

Plantar Fasciitis

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Plantar fasciitis can be an extremely debilitating injury. The plantar fascia is a band of connective tissue that extends from the plantar heel to the base of the toes. Plantar fasciitis is generally worse in the morning during the first few steps out of bed. This is because during the rest periods the plantar fascia is allowed to repair in a shortened position. Once pressure is placed upon the foot, the arch elongates over stretching the plantar fascia, disrupting the repaired tissue, creating pain. In addition, pain will generally increase with increased weight bearing activities.

The people most likely to develop plantar fasciitis are those individuals with biomechanical or anatomical faults. High-arched under-pronating individuals with a rigid foot generally have a tight plantar fascial band. This tight band is relatively non-elastic and does not respond well to the stresses of shock absorption. In contrast, a flat, flexible or over-pronated foot that is excessively mobile will place a great deal of strain on the plantar fascia; the hyper-mobility of the foot stretches the plantar fascia to its maximum length as the foot pronates.

Plantar fasciitis can be a very frustrating injury because it is aggravated every time you stand up. Home treatment for such an injury primarily consists of reducing your activities, massage, and the use of ice packs. The addition of an arch support can sometimes be helpful. Gentle stretching the calf and plantar fascia together is extremely important.

Proper footwear is crucial for recovery and prevention of injury re-occurrence. Just as the proper footwear can be curative to plantar fasciitis by correcting over-pronation or under-pronation, improper foot can inadvertently cause plantar fasciitis. In an under-pronator, a shoe that is rigid in nature and lacks appropriate shock absorption will lend the athlete more vulnerable to plantar fasciitis. In an over-pronator, a shoe that is too flexible or flexes at a point other than where the toes meet the foot (metatarsal phalangeal joints), and/or lacks any medial posting (an increased midsole density along the inner side of the shoe's midsole) will lend the athlete more vulnerable to plantar fasciitis. Thus expert advice should be sought to insure that your biomechanical gait pattern matches your footwear in both the prevention and treatment of plantar fasciitis.

If home care doesn't relieve the injury by the end of two weeks, professional assistance should be sought to prevent a serious or chronic injury that can cause permanent damage. Professional care may consist of taping techniques, manipulation, orthotics, soft tissue massage techniques, physiotherapies and splinting.



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