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Making a decision about Plantar Fasciitis (Plantar Heel Pain)

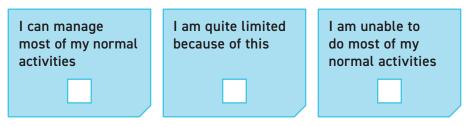
What is this for?

This document is to help you with decisions about your heel pain. It includes information about the condition and possible treatments. There are sections that you can fill in. This will help your healthcare professional understand your situation and what's important to you.

What is Plantar Fasciitis ?

The plantar fascia is a selection of three strong fibrous bands that support the underside of the foot. It originates from the base of the heel, slightly on the inside. Pain and swelling can occur over this point, and surrounding areas when this band becomes irritated.

How is your heel pain?



Treatment Options

There are many things you can do to help your plantar fasciitis.

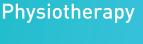


Which options are better for you depends on your personal preferences, your age, and how symptoms are affecting your life. Not every treatment is suitable for everyone and will depend on what you have already tried.

Plantar fasciitis is a common condition. With the right support, most people can manage it well and get better. You can do this by trying the options from 'things I can do myself' first and moving onto the next treatment option if needed.

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Plantar fascia

> Heel bone



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Things I can do myself

Please see our '**<u>Plantar Fasciitis</u>**' patient information leaflet. This self-management should be tried consistently for around 6-8 weeks.

Shockwave/Physiotherapy

Shockwave can be completed following a trial of self-management. Extracorporeal Shockwave Therapy (ESWT) is an evidence-based treatment that consists of low-pressure energy waves passing through injured tissue to increase blood flow and stimulate repair. It also helps to reduce pain, allowing your body to restart the healing process alongside an appropriate exercise programme. Shockwave would be provided by our physiotherapy team, who are trained to competently deliver this treatment.

To learn more, and to help decide if shockwave is right for you, please see our '<u>Extracorporeal Shockwave Therapy</u>' patient information leaflet.

At this stage, further intervention would be completed by our podiatric surgery team. Your physiotherapist or other healthcare professional can refer you.



Injection

Steroid injections can help people with high levels of pain if you have struggled to complete, or improve with self-management or shockwave. These injections will usually be carried out under guidance of ultrasound to make sure the steroid is injected into the correct location.

There is a small risk of complications such as pain, infection, bleeding or bruising where the needle goes in. You will be able to discuss injection options with your podiatric surgeon.



Surgery

Surgery for plantar fasciitis should always be a last resort. Benefits, risks and recovery can be discussed with you by the surgical team. Options include:

- Plantar fasciotomy this is a cut of the medial (most prominent) band of the plantar fascia ligament, effectively releasing the affected tissue.
- Gastrocnemius recession a cut is made at the junction between the calf muscle higher in the leg and the tendon below (the musculotendinous junction) allowing immediate lengthening of the calf muscle, taking tension/strain off the heel.

Surgery for plantar fasciitis is rare. In patients where all other treatment has failed, surgery can be considered, with the gastrocnemius recession being the more likely choice.

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What's important to me?

What matters to you is an important part of making a decision about treatment. On each question think about your answer and mark the scale on the right. You might want to talk about your answers with your healthcare professional.

Thinking about your plantar fasciitis, mark on the scale where it applies to you...

	$Yes \leftarrow$	\longrightarrow No	
I find my pain unmanageable			Use this space to write down your own thoughts:
My pain interferes with my sleep			
My symptoms are affecting my mental health and wellbeing			
I have more bad days than good days			
l am struggling with daily activities (housework, chores, gardening, managing stairs) because of my symptoms			
My symptoms are affecting my ability to work			
My symptoms mean I am not able to spend as much time as I want to with family and friends			

Making the decision

Think about which treatment is the best option for you at the moment. You do not have to make this decision immediately. You can take some time, discuss it with family, friends, healthcare professionals, and then decide. You can always try other options in the future.

Which options you are considering at the moment?				
Do you have any questions about these options?				
I feel sure about the best choice for me	YES	N0		
I know enough about the potential benefits and harms of each option	YES	N0		
I have enough support and advice to make a choice	YES	N0		

Your decision

(mark which applies to you)

I feel unsure about what to do

I have decided what to do next

Based on the information so far:

I need more information to make this decision

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Further information



If you feel symptoms have **not improved within 6-8 weeks** of 'things I can do myself' and you wish to see a physiotherapist, please complete our **online self-referral** or be referred by a healthcare professional.



Visit our **webpage** on plantar fasciitis if you wish to access further information about this condition.

If you have any **questions** please contact the **Care Co-ordination Centre** on:

🕓 0300 131 0111 🛛 🙆 provide.askus@nhs.net

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