

Plantar Heel Pain

Patient Information

MSK (Musculoskeletal) Therapy



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Disclaimer

Not all exercises are suitable for everyone, and while every precaution was taken in selecting these exercises, they do not come without risks. If you have any concerns regarding injury, or whether or not you should partake in the exercises, then you should consult your GP or Physiotherapist prior to commencing any exercises shown here.

It is quite normal to feel some discomfort following exercise, but it is important that this discomfort eases within 2 hours of finishing the exercise and doesn't have an overall negative effect on your symptoms.

The exercise plans shown here are designed to be used as a guide and a point of reference; they are not exhaustive and can be modified and progressed under the supervision of your physiotherapist.

What is Plantar Heel Pain?

Plantar heel pain is one of the most common lower limb musculoskeletal conditions that affects both sedentary and physically active people. It can have a significant impact on work and activities and can occur at any age. When placed under too much stress due to abnormal loading the structures underneath the foot become irritated which can lead to pain.

What are the symptoms of Plantar Heel Pain?

- Pain usually starts gradually without any injury to the area.
- Pain is often worse when you first weight bear after a period of rest or first thing in the morning.
- Pain can be very varied the pain is often a deep, aching sensation but can
 occasionally feel sharp. This can be anywhere on the underside of the heel and
 sole. However, commonly, one spot is found as the main source of pain and may be
 tender to touch.

What risk factors are associated with Plantar Heel Pain?

- Prolonged standing.
- Recent change in footwear.
- Stress.
- Excessive or suddenly increasing running distance.
- Low arches.
- Difficulty bringing the toes towards the shin.
- Obesity or increased body weight.

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How is Plantar heel Pain diagnosed?

- In most cases, no investigations or scans are necessary
- A diagnosis is usually made by discussing the history of your pain and by performing a physical examination of your foot.
- Occasionally, if symptoms do not resolve with usual management techniques, then
 other tests might be used to rule out other causes of the foot pain. These can
 include X-rays, ultrasound, or MRI scans.

What is the Outlook for Plantar Heel Pain?

- Plantar heel pain can take a long time to settle down as the Plantarfascia (The section of connective tissue on the underside of your foot that is often associated with this type of pain) has a poor blood supply, so the pain can persist for some time.
- Pain often lasts for up to 18 months although can sometimes improve within a few weeks. It is impossible to predict how long it will last for each person.

What is the management for Plantar Heel Pain?

- Most people with plantar fasciitis will make a complete recovery within 1 year by following measures which can reduce the frequency of flare ups, this can include:
 - o resting the foot where possible
 - wearing supportive shoes
 - avoiding walking barefoot
 - o a trial of insoles and heel pads
 - weight loss
 - regular strengthening exercises
 - using pain relief or using an ice pack underneath your foot.
- If pain does not improve by completing the measures above, a referral to a physiotherapist or podiatrist should be considered.
- Sometimes, in rare cases, pain does not improve with the measures above and physiotherapy or podiatry treatment. If this is the case, there are further options which could be considered:
 - Short-term relief of symptoms may be provided with a corticosteroid injection, preferably given via an ultrasound guided injection.
 - In rare cases, a referral to a surgeon if pain continues even after treatment by a podiatrist or physiotherapist.

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What is the management for Plantar Heel Pain?

- Placing gradual load on the muscles of the foot and ankle is important to aid recovery.
- A study in 2014 concluded that high-load strength training (this means strengthening the muscles around your foot by placing a controlled load or force through them) is more effective at reducing plantar heel pain than stretching exercises after 3 months.
- It is very important that the exercises are progressed over time to ensure that strength improvements are made, so as the exercise become easier, or the repetitions are reduced, the force or load through the muscles should be increased.
- The exercise should always be performed to the maximum number of repetitions you can possibly do with correct form. For example, for the first stage of the exercise you should do 12 Repetitions Maximum (RM) for 3 sets (a "set" refers to the number of repetitions you manage to do, so for example 12 Repetitions, repeated 3 times, with a brief rest in between each, would be "sets" of 12). 12RM is defined as the maximum amount of weight that the patient can lift 12 times through the full range of motion while doing the exercise correctly and without aggravating their pain levels. This means that the 12th repetition should be the most you can do and if you can reach 13 or 14 with ease then more weight needs to be added.
- More weight can be added by wearing a backpack and filling it with books.
- This exercise should be completed every other day as aggravation of your symptoms is likely after completing them. It is important we let the muscles rest in between exercise sessions so they are not overloaded further.

Windlass Heel Raises



 While standing on a step or the bottom step of your stairs, place a rolled-up towel under your toes and make sure the ball of your foot is on the edge of the step as shown in the picture.



2. Make sure you hold on to something stable for balance, then slowly raise your heel(s) upwards as high as you can.

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3. Count 3 seconds on the way up, hold the movement at the top for 2 seconds and then slowly lower your heels down for 3 seconds.



4. If you struggle to reach the maximum number of repetitions using one leg, then complete it using two until you can do it using one. Remember to add more weight if you use two legs, so as to ensure you just about reach the maximum number of repetitions for that stage.

• In the table below is a 12-week exercise programme which you can follow at home:

Weeks	Repetitions	Sets	Frequency
1-3	12RM	3	Every other day
4-6	10RM	4	Every other day
7-9	8RM	5	Every other day
10-12+	5RM	5	Every other day

- Remember to increase the amount of weight as you progress through the programme, to ensure you reach the maximum number of repetitions required for each stage.
- After completing the programme make sure you continue to complete the exercise at the same level as the last stage, to maintain the improvements you have made.

Frequently Asked Questions

- Should I take painkillers?
 - Painkillers can reduce your pain and help to keep you moving. It is important to speak to your GP or a Pharmacist first before taking any pain relief, especially if you are taking any other medications.
- Should I use ice or heat?
 - The answer to this is completely personal preference, you should use whatever helps relieve your symptoms.
- What should I do if my symptoms do not improve?

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 If your symptoms do not improve after two months, please complete a Self-Referral Form to arrange an appointment with a Physiotherapist. These can be found at your GP Surgery, or on our website at https://www.wwl.nhs.uk/msk-services

• Will exercise make it worse?

- Although aggravation of your symptoms and discomfort is normal during or after completing exercises, especially when starting a new exercise programme, this does not mean it is making your condition worse.
- If you follow the information detailed in this leaflet, including selfmanagement advice and exercises, then the Plantar Heel Pain will improve.

Do I need a scan or X-Ray?

 Plantar Heel Pain is usually diagnosed in the clinic through taking a history and doing specific tests of the foot. Usually, scans are not required to diagnose this problem.

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Please use this space to write notes or reminders.

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Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends, and carers.

Contact Us

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Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

- 1. What are my options?
- 2. What are the positives and negatives of each option for me?
- 3. How do I get support to help me make a decision that is right for me?



How We Use Your Information

For details on how we collect, use, and store the information we hold about you, please see patient information leaflet, Ref. **Corp 006** How we use your information, this can be found on the Patient Information Leaflets page on the Trust website, see details on the front cover.

This leaflet is also available in audio, large print, Braille, and other languages upon request. For more information, please ask in the department/ward.

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