

# Heel Pain

## It's about time we gave heel pain the boot - here's how!

Possibly one of the most painful problems in the foot is heel pain. In this article we talk about how it starts, the cause and how to get rid of it - forever!

The good news is that there is an answer - all you need to do is follow the treatment plan with patience.

### A starting point

It is often hard to pinpoint just when the pain began. You may have noticed it on and off for a few days or perhaps even a few weeks. Then one morning you put your foot to the ground and pow!.. sharp pain.

Patients often report that as the foot 'warms up' the pain seems to settle, but tends to get worse as the day progresses, particularly if it has been a day with lots of walking. The heel is usually sore when standing up again after resting in a chair, or driving.

In fact any activity that follows rest will probably fire it up. This is because when rested, the foot and ligaments cool down.

Cool ligaments do not stretch very well, they just pull, so almost any activity will produce pain.

### Lifestyle changes:

Altered employment conditions or sporting goals are a significant factor in heel pain.

A new job which sees you standing, walking or climbing stairs more often could be to blame. Especially if these activities are conducted on particularly hard surfaces.

If you begin an aerobics or walking fitness program, or even just the purchase of a new home with lots of stairs and lawns to mow could be a major cause.

### Bony changes:

Some feet are genetically 'unsound' or structurally unstable. They have the appearance of 'rolling in' at the ankle when standing. This movement places strain on a major secondary support structure called the plantar fascia.

Your heel is basically a cushion. It contains columns of fatty tissue that allow the foot pad to retain its contour despite the repeated impact of walking or running. This 'shock absorber' design also protects underlying muscles within the sole of your foot.

The plantar fascia is a dense fibrous band that extends from your heel bone (the calcaneus) to the under surface of your toes. Feet that 'roll in' at the ankle cause muscle 'pull' at the heel. Repeated 'pulling' will cause inflammation and ultimately pain diagnosed as plantar fasciitis.

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The plantar fascia attaches to the heel in three locations. They being the inside of the heel and twice in the middle of the heel. A small slip also attaches to the outside of the heel.

Most patients complain of pain around the inside border of the heel and to a latter extent in the middle heel area. Pain is generally felt where the muscle attaches to the heel in the form of a ligament rather than right into the arch.

## How is it diagnosed?

Several other conditions produce similar symptoms making a thorough examination vital. This will rule out disorders such as arthritis, neuritis, tendonitis or heel spurs. Your doctor or podiatrist may choose to organise x-rays if they deem them necessary.

Standard examination would certainly involve squeezing the borders of the heel and pressing directly into the middle of the heel. Only 50% of patients with heel pain have bond heel spur so examination is essential in clarifying your particular problem.

Understanding your genetic foot structure and how it works is the key to diagnosis and complete recovery. A podiatrist or a health provider who is familiar with normal and abnormal foot mechanics, such as a sports physiotherapist or doctor will be able to help.

## Treatment

Simple therapies often give relief but be cautioned, it often takes weeks or even months for complete recovery.

Consulting an appropriate health provider in the early stages can save a lot of pain and time, but here are a few tips to help you on your way in the meantime:

1. Avoid walking on grass, playing golf or mowing the lawn. These activities only aggravate the problem because of the spongy surface (the foot is forced to work harder to achieve stability).
2. If you walk or jog stop now! Change to swimming or cycling.
3. Try some simple home treatments like massage followed by ice 5 minutes twice a day. Foot baths that alternate hot and cold water may also help, then massage with anti-inflammatory gel.
4. Wear recreational shoes with cushioned heels. Add medical-grade shock absorbing pads to your business shoes.
5. Gently exercise your calf muscles to stretch the Achilles tendon. Where possible wear shoes that elevate the heel (not stilettos!) to relieve tension on the ligament.

6. Where extreme pain is experienced, your doctor can prescribe appropriate anti-inflammatory/analgesic medication, or inject Cortisone into the area to reduce pain and inflammation. Try steps 1 to 6 for 3 to 4 weeks, and if no improvement is detected, then step 7 is next.

7. Consult a podiatrist who will dispense custom prescription orthoses (shoe inserts). These devices will change your foot stance and walking pattern to reduce the 'pull' on the muscle attachment that is causing the pain.

With patience, this approach usually achieves very good results because it is addressing the cause not just the symptoms.

## Avoid surgery

In the past, surgery was an option as the pain was thought to arise from a bone spur on the heel rather than an overworked muscle. If a spur does show on x-ray, the treatment outlined above remains exactly the same.

Comfort & Fit are happy to recommend a podiatrist in your area, all you need to do is ask.

Alternatively you can telephone one of our stores to obtain some free advice as we have podiatrists in-store every week.



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Glen Waverley: 58 O'Sullivan Rd. ☎9886 5399 Greensborough: 63 Main St. ☎9432 6344 Niddrie: 368 Keilor Road. ☎9374 4011

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