHS as there is still further research to be done on the effectiveness of this treatment.
- **Surgery.** The procedure releases the plantar fascia from the bone. It may also include calcaneal spur excision. Possible complications include increased pain, nerve injury, fascial rupture, and infection.