

IS PLANTAR FASCIITIS YOUR ACHILLES HEEL?

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What is Plantar Fasciitis? Plantar fasciitis, the irritation or inflammation of the plantar fascia of the foot, is the most common cause of heel pain in adults and athletes of any age. The plantar fascia is a long band of connective tissue, sometimes referred to as a ligament, that connects the heel bone to the toes and creates the arch of the foot.

Plantar fasciitis can affect one or both feet and is one of the most common orthopedic complaints relating to the foot.

What are the symptoms?

Heel pain or pain on the bottom of the foot is the most common symptom. The pain is typically worse with the first steps out of bed in the morning and will decrease as the day goes on. However, pain can become worse with prolonged periods of walking or standing throughout the day.

What causes Plantar Fasciitis?

Several factors can contribute to plantar fasciitis including:

- Excessive pronation (feet roll inward while walking or standing)
- Walking, standing or running for long periods of time, particularly on hard surfaces
- Improper footwear--shoes that lack cushion, are worn out, or do not have good arch support
- Overweight
- High arches or flat feet
- Tight calf musculature or Achilles tendon

For athletes, plantar fasciitis is most often the result of overuse caused by the repetitive nature of certain activities. The tissue can develop small tears that become irritated causing debilitating pain. Improper training and muscle imbalances can also contribute, as well as changes to a training routine or changes in training surface, such as going from a gym floor to concrete surface.

How is Plantar Fasciitis Diagnosed?

The earlier you consult your doctor regarding heel pain, the more effective treatment and relief of symptoms will be. You may visit your family practitioner, but he/she will often refer you to a physician that specializes in foot conditions or sports medicine. When visiting the doctor be prepared to give a thorough history of your symptoms. Your doctor is likely to ask:

- When did you first notice your symptoms?
- Is it better or worse at any time during the day?
- Do you have a physically demanding job?
- What kind of footwear do you typically wear?
- Are you a runner?
- Have you had foot pain in the past?
- Is there anything that makes your symptoms better or worse?
- Do you have pain anywhere besides your foot?

In addition, your physician will perform a physical exam checking for tenderness and may suggest an x-ray or MRI in order to rule out other causes of your symptoms.



Methods of Treatment

"Patience, patience, patience," says Beau Sasser, M.D., board-certified orthopaedic surgeon and medical director, Southeast Georgia Health System Sports Medicine. "With prompt and proper treatment, most patients can achieve complete recovery within one year." Treatment is most successful when sought at the initial onset of symptoms. Resting your

feet is the number one recommendation for plantar fasciitis. Limit or, if possible, avoid the daily activities that cause your heel pain.

Change your footwear. Wear shoes with good arch support and enough cushioning. You may need to try orthotics – heel cups or inserts that are found in most drugstores. Performing daily stretches, such as calf and toe stretches, can help increase the flexibility of your plantar fascia and lessen pain.

"One of my favorite methods of treatment is what I call the soda bottle stretch," says Dr. Sasser. "Take a plastic soda or water bottle and fill it three-quarters full of water and stick it in the freezer. Each day take it out of the freezer and roll it back and forth under the symptomatic foot. The frozen water bottle provides the benefits of ice and deep massage."

Over-the-counter anti-inflammatory medicines are often used to reduce inflammation and pain as well. Your doctor may try corticosteroid injections or suggest physical therapy, custom orthotics, or night splints to ease the pain. When conservative treatments are exhausted, surgery may be a last resort.

Prevention

After your plantar fasciitis has been successfully treated, you can utilize the following tips to help



prevent its return:

- Maintain a healthy weight
- Choose footwear with adequate cushioning and arch support
- Replace old and worn out shoes
- Maintain flexibility of the muscles of the lower leg and foot
- Avoid going barefoot, especially on hard surfaces
- Switch to low-impact activities like biking

Meet Dr. Beau Sasser

Beau Sasser, M.D., is a native of Glynn County and a graduate of Glynn Academy. He received his undergraduate degree from Washington University in St. Louis, Missouri, and his medical doctorate degree from the Medical College of Georgia, where he also completed both his internship and orthopaedic residency.



Following his residency, Dr. Sasser received exclusive sports medicine training while in a fellowship program with the Kansas City Orthopaedic Institute. During his time there, he worked with the NFL's Kansas City Chiefs, treating a variety of sports and orthopaedic injuries incurred by these elite athletes.

Dr. Sasser returned to Glynn County in 2005 and joined Summit Sports Medicine & Orthopaedic Surgery, where he specializes in sports medicine. At Southeast Georgia Health System, Dr. Sasser is a key orthopaedic surgeon at the Orthopaedic & Spine Center and serves as medical director of Sports Medicine. Dr. Sasser is board-certified with the American Board of Orthopaedic Surgery.

Summit Sports Medicine & Orthopaedic Surgery is a strategic affiliate of Southeast Georgia Health System and has three convenient locations. For more information, call 912-262-9961 in Brunswick, 912-466-5570 on St. Simons Island, or 912-576-6355 in St. Marys

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