

Chapter 1 Plantar Fasciitis What is Plantar Fasciitis? Plantar Fasciitis (Painful Heel Syndrome) is a medical disorder with inflammation of the plantar fascia (which stretches from the calcaneum to the toes) typically featured by the pain in the heel especially in the morning and weight bearing exercises. The plantar fascia is a thick connective tissue on the bottom of the foot. The plantar fascia is a strong band of tissue (like a ligament) that stretches from the heel (calcaneum) to the middle foot bones. It strengthens the arch of the foot and also works as a shock-absorber in the foot. It joins the heel bone to the toes and produces the arch of the foot. When this tissue becomes swollen or inflamed, it is called plantar fasciitis. Plantar fasciitis indicates inflammation of the plantar fascia. It is more frequent in women. What is the cause of Plantar Fasciitis? Cause: The main cause of Plantar Fasciitis is the non-specific inflammation of the plantar fascia as an effect of repetitive injury to the fascia. In some patients the plantar fasciitis occurs as a result of a calcaneal spur pressing on the fascia. Plantar fasciitis happens when the thick band of tissue on the bottom of the foot is over-stretched or over-used. This can cause pain and make walking more difficult. Repeated small injuries to the fascia (with or without inflammation) are believed to be the cause of plantar fasciitis. The damage is normally near to where the plantar fascia joins to the heel bone. The patient is more likely to damage the plantar fascia in certain circumstances. For example: 1. If the patient is on the feet most of the time, or if the patient does lots of walking, running, standing, etc, when the patient is not used to it or has previously had a more sedentary lifestyle. 2. If the patient has recently started exercising on a different type of surface - for example, running on the road instead of a track. 3. If the patient has been wearing shoes with improper cushioning or improper arch support. 4. If the patient is obese - this will put extra strain on the heel. 5. If there is over-use or sudden stretching of the sole. a. Athletes who raise running intensity or distance; improper method starting off the blocks, etc. 6. If the patient has a shortened Achilles tendon (the big tendon at the bottom of the calf muscles above the heel). This can involve the ability to flex the ankle and make the patient more prone to damage the plantar fascia. Plantar fasciitis may be thought to be Policemans heel but they are different. Policemans heel is plantar calcaneal bursitis - inflammation of the bursa (sack of fluid) under the heel bone. This is not as frequent as plantar fasciitis. Frequently there is no obvious cause for plantar fasciitis, especially in older people. A wrong belief is that the pain is due to a bony protrusion, or spur, coming from the heel bone (calcaneum). Many people have a calcaneal spur of the heel bone but not everyone with this forms plantar fasciitis. The patient is more likely to get plantar fasciitis if the patient: 1. Have foot arch problems (both flat feet and high arches) 2. Run long distances, downhill or on uneven surfaces 3. Are obese or gain weight suddenly 4. Have a tight Achilles tendon (the tendon connecting the calf muscles to the heel) 5. Wear shoes with poor arch support or soft soles 6. Change the activities Incidence Plantar fasciitis is observed in both men and women. It most frequently involves active men ages 40 - 70. It is one of the most frequent orthopedic foot complaints. Plantar fasciitis was frequently thought to be due to a heel spur. On x-ray, heel spurs are observed in people with and without plantar fasciitis. Both heels can be involved

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