



**Wrightington, Wigan and  
Leigh Teaching Hospitals**  
NHS Foundation Trust

# Plantar Heel Pain

# Plantar Heel Pain

## Patient Information

## Musculoskeletal (MSK)

- Author ID: MSB
- Leaflet Ref: Tpy 072
- Version: 2
- Leaflet title: Plantar Heel Pain
- Date Produced: September 2024
- Expiry Date: September 2026

## 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 soft tissue structures underneath the foot, can become aggravated and 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, and by the end of a busy day.
- 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 under the heel, as the main source of pain, and may or may not be tender to touch.

## What Risk Factors are Associated with Plantar Heel Pain?

- Prolonged standing
- Poor footwear choices (soft, flat, flexible sole)
- Stress
- Excessive or suddenly increase in activities.
- Low arches / flat feet.

- Reduced ankle dorsiflexion (bringing the toes towards the shin), due to tight calf muscles.
- Obesity or increased body weight

## 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 magnetic resonance (MR) imaging scans

## What is the Prognosis/Outlook for Plantar Heel Pain?

- Plantar heel pain can take a long time to settle down as the plantar fascia 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 with conservative (non-invasive) measures, which can reduce the frequency of flare ups; this can include:

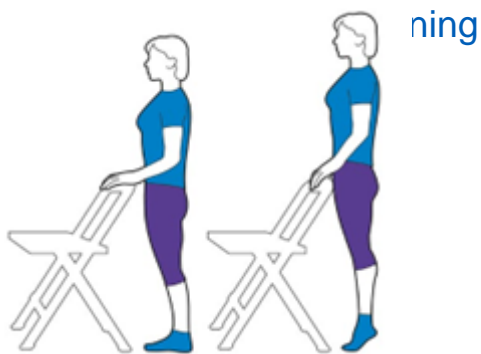
- Resting the foot where possible
- Wearing supportive shoes (stiff/ inflexible sole, with approximately 2cm heel lift). Footwear is essential to reduce symptoms
- Avoiding walking barefoot
- A trial of arch support insoles can also be helpful, to prevent over lengthening / overloading of the plantar fascia
- Weight loss (if overweight or obese)
- Regular strengthening / stretching exercises
- Using oral pain relief or alternating ice / heat underneath your foot to help reduce pain

Sometimes, in rare cases, pain does not improve with conservative measures and physiotherapy or podiatry intervention. If this is the case, there are further options available which could be considered:

- Shockwave Therapy
- Cortico Steroid injection
- In rare cases, a referral to an orthopaedic or podiatric surgeon may be necessary

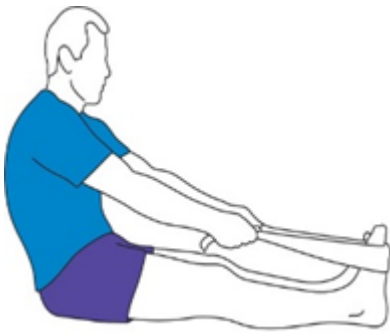
It is very important that the exercises are **progressed** over time to ensure that strength and flexibility gains are made.

The strengthening exercises should be completed **every other day**. Stretching exercises should be performed **daily** and frequently throughout the day.



- While standing on both limbs, very slowly raise up on your toes to the count of 10, hold at the top for a count for 5 seconds, then very slowly lower both heels down counting down from 10.
- Minimum 3 repetitions to a maximum of 10 repetitions at a time, doing max 10 sets or till you feel tired.
- Repeat every other day. You can add weights to a rucksack and wear it on your back, to make the exercise more difficult.

## EXERCISES – Stretching



- While sitting, use a towel / scarf looped around the foot. Gently pull your ankle back until a stretch is felt along the back of your lower leg. Keep your knee straight throughout the stretch.
- Hold this position for 30 seconds and repeat 3 times.
- Doing this before weightbearing in the morning can reduce the initial pain triggered on loading.



- Start by standing in front of a wall or other sturdy object. Step forward with one foot and keep your toes on both feet facing straight forward.
- Keep the leg behind you with a straight knee during the stretch.
- Lean forward as you allow your front knee to bend, until a gentle stretch is felt along the straight back leg; hold this position for 30 seconds.
- Try to repeat on both legs up to 20 times a day in small bite-sized sessions.



- Start by standing in front of a wall or other sturdy object. Take a small step forward.
- Bend both knees, dipping downwards slightly; you will feel the calf of the back leg gently stretch.
- Hold this position for 30 seconds. Try to repeat on both legs up to 20 times a day in small bite-sized sessions.

**Once symptoms improve, please continue with exercises to prevent re-occurrence.**

Diagrams reproduced by permission of Versus Arthritis

## [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 General Practitioner (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, being careful not to burn your skin.

### **What should I do if my symptoms do not improve?**

If your symptoms do not improve for longer than two months after following the advice in this leaflet, please contact:

### **Musculoskeletal clinical assessment service departments:**

Wigan            0300 707 1112 / [wwl-tr.cats.msk@nhs.net](mailto:wwl-tr.cats.msk@nhs.net)

Platt Bridge   0300 707 1422 / [wwl-tr.cats.msk@nhs.net](mailto:wwl-tr.cats.msk@nhs.net)

Leigh            0300 707 1631 / [wwl-tr.cats.msk@nhs.net](mailto:wwl-tr.cats.msk@nhs.net)

### **Physiotherapy Departments:**

Wigan            0300 707 1113 [wwl-tr.mskphysio-bostonhouse@nhs.net](mailto:wwl-tr.mskphysio-bostonhouse@nhs.net)

Platt Bridge   0300 707 1772 [wwl-tr.mskphysio-bostonhouse@nhs.net](mailto:wwl-tr.mskphysio-bostonhouse@nhs.net)

Leigh            0300 707 1595 [wwl-tr.leighphysio@nhs.net](mailto:wwl-tr.leighphysio@nhs.net)

### **Will exercise make it worse?**

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. Please continue to follow the advice.

### **Do I need a scan or X-Ray?**

Plantar heel pain is usually diagnosed in clinic through taking a history and doing specific tests on the foot. Usually, scans/ X-rays are not required to diagnose this problem.



Version number: **2**  
Last modified date: **13th June 2026**

All rights reserved © 2026  
WWL Teaching Hospitals NHS Foundation Trust