Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help at any time.

Bone and Joint Center:
206-598-4288

Remember that the 3 most effective treatments for heel and arch pain are weight reduction, orthotics, and rest:

- Avoid going barefoot.
- For exercise, avoid walking, running, or using a treadmill. Try biking or swimming instead.
- Clogs can be great shoes to wear at home due to their heel elevation and stiffness.

About Heel or Arch Pain

Recognition and treatment

What causes heel or arch pain?

Heel or arch pain is often caused by an irritation of the ligament on the bottom of the foot called the plantar fascia. This condition is known as plantar fasciitis.

The plantar fascia is a strong sheet-like ligament on the bottom of the foot that spans from the toes to the heel. Its function is to help support the arch and prevent it from being too flat. Every time you step down, you are stretching that ligament, and if it is hurt or swollen, then you aggravate it by standing or walking.

When inflamed, your ligament needs rest. To truly rest the plantar fascia ligament means to not walk or stand on it. Even when people are trying to take it easy, the ligament is used more than it should be to rest it as much as needed.
Treatment Options

We’ll suggest ways to help rest the ligament without asking you to go on bed rest or crutches. There are 3 phases to the treatment plan. We start with the most conservative measures, called Phase One. Sometimes the simple things work and the patient is very pleased. Other times the patient does not respond and we proceed to Phase Two or Three.

**Phase One** involves supporting the arch through taping and orthotics, which are rigid arch supports. We will try:

- Lodye taping or pronation spring control (PSC).
- Stretching exercises.
- Over-the-counter or custom-made orthotics.
- Activity, weight, and shoe modifications.
- Elevated-heel shoes.

**Phase Two** includes:

- Cortisone injection (usually done as a series of 3 shots, a month apart).
- Anti-inflammatory medicines to help reduce swelling.
- Casting (removable walking cast).
- Night splinting (a type of lightweight cast worn only in bed while sleeping).
- Physical therapy.

**Phase Three** includes shockwave treatment and surgery. Shockwave treatment involves an acoustical wave of high energy introduced to the area of discomfort. This is done 1 or more times. In some cases, anesthesia is needed. While this treatment gives minimal disability afterward, the resolution of plantar fascial pain will take at least 2 months. This procedure is not covered by most insurance. Check with your health care provider for more information and current fees.

The most common surgical procedure is the endoscopic plantar fasciotomy. A small scope is used to visualize the inflamed plantar fascia ligament. Part of the ligament is cut. Once cut, the ligament is relaxed from its lengthened position.

The surgery takes place on an outpatient basis (no overnight stay) in the hospital or surgery center. Recovery takes about 6 to 8 weeks. There is no need for crutches with this procedure. Other procedures may be needed for your type of heel pain.

**Unusual Types of Heel Pain**

All heel pain is not plantar fasciitis. The reason for your heel pain could be anything from a true stone bruise to a symptom of systemic arthritis. We have seen bone tumors in the heel bone and soft tissue tumors in the ligament itself. You could also have pain from a pinched nerve in your heel or even your lower back. Be sure to tell your doctor about all your symptoms.

On the back page are some basic stretching exercises. These should be done for 10 minutes a day. For best results, soak your foot in warm water before stretching. After stretching, ice your heel with an ice bag or a bag of frozen peas or corn.