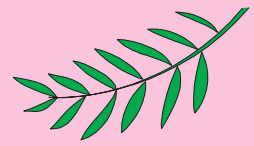


Plantar Fasciitis



Plantar fasciitis (heel-spur syndrome) is inflammation of the tough fibrous band of tissue (fascia) connecting your heel bone to the base of your toes.

HOW DOES IT START?

The condition starts gradually with mild pain at the heel bone. You're more likely to feel it after (not during) exercise. It is usually worse in the morning with the first few steps. The pain classically occurs again after arising from a midday lunch break.

AM I AT RISK?

You are more likely to get the condition if:

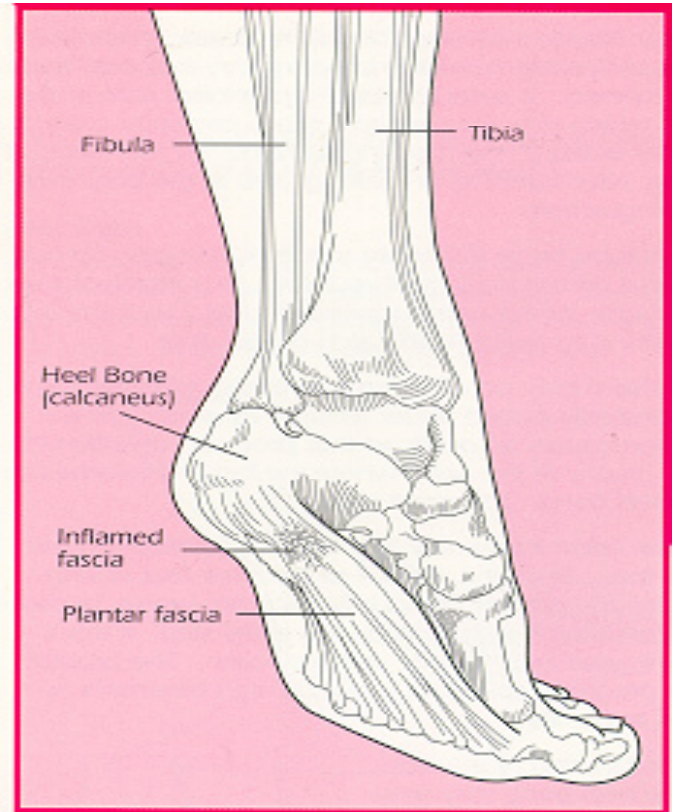
- Your shoes provide poor support
- You are older
- You have flat (pronated) feet or high arched, rigid feet
- Your run or jog on sand or other soft terrain
- You have tight calf muscles
- You run on the balls of your feet or you are a hill runner
- You have gained a significant amount of weight in a relatively short period of time
- You have increased your activity level suddenly
- Someone else in your family suffers from plantar fasciitis

TREATMENTS:

Rest is the first treatment for plantar fasciitis. Try to keep weight off your foot until the symptoms go away. Apply ice to the sore area for 20 minutes three or four times a day to relieve your symptoms. Often a doctor will prescribe nonsteroidal anti-inflammatory medication such as ibuprofen. A program of home exercises to stretch your Achilles tendon and plantar fascia are the mainstay of treating the condition and lessening the chance of recurrence.

About 90% of people with plantar fasciitis improve significantly after two months of initial treatment. You may be advised to use shoes with shock-absorbing soles or fitted with a standard orthotic device like a rubber heel pad. Your foot may be taped into a specific position.

If your symptoms continue after a few months of conservative treatment, your doctor may inject your heel with steroidal anti-inflammatory medications (corticosteroid). If you still have symptoms, you may need to wear a walking cast for 2-3 weeks or positional splint when you sleep. In a few cases, you might need surgery to release your ligament.



SPORTS:

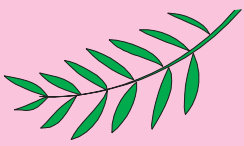
Plantar fasciitis can be aggravated by any foot-impact sport, but particularly activities in which the foot lands repeatedly, such as running or jogging. To maintain cardiovascular fitness, you may be able temporarily to replace foot-impact sports with non-weight bearing activities, such as swimming and cycling. Weight training can be used to maintain leg strength.

When recovering from plantar fasciitis, you will need to return to sports activities slowly. If you have a lot of pain either during the activity or the following morning, you are doing too much.

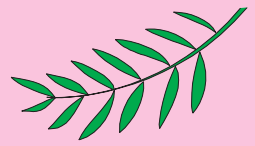
Using heel pads or changing to different or new shoes may help the problem.

SEE REVERSE SIDE FOR SUGGESTED EXERCISES.

Contact Health Services if you have any additional questions or concerns.



Plantar Fasciitis



WALL STRETCH

Lean forward against a wall with one knee straight and heel on the ground. Your other knee is bent. Your heel cord and foot arch stretch as you lean. Hold for 10 seconds, relax and straighten up. Repeat 20 times for each sore heel.



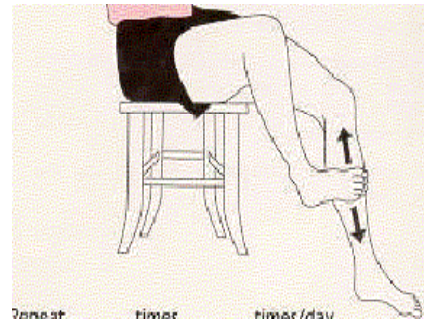
COUNTERTOP STRETCH

Lean forward onto a countertop, spreading your feet apart with one foot in front of the other. Flex your knees and squat down, keeping your heels on the ground as long as possible. Your heel cords and foot arches will stretch as the heels come up in the stretch. Hold for 10 seconds, relax and straighten up. Repeat 20 times.



TOWEL CURL

Place a towel on the floor, and use the toes of your injured foot to gather the towel toward you. You can increase resistance by placing a weight on the end of the towel. Relax, then repeat the towel curl.



SHIN CURL

Run your injured foot slowly up and down the shin of your other leg as you try to grab the shin with your toes. A similar exercise can be done curling you toes around a tin can.